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6 Are Internal Borders Gaining Momentum?
A Territorial Reading of Spain's Covid-19 Crisis Management

Introduction

Since the outbreak of the Covid-19 crisis in February/March 2020, the use of the term 'border' has become widespread in the debate concerning measures to contain the pandemic when referring to the limits of Spain's autonomous communities (ACs). Primarily, the media, but also most of Spain's political classes, have standardised the use of this term, which until now had been restricted to the country's international borders. Yet, despite this, there has been virtually no academic discussion of this rapid *resignification* of the word "border" in Spain. Having said that, interestingly, prior to the pandemic, a line of research conducted from the perspective afforded by border studies had begun to draw attention to the growing territorial tensions between the ACs.[2] It is against this backdrop, therefore, that this chapter seeks to analyse how the Covid-19 crisis in Spain has been managed from a territorial perspective.

The chapter is organised as follows. First, we introduce the theoretical debate concerning the meaning of the term 'internal border' in the broader framework of the European Union (EU) before examining the Spanish case in greater depth. Second, we describe the characteristics of Spain's local and regional map and the country's different

[1] R. Vila-Lage holds a predoctoral research grant by the Spanish Ministry of Universities with reference FPU18/04624.

[2] Xavier Oliveras and Juan-M. Trillo-Santamaría, "Fronteras en el contexto español: ¿barreras o puentes para la cooperación sanitaria?" *Documents d'Anàlisi Geogràfica* 60/1 (2014): 135-159. doi: 10.5565/rev/dag.64.

Joan Tort and Ramón Galindo, dirs., *L'articulació geogràfica i jurídica dels municipis fronterers: radiografia de la cooperació en els límits autonòmics entre Catalunya, Aragó i la Comunitat Valenciana* (Barcelona: EAPC, 2018).

Juan-M. Trillo-Santamaría and Valerià Paül, "¿Cooperación territorial alrededor de las fronteras interautonómicas?", in *España: Geografías para un estado posmoderno*, ed. Joaquín Farinós, Juan F. Ojeda, and Juan-M. Trillo-Santamaría (Madrid/Barcelona: AGE/Geocrítica, 2019), 269-285.

Roberto Vila-Lage, Valerià Paül, and Juan-M. Trillo-Santamaría, "Fronteras autonómicas y áreas protegidas: Un análisis de tres reservas de la biosfera en la interfaz entre Galicia, Asturias y León" *Boletín de la Asociación de Geógrafos Españoles* 86 (2020): 1-47. doi: 10.21138/bage.2966.

tiers of government. Third, we break Spain's process of Covid-19 crisis management down into six phases (between January 2020 and June 2021) and describe their main characteristics and events. Finally, the last section discusses the findings presented in relation to the specific concepts identified and deployed in the second and third sections.

What Are Internal Borders?

The pandemic caused by Covid-19 has been a direct affront to the borderless Europe of the Schengen Area. The internal borders of the EU which, in accordance with Article 26 of the Treaty on the Functioning of the European Union, should have disappeared to ensure the free movement of goods, persons, services and capital, have been re-erected.[3] As a result, the internal borders of the EU today have, some would claim, come to emulate the EU's external borders,[4] where the latter are conceived as the upholders of 'Fortress Europe'.[5,6]

EU member-state solidarity is clearly threatened by the pursuit of individualist interests as countries seek to defend themselves from the effects of the virus by implementing somewhat selfish, egotistical policies. Indeed, some authors have even referred to the states in these times of pandemic as being "critically ill",[7] given their failure to collaborate and to adopt policies based on the principle of solidarity. However, reports commissioned by the European Parliament claimed that, while containment measures might not have been deployed in a coordinated fashion, the Schengen Area was not under threat.[8]

What seems undeniable, however, is that the nation-states of both Europe and other parts of the world responded to the crisis by adopting policies that reinforced their

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[3] Frederique Berrod, "The Schengen Crisis and the EU's Internal and External Borders: A Step Backwards for Security-Oriented Migration Policy?" *Borders in Globalization Review* 1/2 (2020): 53-63. doi: 10.18357/bigr12202019602.
Jorrit Rijpma, "COVID-19, another blow to Schengen?" *Maastricht Journal of European and Comparative Law* 27/5 (2020): 545-548. doi: 10.1177/1023263X20954568.
[4] Iker Barbero, "A Ubiquitous Border for Migrants in Transit and Their Rights: Analysis and Consequences of the Reintroduction of Internal Borders in France." *European Journal of Migration and Law* 22/3 (2020): 366-385. doi: 10.1163/15718166-12340080.
[5] Mette Eilstrup-Sangiovanni, "Re-bordering Europe? Collective action barriers to 'Fortress Europe'." *Journal of European Public Policy* (2021): 447-467. doi: 10.1080/13501763.2021.1881585.
[6] See Chapter 10 of the present volume.
[7] Eva Nossem, *UniGR-CBS Working Paper Vol. 8. The pandemic of nationalism and the nationalism of pandemics* (UniGR, 2020: 11). doi: 10.25353/ubtr-xxxx-1073-4da7
[8] Sergio Carrera and Ngo Chun-Luk, *In the Name of Covid-19: Schengen Internal Border Controls and Travel Restrictions in the EU* (Brussels: Policy Department for Citizens' Rights and Constitutional Affairs European Parliament, 2020). https://www.europarl.europa.eu/thinktank/en/document.html?reference=IPOL_STU(2020)659506.

borders and, hence, the control they exercised over their respective territories.[9] Such has been the shift, that the idea of a world without borders seems increasingly unattainable as we appear to head towards a "new global border regime".[10] This strengthening of state borders in response to the pandemic cannot be understood, however, without recognizing a prior trend in this very direction in recent years, notable in Europe because of the refugee crisis, among other causes. In the words of E. Opiłowska:[11] "[T]he refugee crisis, Brexit, the revival of nationalist movements across Europe, and especially the outbreak of the Covid-19 pandemic and the resulting re-bordering measures have demonstrated that borders have remained strong and are still governed centrally by nation states".

E. Medeiros et al.[12] have coined the expression 'covidfencing' to refer to the systematic closure of borders attributable to Covid-19. Their study analyzes the impact this is having on the European cross-border regions,[13] which have seen neighbors that previously left their doors open to each other begin to erect fences or other types of barriers. The problems and inconveniences that the closure of state borders have had for border people constitute the basis of various studies that describe a range of disruptions[14] that include: accessibility, mobility, work, public services and economic, social and cultural activities, among others. These studies concur in granting a significant role to structures of cross-border cooperation if these barrier effects are to be overcome.

This research dedicated to the study of the impact of border closures on European border areas focuses on a specific type of border: the so-called 'internal border', that is,

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[9] Anna Casaglia et al. "Interventions on European Nationalist Populism and Bordering in Time of Emergencies." *Political Geography* 82 (2020): 1–9. doi: 10.1016/j.polgeo.2020.102238

[10] Steven M. Radil, Jaume Castan Pinos, and Thomas Ptak, "Borders Resurgent: Towards a Post-Covid-19 Global Border Regime?" *Space and Polity* 25/1 (2021): 132-140. doi: 10.1080/13562576.2020.1773254.

[11] Elżbieta Opiłowska, "The Covid-19 crisis: the end of a borderless Europe?" *European Societies* 23/1 (2021): 590. doi: 10.1080/14616696.2020.1833065.

[12] Eduardo Medeiros, Martín Guillermo, Gyula Ocskay, and Jean Peyrony, "Covidfencing Effects on Cross-Border Deterritorialism: The Case of Europe." *European Planning Studies* 29:5 (2021). doi: 10.1080/09654313.2020.1818185.

[13] Birte Wassenberg and Bernard Reitel, *Critical Dictionary on Borders, Cross-Border Cooperation and European Integration* (Brussels: Peter Lang, 2020).

[14] COTER, *Report. Public Consultations on the Future of Cross-Border Cooperation* (Brussels: Committee of the Regions, 2021), accessed June 15, 2021. https://portal.cor.europa.eu/egtc/about/Documents/4525_COTER_Report_on_the_Consultations-Future_of_CBC.pdf.

Francisco Lara-Valencia et al., *COVID-19 and Cross-Border Mobility* (Tempe: Transborder Policy Lab, Arizona State University, 2021). doi: 10.13140/RG.2.2.29353.72807.

Medeiros et al., "Covidfencing Effects on Cross-Border Deterritorialism".

MOT (Mission Opérationnelle Transfrontalière), *La crise du covid-19 aux frontières: retours d'expérience du réseau de la MOT* (Paris : MOT, 2020), accessed June 15, 2021. http://www.espaces-transfrontaliers.org/fileadmin/user_upload/documents/Documents_MOT/Articles_MOT/MOT_Covid-19_aux_frontieres_retours_experiences-06-2020.pdf.

a border equivalent to an international border between two EU member-states.[15] As discussed above in relation to the Schengen Area and 'Fortress Europe', 'external borders', therefore, are those shared with non-member-states, that is, those that mark the outer limits of the EU. However, this exclusive use of internal/external borders is, to our mind, overly restrictive, reducing as it does the scale of analysis to just one: that of the state. We consider it especially pertinent to broaden the focus and to reflect on the impact of Covid-19 on other territorial borders, such as those that exist within states. Thus, here, we defend the use of the concept of 'internal border' to refer to administrative limits within a nation-state, and operating at a range of different scales, including federated states, regions, provinces, municipalities, etc.

It should be stressed that very little research related to the pandemic has taken an intra-state perspective. Some studies have, however, focused their attention on federal states, including, for example, the United States and Australia. In the former case, W. Lyu and G. Wehby[16] examine rates of coronavirus disease in the border counties of the adjacent states of Illinois and Iowa associated with different state policies concerning stay-at-home orders. In the second case, K. Moloney and S. Moloney[17] analyze how responses to various recent pandemics have contributed to shaping Australian identity and union. Clearly, this study refers to both 'external borders', on the one hand, and to 'domestic internal borders' or 'subnational borders', on the other, when examining the boundaries between states that implement different policies. Furthermore, the analysis includes other scales of study, including the subregional.

All of the research described up to this juncture does not, in fact, represent any great novelty in the broad multidisciplinary field of border studies,[18] which has paid more attention to the analysis of external (that is, international) borders at the expense of internal borders (that is, the internal borders of nation-states). In particular, studies of territorial and cross-border cooperation continue to focus almost exclusively on

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[15] Joni Virkkunen, "Disease control and border lockdown at the EU's internal borders during the COVID-19 pandemic: the case of Finland." *Baltic Region* 12/4 (2020): 83-102, accessed June 15, 2021. https://www.ssoar.info/ssoar/handle/document/72226.

[16] Wei Lyu and George L. Wehby, "Comparison of Estimated Rates of Coronavirus Disease 2019 (COVID-19) in Border Counties in Iowa Without a Stay-at-Home Order and Border Counties in Illinois With a Stay-at-Home Order" *JAMA Network Open* 3/5 (2020). doi: 10.1001/jamanetworkopen.2020.11102.

[17] Kim Moloney and Susan Moloney, "Australian Quarantine Policy: From Centralization to Coordination with Mid-Pandemic COVID-19 Shifts." *Public Administration Review* 80/4 (2020): 671–682. doi: 10.1111/puar.13224.

[18] Anne-Laure Amilhat-Szary and Grégory Hamez, *Frontières* (Malakoff: Armand Colin, 2020).
James W. Scott, ed., *A Research Agenda for Border Studies* (Cheltenham: Edward Elgar, 2020).

international borders. For example, there have been interesting contributions about the border barriers and obstacles that continue to exist within the EU. For example, a report published by the European Commission[19] points to the need to review existing practices and this has led to a proposal for a possible European cross-border mechanism to overcome legal and administrative obstacles in the field of cross-border cooperation.

If we focus exclusively on Spanish academic research, the same conclusion can be drawn.[20] Only a very small number of studies to date address the border effect in relation to the country's internal boundaries, that is, by seeking to employ a theoretical and methodological perspective that analyzes its internal borders by analogy with its external borders. This is the case, for example, of X. Oliveras and J.-M. Trillo-Santamaría,[21] a pioneer study of cooperation between ACs in the field of healthcare. In its wake, a number of studies have examined specific territorial areas or sectors, including the border areas between Catalonia, Aragon and the Valencian Community[22] and the areas between Galicia, Asturias and Castile and Leon.[23] These studies tend to focus specifically on the deficiencies and shortcomings in the cooperation between the ACs.[24] In what is often considered a quasi-federal state,[25] there would appear to be a need to promote a greater degree of federal culture in Spain and, as such, stronger horizontal intergovernmental relations.

In short, this chapter seeks to address a research gap that has been detected both internationally and within Spain: namely, that while a wide theoretical and practical literature has been compiled on the bridging (cooperation) and barrier (absence of cooperation) effects of external borders of the state, very little research has been

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[19] European Commission, *Easing Legal and Administrative Obstacles in EU Border Regions* (Luxembourg: EU, 2017), accessed June 15, 2021. https://ec.europa.eu/regional_policy/en/information/publications/studies/2017/easing-legal-and-administrative-obstacles-in-eu-border-regions.

[20] Lorenzo López-Trigal, "Investigación geográfica sobre las fronteras de la Península Ibérica", *Polígonos: Revista de Geografía* 29 (2017): 327-346. doi: 10.18002/pol.v0i29.5213.

[21] Oliveras and Trillo-Santamaría, "Fronteras en el contexto español".

[22] Tort and Galindo, dirs., *L'articulació geogràfica i jurídica dels municipis fronterers.*

[23] Trillo-Santamaría and Paül, "¿Cooperación territorial alrededor de las fronteras interautonómicas?". Vila-Lage, Paül, and Trillo-Santamaría, "Fronteras autonómicas y áreas protegidas".

[24] Joan Romero, "El gobierno del territorio en España. Organización territorial del Estado y políticas públicas con impacto territorial" in *Actas del XXV Congreso de la Asociación de Geógrafos Españoles*, ed. Fernando Allende *et al.* (Madrid: AGE/UAM, 2017), 2379-2393. doi: 10.15366/ntc.2017.

[25] Josefina Gómez Mendoza, Rubén C. Lois, and Oriol Nel·lo, eds., *Repensar el estado. Crisis económica, conflictos territoriales e identidades políticas en España* (Santiago de Compostela: USC, 2013).
Eliseo Aja, *Estado autonómico y reforma federal* (Madrid: Alianza, 2014).
Romero, "El gobierno del territorio en España".

conducted on the internal borders of the state. However, this particular research question has gained considerable momentum in recent times. Indeed, the management of the Covid-19 pandemic offers a highly pertinent case study for reflecting on territorial management in the Spanish framework of the so-called 'State of Autonomies'.

The Spanish Local and Regional Map and Tiers of Government

As discussed above, J. Gómez Mendoza et al., E. Aja and J. Romero,[25] among others, concur that Spain today might be defined as a quasi-federal country, despite prevailing difficulties in classifying the Spanish political and territorial model as such. The country's main territorial units, the ACs, are devolved entities made up of two types (see Figure 1):

1. ACs that are defined as 'nationalities' and which consider themselves as possessing a national character. In these entities, nationalist parties with varying degrees of strength often form part of the ACs Governments (Figure 3). These nationalisms tend to collide with Spanish nationalism, a sentiment that is especially common in the Spanish parties that have held office over the last four decades, above all those that lean to the right.[26, 27]
2. ACs characterized by their regional character, yet which regard themselves as forming an integral part of the Spanish nation. Regionalist parties exist in some of these ACs, but only a few currently hold office (Figure 3).

This distinction between nationalities and regions is provided for under Article 2 of the 1978 Spanish Constitution, which grants these entities autonomy with executive and legislative powers. However, the judiciary remains highly centralized, including the superior courts of justice of the ACs, with the judges being appointed by Madrid. Indeed, various international institutions, including GRECO,[28] claim that the main political parties exercise undue political control over the judiciary. Whatever the case, from Article 3 onwards, the Constitution refers to all of these entities as ACs, implying that any previous distinction between the two types becomes blurred. Currently, the concept of AC is widely used, having been coined, it is claimed, to avoid the conflictual use of

[26] Xosé-Manoel Núñez Seixas, *Suspiros de España: el nacionalismo español (1808-2018)* (Madrid: Crítica, 2018).
[27] Spanish nationalism is hardly regarded as such. In this sense, it is a typical case of 'banal nationalism' (Michael Billig, *Banal Nationalism.* London: Sage, 1995).
[28] GRECO, *Prevención de la corrupción respecto de miembros de Parlamentos nacionales, jueces y fiscales. Cuarta ronda de evaluación* (Strasbourg: Council of Europe, 2019), accessed June 15, 2021. https://rm.coe.int/cuarta-ronda-de-evaluacion-prevencion-de-la-corrupcion-respecto-de-mie/168098c68e.

'nationality' — inherently related to national identity — referring to territories within the Spanish State rather than to Spain as a whole.

According to J. García Álvarez,[29] the Spanish 'State of Autonomies' — developed under the framework of the Constitution and consisting, since the early 1980s, of 17 ACs (Figure 1) — responded to two major demands. On the one hand, it aimed to address the nationalist aspirations of the Basque Country and Catalonia, which in the late 1970s urged Spain to officially recognize their identitary concerns. In this sense, the notion of 'nationality' was the outcome of this process, and, indeed, the first Statutes of Autonomy were passed for the benefit of the three *de facto* constitutional nationalities (2nd transitional provision of the Constitution): the Basque Country (1979), Catalonia (1979) and Galicia (1981). On the other hand, the 'State of Autonomies' aimed to de-centralize Spain in accordance with the prevailing trend in Western Europe. This implied generalizing the model of ACs to the whole of the country — with the exception of Ceuta and Melilla, designated as Autonomous Cities in the 1990s. Indeed, some of these ACs eventually attained nationality status (most notably Andalusia, following a controversial referendum held in 1981 in this respect) (Figure 1). However, some of the ACs emerged in the late 1970s–early 1980s without being rooted in previously recognizable regions in historical and geographical terms, such as the union of (Old) Castile and Leon in one common AC, the creation of single ACs for Madrid, Cantabria and La Rioja, etc.

Today, it would appear almost impossible to modify the map that was drawn up in the 1980s, as the current quest for secession of Leon from (Old) Castile makes evident.[30] There is also a broad-based homogenizing perception — a sense that all the ACs are the same, especially as far as the second type of ACs are concerned. The lack of specific recognition of the singular national character of Catalonia, for example, diluted in the 17 ACs, is one of the reasons underlying the rise of the pro-independence movement that has gained momentum during the second decade of this century. A pivotal event was the Constitutional Court ruling in 2010 that substantial sections of the 2006

[29] Jacobo García Álvarez, *Provincias, regiones y comunidades autónomas. La formación del mapa político de España* (Madrid: Senado, 2002).

[30] Valerià Paül, Roberto Vila-Lage, Alejandro Otero Varela, and Juan-M. Trillo-Santamaría, (2021): "¿Hacia una comunidad autónoma leonesa? Una interpretación urgente del *Lexit* de inicios de 2020 desde la perspectiva de la Nueva Geografía Regional." *Scripta Nova* 25:3. doi: 10.1344/sn2021.25.32289.

reform of the Statute of Autonomy of Catalonia were unconstitutional. This included the subtle definition in its preamble of Catalonia as a 'nation'.

Constitutionally speaking, the ACs are the aggregation of contiguous provinces aimed at providing self-government, based on claims of common identity (or a sole province itself becoming an AC). This is ironic given that the provincial map of Spain, consisting of 49 provinces and established in 1833 (in 1927 a 50th province was added), is the map *par excellence* of the vision of Spain as a single, united territory and of the exercise of the homogenous territorial power of the Spanish State in a centralist fashion — see J. García Álvarez[31] and J. Burgueño[32] on the provincial division of Spain. Importantly, the 1833 map divided up historical territories such as Catalonia, Galicia and the old Kingdom of Valencia into several provinces. Likewise, in the first half of the 19th century, the municipal map was drawn up for the whole of Spain, with a reduction in the number of municipalities being made in the mid-20th century.[33] As of 2020, there are 8,131 municipalities in Spain.

Some ACs have created their own territorial subdivisions for the purposes of delivering their devolved policies, for instance, health management regions which are quite commonly at odds with the provincial map (for instance, Galicia; and see J. Burgueño[34] for a discussion on the health management regions in Catalonia — Figure 6). In addition to this, there are supra-municipal territories recognized by the respective ACs which do not necessarily take into account the provincial map and which introduce new tiers of government. In this respect, cases in point are the following: the counties (*comarcas*) existing in Catalonia, Aragon and El Bierzo in Castile and Leon;[35] the islands in the two archipelagic ACs, each with its own island councils; and some institutionalized metropolitan areas (e.g. Barcelona and Vigo).

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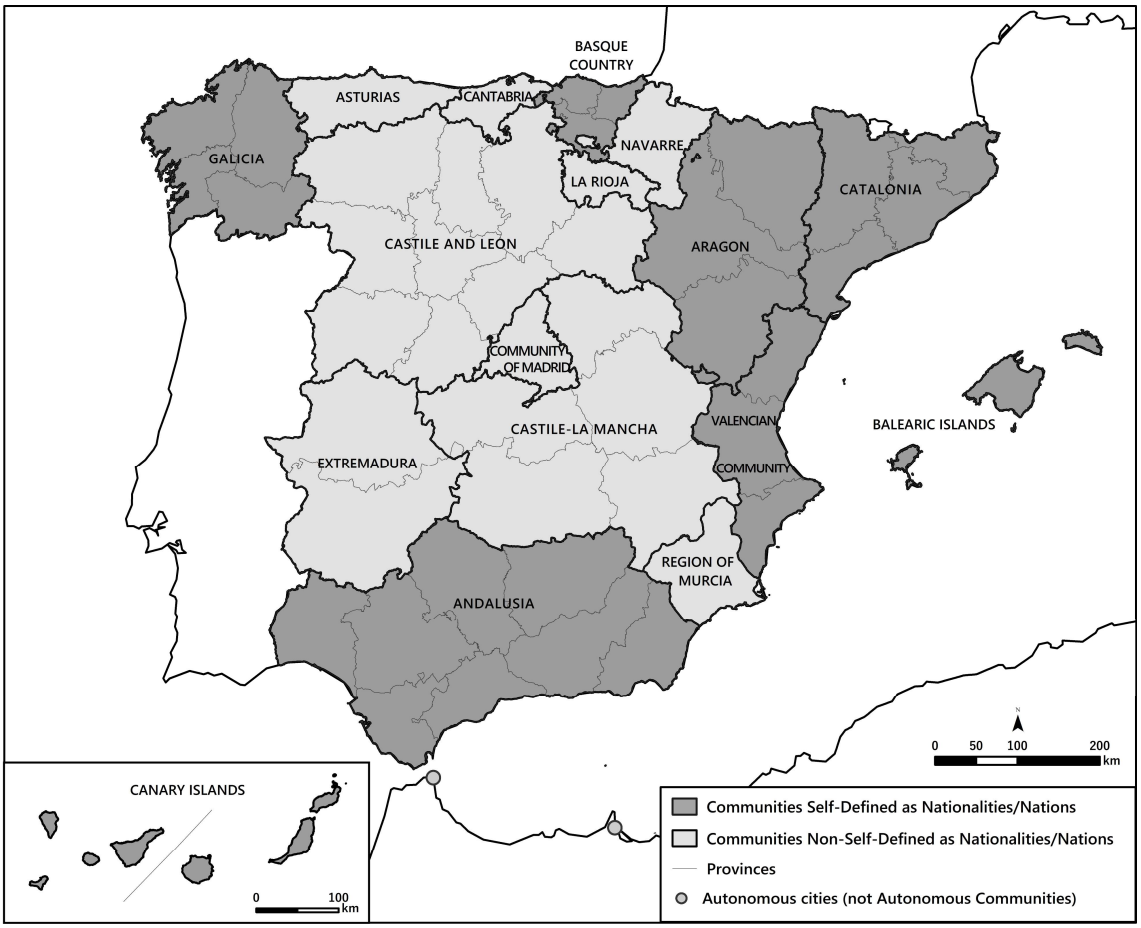
[31] García Álvarez, *Provincias, regiones y comunidades autónomas.*
[32] Jesús Burgueño, *La invención de las provincias* (Madrid: Catarata, 2011).
[33] Jesús Burgueño and Montse Guerrero, "El mapa municipal de España. Una caracterización geográfica." *Boletín de la AGE* 64 (2014): 11–36. doi: 10.21138/bage.1687.
[34] Jesús Burgueño, "El territori de Catalunya s'organitza en... regions sanitàries?" in *Nova Geografia de la Catalunya post-covid*, ed. Jesús Burgueño (Barcelona: Societat Catalana de Geografia, 2021), 51-65.
[35] Joan-Carles, Membrado-Tena, "Entes territoriales de escala comarcal en la Administración local española." *Documents d'anàlisi geográfica*, 62/2 (2016): 347-371. doi: 10.5565/rev/dag.300.

Figure 1. The 'State of Autonomies': the 17 ACs.



Source: Authors' own.

As for the political dimension of territorial decentralization, it should be stressed that since the early 2000s, all the ACs have attained similar political competences, including management of the public health system. Before 2001, however, two distinct classes of AC could be identified: those that exercised their own competences in the field of healthcare (broadly speaking, the 'nationalities') and those that did not (essentially those characterized by their 'regional character', as discussed above). In 2001, all the ACs became responsible for their own healthcare, thus ushering in a highly decentralized system of healthcare management.[36] Yet, the Spanish Government continued to ensure the effective coordination of health matters (Act 14/1986), with the creation, among other instruments, of the Inter-territorial Council of the National Health System (Act 16/2003), a body responsible for overseeing coordination and cooperation between the AC

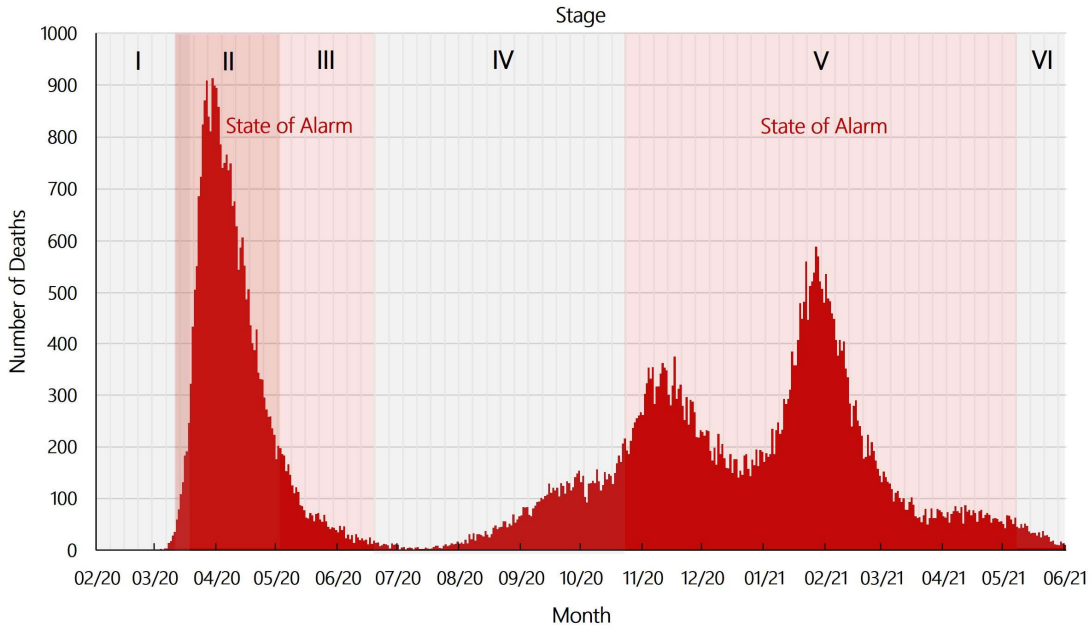
[36] Aja, *Estado autonómico y reforma federal.*
Oliveras and Trillo-Santamaría, "Fronteras en el contexto español".

Governments (represented by their Ministries of Health) and the Spanish Government (represented by its Minister of Health).

Covid-19 Crisis Management in the Context of the 'Spain of the Autonomies'

From the first case of Covid-19 was identified to the time of writing (June 2021), Spain was immersed in a major health crisis, but it also had to face a major conflict in its territorial governance. Figure 2 shows the six main phases that can be identified in this pandemic from the perspective of our territorial analysis. Although the detailed study of the health data emerging from Covid-19 crisis is not the objective of this chapter, the timing of the phases identified is shown here with the corresponding death count. Our aim here is to provide an overview of the impact of the pandemic in Spain in each of these six stages.

Figure 2. Number of daily deaths from Covid-19 in Spain and the main stages identified in the pandemic from a territorial perspective (February 2020–June 2021).



Source: Based on data from Spain's National Epidemiology Centre.

Phase I: Detection of First Cases of Infection

The first phase ran from the outbreak of the Covid-19 crisis in Spain, which can be traced to 31 January 2020, when the first case was detected on La Gomera (Canary Islands), to 14 March 2020, with the declaration of a nationwide State of Alarm. In general, these days were characterized by a general ignorance of and a sense of skepticism about the virus.

Initially, the crisis was managed within the existing legal framework, that is, a model in which all health management policy decisions lay with the ACs. During February, a month in which the number of cases detected was still low, the ACs were taking a 'wait and see' approach. In March, the first steps were taken to prevent the virus from spreading. Thus, between 6 and 13 March 2020, all the ACs introduced regulations to this end.[37]

This first phase was not free of tension and ushered in a whole series of disagreements and conflicts between the Spanish Government and the ACs Governments, as well as between the different ACs Governments. A good example of these discrepancies of opinion concerned the need to apply stricter measures, such as perimeter lockdowns. For example, the Government of the Community of Madrid — the AC that accounted for almost half the cases of infection and which was considered a major zone of the transmission of Covid-19 — began to apply restrictive measures (including, working from home, closure of schools and other educational centers and limiting numbers in typical places of gathering); however, no restrictions were placed on citizen mobility. Many of the other ACs Governments failed to understand why the Government of the Community of Madrid did not take measures to isolate its population and there was general alarm as people from this central AC arrived in other territories.

The disagreements concerning the lockdown of Madrid cannot, however, be analyzed in isolation. During those same days, lacking the powers to enforce the decision itself, the Catalan Government asked the Spanish Government to shut down its perimeter. The Catalan Government argued it was necessary to act quickly and confine the population to stop the virus from spreading. Yet, the Spanish Government, in its efforts to avoid dispute, rejected the request and declared that all measures would be taken in a

[37] Earlier, on the 14 February 2020, the Balearic Islands created an infectious disease management commission. For more information on AC regulations and Covid-19: https://www.boe.es/biblioteca_juridica/codigos/codigo.php?id=396&modo=2&nota=0 (accessed, 15 June 2021).

coordinated and collaborative fashion with all 17 ACs. However, the subsequent declaration of the State of Alarm was testimony to the inaccuracy of this statement.

Phase II: Recentralization and Strict Isolation

The State of Alarm is an emergency mechanism provided for under the Spanish Constitution via which the Spanish Government can adopt extraordinary powers in the face of major catastrophes, health crises or the paralysis of essential services. On 14 March 2020, the first nationwide State of Alarm of the crisis was declared.[38] During this period, the Spanish Government assumed the mantle of the highest 'competent authority', while the Ministers of Defence, Interior, Transportation, Mobility and Urban Agenda and Health were named 'delegated competent authorities' in their respective areas of responsibility. Initially, the State of Alarm was supposed to have a duration of 15 calendar days, any extension requiring the approval of the Spanish Parliament. However, it was in fact to be extended on six occasions, being lifted eventually on 21 June 2020.

We can identify two major phases in the State of Alarm declared in mid-March. The first, which corresponds to phase II of our analysis, ran from its declaration until 4 May, when a de-escalation was initiated. This stage was characterized by the confinement of people to their homes and restrictions on any type of non-essential activity.

Despite the critical nature of the healthcare situation, the political tension and territorial conflicts did not cease. For example, the presidents of Catalonia and the Basque Country called on the Spanish Government to respect the powers of the ACs in combatting Covid-19. However, competences in the field of health and security (recall these two ACs operate their own police forces) now corresponded to what was identified as the 'sole command' of the competent authority. Unsurprisingly, the Catalan and Basque Governments compared the situation to the application of Article 155.[39] But most of the ACs Governments positioned themselves alongside the Spanish Government. Some of the ACs Governments, including those governed by the PSOE (Spanish Socialist

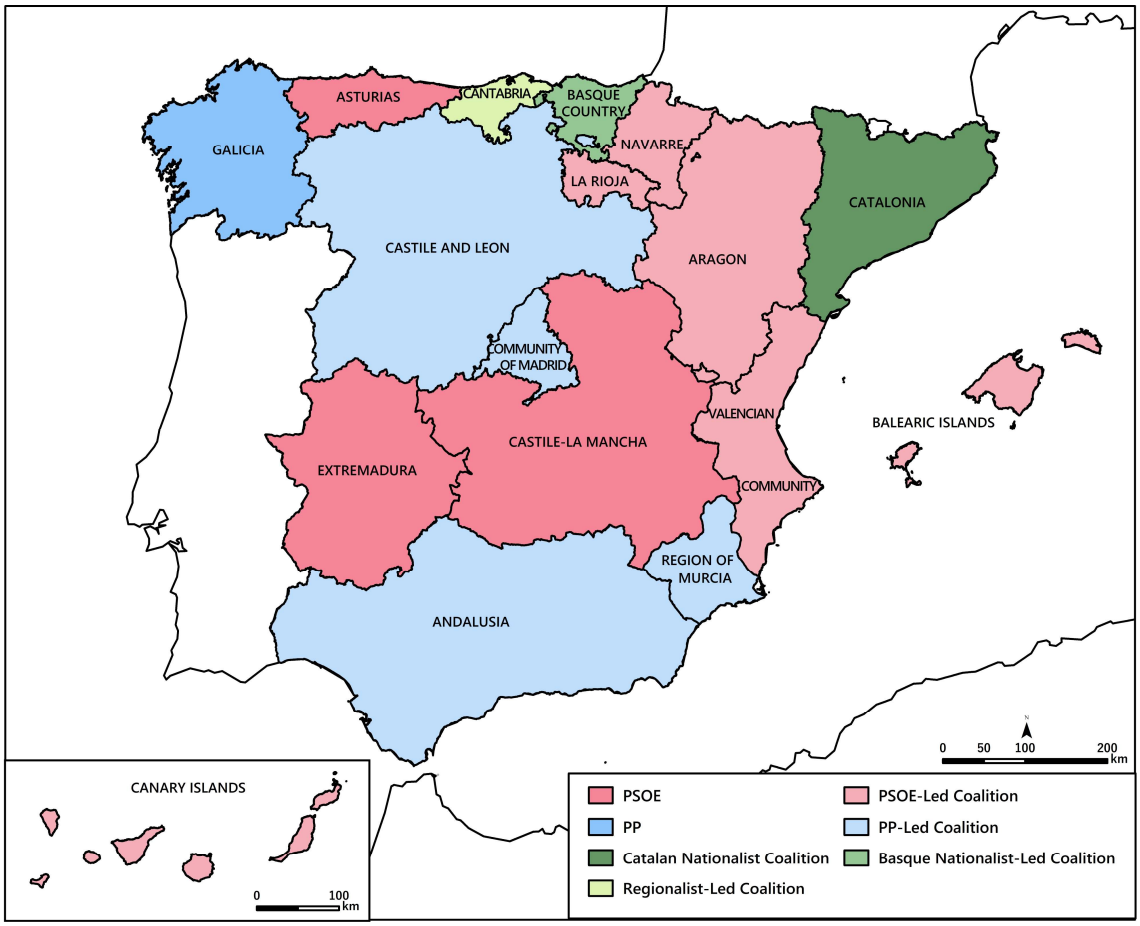
[38] This was actually the second State of Alarm to be declared under the 1978 Constitution, as the mechanism had been invoked for a month (between 15 December 2010 and 15 January 2011), when an air traffic controller strike had led to a blockade of Spanish airspace.

[39] An Article of the Spanish Constitution by which the Spanish Government can suspend the autonomy of an AC if it "does not comply with the obligations that the Constitution or other laws impose upon it, or acts in a way that seriously undermines the general interests of Spain". It was applied between 27 October 2017 and 2 June 2018 in Catalonia in response to the so-called process of independence.

Workers' Party, center-left) as well as by the PP (People's Party, center-right), came out in support of the recentralization of decision-making (Figure 3).

Despite this initial show of support, as the days passed, confrontation increased. The pandemic began to overwhelm the healthcare system and the exchange of accusations became constant. The relationship between the Government of the Community of Madrid, one of the ACs most seriously affected by Covid-19, and the Spanish Government was especially tense. The AC's president, Isabel Díaz Ayuso, went so far as to claim that the Spanish Government was impeding the arrival of medical supplies and that the loss of autonomy was significantly undermining her ability to respond to the crisis. Thus, the opposition of other ACs Governments to the State of Alarm — ACs Governments that had initially supported the measure — was now added to that of Catalonia and the Basque Country. This was especially the case in those ACs where Spain's main opposition party, the People's Party, was in power (Figure 3). Thus, the Governments of Galicia, Murcia and Andalusia all issued critical statements about the management of the crisis, calling for greater coordination and collaboration between the ACs Governments and the Spanish Government.

Figure 3. Political parties governing in the 17 ACs as of June 2021.



Source: Authors' own.

In its turn, the Spanish Government also demanded greater collaboration and coordination in areas such as education and in relation to sensitive issues such as the death count. Paradoxically, it sought to justify the adoption of unilateral measures by resorting to the urgency of the situation, without consulting the ACs. Yet despite everything, the first three extensions of the State of Alarm were approved without excessive problems (Figure 5).

One aspect of this phase that should be highlighted were the weekly meetings (held by videoconference) of the Meeting of Presidents. This political body, not specifically provided for under the Constitution, was created in 2004 by Zapatero's Government (PSOE), and includes the President of Spain, and the Presidents of the 17 ACs and the Cities of Ceuta and Melilla. The aim was to form a body for dialogue, cooperation and coordination between the Spanish Government and the ACs Governments. It should be noted that, since its creation, only six Meetings had been held up to 2020, the last one in 2017. In the period of the first State of Alarm (phases II and III of our analysis), 14 were held, all of them virtual.

Phase III: Provincial de-escalation

This third phase ran from the beginning of the de-escalation process (4 May, 2020) until the end of the first state of alarm (June 21). During this period, although the situation remained grave, the number of infections fell and the previously introduced restrictive measures could be relaxed. Against this backdrop, the Presidents of the Basque Country and Catalonia were no longer the only ones who sought to have the State of Alarm lifted. The ACs Presidents in the People's Party were also in favor of lifting the emergency measure. However, the Spanish Government opted to extend the State of Alarm and initiate a process of de-escalation in which, theoretically, the ACs would have a bigger role to play.

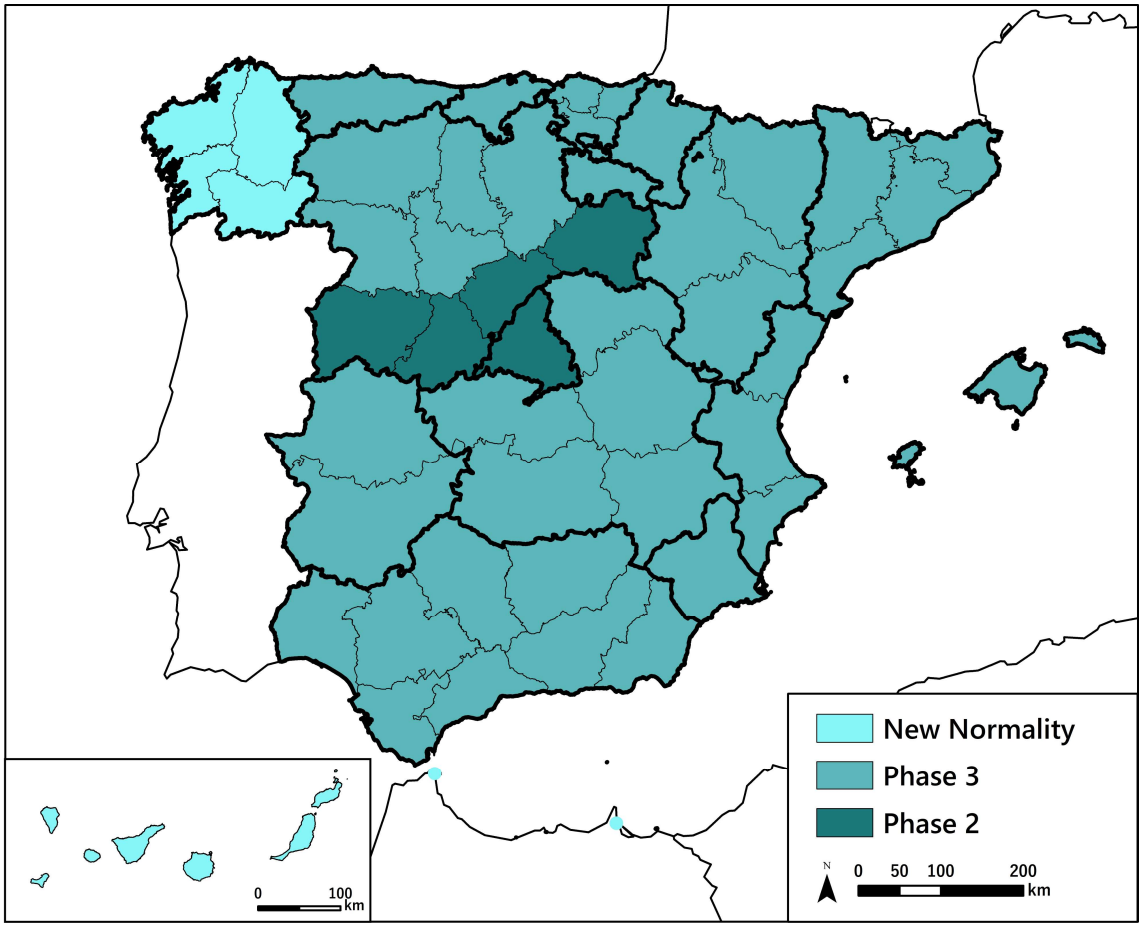
The watchwords that characterized this phase were 'co-governance' and transition to a 'new normal'. The first sought to draw a line under what had occurred in the previous months of 'sole command'. However, by opting to make the territorial unit of reference the province, the Spanish Government granted the ACs Governments merely a supporting role[40] (Figure 4). The Spanish Government established that each province should start from a so-called 'zero or preliminary phase' and, if it met the requirements, it could progressively advance through the other three phases in which the number of permitted activities increased. In the event of a deterioration in the indicators, the provinces could also be sent back to an earlier phase. Once the three phases had been successfully overcome, the so-called 'new normal' was reached.

Despite the Spanish Government's declarations of 'co-governance', in practice, the role that the ACs Governments played was secondary. The latter were able to make their own proposals known, but the ultimate decision regarding a transition into a new phase laid with the Spanish Minister of Health. Only the culmination of the last phase and entry into the 'new normal' were the exclusive decision of the ACs Governments. This de-escalation plan was not to the liking of many ACs, especially those not governed by the PSOE. These ACs Governments expressed their displeasure with the situation, which they considered to show a complete lack of transparency, communication and coordination. During the weeks of de-escalation, the Spanish Government was accused

[40] In the case of the Canary and Balearic Islands, the island was considered the territorial unit of reference. Ceuta and Melilla were also considered individually. The ACs Governments, however, were able to propose other territorial units which they felt should be subject to differential treatment (for example, health regions).

of not applying common criteria for moving from one phase to another and its way of acting was even described as dictatorial.

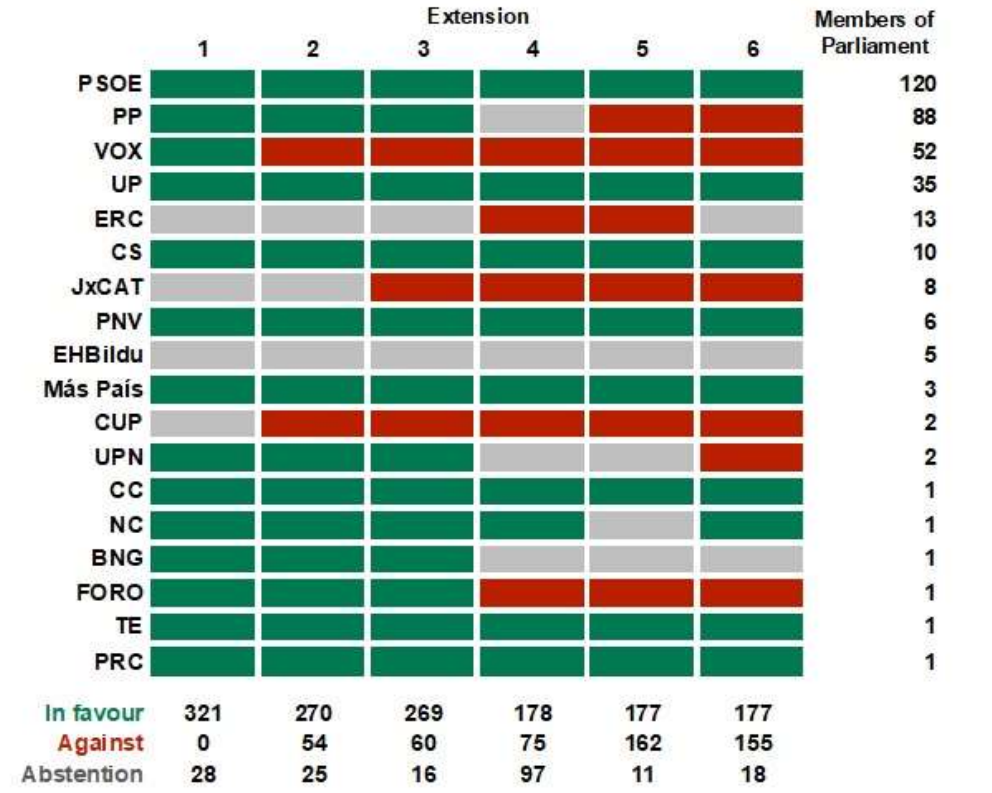
Figure 4. Situation of the provincial de-escalation as of 17 June 2020.



Source: Authors' own.

Voting on the last three extensions of the State of Alarm differed significantly from the first three votes. Support in the Spanish Parliament gradually fell and the main opposition party, the People's Party, withdrew its support, which meant the votes of the different peripheral nationalist (PNV, ERC, CC, etc.) and regionalist (UPN, Teruel E., PRC, etc.) parties were indispensable in ensuring the PSOE-UP coalition government was able to get the necessary support for the extensions (Figure 5).

Figure 5. Spanish Parliament voting on extensions to the first State of Alarm.



Partido Socialista Obrero Español (PSOE), Partido Popular (PP), Unidas Podemos (UP), Esquerra Republicana de Catalunya (ERC), Ciudadanos (CS), Junts per Catalunya (JxCAT), Euzko Alderdi Jeltzalea-Partido Nacionalista Vasco (PNV), Euskal Herria Bildu (EHBildu), Candidatura d'Unitat Popular (CUP), Unión del Pueblo Navarro (UPN), Coalición Canaria (CC), Nueva Canarias (NC), Bloque Nacionalista Galego (BNG), Foro Asturias (FORO) Teruel Existe (TE), Partido Regionalista de Cantabria (PRC).

Source: Authors' own.

Phase IV: 'New Normal'

The fourth phase coincided with the period between the first and second States of Alarm, that is, between 21 June and 25 October 2020. In this period, the 'new normal' was officially established. The ACs Governments, in keeping with their wishes of the previous months, were in charge of managing the waning crisis. However, it was during this phase that the role of Spain's Inter-territorial Council of the National Health System gained in importance. The country's external borders were once again opened up and there were no longer any restrictions on internal mobility.

Outbreaks of the virus required the occasional isolation of municipalities or regions. But now the different political spheres seemed to enter a brief period of truce, reducing the territorial conflicts of the previous months. However, in August the infection rate rose and the tension between the ACs Governments and the Spanish Government rose with it. Some of the former took a stance diametrically opposed to the one they had

taken in the previous phase and asked the latter for a common strategy to combat the pandemic.

As in the earlier phase, the case that best reflects the growing tension occurred in the Community of Madrid. Following a meeting between the Presidents of the Spanish Government and the Community of Madrid, the positions of the two appeared to be much closer. However, a few days later, with a rise in the infection rate, the Government of the Community of Madrid restricted mobility in 37 basic healthcare zones[41], a figure that would later be raised to 45. A week later, the Spanish Ministry of Health agreed to lock down the perimeter of the capital and those of a further eight municipalities in the Community of Madrid. However, Madrid's Supreme Court of Justice, at the request of the AC Government, ruled against the validity of the decision, considering these measures a violation of the citizens' fundamental rights. In the light of events, the Spanish Government opted to decree a State of Alarm applicable in just nine municipalities of the Community of Madrid and thus restricted mobility in this area.

Phase V: Second State of Alarm

The general situation throughout Spain took a turn for the worse (second wave) and the Spanish Government decided to decree a new nationwide State of Alarm on 25 October 2020. A day later the XXIII Meeting of Presidents was held. On this occasion, the emergency measure was prolonged just once, albeit for a period of six months (until 9 May 2021). The vote on the extension in the Spanish Parliament failed to win the support of the PP, which abstained.

Compared to the State of Alarm decreed in March 2020, the differences were significant. The ACs Governments were now considered as 'delegated competent authorities'; thus, although some restrictions were fixed in accordance with a previously established general scale, they enjoyed certain powers of management. For example, the ACs Governments could choose the number of hours of night-time curfew to impose and whether or not to implement perimeter closures (Table 1).

[41] Areas in which a specific health center provides healthcare.

Table 1. Main characteristics of the State of Alarm of 25 October 2020.

Competent authority	Spanish Government
Delegated competent authority	President of the AC or Autonomous City
Limitation of the freedom of movement of people	Limited to between 23:00 and 06:00 The ACs Governments being able to extend or shorten the beginning or the end of this curfew by one hour
Perimeter closures	The entry and exit of people from the territory of each AC is restricted *, ** The ACs Governments being able to limit the entry and exit of people from territorial areas at a lower tier than that of the AC, that is, depending on their internal territorial divisions. *Following the pertinent communication to the Spanish Ministry of Health, each AC Government is able to modify, adapt or suspend this measure **This does not affect the border regime with other states
Limitation of the permanence of groups of people in public and private spaces	Maximum of six people, unless from the same household bubble The ACs Governments being able to reduce this number
Limitation of the permanence of people in places of worship	The ACs Governments regulate the number of people allowed to gather

Source: Authors' own.

Table 2 provides an example of the variety of restrictions in place as of February 2021. The power of the ACs Governments to close the perimeter of other territorial areas within the AC was one of the most notable of these measures. We examine three of these ACs

in greater depth. First, the case of Catalonia which, as discussed above, presents an internal division into health regions which, broadly speaking, coincide with the map of *vegueries* or regions made up of several *comarcas* or counties and which have been repeatedly proposed as a replacement for Catalonia's four *Spanish* provinces[42] (Figure 6). The AC's management of the pandemic was focused on these nine health regions (or *vegueries*) given that they, unlike the 'artificial' provinces, have within their territory one or more of Catalonia's major hospitals and present more homogenous geographical characteristics. In this regard, there exists a fairly broad consensus that the 2010 Constitutional Court ruling concerning the unconstitutional nature of the reform of the Statute of Autonomy of Catalonia marked the beginning of the independence process of the last decade.[43] Ironically, this ruling closed the door to any possible reform of the provincial map in Catalonia, which is *de facto* considered constitutionally frozen, and the *vegueries* or health regions have had to continue as mere internal divisions employed by the Catalan Government in relation to certain specific matters, such as healthcare.

The second case corresponds to that of Galicia, whose health regions, unlike those of Catalonia, overlap more closely with its provinces (Figure 6). The main exception are its two western provinces, which are both divided into three regions with an interprovincial region emerging around the Galician capital (Santiago de Compostela). This health map is more coherent with Galicia's urban system, in particular with the areas of influence of the five main cities of western Galicia. However, the tendency to be governed by the provincial divisions often gave rise to contradictions between the decisions taken and implemented based on the provincial map and the reality of healthcare needs in the Santiago de Compostela region in particular.

Finally, in the case of Madrid, decisions concerning the management of the pandemic were taken at the level of the basic healthcare zones. Indeed, the regional government recognized a total of 286 zones, centered at the neighborhood level or lower. However, opting to make decisions at this scale gave rise to numerous criticisms, not least because epidemiological indicators were not available at this level (which means taking decisions about perimeter closures is far from easy) and because the policing of zones at this scale is especially challenging.

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[42] Burgueño, "El territori de Catalunya s'organitza en... regions sanitàries?".
[43] Paül and Trillo-Santamaría, "The Persistent Catalan-Spanish Turmoil".

Table 2. Restrictions by AC in February 2021.

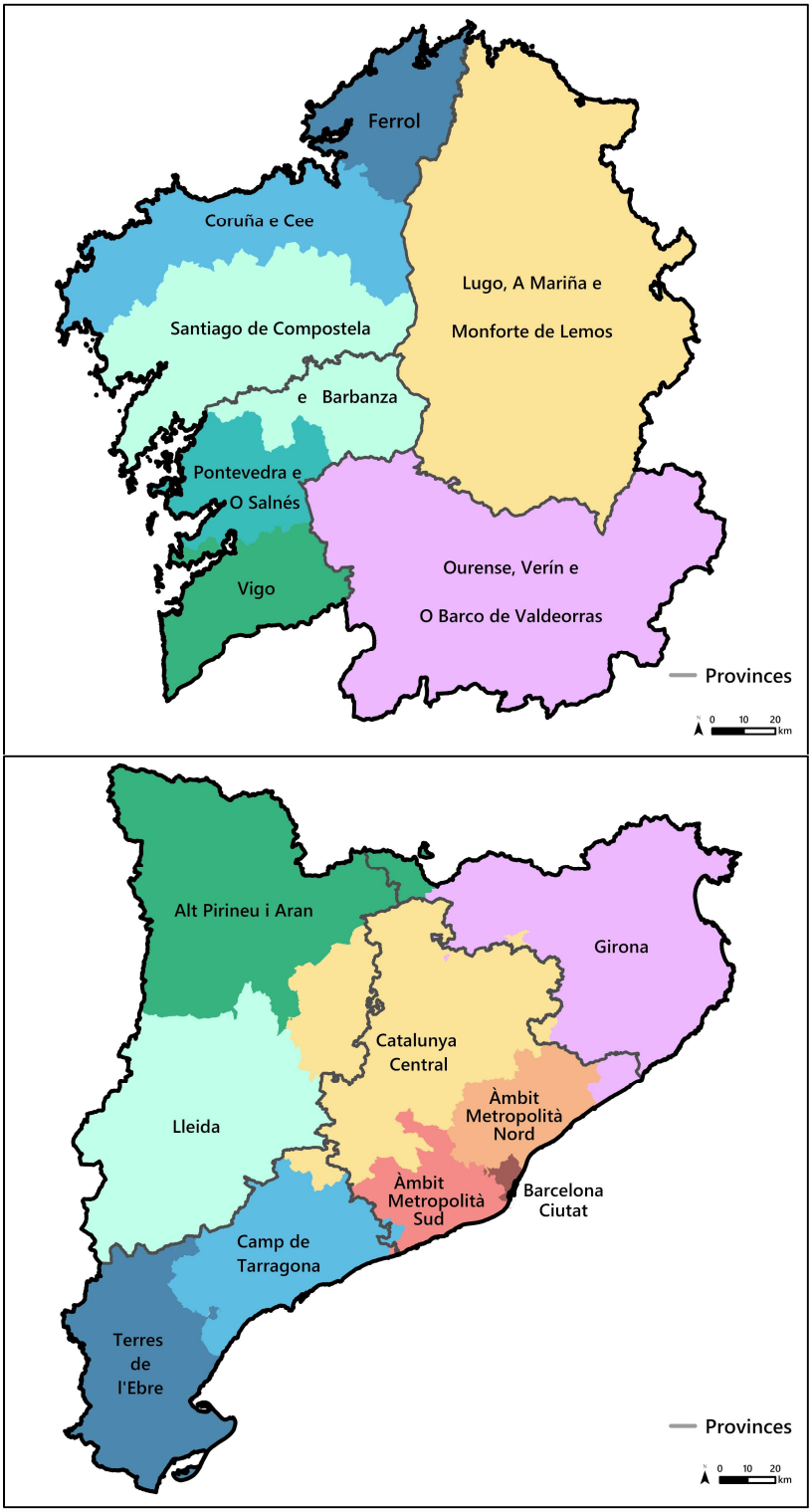
AC	Perimeter closure	Other territorial units locked down	Night-time curfew	Social gatherings
Andalusia	Yes	Provinces and municipalities with high incidence	22:00–06:00	Maximum of four people except for funerals
Aragon	Yes	Provinces and four municipalities	22:00–06:00	Maximum of four people
Canary Islands	Yes*	Two islands	22:00–06:00	Depending on the island, varies from two, four or six people
Cantabria	Yes	Four municipalities	22:00–06:00	In general, maximum of six people. In four specific municipalities, a maximum of four people
Castile and Leon	Yes	Provinces	22:00–06:00	Maximum of four people
Castile-La Mancha	Yes	None	22:00–07:00	Maximum of six people
Catalonia	Yes	All municipalities	22:00–06:00	Maximum of six people and two cohabitation bubbles
Community of Madrid	No	Basic health zones and municipalities	22:00–06:00	Only cohabitants
Navarre	Yes	None	23:00–06:00	Maximum of six people
Valencian Community	Yes	Municipalities over 50,000 inhabitants on weekends and public holidays	22:00–06:00	Maximum of two people in public spaces. Only cohabitants in spaces for private use
Extremadura	No	22 municipalities	22:00–06:00	Maximum of six people
Galicia	Yes	All municipalities	22:00–06:00	Only cohabitants
Balearic Islands	No	Two islands	22:00–06:00	In three islands, only cohabitants. In the other islands, a maximum of six people
La Rioja	Yes	All municipalities	22:00–06:00	Only cohabitants
Basque Country	Yes	All municipalities	22:00–06:00	Maximum of four people

Asturias	Yes	17 municipalities	22:00–06:00	Maximum of four people. Only household cohabitants
Region of Murcia	Yes	23 municipalities and one consortium	22:00–06:00	Maximum of two people in public spaces

*The entry restriction does not apply to travellers who have taken a PCR test.

Source: Authors' own.

Figure 6. Health regions of Galicia and Catalonia during the pandemic.



Source: Authors' own.

During this period, two particularly critical moments were experienced as regards the ongoing healthcare crisis: the second wave reached its peak (October/November 2020) and the third wave emerged (January-March 2021). However, in terms of the political and

territorial conflict, the tensions recorded were constant. Some ACs Presidents accused the Spanish Government of not providing them with sufficient tools to deal with the pandemic. This dispute even reached the Courts. We mention two of these legal cases. First, the case of Castile and Leon, where the AC Government decided to fix a later curfew than that established under the parameters of the State of Alarm. The second case corresponds to that of Galicia, whose AC Parliament passed a law-making vaccination mandatory (Galician Act 8/2021). Both measures were challenged by the Spanish Government before the Courts.

Even in those moments when the infection rate fell, disputes between the ACs Governments and the Spanish Government concerning the measures to be applied were constant. Thus, in the days before Christmas and Easter — when special measures were agreed to by the Inter-territorial Council of the National Health System — tensions ran high. Similarly, in April, faced by the potential shortage of vaccines, some ACs Governments studied the possibility of purchasing supplies of vaccine unilaterally. The EU was obliged to remind them that this was the competence of the state.

Phase VI: Confusion

On 9 May, 2021, more than six uninterrupted months of the State of Alarm were finally brought to an end. By this date, Spain's most elderly citizens had been vaccinated and the situation, from a healthcare perspective, had improved notably. However, the lifting of the emergency measure ushered in another turbulent episode in the relations between the ACs Governments and the Spanish Government.

Some ACs Governments claimed not to have the necessary tools to combat the pandemic and urged the Spanish Government to provide some type of solution (for example, the Basque Government demanded the continuation of the State of Alarm, since it ensured more restrictive measures could be taken). Restrictions affecting fundamental rights, such as the freedom of movement, could no longer be applied directly and had to be ratified by the Courts. ACs Governments seeking to apply restrictions of this kind (night-time curfews or perimeter closures, for example) had to go to the superior court of justice sitting in each AC and, if denied, they could appeal to the Supreme Court — the Spanish Government approved Royal Decree-Act 8/2021 to make these measures lawful. The Galician President, Alberto Núñez Feijóo, referred to this situation as the 'judicialization of the pandemic' resulting from the inaction of the Spanish Government;

the judiciary itself was also critical of this way of regulating the measures, in a typical display of the political posturing of the judiciary.

Disagreements and conflict followed hard on each other over the course of the following weeks. One of the main disputes concerned the vaccination protocol for the second dose of the Oxford/AstraZeneca vaccine. The Spanish Government proposed that it be replaced by Pfizer, while some ACs Governments, including Madrid and Galicia, recommended injecting Oxford/AstraZeneca and, if not, insisted upon obtaining a signed consent from the person to be vaccinated indicating they were happy to follow Spanish Government guidelines. A second dispute concerned the approval in the Inter-territorial Council of the National Health System of a series of measures, including restrictions on restaurants and bars and on nightlife in general. The Basque Government, for example, claimed that this amounted to an invasion of the powers of the ACs, while the Government of the Community of Madrid described the measure as a 'political imposition'. Such is the extent of the conflict that the ACs Governments threatened not to apply the regulations approved by the Spanish Government, while the latter reminded them of their mandatory nature.

Final Reflections

From the beginning of the pandemic, Spain's international borders with both Portugal and France were closed on various occasions, in what was a widespread response of the states to withdraw in on themselves to contain the virus.[44] Evidence of this trend has been widely reported. For this reason, rather than reiterating this finding, the chapter has chosen to analyze a parallel process and one that has received less attention from within academia: the bolstering of the Spanish State's internal borders that consequently occurred at various territorial scales — for example, that of the ACs, provinces and health regions. It is our contention that the use of 'internal borders' within the EU to refer to the borders between member-states[45] has tended to mask other 'internal borders', that is, the ones specifically discussed herein. By adopting a broader agenda and time framework,

[44] Berrod, "The Schengen Crisis and the EU's Internal and External Borders".
Rijpma, "COVID-19, another blow to Schengen?".
[45] Barbero, "A Ubiquitous Border for Migrants in Transit and Their Rights".
Virkkunen, "Disease control and border lockdown at the EU's internal borders".

this contribution complements an initial geopolitical study of the Spain–Catalonia conflict during the first weeks of crisis, undertaken by two of the authors of this chapter.[46]

This chapter has enabled us to draw, at least, two worthwhile theoretical inferences. On the one hand, it provides evidence that the barrier effects of international borders in relation to the Covid-19 crisis[47] have their correlate in a state's internal borders. Our analysis of the Spanish case has detected six phases characterized by different perimeter closures at different scales. All of them have had a major impact on their respective populations, including a curtailment of mobility and disruptions to their daily lives. This process has taken place, in particular, although not limited to, the border areas of all of the internal borders that have been erected.

On the other hand, we have shown that the main internal borders at stake are those erected between the 17 ACs. These borders have been resignified with the management of the conflict described here, adding pressure to Spain's dysfunctional territorial model, which strives to be federal in definition but fails to fulfil the requisite conditions[48]). Indeed, in the course of the six phases described, we have been witness to constant tensions between the Spanish Government and the ACs Governments, regardless of the specific measures that have been implemented. During the first State of Alarm, the ACs Governments criticized the centralizing policies adopted, considering them an encroachment on their devolved powers (phase III). Yet, when the Spanish Government switched strategies and initiated greater decentralization (phases IV, V and VI), some ACs Governments denounced the lack of coordination and the general chaos. Clearly, when the political colors of the governments at loggerheads did not coincide, the tensions were much greater. However, the situation cannot simply be reduced to a matter of conflicts between parties that lean more to the left or to the right. Indeed, in the Spanish case, different conflicting national sensitivities — or regional, depending on the case — clearly emerge.[49] In Spain, several nations, with varying degrees of official recognition

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[46] Paül and Trillo-Santamaría, "The Persistent Catalan-Spanish Turmoil".
[47] COTER, *Report. Public Consultations on the Future of Cross-Border Cooperation.*
Lara-Valencia et al., *COVID-19 and Cross-Border Mobility*.
Medeiros et al., "Covidfencing Effects on Cross-Border Deterritorialism".
MOT, *La crise du covid-19 aux frontières.*
[48] Gómez Mendoza, Lois, and Nel·lo, eds., *Repensar el estado*.
Aja, *Estado autonómico y reforma federal*.
Romero, "El gobierno del territorio en España".
[49] Paül and Trillo-Santamaría, "The Persistent Catalan-Spanish Turmoil".
Núñez Seixas, *Suspiros de España: el nacionalismo español.*

and varying degrees of adherence among the population, coexist, and these may or may not coincide with one or more of the 17 ACs. The different nationalist movements — or regionalist in some cases — in question erect 'external borders' for their respective 'national [or regional] territories'.[50] Note that, in this game of scales, what are 'external borders' for the nations/regions are 'internal borders' for the Spanish State.

In their turn, nationalist — and regionalist — movements create their own internal territorial divisions which they defend zealously. For this reason, Spanish State nationalism will always prefer the provincial scale as its map *par excellence*,[51] in its efforts to subtly undermine the role of the ACs, as occurred in phase III of the crisis. Moreover, some ACs with openly nationalist Governments, as is the case of Catalonia, reject this territorial division in favor of another: the *vegueria* and the *comarca* or county; both of which respond to their territorial self-representation.[52] Thus, what we find is a face-off between internal borders at various scales based on conflicting maps of the same territory.

However, in the case of Madrid its healthcare map does not respond to a specific nationalist imaginary. Yet, it is worth stressing that the scale represented by its 286 basic healthcare zones areas has been used by the Government of the Community of Madrid (the PP in coalition with *Ciudadanos*) as a weapon against the Spanish Government (a coalition led by the PSOE). Thus, in the face of constant demands from the Spanish Government during phase V to "shut Madrid down", the Government of the Community of Madrid responded that it would shut down only those neighborhoods it deemed necessary, but not the entire city or region. Recall that, in phase IV, the Spanish Government, following the annulment by the Supreme Court of a previous ministerial decision, declared a specific State of Alarm in order to be able to close the perimeter of the capital and a further eight municipalities. In short, the tensions between the Government of the Community of Madrid and the Spanish Government acquired a clearly political nature, with the former taking on the role of the opposition and acting with particular firmness and obduracy. Indeed, it would not be going too far to claim that this confrontation reached levels of tension greater than those recorded between the Catalan

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[50] Joan Nogué, *Els nacionalismes i el territori* (Barcelona: El Llamp, 1991).
[51] García Álvarez, *Provincias, regiones y comunidades autónomas.*
Burgueño, "El territori de Catalunya s'organitza en... regions sanitàries?".
[52] Membrado-Tena, "Entes territoriales de escala comarcal".
Burgueño, "El territori de Catalunya s'organitza en... regions sanitàries?".

Government (ruled by Catalan nationalist parties) and the Spanish Government.[53] Such was the tension that a strong nationalist — in this case, Spanish nationalism — discourse emerged: the Government of the Community of Madrid defended its *Spanishness* as the capital of the State and as the ultimate embodiment of Spanish identity. This political tension between parties ended up being transferred to the judiciary, which, as mentioned previously and as reported by GRECO,[54] is unduly influenced by the political parties. In practice, this means that the courts may end up ruling in favor of the Spanish Government or the ACs Governments based on purely political criteria.

The criticisms that emanate from the ACs Governments (above and beyond those that are purely political in nature) are based on the evident failure of the mechanisms of horizontal cooperation, consubstantial to all federal state systems. For example, although between 15 March to 14 June 2020, more Meetings of the Presidents were held than ever (14), they did not function as a mechanism for debate and the reaching of agreements, but rather for the transmission of the decisions taken by the Spanish Government to the ACs Governments. As for the Inter-territorial Conference of the National Health System, the deficiencies — and tensions — identified in its governance confirm the weaknesses described elsewhere — see J. Ruiz González[55] and E. Aja[56]— regarding these so-called 'sectoral conferences' (multilateral bodies with the representation of the Spanish Government and the ACs Governments): the disproportionate importance of the former in their operation and an excessive dependence on the Spanish Minister on duty, among others.

In short, what emerges from the territorial analysis conducted here of Spain's Covid-19 crisis management is, on the one hand, the virtual absence of any effective mechanisms of coordination, collaboration and cooperation. This can be attributed to the limitations of the 'State of Autonomies', which, since at least the first decade of the present century, has been characterized by the erection of a blockade that has prevented any movement towards the expected horizon of a more federal state. On the contrary, Spain seems to have moved in the opposite direction, in large part, as described above, due to the persistence of a centralized and politicized judiciary. On the other hand, Spain

[53] Paül and Trillo-Santamaría, "The Persistent Catalan-Spanish Turmoil".
[54] GRECO, *Prevención de la corrupción.*
[55] José Ruiz-González, "La cooperación intergubernamental en el Estado Autonómico: situación y perspectivas", *REAF* 15 (2012): 287-328, accessed June 15, 2021. https://raco.cat/index.php/REAF/article/view/252678.
[56] Aja, *Estado autonómico y reforma federal.*

provides an extraordinarily rich case study from a geopolitical perspective, which includes that of its internal borders. As we have seen, various coexisting nationalisms and regionalisms have erected conflicting and overlapping borders at different scales. At the time of writing, Covid-19 is still very much present in our lives and just what the next phases might hold remains unknown. However, in Spain, the crisis can never be simply a circumstantial matter of health management, but, in common with any issue that affects this country, it inevitably acquires a territorial reading.