

Ethical Issues of Elders During The COVID-19 Pandemic

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Abstract. The Elders are facing severe marginalization in modern society, especially during the pandemic. It is because of this marginalization and lack of resources, that the elders face many ethical issues in their daily life. Under the COVID-19 Pandemic, ethical issues dealing with vaccines, priority, and isolation are really worth attention. This research collects some of the main ethical issues found during the COVID-19 pandemic, focuses on finding the root cause of each, and gives a possible future alternative. This research brings up three major ethical issues, each discussing priority, vaccination, and isolation. As a research based on other expert's findings, this research uses pieces of evidence to prove the importance and the severity of the ethical issues listed above. The central aim of this research is to inform people about the existence of such problems, hence, suggesting the importance of necessary solutions, such as communication.

Keywords: Elderly, COVID-19, Ethical Issues.

1. Introduction

1.1. The COVID-19 Pandemic and the Elders

The COVID-19 pandemic has been a severe global issue for the past few years. According to the records of WHO, there are over 770 million confirmed cases and about 7 million confirmed deaths due to the SARS-COV-2 infection [1]. Such a number of confirmed cases takes up about 9% of the whole world's population. In some countries, such as China and the U.S., this percentage can rise to 50% [2]. Among all age groups that can be infected by COVID-19, statistics showed that although the elders are not likely to get infected, their death rate is incredibly high: about 22% of people over age 65 have COVID-19 as their direct cause of death [3]. The reason for this scenario is that the elders have low immunity and a weak disease-fighting system. Hence, it is important to keep track of the situation of the elders, to prevent such consequences from happening again.

During the pandemic, the elders not only suffer from the risk of infection and physical diseases but also mental health issues. It is hard to meet people offline during the pandemic, and even if people can, they're more likely to be afraid to go outside [4]. According to research, the elders are more likely to feel isolated by society, and most of the elders who got COVID receive little care [5]; due to the quick development of current technology, it is less likely for the elders to have common topics to communicate with others, which will increase the feeling of isolation. The quarantine policy of COVID-19 made such issues more severe: with the lack of offline interaction and the technology issue with online communication, the elders can find no chance of interaction. Hence, it is also important to take care of the mental health issues of such marginalized people to maintain good public health conditions.

1.2. Relation between lack of resources and ethical issues.

People create ethics. In other words, it is subjective, which may lead to conflicts. Indeed, when ethics "collides" with daily life, it creates dilemmas. While such cases are rare and easy to solve, it is fatal during a pandemic. Severe ethical dilemmas may cause hesitancy in institutions, protests, and eventually, social chaos. Take China as an example. China has a great population. On one hand, a massive population means massive products, which means a higher speed of development. On the other hand, to maintain the basic needs of that many people, lots of resources are needed. Such great requirements are also the main reason why there are still lots of poverties in China: too much population with too little resources. Moreover, during the pandemic the disadvantage of having such

a great amount of population is further revealed: The health system cannot afford that many patients so lots of people can only rely on their own immune systems, causing a massive increase in mortality. In response to this problem, people built temporary health sites, aiming to “accept and cure all the patients”. However, they only managed to “accept all”. The healthcare resources cannot make sure that all of the patients can get their cure.

1.3. Purpose

This research aims to discover some existing ethical issues that are related to the elders and find some potential solutions to such ethical issues. As mentioned in the introduction, marginalized people like the elders should be taken care of, especially during the pandemic. Hence, it is essential to find out what problems they currently have. This research aims not only to rely on the summary of other researcher’s opinions but also on observations of daily life.

2. Methods

Firstly, some ethical issues that already can be observed in society are proposed and analyzed. After that, new questions based on the analysis will be further asked until the root cause of such an issue is found. Combining the results from other existing research, a possible solution to some of the issues will be proposed and evaluated.

3. Results

3.1. The “who to cure first” dilemma

The major concern of this problem starts with two patients: an elder with underlying diseases, and a “healthy” adult. Both of them got COVID. According to the central aim, the institution should accept all of them. However, due to a lack of resources, they can’t make sure that both of them can get treated on time. If they choose to treat the elderly first, due to their underlying disease, it is at a high risk that the elderly will become severe cases, spending more resources that are already lacking. The younger may also become severe cases due to late treatment. On the other hand, if they choose to cure the younger, surely the patients would be cured faster, hence, leaving more space for other patients. However, this may lead to the death of the elder, and protests due to the so-called “not respecting the elders”.

Such cases happen everywhere in the world, not limited to the Chinese, not limiting to age, gender, or race. It seems that whoever cures first, will be a setback that causes more severe problems. Such a dilemma leads to the hesitancy of institutions and rising protests, making the aim of total cure even harder.

One solution to this problem—which the Chinese Health Institution is doing now—is to treat people with more severe symptoms first, regardless of their age or underlying diseases. This surely follows the central aim of healthcare and is accepted by most people. It seems that the problem is solved. However, if the elder and the younger adult are both severe cases, it’s hard to decide who to treat first. This ethical issue may have more than one variant, and such a method that “controls one variable” may not work for all circumstances.

3.2. Vaccination vs. Risk-taking

Vaccination is always the core element and a turning point in a pandemic. The creation of a reliable vaccine will greatly reduce the severity of a virus [6]. Hence, most of the population will likely take the vaccine to get immunity. However, things are different when it comes to the elders. Most of the elderly have some underlying diseases already. When the vaccines are newly developed, it is not sure whether they will cause the aggravation of other diseases. Hence, it is unsafe for the elders to take the vaccine that early [7]. The dilemma exists here: If the elders choose to take the vaccine, as mentioned above, they’re taking the risk of aggravating underlying diseases. Some underlying diseases such as

coronary heart disease may cause immediate death if it turns into severe cases. On the other hand, if the elders choose not to take the vaccine right after it is developed, it will increase the risk of them getting infected.

To solve this problem, the Health Institution gives the choice to the elders themselves: let them choose whether they should get vaccinated. However, the setbacks of the two choices still exist, so the elders should balance the pros and cons themselves. Under such isolated and resource-lacking conditions, it is often hard for the elders to make the right choice by themselves.

3.3. The Isolation of the Elders

As mentioned in the introduction, the elders, or the whole marginalized group of people, are more likely to feel isolated. During the pandemic, the feeling of isolation is becoming fatal to their mental health [8]. Take China as an example: After the pandemic spread out, China posted a long-term quarantine policy, where residents should be banned from going outside, and do PCR tests at specific times—usually two or three times a day. The consequences of such a policy are double-sided. According to statistics, the number of confirmed cases significantly dropped since the policy was established [9], however, it also created massive mental health torture. Lots of people feel anxious about the lack of resources, knowing that it is impossible for them to buy new resources themselves. Some are worried that if someone is infected in their building, the quarantine will be harsher and longer. Among all of the age groups, the elders are less likely to adjust their mental health condition by themselves. They will easily fall into depression and emotional disorders. Over time, such problems will get even more severe if they fail to get their “freedom” by going outside. This again creates a dilemma: the significant decrease in the risk of getting infected vs. the psychological torture of the quarantine.

4. Discussion

To find out methods of balance, an understanding of the main causes is required. The direct cause of this ethical issue is the lack of resources. These “resources” consist of a lack of wards, and human resources in both healthcare and manufacturing. With those aspects prepared, it is not likely that such situations will happen. The lack of care for marginalized people increases the risk of them getting infected, hence, increasing the number of cases needed to cure, lessening the resources remaining. The limitations of various ethical rules also make the institutions undecided. Such rules may include protests for gender equality, race equality, and respect for the elders and children. Prioritizing any people violates such “black-or-white” rules, exposing institutions to protests and criticism.

Some may argue that the root cause of this ethical concern is the pandemic itself. They may suggest that the resources are only lacking during the pandemic. Indeed, the COVID-19 pandemic is one of the most pronounced external causes of the dilemma. However, as mentioned above, the root cause of this problem already exists in daily life: what the pandemic did is to reveal it to society. The internal causes are also mentioned above. Hence, to balance the ethical concerns in the future, all of those factors should be considered.

To begin with, resources should be prepared and maintained to avoid the circumstances that may cause the dilemma. This “resource” includes healthcare and human resources. Such resources can maintain the continuous presence of healthcare ability, help the development of vaccines, and also develop the confidence of people, lessening the feeling of anxiety and depression. The vaccines should be re-considered if they fit the elders to take. If not, there should be a rework on it to eliminate or alleviate the possible risk of “awakening” underlying diseases. Communication and respect is also a necessary factor to release negative emotions such as isolation [10]. It can also lead to the understanding between different opinions, thus, creating a solution that is mostly acceptable.

On the other hand, internal ethical concerns are hard to actually “solve”. The possible alternatives to that may be the continuous communication between institutions and people, or the persistence of the institution, regardless of the protests.

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