

Ethical issues in ageing

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ABSTRACT – Population ageing, in both the developed and developing world, has put increasing demands on health resources; this has brought to the fore various ethical issues related to ageing. This paper examines moral issues that confront people as they grow old as well as those who are involved with them. The concepts of autonomy, dignity, justice and intergenerational solidarity are explored. Living wills and the role of a proxy could help to deal with the common ethical dilemmas related to death and dying. Positive action by governments to overcome ageism is recommended. The need to establish ethical guidelines, which take into consideration differences in religion, culture, ethnicity and race, is highlighted.

KEY WORDS: ageing, ethics of ageing, living wills, population ageing, proxy

The Second World Assembly on Ageing organised by the United Nations (UN) in Madrid on 8–12 April 2002, was convened on the twentieth anniversary of the First World Assembly held in Vienna in 1982. The purpose of the Madrid conference was to review progress achieved since 1982 and to consider priorities for future action. It set out a blueprint for an international response to the opportunities and the challenges of population ageing in the twenty-first century and for the promotion of a ‘Society of All Ages’. This century has been termed the Age of Ageing; it is estimated that around one million people reach the age of 60 years every year and the number of people aged over 60 is expected to rise from 600 million to 2,000 million by the year 2050 when they would make up to 21% of the world population.

An outcome of the First World Assembly was the establishment in 1988 of the International Institute on Ageing (INIA), United Nations, in Malta. Its main mandate was to set up training and education programmes in the various fields of ageing particularly for developing countries, as well as to carry out research and consultancy work. In the last 14 years, INIA has trained more than 2,000 participants from 124 different countries in its programmes dealing with the various aspects of ageing.

Ethics of ageing

The pace of population ageing in both the developed and the developing world has, over the last 20 years, stimulated a growing interest in the ethics of ageing. These demographic changes are occurring at a time when major changes are taking place in information technology, globalisation and the ever-present introduction of new technologies. Moreover, the increasing demands on health resources have also brought to the fore issues of resource allocation between generations and of justice between generations. Several ethical issues have arisen, not all susceptible to judicial and public treatment, that call for deeper moral reflection and commitment by public authorities, non-governmental organisations and by individual human beings.

As ethical issues in ageing are a prime interest of INIA, the Institute set up a study group made up of professionals and academics with expertise in medicine, law, economics, philosophy, bioethics and sociology to examine issues of a moral nature that typically confront people as they grow older or as they become involved in one way or another with people who are growing old. The following views reflect the deliberations of the study group.

Autonomy and dignity

A major concept, central to ethical practice, is autonomy. The capacity for autonomous decision-taking is regarded as the basis of human dignity. A primary moral difficulty is the preservation of such a dignity at a time when there is a declining capacity for autonomous decision-taking. This decline may not be simply a consequence of ageing; it may be affected by such factors as increasing physical disability, intellectual disability such as illiteracy, and by psychological conditions that often lead to social isolation and depression. These disabilities call for different moral responses. The most difficult moral question is whether the principle of the maximum exercise of autonomy extends to authorisation of self-destruction. Moralists like G Dworkin,¹ P Singer,² and J Harris³ hold that there may be conditions of life so bad as to make life worthless, whilst there are other just as worthy moralists like J Keown,⁴ L Kass,⁵ G Grisez⁶ and others who hold that even the greatest debilitation cannot destroy the worth of human life.

On this issue depends the moral legitimacy or otherwise of euthanasia.

Persons over the age of 80 are the fastest growing age group in developed societies; this is the group where physical frailty and diminished mental capacity are common, rendering them most vulnerable to abuse and where ethical dilemmas related to death and dying are frequent. This decline in functional capacity may lead to inability to take responsible decisions. This might require another person to act as proxy with all the attendant moral responsibility. The most critical cases of proxy decision-making arise when withdrawal of life support is being contemplated. The overriding principle is for the proxy decision-maker to show the maximum possible respect for the known or likely wishes of the patient. The formulation of so-called living wills may be of great help in the exercise of proxy decision-making.

The reduced autonomy of the older person needs to be exercised according to the group within which s/he lives, whether in a family or in an institution or alone. In all these cases, elderly people are morally obliged to keep making the most productive use of their talents, not only out of self-interest but also as their personal contribution to the common good of mankind. A specific danger threatening the proper autonomy of the elderly in the family setting is filialism (ie limiting the freedom and responsibility of older people by the well meant actions of sons and daughters). However, the psychological contribution of family members to the sense of autonomous well-being of the elderly is irreplaceable by that of other carers, whether paid or voluntary. The family is the only institution that can ensure recognition of every elderly person's unique value.

Autonomy is not one sided. It implies responsibilities as well as rights. The individual should take a share or responsibility for his/her future, but this does not exempt the state and other corporate institutions from providing assistance. Indeed, there are many social provisions that can be made to enable the elderly to retain as much autonomy as possible.

Sustaining a growing older population is the responsibility of everyone – society, government, the family and the individuals themselves. In general, there should not be any discrimination on the basis of age, any more than there should be on the basis of gender and race. This raises the issue of the morality of compulsory retirement; however, this should be viewed in terms of inter-generational equity with younger persons. As people are living longer and also remaining healthier, supporting so many healthy but economically unproductive people may render the concept of retirement obsolete. Also, in an age where globalisation is increasing, it is important that the elderly do not feel marginalised.

Justice and moral obligation

Justice is the other major concept, central to ethical practice. Justice includes notions of equity for all parties, especially if there is status denigration because of age, sex, race, ethnicity or social economic status. Justice would be done if society attempted in its laws to make up for the disadvantages suffered by people because of advanced age. One of the major moral

issues is whether the elderly, being the category of persons in greatest need, should have priority in resource allocation. This raises the issue of justice between generations and how scarce resources are to be distributed among different age groups. Population ageing, with advances in medical technology, ensures that the allocation problem will continue to affect societies as far as one can see into the future. The question of priority for the elderly among all claimants for scarce resources can only be settled after realistic consideration in terms of relative need. Among the needs of the elderly, a paramount one is income security, though there is no general agreement as to the most moral way of guaranteeing it.

Ethics requires that human relations, even between generations, go beyond strict justice. Thus those elderly people who could assume responsibility for their own future should do so not only for their own sake, but also as an act of solidarity with the whole human community. These particular moral obligations both of and towards the elderly stem from the fact that all human beings share responsibility for the well being of all other human beings.

Respect for the elderly has always been thought to be a common heritage of mankind. The negative image of ageing with its discriminative practices characterised by the concept of ageism must be overcome through positive action by governments through the application of ethical concepts which are relevant to different religions, ethnic, racial and social classes, as the practice of ethics is grounded in one's everyday life, whether personal and professional, whether public or private.

An international approach

Though different countries have different cultural, family and societal values as well as different economic realities, this should not hinder international moves to establish ethical guidelines. All human beings share responsibility for the well-being of all, so governments should be encouraged to formulate laws to make up for the disadvantages suffered by people because of advanced age in order to enable the elderly to retain as much autonomy as possible.

Although ethical issues transcend national frontiers, the policies and the practices adopted have to be congruent with the country's culture. In view of the universality of the subject, in the run-up to the Madrid meeting, INIA prepared a Declaration on Ethical Issues in Ageing, which was circulated by the Malta Government during the conference. The declaration highlighted the need for an international task force of experts to prepare a comprehensive report in which they would examine the moral questions that face human beings concerning ageing, and propose answers that may be helpful to those who have to take the relevant decisions.

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