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Care of the Elderly

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I greatly admire the work of a pro-humanity and anti-euthanasia group in the UK, called Care, Not Killing. Its members state a very clear NO to euthanasia and other forms of “assisted dying,” another euphemism for deliberately ending a human life on request or out of what is called “compassion” brought about by our reaction to another person’s distress in his or her human suffering. This article is not so much about the understanding or lack of it that gives us permission to end someone’s life, even assuming legalization (which, morally, by itself does not justify anything) and even if the person requests it as death approaches. The very name Care, Not Killing, however, speaks to another approach to dying, death and suffering: it says YES to accompaniment of the dying person, YES to human acceptance and support and YES to encouragement of living one’s last days as well as possible. And this IS possible. Good pain medication and hospice or palliative care, whether at home or in a facility, can make an enormous difference in relieving possible pain and suffering at end of life and also in reassuring the family and friends accompanying the person.

My first experience of “accompanying” was as part of a larger group of family and friends, mainly the

members of a prayer group in our church, who offered accompaniment and support to a mutual friend in her early 40s, dying of cancer. I was in my 30s and this was a new way for me of “being” with someone. The important thing was that the focus was on our friend, to help her and her family. I will never forget the day I was alone with her, and had to perform bedpan duties, a task that I had learned as a student in a summer job in a women’s hospital several years before, and had not done since. I told our friend that I was a little nervous. This dying woman grinned and said: “Stick around with me, and you’ll learn how to do all sorts of things!” We laughed and I managed. Even in that somewhat undignified but essential matter SHE encouraged ME. She helped me. I realize now that it was important for her to have some control, to be able to give some direction, to “supervise” in a gentle sort of way and to be able to help, to contribute. I didn’t have to know everything, I didn’t have to be super-skilled: I just needed to be there for her and with her, and to help out when needed. It was an important lesson for me and for other people who think “I can’t do that because I don’t know what to do, or to say.” We can all learn to care for the person’s needs if we care about the person.

An important dimension of care at the end of her life was concern for her spiritual life. These days we sometimes forget that need. We know this dimension is respected and developed in good care facilities of all types, and that should be recognized and encouraged. Then there are those places where carers look after the body but do not have time or concern for care of the spirit. It is too much to expect staff to be all things to all people, and perhaps this is another area where Christians could be more involved. This type of volunteer work is demanding, both of our time and of our person. We are all busy and we always have something else to do. That will never change while we are able bodied! At the same time, many of us have friends or family who languish in their residences. I use the word ² deliberately, since anyone who visits such places regularly sees many people in that situation. "Languish" rhymes with "anguish," especially concerning many people whose minds are as intact as ever, even if their bodies are in decline. I have a friend in just such a situation and I do not visit as often she deserves. I have much to learn. I know this is an area where our witness really counts, and, as usual, it is not enough to talk about it.

What does Pope Francis say about these situations? We would expect him to talk about "encounter" between the elderly and the rest of society, and he often does exactly that. In a special Mass celebrating the elderly in September 2014, he spoke of the enormous contribution that seniors make to society through their wisdom and experience.¹ The Pope stated that, notwithstanding the need for freedom for the younger generation, yet "...if a new and fruitful intergenerational equilibrium is not restored, the result will be serious impoverishment for everyone, and the freedom which prevails in society is actually a false freedom." He continued: "Zechariah says in Ps. 71, 'Do not cast me off in the time of old age, do not forsake me when my strength is spent...do not forsake me, until I proclaim your might to all the generations to come.' Mary listened to these elderly people and treasured their wisdom: the young give the strength which enables a people to move forward, while the elderly consolidate this

strength by their memory and by their traditional wisdom."² This is the way of encounter between the old and the young.

In, *The Dignity of Older People and Their Mission in the Church and the World*, written by the Pontifical Council for the Laity, Pope John Paul II is quoted as saying:

You are not and must not consider yourselves to be on the margins of the life of the church, passive elements in a world in excessive motion, but active subjects of a period in human existence which is rich in spirituality and humanity. **You still have a mission to fulfil and a contribution to make.**³

This is truly Good News for people at this stage of life, and it should be shouted from the rooftops.

The Pontifical Council lists areas where we need to revise our approach to pastoral care for people at this stage: new forms and new methods more consonant with the needs and spiritual aspirations of older people need to be sought; new pastoral plans rooted in the defence of life, of its meaning and of its destiny, need to be formulated. It is essential to encourage older people to make their own contribution to the church's mission. The Council warns against stereotyping, reminding us that older people are not a homogeneous group. Rather, it reminds us: "We need to accept it as a stage on the journey by which Christ leads us to the Father's house. Only in the light of faith strengthened by the hope which does not deceive, shall we be able to accept old age in a truly Christian **way both as a gift and a task.**"⁴

While it is true that we do not tend to view old people as gifts, we should be aware that there are charisms (gifts of the Spirit) peculiar to this stage which could benefit us all:

Disinterestedness: instead of measuring the value of our actions through efficiency and material success—what about giving of

ourselves without expecting a return on the gift—but giving for its own sake?

Memory: if we minimize history, we run the risk of repeating errors. The loss of an historical sense on our part marginalizes old people—their experiences and life history will not seem to count for younger people.

Experience: today's world seems to value science and technology over the 3 accumulation of personal experience, but there is always room for wisdom and the recounting of practical, cultural and spiritual experiences.

Interdependence: this human need is sometimes overshadowed by individualism and extreme concepts of autonomy and personal choice. Yet we need each other, and the generations need to matter to each other, instead of the weak being abandoned as incidental and forgettable in their old age.⁵

Based on its reflections, the Pontifical Council made some recommendations, noting that this older stage in life seems “particularly conducive to religious practice.”⁶ It noted that sometime older people return to religious and spiritual practices after long absences, and that this needs to be fostered. It pointed out that some older people see their physical decline as “signs that God is no longer benevolent” and the Council hoped to counteract this fatalistic view by emphasizing possible responses of the church as duties, viz:

It is the *duty* of the Church to announce to older people the Good News of Jesus, who is revealed to them just as he was revealed to Simeon and Anna.

It is the *duty* of the Church to give older people the chance to encounter Christ. She must help them to rediscover the significance of their Baptism, by means of which they were buried together with Christ

and joined him in death, “so that as Christ was raised from the dead by the Father's glorious power, [they] too should begin living a new life” (Rom 6:4) and find in him the meaning of their present and future life.

It is the *duty* of the Church to instill older people with a deep awareness of the task they too have of transmitting the Gospel of Christ to the world, and revealing to everyone the mystery of his abiding presence in history and that they are privileged witnesses, who can testify—both before human society and before the Christian community—to God's fidelity.⁷

The pastoral task of evangelizing or re-evangelizing older members of the community must aim at fostering the spirituality that is peculiar to this age of life, i.e., a spirituality based on the continual rebirth that Jesus himself recommended to the elderly Nicodemus. Jesus urged Nicodemus not to let old age stand in the way of rebirth. The Pontifical Council adds:

In spite of the passing of years, which risks dampening enthusiasm and draining away energy, older people must therefore feel themselves more than ever called to persevere in the search for Christian holiness: Christians must never let apathy or tiredness impede their spiritual journey. ⁸

Pope Francis endorses this approach, saying in a General Audience in March 2015, that being old is no time for a rest, but a chance for a new mission in the world. In today's frenetic world, young people and families need “...the older generation's prayers, wisdom and gifts to give them the encouragement, hope and faith they often lack.” ⁹ In a personally inclusive manner he added:

We older people can remind ambitious young people that a life without love is barren. We can tell fearful young people that worrying about the future can be overcome.

We can teach young people who are in love with themselves too much that there is more joy in giving than receiving. ...In fact, there is a true vocation and mission set aside for older people, who have a lot more free time at their disposal now than before. It's still not time to "rest on one's oars" and just coast along!¹⁰

Pope Francis reminded us that our societies are not ready, spiritually and morally, to give this period of life its full worth, and, in fact, the church itself has to look at what it can provide spiritually for older persons. He added that there are plenty of saints as role models, especially the elderly Simeon and Anna in the temple, for whom, when they saw Jesus, "...the weight of age and waiting disappeared at that moment and they found new strength for a new task: to give thanks and bear witness to this sign of God."¹¹

Scholars present the current century as "the century of old age": there are fewer children and an increase in elderly people. This imbalance is a great challenge to contemporary society. Pope Francis frequently expresses regret, as he said in another General Audience in March 2015, that our culture insists on making the elderly appear to be a burden, an extra weight. He noted that the elderly are seen as not only unproductive, "...they are an encumbrance, and are to be discarded. And discarding them is sinful. We do not dare to say this openly, but it happens. There is something cowardly in this inurement to throwaway culture..."¹²

We know that a society without intimacy and intergenerational relationships will lose its soul. Pope Francis is clear: the Church, faithful to the Word of God, cannot tolerate these degenerations.¹³ Pope Benedict XVI stated that "the quality of a society, I mean of a civilization, is also judged by how it treats elderly people and by the place it gives them in community life."¹⁴ It is clear that our way forward must be to engender respect for the elderly, to ensure their welfare and to provide a hopeful future for the young.

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Prof. McQueen also teaches moral theology in the Faculty of Theology, University of St. Michael's College. In 2015 Pope Francis appointed Dr McQueen as an Auditor at the Synod of Bishops on the Family (October 4-25), and in September 2014, he appointed her as a new member to the International Theological Commission for a five-year term.

1 Homily of Pope Francis, Mass for the Elderly, 28 September 2014.

<http://www.news.va/en/news/popefrancis-elderly-are-key-to-health-of-free-society>

2 Ibid.

3 Pontifical Council for the Laity. *The Dignity of Older People and their Mission in the Church and in the World*. The Holy See, October 1, 1998. P.3
http://www.vatican.va/roman_curia/pontifical_council

[s/laity/documents/rc_pc_laity_doc_05021999_older_people_en.html](http://www.vatican.va/roman_curia/pontifical_council/laity/documents/rc_pc_laity_doc_05021999_older_people_en.html)

4 Ibid., P.4

5 Ibid., Pp.5/6

6 Ibid., P.12

7 Ibid., Pp. 13-14

8 Ibid., P. 14

9 General Audience, March 12, 2015.

<http://www.catholicherald.co.uk/news/2015/03/12/pope-francis-to-elderly-people-give-the-world-yourwisdom-and-prayers/>

10 Ibid.

11 Ibid.

12 General Audience, March 4, 2015.

[https://w2.vatican.va/content/francesco/en/audiences/2015/documents/papa-](https://w2.vatican.va/content/francesco/en/audiences/2015/documents/papa-francesco_20150304_udienzagenerale.html)

[francesco_20150304_udienzagenerale.html](https://w2.vatican.va/content/francesco/en/audiences/2015/documents/papa-francesco_20150304_udienzagenerale.html) 13 Ibid.

14 General Audience, March 4, 2015, *supra*

Covid-19 as a Call to Responsibility for the Vulnerable

by Sarah Becker

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The high COVID-19 death rate among elderly individuals living in nursing homes has been attributed to overworked staff, poor infection control, limited resources, and the transfer of infected individuals into long-term care facilities. While these circumstances have certainly contributed to the problem, we should view them as symptoms—rather than root causes—of a deeper, more significant ethical problem: our tendency to shun responsibility for the weakest and most vulnerable individuals among us.

As a former nursing home and hospice aide, I acknowledge the intensely unnerving nature of human suffering, especially when it afflicts the elderly and dying. Spending hours caring for patients who are unable to move their limbs, control their bowel functions, or breathe without the assistance of morphine is difficult for even the most compassionate and generous caregivers.

Frailty and dependency are challenging phenomena to encounter, and thus it is unsurprising that we treat the process of aging and eventually dying as an awkward, shameful appendix to the busy, productive, and efficient years which constitute our “real lives.” Though any of us might be diagnosed with incurable, stage four cancer tomorrow, or suddenly become the victim of a severe car accident, we collectively prefer to ignore



our mortality. When it finally and unavoidably stares us in the face, we pray it passes as rapidly, painlessly, and privately as possible to minimize its inconveniences and undignified details.

Avoiding death is easier than facing it head on; outsourcing care is more comfortable than providing it within the context of our own families and communities; and, it is more convenient to offer cheap, expedient methods of care rather than work towards high-quality compassion. Our hesitance to encounter intense suffering and the raw realities of death have caused us to place a low priority on caring for our elderly population. When I worked as a nursing assistant long before the pandemic, this was painfully obvious to me: I was offered more overtime than I could possibly accept, worked with staff poorly trained in infection control, accepted the frequent staff turnover as normal, and often left completely exhausted. Some nights, after an especially intense shift, I sat in the parking lot and cried, both for my lonely, frustrated patients, and for my own inability to remedy suffering which could have been avoided.

It is true that the elderly often require lower levels of care, yet it is an illusion to believe this justifies providing low-quality care. A nursing home is no ICU: bathing and dressing replace intubations and intensive monitoring. End-of-life care is composed

of a thousand basic tasks which demand relatively minimal amounts of medical skill. Nevertheless, these patients are no less worthy of care than someone undergoing more intensive treatment, nor is their multifaceted humanity as physical, emotional, and spiritual beings any less complex. If anything, addressing the innumerable dimensions of human wellness is more difficult and more important as death approaches than at any other point in the human lifespan.

Old age inevitably brings a unique set of challenges and dying is always difficult. How our society approaches the responsibility of caring for the elderly and dying, however, reveals our most fundamental beliefs about what it means to care for the vulnerable. Either we will continue to perceive this obligation as nothing more than an endless string of mundane tasks which fall outside the serious consideration of public health policy, or we will view it as a profound opportunity to accompany our fellow human beings during some of the most important days of their lives. The consequences of our choice are not merely death or life. Though we certainly must avoid causing the premature death of others, the primary goal is not indefinite life expansion. Instead, what is ultimately at stake is whether we will craft a society which views everyone as equal members who are worthy of dignified support regardless of age, ability, or any other characteristic.



The COVID-19 tragedy sweeping through nursing homes not only requires the prompt action of public health officials, but also demands that we as a society open our eyes to a hidden, underlying tragedy: these inequities that plague our approach to caring for the vulnerable lead us to treat the elderly with mediocrity and neglect rather than integrity and good medicine. The process of

growing old and facing death does not need to be a depersonalized, undignified experience. Instead, it can be full of joy, community, and deep bonds of friendship, though this manner of caring for our elders will be difficult at times. This is to be expected—building a just, compassionate, and authentic human society is never an easy task. It will challenge us to not only wear masks and stay home, but also to undertake the difficult tasks of re-evaluating our most fundamental beliefs about what it means to care for those who need us the most and remedying our failure to do so.

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