

Old Lives Matter

How quickly we forget. Especially when we want to.

When will there be a day of mourning? Not just for the 393 000 who have now died from Covid-19, according to reports. But for the roughly 300 000 of these – going by averaging – who were over 65 years of age.

Can we blame the virus for this debacle and shrug it off? Not when you think that a disaster is defined as an episode that happens when a Trigger-event clashes with Vulnerability. We have to accept the blame for the conditions of Vulnerability that our elders were living in.

After being hit hard by the HIV virus, we dodged five other bullets – SARS, MERS, Ebola, avian influenza and the swine flu. But the Covid-19 pandemic hit us hard. For some reason this virus proved to hit older people harder than younger. It made a big dint in a generation that fought hard for our freedoms. This is as true in Africa as it is in the North.

Countries of the North have prided themselves in having high life expectancy rates and low unemployment rates. Younger people have jobs and families, and have receded for the most part into “nuclear families” (mother, father, and 2.2 children). The elderly managed to survive on their own, for the most part, on the unprecedented wave of affluence that kept rising since World War II. They accumulated enough wealth to pay their own way.

This is different in the “first nations” of the North, as it is in Africa. Old folks remain part of the extended family, which in some ways is more close-knit than the nuclear family, oddly enough. What has emerged in the North is a model of institutional care for the elderly. It was championed as a model of efficiency – where the care-givers needed could concentrate on multitudes of elderly people in the same building. Or sometimes at a campus, as in a gated-community of elderly people with an attached “frail care” facility. The convenience factor worked both ways – residents could reach a pharmacy quickly or enjoy company of others in a TV lounge, for example.

But some elderly people view this kind of concentration of the elderly as un-natural, and more like “concentration camps”.

The institutionalization of care-giving is not new. For example, after the monasteries were closed in the wake of the Protestant Reformation, the streets of Europe suddenly filled up with orphans. Previously, they had been absorbed into monasteries, for centuries. In Halle, Germany, a pietist named Auguste Frank actually invented the “orphanage”. He called it the “ragged school” and these became all the rage. In the UK, they were emulated by the saintly George Muller, in Bristol. Orphanage technology became very advanced, but led to excesses. For example, when new facilities were built, they designed the windows higher than usual, so that orphans could not easily see outside, into the “real world”. They became

a trap for abuse. Let us just summarize that adoption of children (or “placing out”) has overtaken orphanages as the strategy of choice.

Why can't we adopt the elderly too? In the North where houses are two or three storeys tall, why can't architects design a “granny flat” on the main floor, along with kitchen/dining and lounge? That way the elderly will not have to navigate stairs, and the younger members can have their own space upstairs, while sharing everyday-life with the elderly?

Some ranch-style homes (all on ground level) could be purchased in the neighbourhood for the elderly of several families who live within walking distance of that coop. This would minimize the risks of one pathogen taking out dozens if not hundreds of residents. In Spain, at the peak of the Covid crisis, one such facility was found with elderly people dead in their beds or dying. The staff either caught the disease and had to self-isolate, or couldn't deal with the risks and/or the emotional impact of it all?

South Africa has been described as a third world country and a first world country occupying the same space. So while there are “care homes” for elderly whites, higher-density African communities tend to esteem the elderly, inclusively. They are not abandoned and sequestered.

I see the Covid crisis as a wake-up call. Especially for those who have championed “child headed households” for AIDS-orphans. Just as children have the right of inheritance to their parents' home and assets, the elderly also have a right to dignity. The argument that care homes are more efficient and more convenient has not stood the test of the Covid crisis. In this model of care, the elderly are sitting ducks.

Disruption often leads to innovation. Care homes are going the ways of orphanages. They seemed like a great idea at the time. But they have not stood the test of time.

In Italy, where 23% of the population was over 65 years of age, 86% of the 34 000 Covid fatalities were over 70. In the UK, pensioners were 34 times more likely to die of Covid than working-age citizens. 31 000 of UK's 40 000 fatalities were over 65. In Canada, 90% of the 8 000 fatalities were over 60 years of age. In the USA, 79% of the 111 000 fatalities were over 65. A whole generation has been decimated.

There should be a day of mourning, when we confess as those running social services that we got it wrong. We have to find a new, better and inclusive way of keeping the centrality of the family. Families do not exist just for raising children. They are the indivisible, lowest common denominator of all our social structures. Including the mamas and the papas.