

I fear there's a link between our care crisis and the calls for 'mercy killings'

MAY you live a long life' is the most universal of blessings, intoned for centuries across all cultures.

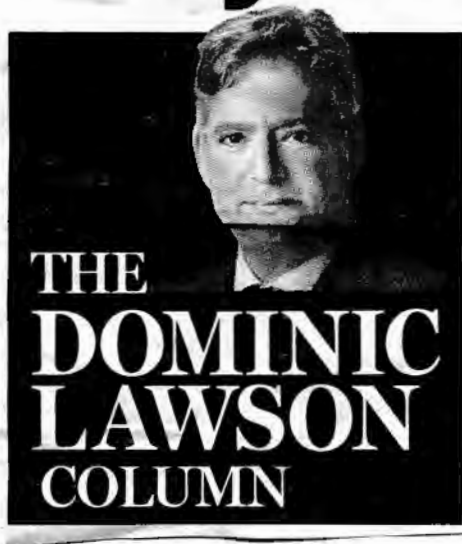
But now that medicine has made this wish a reality for so many millions, there is growing concern — not all of it well-motivated — about the consequences. Let's be more specific: the financial consequences.

In this country, the number of those over 65 has for the first time overtaken the amount of people under the age of 16. With one in six of us now expected to live to more than 100, it is thought that by the middle of the century the ratio of working people to pensioners will halve.

A glimpse of our possible future is seen in fiscally wrecked Japan, where, as I discovered on a trip last year, more nappies are sold to the incontinent elderly than to mothers with young children.

Last week, Health Secretary Jeremy Hunt invoked another Asian country as an example of how we should deal with the demographic crunch. Hunt, whose wife is Chinese, insisted we emulate the respect paid in China to elderly relatives, where 'residential care is a last, rather than a first option'.

It's a good general argument, although in practice the Communist one-child policy is producing a situation in which China will have the least number of children to look after elderly relatives of any country.



Isolation

If we needed a further example of what institutionalised care can mean at its worst, there is the inquest into the 'unexplained' deaths of 19 residents at the Orchid View care home in West Sussex: among other horrors, the coroner reported how one resident was found naked and writhing in agony with a twisted catheter, while a family member found staff eating toast and drinking tea with their feet up.

Yet unlike rural China, where families have remained rooted to the same patch of land for centuries, the pattern in this country at least since the Industrial Revolution has been dispersal and even isolation: the integrated extended family has long ceased to be the British way of life.

So now many middle-aged children, psychologically ill-equipped for what Hunt rightly calls their duty of care, are filled with rage at the thought of their parents' homes and savings being suctioned away by the high costs of geriatric supervision.

The Government's response, which was

drawn to public attention last week by the Labour peer Lord Lipsey, is to say that the State will pay for all personal care, with the proviso that this will be available only when the elderly home-owners' liquid assets have run down to no more than £23,500.

This has served only to increase the fury of the middle-aged, provoked in particular by the assertion of the Liberal Democrat health minister Norman Lamb that £23,500 was a 'vast amount of money'.

Many people seem to think that the State stepping in to pay everything amounts to a blessed relief of their financial burden. In fact, whatever is paid by the State is far from 'free' but recovered out of our taxes.

The anger felt at those who are 'feckless' getting their elderly paid for, while middle-class savers are fleeced, is easily understood. But it will be the same middle classes who, by virtue of being the greatest source of taxes, will be paying both for the feckless and their own family's care under a so-called 'free' system of elderly care.

The greatest anxiety, of course, is that the elderly relative's home will also go to pay for the cost of residential care. We should be clear, though: this concern is not exclusively about the well-being of grandpa or grandma — it is very often about the possibility of the expected inheritance being snatched.

The Government's proposals purport to diminish that threat, saying that individuals will have to pay no more than £72,000; but as things stand there is a kind of care home means test which takes into account property wealth. On Saturday, the Mail reported how some councils now employ staff to investigate whether elderly parents

are signing over their homes to their children solely in order to avoid paying care home fees.

Now, I might have an unduly cynical view of human nature; but I find it hard not to see a connection between these financial concerns and the rising clamour for the legalisation of some form of euthanasia; indeed I read the following comment on Mail Online last week: 'If the Government want to rob us of our savings, they should at least offer us a Dignitas option as an alternative.'

Those actively pushing such a dramatic change in the law, including Lord Falconer, insist that such 'mercy killings' would be only for those suffering from terminal illnesses. But that is the most lethal of slippery slopes. Just as abortions have risen to a level which seems to have astounded David Steel, the man behind the 1967 Act which legalised it in a supposedly restrictive manner, we can be sure that once so-called 'assisted killing' is made legal, it would become much more widespread than suggested by its oh-so-civilised advocates.

One reason why the majority of doctors oppose the increasingly fashionable calls for 'mercy killing' is not just because of their Hippocratic oath, but also because they tend to have a darkly practical knowledge of family dynamics: they have encountered impatient sons or daughters whose concern that Mum is 'spared suffering' is not entirely altruistic.

And the vulnerable elderly can all too easily be manipulated into expressing what it is that others — especially those they love — wish them to say.

Insidious

What, then, should be done to avoid this dystopian prospect, as the insidious consequence of unaffordable care bills? Given that the national problem is too few workers paying for too many pensioners, the obvious answer — however unpopular — is to increase the retirement age, and sharpish.

After World War II, when the state pension age was 65 for men, it was barely higher than the average life expectancy. But we are not just living much longer. Thanks to modern medicine and the increasingly non-physical nature of work, there is no reason why many of us should not be in gainful employment well into our 70s, thus bringing the worker-pensioner ratio down to a sustainable level.

Besides, continued mental activity in old age is known to decrease the likelihood of dementia.

The alternative future of ill-provided state dependency for 20 years or more would be no blessing at all, but a national curse.

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