

Introducing the *Journal of Elder Policy* during the COVID-19 pandemic: Why policies that protect older adults are more important than ever

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Welcome to the inaugural issue of the *Journal of Elder Policy (JEP)*. This journal was initiated in 2019 during a period of relative calm and stability in the US. Our goal as a journal is to showcase cutting-edge scholarship in the field of aging and the social sciences that offers guidelines for practice and policy benefiting and protecting older adults.

For our first issue, we invited contributions from seven eminent scholars, whose work spans issues of intergenerational family support, long-term care, financing healthcare for frail older adults, public guardianship, age-friendly cities, ageism in society, and living with vulnerabilities such as HIV/AIDS. The authors represent diverse disciplines and theoretical orientations and include international and US-based scholars. We can thus view social policy issues through different lenses and gain a glimpse into diverse societies' ways of addressing the needs of older adults. I am pleased to report that the papers in this volume are creative, thought provoking, and highly relevant to the unprecedented global challenges we face today. In this editorial, I highlight the relevance of each of the papers included in our first issue to concerns affecting older adults during the current 2020 pandemic.

As we planned this first issue, little did we know that when our articles would go to press we would be in the midst of a COVID-19 pandemic, which puts the life and death of older adults at the center of social upheaval. This pandemic disproportionately threatens the lives of older people. Rather than focusing on policies that can benefit and protect older persons, the discourse has precipitously shifted to concerns about the social costs of protecting older persons, people with disabilities, and those with health-related vulnerabilities (Grzelka, 2020). This has resulted in militant manifestations of ageism and resentment directed toward older adults.

In a timely paper, expressions and consequences of ageism are addressed by **Ayalon**. Her essay focuses on ageism toward older adults at the macro-institutional level in policies or politics, at the meso level of interpersonal relations, and at the micro, intrapersonal level. She skillfully uses several contexts to demonstrate how ageism is manifested within policies, healthcare systems, workforces, and our ageist attitudes toward ourselves. Ayalon's article concludes with creative ways to combat such ageism.

As a counterpoint to ageism, environmental initiatives to promote age-friendly environments within cities are addressed by **Phillipson** and **Buffel**. Their paper reviews age-friendly initiatives and points to areas where these policies can be developed and improved so as to be more inclusive for different groups of older adults and to enhance their quality of life within cities. At a time when COVID-19 is striking cities across the world, Phillipson and Buffel place ageism in an ecological context that is highly relevant to the current stay-at-home orders enacted in many countries to ensure social distancing.

Investing in bettering life for the old often comes with costs that threaten alternative social policies (Kahana & Kahana, 2017). Indeed, unlimited funds are seldom available for programs and services. Yet, in normal times, the competing needs of different segments of society do not come in as stark relief as they do during this pandemic. Older people and those with health-related vulnerabilities are at high risk for severe complications and mortality during the COVID-19 pandemic. There has been a major concern that the large numbers of severely ill patients requiring hospitalization in ICUs and placement on ventilators may overwhelm capacities of the healthcare system (Emanuel et al., 2020).

These concerns are reminiscent of the panic created in society at the time of the HIV/AIDS crisis. In our current issue, **Emlet** and **Brennan-Ing** address the long-term effects of aging with HIV/AIDS. While much progress has been made in the treatment of this disease, their article reminds us of the physical and psychosocial issues that impact older persons living with HIV. This thought-provoking article provides concrete policy recommendations that can improve the lives of this population, if implemented. We can only hope that similar progress will be achieved in the future treatment of COVID-19 infections.

At the writing of this editorial, during late April 2020, most states in the US are on lockdown, with schools and “non-essential” workplaces close and public gatherings canceled. In the US, tens of thousands of citizens, who are predominantly older, have already succumbed to COVID-19 and the future is unknown. The article featured in this issue by **Lynn** and **Franco** highlights the need for restructuring public policies to accommodate the increasing number of disabled older adults. Their focus is on factors such as finances, housing, medical care, food, transportation, and the direct-care workforce that provide insufficient support for older adults. This manuscript relates directly to issues of COVID-19: “Communities vary greatly in their readiness to assist disabled elderly people. Many cities now have more than six-month waiting lists to get home-delivered food, and most do not offer door-to-door transportation. Some have active ‘Villages’ that help with neighborly services like getting groceries, making minor repairs and upkeep, and providing companionship, while other communities have no such services.” Based on these arguments, we can say that the pandemic has not only produced new problems for older adults, but has also exacerbated and made visible already existing problematic conditions.

While the lockdown is necessary to save lives, especially of older adults, the elderly encounter unique hardships in obtaining food, medicine, and services as they stay at home. The concrete policy reforms that Lynn and Franco advocate are more important than ever if we want to avoid the hardships created by this pandemic for future generations of older adults. While it is important for older adults to self-quarantine in order to avoid exposure to the virus, many older adults are caregivers for grandchildren and/or live in multi-generational households (Brooke & Jackson, 2020). The article by **Harrington-Meyer** and **Abdul-Malak** focuses on the power of intergenerational ties within the family. They also argue for the importance of policies that support parents in caring for their children, especially those with special needs. Programs, such as paid parental leaves, would diminish the need for grandparental caregiving. Today many older adults in the US are financially responsible for grandchildren with disabilities and are direct caregivers to such children. The demands on such elders pose serious stressors during the threat of COVID-19.

Even as social distancing and self-isolation are key to protecting older adults during the COVID-19 pandemic, such shutdowns come with staggering economic costs that may be associated with protecting older adults. In the US and other countries, there has been great public demand for diminishing restrictions of social distancing and an “opening up” of the economy. It is increasingly argued, even by political leaders, that the financial harms to the working poor and the psychological harm of social isolation of the young justify putting the old and vulnerable at risk (Thunstrom et al., forthcoming).

These arguments reflect negative attitudes toward older persons, who may now be viewed as expendable and a burden on society. The requirements for scarce and costly ventilators in treating severe COVID-19 complications have also raised questions about the rationing of healthcare based on projected life expectancy and success of treatment. The difficult choices made in caring for the severely ill have been documented in Britain (Merrick, 2020) and Italy (Cesari & Proietti, 2020). Age has been used in extreme situations as a factor in withholding treatment.

The loss of life among older adults due to COVID-19 has been most staggering in nursing homes and long-term care facilities, which have become epicenters of infection and death (Barnett & Grabowski, 2020). In the context of normal times, the changing profile of the long-term care system based on geographic context is by **Applebaum, Nelson, Straker, and Kennedy**. Their paper explores long-term services policy over time, focusing on data from Ohio. They show that despite an increase in Ohio’s older population, nursing home use has declined. They note that frail older adults are increasingly opting for home care and non-institutional alternatives and relate this phenomenon to state policy and industry change. Their analysis offers useful insights about the challenges faced by long-term care delivery systems even in normal times. Given the devastation of residents in nursing

homes and other long-term care facilities and allegations of negligence in some cases, we might anticipate that demand for such facilities may further decline as a result of the pandemic. Creative solutions will be needed to find safer alternatives in caring for frail older adults (Kahana & Kahana, 2017).

With early signs of some benefits from social distancing, there appears to be a strong push to prioritize protecting livelihood and personal freedoms, even at the expense of protecting lives. In the US, there have been demonstrations protesting the loss of civil liberties during social distancing directives. Older adults find themselves the objects of scorn and disapproval rather than of caring. Suddenly, the theoretical issues we explore in *JEP* are imminent and personal for older adults. The COVID-19 pandemic calls for younger people, who feel that they are far less threatened by this crisis than are their elders, to change their way of life. They must reluctantly do so to protect the old and the vulnerable, who are at greater risk of mortality if infected.

The threat of COVID-19 has occurred against a backdrop of institutional ageism in the global health priority setting (Lloyd-Sherlock et al., 2020). Protection of the most vulnerable older adults is explicitly tackled in **Teaster and Chamberlain's** paper on public guardianship. Their article focuses on the successes and failures of the court system in the US in implementing public guardianship programs for those older adults who are unable to make decisions for themselves. Teaster and Chamberlain provide a detailed description of the guardianship system and available research while highlighting the flaws in the system that still leave the most vulnerable older adults unprotected. During a crisis, like the COVID-19 pandemic, such problems are likely to result in a lack of attention to tending to the needs of older adults who are quarantined, comforting those suffering from COVID-19, and ascertaining their end of life wishes.

Voices that question policies of physical and social distancing are not unique to the US. A recent position paper, written by health policy experts in Germany (Pfaff, 2020), laments the harms to society of enduring social distancing. The authors point to economic harms and growing inequality as a result of social distancing orders. They emphasize that continuing social controls that affect the economy are likely to lead to social unrest because they are damaging the mental health and lives of residents. Indeed, such arguments have led to steps to return to work both in Europe and the US. Many public health officials consider these initiatives premature. Given the uncertainty regarding antibody testing and potential for reinfections, there are fears of further serious flare-ups in infections.

Acceptance of placing the sick or the old at risk is antithetical to the values of protecting the old with social policies. These generational conflicts remind scholars of social policy that age matters as a social, political, economic, and historical category. Intergenerational solidarity is likely to benefit all age groups. Indeed, the young benefit in many ways from interactions with members of the older

generation. Elders serve as family historians and provide roots and values for the younger generation.

Being old and vulnerable is very personal to the editor. I am writing this editorial soon after celebrating my seventy-ninth birthday and am still much involved in productive work as a teacher, researcher, and mentor. I spent three months this past winter at Miami Beach with my eighty-six-year-old husband, who just retired last January after fifty-four years as a psychology professor. We traveled to Florida to avoid the health risks associated with the cold weather in Cleveland. We delayed our return from Florida to our home, because of the health risks of flying during this pandemic. We found the encounters with TSA and getting on the flight particularly frightening. None of the personnel we encountered were wearing masks. During our fourteen days of quarantine after returning home, we felt great anxiety about the threat to our lives if we were to catch this malevolent virus.

While we were in Florida, we witnessed no voluntary avoidance by young adults to protect the old. The beaches were full of young revelers for Spring Break 2020 until they were closed down due to rising infection rates and outside pressure. The young could not or would not comprehend the need for “social distancing.” Did they need to stop having fun in order to protect a bunch of frail old folk? This concretizes the critical questions asked by *JEP* about implementing age-friendly social policies. The current pandemic brought into dramatic light the potential conflict of generations that often undergirds social policies (Binstock, 2010).

The mistaken belief that COVID-19 only poses a threat to the old helps support the ageist attitudes highlighted in this editorial (Brooke & Jackson, 2020). In their most extreme forms, these beliefs suggest that the old are a homogenous and dispensable group. If social distancing measures are relaxed or stopped too soon, the lives of older persons will be put in danger. Even as social distancing is institutionally supported, not all older persons can be protected. Social inequality and financial hardships play important roles in putting older adults at risk during the pandemic. Recommendations to have food delivered are not feasible for those without credit cards. Drive-in testing is not feasible for those without a car. Some people live in areas far from hospitals and away from essential services. Furthermore, the lack of internet access can further isolate older adults who may have difficulty communicating with family or healthcare providers (Ahmed et al., 2020)

This essay calls attention to the unique challenges for society in valuing and protecting older adults. While reflecting on the current health crisis, it is important to put things into perspective. It is reassuring to know that the majority of the US public does indeed support protections for the old and the frail. Therefore, I want to conclude by recognizing positive forces that have become visible during the pandemic. For instance, students and teachers inquiring online about each other’s welfare and grandchildren calling grandparents, even as personal contact and hugs are discouraged. Compassionate love is a palpable currency as neighbors

check on one another to ensure the availability of food. Here humanity must stand in for social policy.

At this time, no one knows the timelines or degree of devastation ultimately to be wrought by this virus. The hope is that as a society we will survive and even come out stronger and more caring in the aftermath. Survivors of prior traumatic events, such as the Holocaust, have demonstrated social strengths and resilience (Kahana, Harel, & Kahana, 2013). I, myself, am a child survivor of the Nazi Holocaust and learned early to value efforts that better the lives of vulnerable members of society. For social scientists, there will be many valuable lessons about social forces and individual coping that come from this challenge.

We hope that you enjoy our inaugural issue of the *Journal of Elder Policy*. We believe that these articles, and the articles to come, raise important policy considerations that can be drawn from during uncertain times and times of calm in order to benefit the lives of older adults. Articles have been invited and are currently being received for our second issue. They present exciting additional topics related to aging and policy, such as elder abuse, financial security, healthcare advocacy and communication, future care planning, pension policies in China, and justice-involved older adults.

Lastly, we would like to mention that our journal has issued a Call for Papers to explore provocative issues in the social sciences brought to light during this pandemic. We hope that our readers will contribute to the scholarly discussion that considers both the problems and solutions regarding promoting the welfare of older adults that are brought to light by this unprecedented pandemic.

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