



*Presidenza del Consiglio dei Ministri*

**NATIONAL BIOETHICS COMMITTEE**

**BIOETHICS AND THE RIGHTS OF THE ELDERLY**

(20th January 2006)

*abstract*

In this opinion the NBC proposes a series of considerations on the condition of the elderly, stressing that a bioethics “with” the elderly is now absolutely opportune and necessary, in so much that it is liable to involve different subjects (individuals, families, institutions, volunteer associations, etc.) and able to foster a wide range reflection on an urgent social issue which must be dealt with according to various perspectives: medical-healthcare, psycho-social, ethical-normative and finally anthropological, both with regard to the people directly involved and the public sphere. Considering the “moral” situation of the elderly person, Art. 25 of the Charter of Fundamental Rights of the European Union is quoted, in which the Union “respects the rights of the elderly to lead a life of dignity and independence”, recognising the rights of the elderly person as a subject for the first time.

In this framework the NBC is in favour of the setting up of an “Observatory for the conditions of the elderly”, with the task of assessing the application of national and international regulations concerning them. The following rights of the elderly have been identified: the elderly person is a person and as such must be respected; the elderly person has the right and duty to foster his or her own human and in particular spiritual resources; society has the ethical duty to facilitate the fostering of the dignity of the elderly person’s life; the elderly person has the right to be treated according to the principles of impartiality and justice, independently of their degree of autonomy or health.

In the second part of the document is considered the condition of the elderly person who is not self-sufficient and their “fragility” advocating a change in our healthcare system, which at present is directed at the cure rather than the care. Instead of a system aimed at prolonging life, a philosophy of medicine and a type of healthcare should be formulated that is able to identify a better balance between curative and aggressive (technological) medicine and the more patient one of “taking care”. The community is called upon – on the basis of the “citizen-based social contract” – to guarantee to the greatest extent possible a support for this fragility by means of figures or bodies that can take care of the elderly, not abandoning these subjects when they reach old age, but fostering these resources of culture, the exchange of values and experience, of real individual skills and abilities, of spirituality and religiousness: in this way the concept of active ageing can be fully understood. The NBC concludes this reflection, stopping at the threshold of the terminally ill, palliative care and the approach of death.