SPECIAL ARTICLE EIΔΙΚΟ ΑΡΘΡΟ

Policies followed by four European countries in the management of Covid-19 The right of older people to health and life care

In 2020 a new strain of coronavirus (2019-nCoV, Covid-19) appeared on the world stage, which greatly affects the elderly and to which patients with underlying diseases are vulnerable. This study, which covered the period from late January to mid-June 2020, explored the different health policies implemented in the UK, Italy, Spain and Greece with regard to Covid-19, which resulted in the loss of hundreds of thousands of lives in Europe in this period. In parallel, the right to life is examined, as this is now guaranteed by legal documentation, both of international organizations (e.g., the Universal Declaration of Human Rights) and the Greek legislative framework. The material used in this study was collected from the World Health Organization website, statista.com, and through an online survey on current affairs.

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Πολιτικές που ακολούθησαν τέσσερις ευρωπαϊκές χώρες στην αντιμετώπιση της Covid-19: Το δικαίωμα των γηραιότερων ατόμων στην παροχή φροντίδας υγείας και ζωής

Περίληψη στο τέλος του άρθρου

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1. INTRODUCTION

In 2020 the average citizen came into contact with previously unknown words, such as pandemic, Covid-19 and coronavirus. As the World Health Organization (WHO) stated: "Covid-19 is the infectious disease caused by the most recently discovered coronavirus". WHO also pointed out that "older people, and those with underlying medical problems like high blood pressure, heart and lung problems, diabetes or cancer, are at higher risk of developing serious illness". It is a contagious disease that can affect the elderly and people with underlying diseases severely. When Sotiris Tsiodras, the Greek government representative of the committee responsible for dealing with the pandemic, was asked by a respected colleague why the survival of the elderly, who were going to die anyway, was such an important matter, Sotiris Tsiodras replied "the

miracle of medical science in 2020, is the prolonging of the quality of survival of these people, many of whom are our mothers and fathers and grandparents. The answer is that we honor everyone, we respect everyone, we protect everyone but above all these people. We cannot exist or have an identity without them".4

In Europe, during the period studied, there was a west to east (from highest to lowest) gradient in the mortality of Covid-19.⁵ According to the WHO, Great Britain reported 299,255 confirmed cases and 42,153 deaths between 31 January and 18 June 2020, Italy 237,828 confirmed cases and 34,448 deaths, Spain 244,683 confirmed cases and 27,136 deaths and Greece 3,203 confirmed cases and 187 deaths. For the month of June, according to statista.com, the deaths (i.e., mortality rate) amounted to 65.4/100,000 in the United Kingdom, 57.4/100,000 in Italy, 60.7/100,000

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in Spain and 1.8/100,000 in Greece. Some of the observed variability in mortality can be explained by policy factors.

2. HEALTH POLICIES

In an attempt to investigate whether good political practice is capable of tackling the pandemic, and to what extent the values and moral principles of each of these four European countries influenced the response to Covid-19, we collected case statistics for each country from the WHO website and statista.com. We conducted a brief review based on PubMed and made an online topical survey, through which we identified the policies of each country.

2.1. Spanish and Italian policy

Spain and Italy were slow in taking the necessary measures and proceeding to a lockdown.⁷ Although Spain already had the example of Italy's mistakes, it did not take action quickly enough, resulting in high mortality rates. Before the general lockdown on March 8, football matches took place, contributing to an increase in cases.

2.2. British policy

The British government sought volunteers to work in health and social care to help address the threat posed by staff shortages at a time of rising need, and the call achieved an excellent response.8 The government also removed some barriers to effective coordination between health and social care, while introducing measures to promote the financial viability of care providers. This came, however, only after an interval during which Great Britain (GB) initially followed the theory of herd immunity. Herd immunity occurs when a large portion of a community (the herd) becomes immune to a disease, making the spread of disease from person to person less likely. As a result, the whole community becomes protected – not just those who are immune. 9 Application of the herd immunity theory in the case of GB brought dramatic results, with a rapid increase in casualties and deaths, as discussed above.

2.3. Greek policy

Greece closed schools on March 11, and went into lockdown, taking early heed of the information supplied by Italy and Spain, as well as the example of China. ¹⁰ The population, following the words of Sotiris Tsiodras, complied religiously with the instructions. People restricted their movements and social contacts and the local population

took all the basic measures according to the advice of the WHO. In the case of Greece, the way the elderly are treated by the rest of the population played an important role. The core of the Greek family includes grandparents and it is customary for older people to live in the classic form of the parent-child family. Great respect was shown for the right of the elderly to life, to the prolongation and quality of their life, often even restricting the needs of the young people. Then, during the second wave of the pandemic, i.e., in the summer of 2020, the restrictions that the population had complied with at the beginning of the pandemic were eased. This was due in part, not to a change in the attitude of the younger members towards the older population, but to the indications of a small number of cases in the country and an even lower mortality rate. The apparent resistance of the population to the virus has led to negligence in the faithful implementation of the measures, and has even given rise to conspiracy theories regarding the non-existence of the virus.11 Every single person is entitled to the right to life, even if it is this small percentage of 1.8/100,000. After the relaxation of the measures in Greece, the mortality rate increased from 1.8/100,000 in June, to 2.37/100,000 on 30.8.2020. This difference would be negligible if we were not talking about human lives. But we are talking about the death of one person per 200,000 of the population. The right to life does not differ according to age, religious or political beliefs, or life expectancy. At any age the individual has the right to a dignified life, especially at the end of their life.¹²

3. RIGHT TO LIFE

According to article 3 of the UN Universal Declaration of Human Rights, which was signed after the end of World War II, everyone has the right to life, liberty and security of person. ¹³ Similar clauses are laid down in articles 2 and 5 of the European Convention on Human Rights. ¹⁴ In the case of Greece, the right to life is protected both by article 2 of the Constitution which stipulates that "respect and protection of human dignity are the primary obligation of the State" and by article 5 § 2 check number, which stipulates that all those who are in Greek Territory enjoy the absolute protection of their life, honor and freedom, without discrimination of nationality, race, language and religious or political beliefs. ¹⁵ Through the above articles it is clear that the protection of freedom, life and physical integrity is a priority not only of nations but of all humanity.

4. CONCLUSIONS

Adherence to the measures proposed by the WHO has

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reduced the mortality rate in the countries in which they have been applied. The nature of the position of the elderly in every society, and the importance given to human life by both the state and the people, especially in Greece, has played an important role in reducing the incidence and spread of the virus in general. The exploitation of knowledge acquired by the experience of countries such as Spain and Italy was another factor that favored the situation in Greece.

At the same time, the health providers and the ordinary citizens must take all the necessary measures to avoid the death of even one elderly person per 100,000 of the population. In Greece in particular, it must be noted that the health sector was already burdened by the ongoing economic constraints imposed on Greece, in the midst of an economic crisis, by the International Monetary Fund and the European Union (EU). ¹⁶ Protecting the life and the health and caring for the elderly is pertinent, not only in dealing with Covid-19, but also in upgrading the health sector. The EU, on the other hand, is about to take action in accordance with the international treaties and the European Convention on Human Rights to provide financial support to all Member States in the field of health. ¹⁷

ΠΕΡΙΛΗΨΗ

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Το 2020 ένα νέο στέλεχος κορωνοϊού (2019-nCoV) παρουσιάζεται στο προσκήνιο, το οποίο πλήττει σε μεγάλο βαθμό άτομα τρίτης ηλικίας, ενώ το ίδιο ευάλωτοι αποδεικνύεται να είναι και ασθενείς με υποκείμενα νοσήματα. Η μελέτη που καλύπτει το διάστημα από τέλη Ιανουαρίου έως μέσα Ιουνίου του 2020 στοχεύει στη διερεύνηση της εφαρμογής διαφορετικών πολιτικών στην υγεία σε Μεγάλη Βρετανία, Ιταλία, Ισπανία και Ελλάδα σε σχέση με την Covid-19, οι οποίες κόστισαν εκατοντάδες χιλιάδες θύματα στην Ευρώπη. Παράλληλα, εξετάζεται το δικαίωμα στη ζωή, όπως αυτό διασφαλίζεται πλέον μέσα από νομικά κείμενα, τόσο διεθνών οργανισμών όσο και του ελληνικού νομοθετικού πλαισίου. Το υλικό που χρησιμοποιήθηκε στη μελέτη συλλέχθηκε από τον ιστότοπο του Παγκόσμιου Οργανισμού Υγείας, τον ιστότοπο statista.com και μέσω μιας διαδικτυακής έρευνας στα θέματα της επικαιρότητας.

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Λέξεις ευρετηρίου: Ανθρώπινα δικαιώματα, Ευρώπη, Πολιτικές υγείας, Covid-19

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