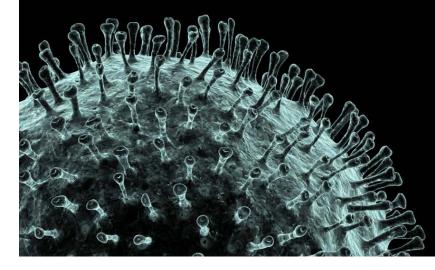
COVID-19 Conversations



Jason Karlawish, MD

Professor of Medicine, University of Pennsylvania



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For science, For action, For health

Benefit/risk analysis of social and physical distancing strategies:

The impact on vulnerable populations

Jason Karlawish, MD

Professor of Medicine, Medical Ethics & Health Policy, and Neurology

University of Pennsylvania

Penn Memory Center

@jasonkarlawish / jasonkarlawish@gmail.com

Outline of the talk

- The concept of being vulnerable
- A close look at who is vulnerable as a result of physical distancing
- An framework to address this vulnerability during a pandemic
- Preliminary thoughts and recommendations

The concept of being vulnerable

- Being relatively or absolutely unable to protect or advance one's rights, interests or well-being.
- Who is made vulnerable by physical distancing?
 - People who need physical closeness to survive
 - People who provide services that require physical closeness
 - People who provide services that facilitate physical closeness
- Sometimes physical distancing causes social isolation (solitary confinement).

A closer look at the vulnerable.....

Needs physical contact to survive (think, "care")	Provides services that require social or physical closeness	Provide services that facilitate social or physical closeness
Persons living with a disability (IADL /	Caregivers to assist with IADL /	Food supplier to a restaurant adult
ADL)	ADL	day activity program, etc
physical impairment	informal	workers who support people who
cognitive impairment: MCI, dementia	formal / paid	provide services that involve social or physical closeness
	Adult day activity programs	
Persons needing chronic/intense	Child care	
face-2-face, hands on care	Cleaning / domestic work	
dialysis, chemotherapy, hospice	Food service	
	Entertainment	
Persons needing acute medical care	etc	
a hospital patient		
	workers who provide services	
Persons living in a total institution	that require face-to-face	
college students	engagement	
prisoners		
residents of long term care facilities		
Persons w/o access to internet		

A closer look at the vulnerable

- A person can have multiple causes of vulnerability
 - A person with dementia, who requires dialysis and is a resident of a nursing home without access to internet. He enjoys walking about and visits from family.
 - multiple possible routes of COVID-19 exposure
 - physical isolation causes social isolation
 - in room, alone, w/o visits from family, he is at risk of delirium
 - A CNA at that nursing home has to take public transportation to the facility and has children at home
 - multiple possible routes of COVID-19 exposure
 - job is essential for other's survival
 - others are at risk



London Review

LRB blog

31 MARCH 2020 Rich Man's Disease Adewale Maja-Pearce

As I drove around on Sunday evening with my brother-in-law, watching people going about as usual to the churches and mosques and beer parlours, it was obvious that this was going to be a tough call. When we stopped to buy barbecued beef, the seller pointed to the wood fire and joked that it had already killed the virus even as he was cutting up our meat, provoking much laughter from the young men standing around. It is hunger that people here fear, not a virus they can't even see.

www.lrb.co.uk/blog/author/adewale-maja-pearce 31 March 2020

BLOG

FIGURE 1

Uninsurance Rate of Food Service and Preparation Workers by State, 2017

Unsurance rate

0% 10% 20% 30% 40% 50%

Source: 2017 American Community Survey.

Notes: Sample excludes workers under age 19 and public/government workers. Medicaid expansion states are shown as solid colors (32 states); nonexpansion states are shown with black vertical stripes (15 states). States that expanded Medicaid after 2017 are shown with white horizontal stripes (4 states).

Source: Gangopadhyaya and Waxman. Supporting Food Service and Preparation Workers during the COVID-19 Pandemic. Urban Institute, March 2020. https://www.urban.org/ research/publication/foodservice-and-preparationworkers-and-covid-19-pandemic

A basic principle of justice

- Treat equal people equally, and unequal people unequally
 - Persons who are vulnerable are unequal to persons who are not vulnerable
 - Therefore, they merit, deserve, more than persons who are not vulnerable
- In a pandemic, treated by physical distancing, equal (or unequal) with respect to what? What should matter?
 - Health care insurance tied to employment
 - Living in a private space
 - Working at a job that can be done "remotely"
 - Having easy and regular access to technologies that "close" social distance
 - Able to perform ADL / IADL
- In a pandemic, survival supersedes quality of life, rights and interests
 - e.g. free assembly in public spaces, such as a demonstration, is not important
- In general, we want to live days that are safe, social and engaged.
 - This is a balance, a kind of triangle

Thinking about how to apply physical distancing for	a very wealthy person who has paraplegia	a person with dementia, requires dialysis & is a resident of a nursing home w/o internet	the CNA who works in the LTC facility
Health care insurance		YES	YES but NO
Living in a private space		Group meals, perhaps a room mate, dialysis center	Yes and with others
Working at a job that can be done "remotely"		NA	NO
Having easy and regular access to technologies that "close" social distance		Not available	Not for work
Able to perform ADL / IADL		CNA's who work shifts	YES

Another closer look at the vulnerable.....

Needs social and physical contact to survive	Provides services that involve social or physical closeness	Provide services that facilitate social or physical closeness
Persons living with a disability physical cognitive: MCI, dementia	Caregivers to assist with IADL / ADL informal formal / paid	Workers who support people who provide services that involve social or physical closeness food supplier to a restaurant
Persons needing chronic medical		
care	Food service worker	
dialysis	Entertainment worker people who provide services	
Persons needing acute medical care a hospital patient	that require face-to-face engagement	
Persons living in a total institution college students		
prisoners residents of long term care		
facilities		
Persons w/o access to internet of things		

Preliminary thoughts & recommendations.... Where possible, remove sources of vulnerability....

- - address the economic losses to workers many are or will be unemployed
 - support for access to health care (health insurance)
 - close schools
 - broad access to the internet
 - prisoner release / parole
- After addressing sources, some will remain vulnerable.
 - The more a person is vulnerable, the further up in the front of the line for PPE, testing, treatment and vaccine

Preliminary thoughts & recommendations....

- Total institutions such as NH and prisons must be *ground zero for our* attention because we are in this for months
 - Medicaid funding is a pipeline to most nursing homes and Medicare to dialysis
 - crowd source ideas for <u>access to PPE</u>; <u>safe, social and physical connection</u> in congregate living such as train family to be CNA's, selected/escorted visits, use technology, in hallway dining... nothing is too stupid or "outside the box"
- For a disease that is incurable & untreatable, where we have to let nature take its course, we have to take caregiving seriously.
 - Caregivers humans are like influenza vax or penicillin... but social distancing can impede the ability to care. This is our national dilemma.