

The New York Times, Obamacare and the war on the elderly

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3 December 2013

"We are not, however, obliged to help the old become indefinitely older. Indeed, our duty may be just the reverse: to let death have its day."

The above passage concludes an opinion piece appearing Sunday in the *New York Times*. "On Dying After Your Time" by Daniel Callahan advances the notion that the burning issue vexing the US health care system is that people are living too long. The cost of keeping them alive, Callahan argues, is threatening a social catastrophe.

This misanthropic attack on human progress is published in the same newspaper that for five years has campaigned relentlessly for reducing access to cancer screenings and medications, agitated against "overtreatment" of cardiovascular disease, and promoted a series of slanted studies supposedly proving that rationing health care will not only reduce government and corporate costs, but also improve public health.

Callahan's column zeroes in on the next logical target: the undesirable phenomenon of people living longer in retirement.

From the outset, the ostensibly "liberal" *Times* has been a champion of Barack Obama's drive to slash health care spending for the vast majority of ordinary Americans through an overhaul of the health care system. The Affordable Care Act (ACA) is the embodiment of this cost-cutting scheme.

The *Times* has brought forward a long list of medical "experts" to advance this agenda. Daniel Callahan, Ph.D is but the latest. As senior research scholar and president emeritus of the Hastings Center, and co-director of the Yale-Hastings Program in Ethics and Health Policy, he has authored articles such as "Medical Care for the Elderly: Should Limits Be Set?" and "Ethics and Health Care: Rethinking End-of-Life Care."

This latest installment in the *Times'* campaign comes as the Obama administration is facing criticism over the

botched rollout of its HealthCare.gov web site. But the retrograde nature of what is commonly known as Obamacare does not lie in the technical problems of the web site.

The sales pitch for Obama's health care "reform"--that it will expand the quality and accessibility of health care for millions of Americans--is a fraud. The ACA is aimed at establishing an even more heavily class-based system of health care delivery than currently exists, in which spending is slashed for the government and employers and medical care is reduced and rationed for working people--all while boosting the profits of the health care industry and the corporate elite.

From this standpoint, it is instructive to examine Daniel Callahan's column in some detail. He notes that anti-aging "optimists" point to "the many life-extending medical advances of the past century as precedents, with no end in sight," and that "average life expectancy in the United States has long been rising, from 47.3 in 1900 to 78.7 in 2010." A decline in infant mortality, improvements in nutrition, decreases in infectious diseases and advances in medicine have contributed to this dramatic increase in lifespans over the past century.

But while such increases in life expectancy have long been the measure of a society's health and progress, Callahan warns us of the supposed dangers should this upward trend continue. "Regardless of what science makes possible," he writes, "or what individual people want, aging is a public issue with social consequences, and these must be thought through."

He notes that by 2050, the over-65 population will have grown to more than 83 million from some 40 million in 2010, leading to a projected "rise of Medicare expenditures to 5.8 percent of gross domestic product in 2038 from 3.5 percent today, a burden often declared unsustainable." Unsustainable for whom, he does not say.

As with every hack job in defense of slashing health

care spending that has appeared in the pages of the *Times* in recent years, the column takes as a given the present health care set-up, in which the entire system is subordinated to the capitalist profit system. The quality and availability of care is determined not by the medical needs of the population, but by the bank accounts and profit margins of the private insurance companies, pharmaceutical corporations and giant health care chains.

In arguing that old people desiring to live longer are selfishly consuming too great a share of the available resources, Callahan makes no mention of the vast and unprecedented concentration of wealth at the very top of the social ladder. He has no complaints about the trillions squandered by the super-rich, but instead directs his ire at ordinary people who think they have a right to decent health care and a long life.

Behind his ethical pretensions and posture of reasoned discussion, he is a garden variety apologist for capitalism, but one who goes further than most in articulating the anti-social and inhumane implications of his position.

We are told that the government--which has bailed out the banks and auto industry to the tune of trillions, financed an endless string of wars, and constructed a massive apparatus to spy on the world's population--has "no money" to finance health care for workers who have labored for decades and want to enjoy their retirement.

Callahan complains: "Just 10 percent of the population--mainly the elderly--consumes about 80 percent of health care expenditures, primarily on expensive chronic illnesses and end-of-life costs." He asks: "Can we possibly afford to live even longer--much less radically longer?"

In an effort to answer his own question in the negative, he advances the pernicious argument that the elderly remaining among the living are robbing society's youth of their futures. Callahan writes that "an important and liberating part of modern life has been upward social and economic mobility. The old retire from work and their place is taken by the young."

He adds: "A society where the aged *stay in place* for many more years would surely throw that fruitful passing of the generations into chaos" (emphasis added). He also bemoans the likelihood that "older people who stay longer in the work force, as many are now forced to do, will close out opportunities for younger workers coming in."

But why can't society fund retirement and health care for the elderly *and* provide jobs for the younger generation? And why are those over aged 65 forced to

stay in the work force, when it is clear that many people laboring into their 70s and even 80s do not voluntarily choose this route, but simply cannot afford to retire? The answer is that the well being of society is held hostage to the profit interests of a financial aristocracy that determines who works, who retires, and what workers are paid for their labors.

Callahan attempts to further justify his opposition to extending life expectancy by advancing an argument that has a distinctly fascistic odor. He asks: "And exactly what are the potential social benefits? Is there any evidence that more old people will make special contributions now lacking with an average life expectancy close to 80?"

One could expand this argument: What are the "potential social benefits" of the mentally impaired, or the physically disabled? Wouldn't society be better served if their lives were cut short as well?

What the "ethicist" Callahan is really saying is that too many people are staying alive too long after having exhausted their value to the ruling class as sources of surplus value and profit.

According to Callahan, the answer to the disturbing "crisis"--compounded by advances in science and medicine--of people living longer is "to let death have its day." Such arguments highlight the reactionary character of the Obama administration's health care legislation. It is part of a social counterrevolution, aimed not only at slashing and rationing health care for working families and retirees, but reducing life expectancy for the working class.

In making his Malthusian argument, in which he presents advances in medical care, science and technology and the resulting potential for increasing life expectancy as evils, Callahan only exposes the irreconcilable contradiction between human progress and the interests of the capitalist ruling class.



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