Does Care Require Personhood? The Ethics of Robot Caregiving

By **Rachel Robison-Greene** - Jun 7, 2019

"Smiling caregiver embracing happy senior woman in nursing home" by agilemktg1 is part of the public domain (via Flickr)ID:54611003

Emerging technologies have presented people that require daily medical services with a wider range of options. For example, Rudy the healthcare robot can be purchased by a patient for $5,000 or leased for $100 a day. Though these numbers may seem high, the average cost of at-home medical care provided by a human caregiver is $4,099 a month. Rudy offers care at a significantly lower cost. Rudy can perform a wide range of tasks including wound care, ostomy care, and the administration of injections. Often, patients simply need assistance getting out of bed to use the restroom at night, and as round-the-clock medical assistance is particularly expensive, Rudy can be there for the basic nighttime needs of patients at a fraction of the cost.

For people who suffer from depression, anxiety, or related mental health challenges, there is PARO, the robotic therapy seal. In a promotional video for PARO, a research scientist makes the remarkable claim that "PARO has a value system that includes enjoying being stroked and disliking being hit." The personality of the seal is determined by what its owner likes. When the seal is stroked, the behavior that preceded the stroke will be reinforced, and the seal will engage in that behavior more frequently. As a result, the patient can guarantee that the robotic seal will exhibit behavior that they find soothing or uplifting. The psychological results are similar to the results produced by therapy animals, but without the uncertainty that comes along with the spontaneous behavior of a living creature. The robot is particularly effective in providing psychological relief to patients with dementia.

Relatedly, Same Day Security recently raised 35 million dollars for its Addison project. Addison is a virtual healthcare companion who appears on ten-inch screens strategically placed around one's home, asking patients regularly about whether they've taken their medication, exercised, or consumed healthy meals. Addison can detect motion and can guide patients through exercise routines. Addison can also track vital statistics and keeps records of those statistics to share with the patient's doctor, should the patient choose to do so.

For a number of reasons, these technologies appear to many to be a step in the right direction. Many sick people who require frequent care don't have family members that can reliably provide that care, and the cost of personalized care can be quite steep. But it's more than simply a matter of cost. Medical procedures involve the care of bodies and a

person's body is something over which they frequently want to retain some privacy. These procedures are very personal procedures, and the involvement of another human being can sometimes be quite jarring and even humiliating. Each of these potential solutions – Rudy, PARO, and Addison – is incapable of taking the kinds of attitudes toward human bodies that a patient might fear. If a patient is humiliated in the presence of a robot caregiver, they've made a category mistake.

Another benefit of robotic and virtual technology when it comes to healthcare is that robots won't be affected by the stress inherent to the healthcare system. Even the most professional human healthcare providers can respond poorly to the difficulties posed by ill health. Understandably, patients aren't always capable of responding to their medical problems with good humor, and this can be difficult to navigate for a human caregiver. Robot caregivers are in a better position when these difficulties arise.

In cases in which a patient cannot afford a professional caregiver, the responsibility often falls to family members. If a patient is elderly, their children frequently step in to provide the care. These adult children often have careers and families of their own, and the new responsibility of providing care for an ailing parent can be a significant stressor. What's more, this burden tends to fall disproportionately on the shoulders of the patient's female children. When career and other personal sacrifices need to be made to make time for caregiving, it is more often females who make those sacrifices. Robot caregivers provide a potential solution for everyone, and help to lessen the disproportionate burden placed on women.

These new trends in healthcare technology might be useful for other reasons. Many countries, like China, have rapidly aging populations. By the middle of this century, 450 million people in China will be over the age of 65. There simply aren't enough caregivers to satisfy the needs of all elderly patients. This trend is exacerbated by people having fewer children in order to reduce carbon emissions. When populations start having fewer children, they also ultimately have fewer young people to provide care as older generations age. Robot caregivers can potentially solve this problem.

Others are not so impressed with this technology. They argue that care relationships are, fundamentally, relationships between *persons*. While PARO, Addison, and Rudy provide services for patients, they aren't actually providing *care* for patients. Care requires attentiveness to needs and a genuine willingness to satisfy those needs for the good of the person in need. We are falling short of our duty to patients if we provide them, merely, with *service*, when every person is deserving of *care*.

It may well be the case that these technologies are less expensive for patients, and that's important. But the fact that robot care is less expensive might be viewed as an indictment of our health care system rather than an argument in favor of a robotic solution. Perhaps instead we should support elected officials who plan to pass legislation to make health care affordable for everyone. We could lessen the burden on family members by creating a system in which real *human* professionals were affordably available to anyone in need of their services.

For patients who desire increased privacy, robotic health care could continue to be an option. It shouldn't be the case, however, that patients are essentially coerced into choosing a less intimate form of care simply because they cannot afford the alternative.

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