



What role should disability play in ventilator triage policy?

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Findings

1. Participants prioritised those with a better chance of survival, most of the time.

Part 2

Public Opinion: Who Gets the Ventilator?



Who should receive the ventilator?

Patient A 40% chance of surviving Patient B 40% chance of surviving and has a disability

Background

- Scarcity of resources during COVID-19 pandemic
- Institutions had to rapidly develop ethical guidelines
- Centrality of the question of well-being and quality of life \bullet
- Balancing fairness and benefit
- Objections to UK guidelines from Disability Community \bullet

Research Question:

What are public attitudes about the role that disability should play in triaging policy?

Patient with Lambda has Equal survival Patient without Lambda has greater survival odds greater survival odds odds

Part 2 was repeated for three hypothetical disabilities:

- θ **Theta**: moderate cognitive deficit
- Kappa: wheelchair bound K
- λ Lambda: fixed intellectual disability

2. When the difference between survival odds was small or non-existent, it was found that two factors significantly predicted how respondents would allocate:

Type of disability (Theta, Kappa and Lambda)

Assumptions about quality of life

Meaning, the more respondents thought a disability reduced a person's quality of life, the more likely they were to allocate the ventilator to the non-disabled person even when the disabled person had an equal or better chance of survival.

Method

Part 1

% of Participants



Survey Structure



Public Opinion: Who Gets the Ventilator?



Responses: Disability 'x' Reduces Quality of Life

Implications

- Participants favour a maximising consequentialist approach
- The data provides a **new perspective**: assumptions about quality of life significantly influence how the public make triage decisions between patients when prospective survival rates are comparable.

Flip a coin Person with greater survival odds 100 90 80

> **Future directions:** Larger surveys of broader sample size, and focus groups to look at roots of quality of life assumptions

Significance: Contributes to discussion that could inform future triage guidelines and policy

• However, assumptions about quality of life may be misguided.

This may be ethically problematic and lead to discrimination

Person with lesser survival odds



Dilemmas by Survival Odds: No Disability vs. Disability