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Article:

Prescott, T.J. orcid.org/0000-0003-4927-5390 and Robillard, J.M. (2019) Robotic automation can improve the lives of people who need social care. *BMJ*, 364. l62. ISSN 0959-8138

<https://doi.org/10.1136/bmj.l62>

This article has been accepted for publication in *BMJ*, 2019 following peer review, and the Version of Record can be accessed online at <https://doi.org/10.1136/bmj.l62>

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In reply to: David Oliver, will robotic automation solve social care? BMJ 2018; 363, doi: <https://doi.org/10.1136/bmj.k4854> (Published 21 November 2018).

David Oliver asks and answers the wrong question. Robotic automation will not “solve social care”, but it can contribute to improving the lives of people with care needs.

In the report for the EPSRC Robotics and Autonomous Systems Network (“Robotics in Social Care: A Connected Care Ecosystem for Independent Living” (1)) we considered the state of social care in the UK, where standards of care are falling dramatically (2), and reviewed the potential of robotics to address some of the challenges. A key focus of that paper, and of other international efforts, is on the need for an interaction between designers, carers, and people in need of care in developing new technologies (e.g. 3), alongside consideration of the economic implications.

David Oliver notes the high levels of social isolation among older adults. In today’s context, loneliness among people in need of care is clearly not due to robots but to systematic and societal issues in how needs are valued. There is little evidence, as yet, that suggests introducing robots in care increases social isolation. Loneliness is a complex phenomenon (4), for which the presence of other people is not a guaranteed solution. In our view, social robots could play a role, for instance by providing a ‘social bridge’ to friends and relatives.

While David Oliver correctly states that evidence of impact is limited, the research to demonstrate such impacts lies ahead. Compared to the billions we spend on medical research, the UK has invested, at most, some tens of millions in exploring the potential of assistive robotics for social care, at a time when it is estimated that around 1.2 older million people in the UK have an unmet care need. Faced with this challenge, the responsible trajectory is to explore all possible courses of action to achieve the highest standards of evidence-based care.

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