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Morality of COVID-19 Global Pandemic

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Abstract:

The unprecedented global pandemic of COVID-19 creates many problems. No country in the world is ready to deal with this pandemic and some of them do not know how to overcome this pandemic. The victims of this pandemic (human and non-human) is very big and soaring every day. There are millions of infected and thousands of deaths around the world. At the same time, there are no available effective vaccines. The only available vaccine is for emergency used that we don't know yet exactly the efficacy and the side effects of it. This situation creates many moral and ethical problems. We try to resolve some moral problems in the light of magisterial teachings to know how to answer some moral problems related to global COVID-19 pandemic.

Keywords:

COVID-19, emergency vaccine, minus malum, moral problem, privacy and confidentiality, vaccination.

Introduction

As a terminology, COVID-19 is an abbreviation of 'CO' stands for Corona, 'VI' for virus, 'D' for disease, and 19 for the year 2019. So, COVID-19 is the acronym derived from "coronavirus disease 2019."[1]

[1] UNICEF, WHO, CIFRC, *Key Messages and Actions for COVID-19 Prevention and Control in Schools*, 2020: 2

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COVID-19 is an infectious disease caused by a newly discovered coronavirus called SARS-CoV-2. It is a new type of respiratory illness. This virus is the same family of viruses as Severe Acute Respiratory Syndrome (SARS) and some types of common cold. Complications leading to death may include respiratory failure, acute respiratory distress syndrome (ARDS), and multi organ failure (injury of the heart, liver, and kidneys).

Covid-19 is believed to have originated in Wuhan, China. According to South China Morning Post (April 23, 2020), the first case of the novel coronavirus can be traced back to November 17, 2019. It is only on December 27, 2019 China realized that the disease was caused by a new coronavirus. On January 30, 2020, the WHO declared the COVID-19 outbreak a global health emergency and on March 11, 2020, the WHO declared COVID-19 a global pandemic[2]. It is a pandemic due to the rapid increase in the number of cases, and it is a global pandemic due to the rapid increase cases outside China that has affected a growing number of countries. From Wuhan, Coronavirus spreads rapidly to all over the world. Within a few days, new cases were confirmed in India, Philippines, Russia, Spain, Sweden and in many other countries. The first death outside China was in the Philippines on February 2, 2020.

In Indonesia, President Joko Widodo announced the first case of COVID-19 on March 2, 2020[3]. After 1 years from the official declaration that COVID-19 is an outbreak a global health emergency (30 January 2021) there are 103,108,966 total number of cases and 2,228,174 of death world widely[4]. No country really equips to conquer the VOVID-19 pandemic so that the victims of this pandemic are soaring every day. This pandemic is the first global pandemic in human history in which almost no country is excluded.

The impact of the pandemic is immense in almost any sector of lives. Because it is a new virus and new pandemic, it creates also unprecedented ethical and moral dilemma in all sector of lives. The first ethical dilemma relates to limited medical tools, such as limited

[2] Desheng Dash Wu and David L. Olson, *Pandemic Risk Management in Operations and Finance: Modelling the Impact of COVID-19*, Springer, 2020: 2

[3] https://www.thejakartapost.com/news/2020/03/02/breaking-jokowi-announces-indonesias-first-two-confirmed-covid-19-cases.html

[4] https://www.worldometers.info/coronavirus/?isci=010702

hazmat suit (hazardous materials suit) to protect healthcare workers, limited ICU, no drugs to cure the patients, and the allocation of scare resources. The second ethical dilemma relates to the healthcare workers such as limited competent healthcare workers and the victims among healthcare workers is high. The third ethical dilemma relates to society because there is limitation of moving and socializing for citizens so that it lowers productivities in society. The impacts of this pandemic are also immense in economic and social life, in spiritual life, in the budget of the government, unemployment, and so on. We will discuss some of the moral dilemmas.

Privacy and Confidentiality

Privacy and confidentiality in healthcare is an ancient ethical duty which lasts until now. It has been declared in the Hippocratic Oath, "What I may see or hear in the course of the treatment or even outside of the treatment in regard to the life of men, which on no account one must spread abroad, I will keep to myself, holding such things shameful to be spoken about".

It is an important task for physicians to hold patient confidentiality because it is related to the secret information of patients that should not be exposed externally. In the beginning, holding confidentiality is a practical reason. To make a good diagnosis, a physician needs to get much information regarding the illness of the patient. Some information is secret because it related to the lifestyles, personal preferences, personal affair, or something that make patients ashamed. To tranquil patients, a physician told the patient that he/she will not tell other people of his/her secrets. It is guaranteed that the secrets will not be exposed externally. In this way, the patients respect and believe in their physicians and willingly tell them secrets related to the illness. Confidentiality make a trust relationship between physicians and their patients.

Breaking the confidentiality is a violation of respect and love of others, complicates the process of curing, and makes the patient not come again to that physician. That is the reason ethical (and legal) regulations were set up since antiquity so that there will be no abuse of confidentiality. In our time, the temptation to break confidentiality is even more

challenging since personal information is worthwhile economically in the information era.

United States Conference of Catholic Bishops issued a document on healthcare, Ethical and Religious Directives for Catholic Health Care Services (2018). To make professional-patient relationship, the document said, *"Health care providers are to respect each person's privacy and confidentiality regarding information related to the person's diagnosis, treatment, and care."* (no. 34)

In the time of COVID-19 pandemic, it comes up serious questions on the confidentiality. Is it an absolute ethical and legal duty? Can we break the confidentiality for some reasons? If we can, on what reasons? It is clear that in the ordinary time, breaking the confidentiality is forbidden and even a crime. Since the information in medical record belongs to the patients, telling other people about the confidential information from medical record, has to have permission from patients. The COVID patients have the rights of confidentiality to not get a bad stigma from society.

The leading bioethicists Tom L. Beauchamp dan James F. Childress explained that Respecting others' privacy is part of respect for autonomy. Respect for autonomy is a prima facie duty[5]. Prima facie duty is a duty which first appear as a duty, but whether it will remain a duty or not, depends on the real situation that follows. If there is more fundamental duty than the prima facie duty, it is possible that it may change. The actual duty is not the prima facie duty anymore.

So, according to Beauchamp and Childress, confidentiality is not an absolute duty. In the case of COVID-19 pandemic, keeping confidentiality is a prima facie duty which can be overcome by other more fundamental principles, such as protecting life, health, and well being (*bonum comune*). Respecting confidentiality which is part of human autonomy is respecting human rights. Life is the most fundamental element because the existence of human rights depends on the life of human beings. If there is no life, there will be no human rights also. From life of human being it flows other form of life: social life, religious life, academic life,

[5] Tom L. Beauchamp and James F. Childress, *Principles of Biomedical Ethics,* (Oxford University Press, Oxford, 2019): 105

political life and so on. In other words, if there no life of human, there will be no social life, religious life and so on. So, the most fundamental human rights is rights to live which cannot be cancelled by any others.

In this line, we affirm that saving life is more important than respecting confidentiality. If there is conflict between respecting life and respecting confidentiality, respecting life must be the first. In a case respecting confidentiality threaten the life, so life must win over confidentiality. There are many examples of it in COVID-19 pandemic. We know that COVID-19 is a contagious disease through droplet and airborne. People who stay next to those who suffered from COVID-19, are in danger of being infected by COVID. It means also that their lives and health are also exposed in danger; in fact, nobody has the right to expose other people to danger. If there is a case in which keeping confidentiality means aggression to other people's life and health, saving life is precedence over keeping confidentiality. Those who are suffered from COVID has the obligation to declare themselves that they have COVID so that those who in contact with them in a certain period of time, may proceed to medical check-up for potential infection. If they don't want to declare, there must be a means to influence them to open and it must be said that it is an ethical obligation. It doesn't mean that they have to open their confidentiality to all people but only for those who are potentially infected.

In this case, breaking confidentiality is necessary for tracing and preventing the spread of COVIC-19 to stop the pandemic. Now, the only available vaccines are for emergency used because those vaccines have not passed the 3rd phase of a regular clinical trial. We don't know yet exactly what are the side effects of those vaccines. COVID-19 will remain a danger for next couple of years, some expert said. In this difficult situation, knowing who are suffered from COVID-19 is very important.

VACCINATION

Some people who questioned morality of the vaccination in term of the mandatory of the vaccination based on human rights. They argue that vaccination is private rights. It depends on the autonomy of a person. Universal Declaration of Human Rights declared that rights of healthcare is one of the human rights, "*Everyone has the right to*

a standard of living adequate for the health and wellbeing of himself and of his family, including food, clothing, housing and medical care and necessary social services, and the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood in circumstances beyond his control." (Article 25). The same issues were declared on the International Covenant on Economic, Social and Cultural Rights (1976), "*The States Parties to the present Covenant recognize the right of everyone to the enjoyment of the highest attainable standard of physical and mental health*." (article 12.1).

Briefly, the right of adequate health is a human right whose exercise depend on the will of the person. It cannot be forced. If you are sick, whether you want to visit a doctor or not, it depends 100% on you and you cannot be punished for not visiting doctors. Some people argue about the vaccination with the same logic.

The vaccination in the time of COVID-19 pandemic is different. COVID-19 is an infectious disease which is easily transmitted to other people through droplet and airborne. In the beginning, we don't know exactly how to deal with this virus so that the standard operating procedure (SOP) of COVID-19 is changing continually. It makes people confuse and hopeless.

Although the percentage of death is relatively low compared to SARS and Dengue,-the rapid increase in the number of cases is very high, so the total number of deaths is very high. It is a pandemic which affected all sectors of life. The damages which Covid-19 does are immense in almost all sectors of life: economics, social, education, politics, religions, transportation, leisure and many more. It means that the danger of COVID-19 is very high and devastating. Those who suffer from COVID have very high possibility of exposing other people to danger of death or danger of health. In fact, there is no body who has the rights to put other people in danger. It is an obligation to stop the spread of this disease. The only possibility for permanent eradication of COVID-19 is through vaccination. So, in this case, vaccination is not a private affair anymore, but it is a social obligation.

In 2016, Pontifical Council for Pastoral Assistance to Health Care Workers issued New Charter for Health Care Workers. When the

council discuss about vaccination, it said, "*From the perspective of preventing infectious diseases, the development of vaccines and their employment in the fight against such infections, through the obligatory immunization of all the populations concerned, is undoubtedly a positive step.*" (number 69). Vaccination for preventing infectious diseases is an obligatory. Human being has the rights and obligation to preserve, develop, and maintain their life because it is a precious gift from God, as the Catechism of Catholic Church states, *"Life and physical health are precious gifts entrusted to us by God. We must take reasonable care of them, taking into account the needs of others and the common good*." (No 2288). Life is entrusted to us to be preserved and developed. There is no right of human beings to destroy or abandon his life or life of others.

Addressing to an International Congress of Anesthesiologists on November 24, 1957 in Rome, Pius XII said, *"Natural reason and Christian morals say that man (and whoever is entrusted with the task of taking care of his fellowman) has the right and the duty in case of serious illness to take the necessary treatment for the preservation of life and health. This duty that one has toward himself, toward God, toward the human community, and in most cases toward certain determined persons, derives from well-ordered charity, from submission to the Creator, from social justice and even from strict justice, as well as from devotion toward one's family*."[6] Man has the rights and duty for the preservation of life and health. The basis of these rights and duty is twofold: natural laws and Christian morals. All living beings (plants, animals, and human beings) are always equipped naturally with the ability to defend their life and health and to protect against their aggressors. Poisons, running fast, claws, rolling et cetera are natural means to defend lives. These are the natural laws. As a believer, life is entrusted by God to human beings to be guarded, preserved, and developed. There is no right to human being to end life either their own life (suicide) or the life of others (murder). Human beings are only an administrator to their lives not the absolute owners.

The duty to preserve life and health has threefold: toward himself,

[6] Pius XII, "The Prolongation of Life" in *The National Catholic Bioethics Quarterly, Summer,* 2009: 327 - 332

toward God, toward the human community. It means that preserving life and health is not only for personal benefits but also social benefits. Preserving life is not only personal duty toward herself/himself but also duty toward others. This duty or obligation to preserve other's life means that there is no right for everybody to expose life of other people in danger. Therefore, vaccination in the time of pandemic is an obligation.

The common rule to use vaccines prepared using cell lines derived from aborted human fetuses is illicit. It is a duty to remove oneself from a gravely unjust legal situation as the Pontificia Accademia pro Vita said in his document Moral Reflections on Vaccines Prepared from Cells Derived from Aborted Human Foetuses, June 9 2005. It is said in this document, "*If someone rejects every form of voluntary abortion of human foetuses, would such a person not contradict himself/herself by allowing the use of these vaccines of live attenuated viruses on their children? Would it not be a matter of true (and illicit) cooperation in evil, even though this evil was carried out forty years ago?*". The illicit of using this type of vaccine is related to cooperation in evil (a link between his own immoral acts and a morally evil action carried out by others). Some people performed illicit action (procured abortion) and the other people uses the fruit of this illicit actions. The two action is illicit.

Pontifical Council repeated the same pronouncement for Pastoral Assistance to Health Care Workers.

Pontifical Council for Pastoral Assistance to Health Care Workers repeated the same pronouncement on their document New Charter for Healthcare Workers (2017). It is stated, "*In some cases, researchers utilize "biological material" of illicit origin that was not directly produced by those who make use of it, but acquired commercially; in these situations, one could invoke the criterion of independence, that is, the absence of any proximate connection to illicit practices. Nevertheless, the researchers, in their professional activity, have the duty to avoid scandal.*" (no. 70)

Although the two important documents stated clearly that vaccination using vaccine derived from aborted foetuses is illicit, the case of COVID-19 vaccination has different moral considerations. Responding to the available vaccines on COVID 19, The Congregation

For The Doctrine Of The Faith issued a document on 21 December 2020, "*When ethically irreproachable Covid-19 vaccines are not available, it is morally acceptable to receive Covid-19 vaccines that have used cell lines from aborted foetuses in their research and production process*." (no. 2). The reason for this exception is described also in the document, *"The fundamental reason for considering the use of these vaccines morally licit is that the kind of cooperation in evil (passive material cooperation) in the procured abortion from which these cell lines originate is, on the part of those making use of the resulting vaccines, remote. The moral duty to avoid such passive material cooperation is not obligatory if there is a grave danger, such as the otherwise uncontainable spread of a serious pathological agent--in this case, the pandemic spread of the SARS-CoV-2 virus that causes Covid-19."* (no. 3).

There are two reasons for allowing vaccines using fetuses. First: the relation between evil doer (those who made abortion) and the users of vaccine is a remote type of passive material cooperation in evil, so it is not formal cooperation. Any form of formal cooperation in evil is prohibited. Even, if formal evil cooperation produces something good, the formal evil cooperation remail illicit because both the doers (the abortionists and those who use the result of abortion) do the same illicit actions. Unlike the case of remote passive material cooperation, the users of the vaccines do nothing and contribute nothing to the evil action of the abortionist.

Second: It is the more fundamental. The consequences of not using vaccines is a great danger of spreading uncontrollable COVID-19 pandemic. In this case, it is permissible to use vaccines that have used cell lines from aborted fetuses in their research and production process in order to promote a greater good. It is a minus malum choice, to choose the lesser evil in order to promote greater good. The Principle of Minus malum is applied whenever all the choices are bad, or all the consequences of the choices are bad and there is no choice of not choosing. Even not choosing has the bad consequences. In this situation, we have to choose the one with the lesser evil in order to promote greater good. Pope Paul VI in his encyclical letter Humanae Vitae (1968) no 14 said, "*Though it is true that sometimes it is lawful to tolerate a lesser moral evil in order to avoid a greater evil or in order to promote a greater good*." The

same note was cited by Pope John Paul in his Encyclical letter Veritatis Splendor (1994) no 80 that affirmed the application of the principle.

Emergency Use of Vaccine

When the Chinese Sinovac vaccine made 3rd phase of clinical trial in Bandung and West Java, Indonesia las year, some Indonesians complained about why the clinical trial was done in Indonesia and used Indonesians as 'kelinci percobaan'. The term 'kelinci percobaan' is an Indonesian term to express that someone is sacrificed for the sake of other people or other things. Many people do not know that this clinical trial is important for the Indonesians. In the era of personalized medicine, it is important to find the exact medicine for everybody according to their genetic makeup because everyone is different genetically. The genetic make up of Indonesians have some differences compared with Europeans or Middle Eastern or other descendants. Furthermore, the virus may mutate because of the different environment. So, it is important that the 3rd phase of clinical trial is conducted in Indonesian so that Indonesians will get vaccine specifically suitable for Indonesians.

Usually, the 3rd phase of clinical trials takes a long time to know the efficacy of a drug, determine the drug's longer-term effects (safety), and tests the potential treatment in the largest number of people. Usually, it takes 1 – 4 years and involves 300 to 3,000 volunteers. In the case of COVID-19 vaccines, it takes less time and volunteers than usually. Scientists embarked on a race to produce safe and effective coronavirus vaccines in record time as never before. The reason for the rush is the emergency situation of COVID-19 pandemic. The danger is real and huge but there is no effective vaccine available. The infected people and death are soaring from day to day, and many healthcare workers don't know exactly how to handle this situation. The only hope to overcome the pandemic is in the new vaccine.

In this chaotic situation, some reliable institutions to safeguard the medicine and drug: WHO, FDA (USA), BPOM (Indonesia) and the others, issued approval of some drugs to be used in an emergency situation, although they do not yet pass the usual 3rd phase of the clinical trial. As the name indicates, it is not yet a usual drug, but emergency used. It

means that its efficacy and side effects we don't know yet exactly. Why are they approved? Because it is emergency situation.

What is the official teaching of the Catholic Church in this case? Sacred Congregation for the Doctrine of the faith issued the Declaration on Euthanasia on May 5, 1980. In that document, it says, *"If there are no other sufficient remedies, it is permitted, with the patient's consent, to have recourse to the means provided by the most advanced medical techniques, even if these means are still at the experimental stage and are not without a certain risk. By accepting them, the patient can even show generosity in the service of humanity.*" (part IV)[7]. In their document New Charter for Healthcare Workers, this teaching is repeated by the Pontifical Council for Pastoral Assistance to Health Care Workers, no 87.

The morality of using experimental vaccine in the case of COVID-19 pandemic is also minus malum choice. As being discussed the Principle of minus malum is applied whenever all the choices are bad or all the consequences of the choices are bad. In this case the available choices are between being vaccinated using the experimental vaccine and not being vaccinated. Both of them are bad. On one hand, using the experimental vaccine is bad because we don't know for sure the efficacy and the side effects of the vaccine. On the other hand, not being vaccinated will spread and transmit the COVID-19 and make pandemic become more uncontrollable. Not using the vaccine is worse because we cannot stop the pandemic so that the victims and the death will keep soaring. From the existing clinical trial, we know that there are some benefits of using it. If we compare between using vaccine and not using vaccine, we know for sure that the lesser evil is using vaccine. So, using vaccine is chosen not because it is the best but because it is a lesser evil to avoid a greater evil. So, "*Though it is true that sometimes it is lawful to tolerate a lesser moral evil in order to avoid a greater evil or in order to promote a greater good*." (Humanae Vitae no 14 and Veritatis splendor no 80)

As it has been described in the previous chapter, the reason for The Congregation For The Doctrine Of The Faith agreed to use vaccines that have used cell lines from aborted foetuses in their research and

[7] Congregation for the Doctrine of the Faith, Declaration on Euthanasia, IV: AAS 72 (1980): 550 - 551

production process is to avoid great danger of spreading uncontrollable pandemic. It is also a minus malum choice because all the available choices have bad consequences. The Congregation for The Doctrine of the Faith agreed upon the using vaccines not because everything is good, but because it is a lesser evil to avoid a greater danger.

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