

Discuss the ethical implications of the coronavirus pandemic.

The World Health Organisation officially declared the coronavirus (COVID-19) outbreak a global pandemic on March 11th 2020. With the novel infection posing serious clinical implications, including death and its rapid spreading to over 124 countries, the debate as to how one should deal with the implications of the virus is evoking conversations in every government, source of media, business and household. Countries are desperately adapting to provide what they deem is best for their people with some adopting the “herd immunity” approach, whilst others implementing a strict lockdown/self-quarantine resolution. In a time of a pandemic there stand a multitude of issues to which there is an abundant reliance on the government to provide the guidance needed to overcome the virus as swiftly, with as little casualties and implications as possible. Whilst considering implications of businesses is rather important, perhaps the most crucial, certainly at this moment in time, is considering the pandemic from a bioethicist standpoint. This includes focusing on the responsibility one has to protecting the vulnerable, the allocation of scarce medical resources and protecting those medical workers on the front line.

Essentially, one of the upmost importance is the responsibility one has to protecting it's vulnerable. This includes not over-taxing the medical system to enable those who require support receive what they need. The emergence of the viral pandemic is evidently placing extraordinary and sustained demands on public health systems which are already overwhelming the health care infrastructure. Such demands create the need for the rationing of medical equipment and interventions. This issue was first seen in Wuhan (and now arising globally) where the allocation of scarce medical resources proposed the impending question, who receives the care they desperately need? In the case of disasters such as this, decisions must be made as to who should receive care until more is provided. Due to the nature of the virus causing respiratory complications, there is an overbearing demand for equipment such as ventilators. The ethical values of maximising benefits, equal treatment and giving priority to the worst off encompass the specific recommendations for the allocation of medical resources during the COVID-19 pandemic: maximise benefits, prioritise health workers, do not allocate on a first-come first-serve basis, be responsive to evidence, recognise research participation and apply the same principles to all. Although all six guidelines are valuable in their own right, one could argue in the context of this pandemic, the value of maximising benefits holds the upmost importance. This entails the importance of responsible stewardship of resources, it is certainly challenging to justify asking health care workers and the public to take risks if the outcome to saving lives is rather illusory. The priority for the limited resources consequently should aim for both the saving of the most lives and at maximising the improvements in individuals' post-treatment length of life. The saving of the greatest number of lives as possible is the general consensus amongst healthcare experts. Essentially, this approach encompasses both a utilitarian perspective (on which it is consistent with promoting the most happiness due to focus on maximising survival) and at the same time, a deontological perspective (with the emphasis of the paramount value each human life poses).

In the case of the American philosopher Michael Sandel, he indeed proposes a similar criterion on his podcast to medical staff. He leads a discussion surrounding how scarce resources, particularly ventilators, should be allocated in the midst of the public health emergency overwhelming hospitals. He lays out three main options: 1) provide on a first-come is first-served basis, 2) provide according to age (youngest has priority over the oldest), or 3) provide to those who statistically have more chance of survival. The fellow medical professionals reach a similar consensus, agreeing that although an extremely challenging decision, allocation to those with the most chance of survival is justifiably the most ethical method to take. Focusing on the benefit maximisation, one could perhaps attribute this train of thought to that of a utilitarian. Decisions are made according to future consequences, such as life expectancy of a given patient and their quality of life.

Additionally, there are equally arduous ethical decisions being made in relation to those being placed on the frontline. These not only include health staff, but multiple other keyworkers in sectors such as education, government, food/necessary goods and transport. All are justly playing a pertinent role in maintaining an ordered society. Yet their lives are essentially being put at risk. At first glance this may pose as rather unsettling to many, for the philosopher Immanuel Kant would propose that using a person as a means to an end is categorically wrong. Thusly would perhaps be influenced to take up an argument that you cannot possibly justify the sacrifice of one life for another, sacrificing the lives of frontline workers for their service. Furthermore, it is also fair to assert that COVID-19 has not only affected every societal level imaginable but also on an economic level as well. Despite it being impossible to accurately predict how the events will unfold, it is clear that it will bring about threats and ethical implications concerning the economy. There are a myriad of pertinent issues as a result to which many facets of the industry will have to face and provide fast solutions to.

The crisis has forced many from a rather modern individualistic mindset into a collectivist mindset. One's concerns are less occupied around individual preservation and more acting in the interest of a collective good. This in theory may sound simple but in reality it proves to be challenging, even for those with best intentions. This is a problem that the government faces. They require for all to obey their recommendations, for example ignoring an impulse to panic buy and only buy what is required. They have the power to enforce these behaviours through policing, however the UK government have appeared to appeal to a sense of duty and morality acting in the interest of society as a whole. They use the words "we ask you to" rather than "you must." In doing so invoking a communal spirit to do what is right. They place trust that there will be a following of guidelines purely out of a sense of duty and acting rationally, very similar to the morality proposed by Kant himself. Kant was not interested in consequences, but only in acting rationally for the sake of acting rationally. He emphasised the importance of all following a moral instruction he calls the "categorical imperative", arguing that we should not do things that do not make sense if everyone did not also do them. A relevant example is of course panic buying. To buy more than needed at a supermarket would fail to pass this test, for if everyone were to do the same it would be impossible. Kant points out that one has an innate tendency to make exceptions in the matter of self-preservation. The root cause of this reluctance to put society before oneself is that Kant (and governments) are calling on a population that has committed to individualism for so long to act in a collective interest. In the case of the UK prime minister, Boris Johnson, the hesitation

in enacting strict orders rather than vague directions comes down to a naïve faith in personal freedom, a deep mistrust of state power. Succinctly, it is down to his commitment to the ideals of free market, autonomy and a small state. Only a truly collectivist society would ever have the capability of reaching self-isolation on a mass scale. It is therefore no surprise that so many governments now have to resort to fully enforced lockdowns with policing. Where Kant tried to invoke the power of God to encourage people to act morally, something contradicting his secular philosophy, modern leaders are being forced to invoke the power of the state.

Ultimately, when assessing the myriad of issues that arise as a result of the impending pandemic, it is easy for one to feel lost in the midst of it all. Applying a code of ethics to the situation also poses rather difficult as there exist many different solutions to issue. The pandemic has been a shock to the healthcare system, to the economy, to society and to people and families on an individual basis. Nonetheless, it has also provided a jump-start to moral consciences, perhaps the only positive to come of it all. What was once tolerated as a society (such as low pay for essential workers and income barriers to hospital treatment) suddenly seem abominable. It appears that many are in fact adopting a Kantian mindset, believing in one rule for everyone. Perhaps it is most advantageous to regard the Enlightenment thinker Immanuel Kant as the most suitable guide to the current predicament. After all, a key aspect of his ethical framework is to avoid privileging oneself in moral deliberations. Therefore, allowing one to judge impartially, standing apart from one's own circumstances and to choose what to do rationally in a given situation. It is true that there are many devastating implications of this pandemic, but it is also true that positives have come to light resultingly. Society appear to be working coherently, moving away from a strict individual mindset. Neighbours helping out with shopping, the young looking out for the old, donations being made to foodbanks, volunteers stepping forward, businesses donating money and supplies to hospitals (such as ventilators being produced by Dyson), and the list of all that is being done continues. The pandemic is devastating but what people are attempting to achieve is incredible, potentially outweighing the misery with a collective sense of optimism.