Ethical issues in the COVID-19 pandemic: Are lessons ever learned?

Ross E.G. Upshur, BA (Hons.), MA, MD, MSc, MCFP, FRCPC, FCAHS
Dalla Lana Chair in Clinical Public Health
Head, Division of Clinical Public Health, Dalla Lana School of Public Health
Associate Director, Lunenfeld Tanenbaum Research Institute
Director, Bridgepoint Collaboratory for Research and Innovation
Sinai Health
Professor, Department of Family and Community Medicine and DLSPH
University of Toronto
Albert Camus: The Plague

• Everybody knows that pestilences have a way of recurring in the world; yet somehow we find it hard to believe in one’s that crash down on our heads from the blue sky.

• There have been as many plagues as wars in history; yet always plagues and wars take people equally by surprise.
COVID-19: Make it the Last Pandemic
But the world cannot afford to focus only on COVID-19. It must learn from this crisis, and plan for the next one. Otherwise, precious time and momentum will be lost. That is why our recommendations focus on the future. COVID-19 has been a terrible wake-up call. So now the world needs to wake up and commit to clear targets, additional resources, new measures and strong leadership to prepare for the future.

We have been warned
Sirleaf said: “The situation we find ourselves in today could have been prevented. An outbreak of a new pathogen, SARS-CoV-2 became a catastrophic pandemic that has now killed more than 3.25 million people, and continues to threaten lives and livelihoods all over the world. It’s due to a myriad of failures, gaps, and delays in preparedness and response. This was partly due to failure to learn from the past.”
SARS!
Swine flu fears spur Canada to stock up on ventilators

Warnings that youth are hit hardest by virus point to shortfalls in strategy for pandemic
Ebola
Ebola declared threat to peace and security by UN

Urgent resources and assistance needed to help tackle crisis, UN Security Council says

We urgently need major cooperation on global security in the COVID-19 era
Ebola crisis: Sierra Leone begins three-day lockdown
FEATURE - Liberia Ebola survivors face health problems and fears the virus could return

Source: Thomson Reuters Foundation - Mon, 25 Jan 2016 00:01 GMT

Author: Kieran Guilbert

More news from our correspondents

FEAR, dread, and panic: Some Covid-19 survivors feel stalked by possibility of reinfection

By GABRIELLE GLASER / AUGUST 28, 2020
Seoul a ghost town as South Korea grapples with Mers fear

Health officials are urging people to go about their normal daily activities, saying the rate of new cases is slowing, but in South Korea’s capital the fear is still palpable.

El Salvador’s Advice on Zika Virus: Don’t Have Babies

By AZAM AHMED  JAN 25, 2016
Lessons Learned?
The lesson of SARS: A wake-up call for global health

By Ilona Kickbusch
Published: April 29, 2003

NEW HAVEN, Connecticut—The outbreak of severe acute respiratory syndrome might prove to be the needed wake-up call to strengthen the World Health Organization and other international institutions to ensure global health security.

Just a few weeks after SARS was identified, WHO is calculating that the cost of the disease is already close to $30 billion — roughly the amount of annual donor spending that the WHO says is required to significantly reduce the global infectious disease burden in the
The Ethics of COVID-19 Immunity-Based Licenses ("Immunity Passports")

Govind Persad, JD, PhD; Ezekiel J. Emanuel, MD, PhD

Support grows for a controversial 'human challenge' vaccine study – but no trial is yet planned.
The most important lesson we must learn from this Ebola outbreak regards our inability to learn lessons from past outbreaks. We have hit the snooze button repeatedly and ‘learn’ the lessons all over again when the next outbreak emerges. **We either have collective amnesia or collective narcolepsy.**
Ebola and Learning Lessons from Moral Failures: Who Cares about Ethics?

Maxwell J. Smith*, University of Toronto
Ross E.G. Upshur, University of Toronto

*Corresponding author: Maxwell J. Smith, Dalla Lana School of Public Health and Joint Centre for Bioethics, University of Toronto, 155 College Street, Toronto, Ontario M5T 3M9, Canada. Email: mw.j.smith@utoronto.ca

The exercise of identifying lessons in the aftermath of a major public health emergency is of immense importance for the improvement of global public health emergency preparedness and response. Despite the persistence of the Ebola Virus Disease (EVD) outbreak in West Africa, it seems that the Ebola ‘lessons learned’ exercise is now in full swing. On our assessment, a significant shortcoming plagues recent articulations of lessons learned, particularly among those emerging from organizational reflections. In this article we argue that, despite not being recognized as such, the vast majority of lessons proffered in this literature should be understood as ethical lessons stemming from moral failures, and that any improvements in future global public health emergency preparedness and response are in large part dependent on acknowledging this fact and adjusting priorities. Policies and practices accordingly such that they align with values that better ensure these moral failures are not repeated and that new moral failures do not arise. We cannot continue to fiddle at the margins without critically reflecting on our repeated moral failings and committing ourselves to a set of values that engenders an approach to global public health emergencies that embodies a sense of solidarity and global justice.
Pandemic Playbook

Pandemic/Epidemic Event
1. High early morbidity and mortality in HCP’s and caregivers
2. High levels of uncertainty/lack of evidence
3. Need for public health measures to contain spread
4. Facing scarcity
5. Global issues

Associated Ethical Issues
1. Duty to care/duty to protect
2. Research ethics, pandemic exceptionalism
3. Public health ethics/justification of restrictions
4. Resource allocation/priority setting
5. Global governance: solidarity
Evidence and Effectiveness in Decisionmaking for Quarantine

Cécile M. Bensimon, PhD, MA, and Ross E.G. Upshur, MD, MA, MSc, RPSPC

When public health decision-makers turned to quarantine during the recent severe acute respiratory syndrome (SARS) epidemic, difficult questions were raised about the legitimacy and acceptability of restrictive measures to contain the disease. What are the limits on public health authorities to protect the community at large? When there is uncertainty about the nature and extent of the threat, how do you make choices that affect the rights and freedoms of individuals? This is the challenge faced by governments and public health officials when they decide whether to quarantine individuals or communities.

Vulnerability: A Contentious and Fluid Term

To the Editor: As governments and public health officials respond to the current SARS epidemic, they must be aware of the vulnerability of individuals and communities to quarantine measures. The term "vulnerability" is contentious and fluid, and its meaning can change depending on the context and perspective. To effectively address the challenges of quarantine, it is essential to consider the ethical, social, and political implications of such measures.

The Role of Faith-Based Organizations in the Ethical Aspects of Pandemic Flu Planning—Lessons Learned from the Toronto SARS Experience

Halley S. Faust, University of New Mexico and University of Toronto
Cécile M. Bensimon, Sunnybrook Health Sciences Centre, Toronto and University of Toronto
Ross E.G. Upshur*, Sunnybrook Health Sciences Centre, Joint Cerv University of Toronto, Toronto

Physicians’ legal duty of care and legal right to refuse to work during a pandemic

Cara E. Davies JD, Randi Zlotnik Shaul LL.M PhD

Health Services Research

hospital priority setting: a qualitative case study and

AIDS, HIV, and the Law: rights of persons living with HIV/AIDS

Contextualizing Ethics: Ventilators, H1N1 and Marginalized Populations

Diango S. Silve, Jason X. Nie, Kari Rosenthal, Seithi Salihi and Ross E.G. Upshur on behalf of the Canadian Program of Research on Ethics in a Pandemic

Received 28 May 2004
Accepted 19 December 2004

436 10.1177/0307180X04260671

PUBLIC HEALTH ETHICS VOLUME 2 NUMBER 1 2009 105-112

© The Author 2009. Published by Blackwell Publishing Ltd, 9600 Garsington Road, Oxford OX4 2DQ, UK, and 350 Main Street, Malden, MA 02148, USA

University of Toronto Joint Centre for Bioethics

May 17: 12:22:43 PM

1 of 4

1 of 4

1 of 4

1 of 4
“Stand on Guard for Thee” Report

- 10 substantive values
  - Individual liberty
  - Public good
  - Reciprocity
  - Solidarity
  - Trust
  - Equity
  - Stewardship
  - Proportionality
  - Privacy
  - Duty to care

- 5 procedural values (“A4R”)
Key Concepts

• Community Engagement
• Trust
• Reciprocity
• Solidarity
• Equity
Conclusion

• Ethical issues constitutive to pandemic response but poorly integrated into response
• Abundant research and guidance on all elements of the pandemic playbook
• For the most part, ethical issues not recognized as such and therefore not addressed
How can ethics be better engaged?

• Despite complaints, research ethics guidance well established
• Need better translation of ethics into pandemic response (topic absent in Independent Panel Report)
• Learn from knowledge translation and implementation science
• Better use of health communications
• Better preparation and training of health professionals and policy makers