Wanted: A COVID-19 vaccine that’s safe, effective, and moral

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A patient in New York City is transported at the emergency entrance outside Mount Sinai Hospital in Manhattan April 13, 2020, during the coronavirus pandemic. (CNS photo/Mike Segar, Reuters)

The biopharma sprint toward production of a safe and effective COVID-19 vaccine has everyone’s attention. Some experts predict one of two vaccine producers will be first to reach the finish line: Sanofi-GSK with its Sars-CoV vaccine or Janssen Pharmaceutical (a subsidiary of Johnson & Johnson) with its AdVac vaccine. Careful analysis of the respective production platforms of these COVID-19 vaccine candidates exposes their moral disparity. Sanofi-GSK produces their vaccine using a modified virus cultivated on insect cells. No moral difficulty here. The Janssen vaccine, on the other hand, uses a modified virus cultured on PER C6 cell lines developed from retinal tissue of an 18-week-old, intentionally aborted, baby. Definite moral problem there. By exploiting preborn life and violating the dignity of fetal remains, the production matrix of the Janssen vaccine lacks the moral integrity that should be at the heart of scientific excellence.

Using an abortion-dependent vaccine and cooperation in evil

So, a person interested in doing good and avoiding evil might ask: if the first vaccine to pass safety and efficacy issues were produced within an abortion-dependent platform, would it be morally licit to use it? As if on cue, Ted, a solid pro-lifer who’s very good at anticipating
moral dilemmas, called my office recently and posed that very question: would it be morally acceptable for me to be vaccinated with a COVID-19 vaccine (like the Janssen vaccine, for instance) when its production employs fetal cell lines derived from voluntarily aborted fetal tissue? In other words, would my act of using a vaccine like the one produced by Janssen Pharmaceutical implicate me in the evil act of abortion?

My response to Ted relied on the Church's guidelines on using abortion-dependent vaccines from the Pontifical Academy for Life (Moral Reflections on Vaccines Prepared from Cells Derived from Aborted Human Fetuses, 2005) and on the instruction from the Congregation for the Doctrine of Faith (Dignitas Personae, 2008). I framed my analysis of Ted's question within this hypothetical scenario: the abortion-dependent Janssen vaccine is the COVID-19 “winner,” and Ted has already been vaccinated.

First, I defined basic terms. The two parties brought together by an act of cooperation in evil are the wrongdoer and the cooperator. In this case, the woman who voluntarily had the abortion and subsequently donated her dead baby's tissue to research is the wrongdoer. Ted is the cooperator—the one who, through his act of getting the Janssen vaccine, is brought into cooperation with the evil of the wrongdoer's act of abortion.

Second, I explained the moral difference between two levels of cooperation, formal and material. Ted's vaccination would be formal cooperation in evil if, in getting it, he concurred with the woman's bad will, that is, in her bad intention to abort her baby. But Ted made it abundantly clear that what he intends in getting the COVID-19 vaccine is the specific goods of personal and societal health that come from protection from COVID-19 and suppression of its spread. Since using the Janssen vaccine is the only means by which Ted can accomplish the good he intends (there's no moral alternative available), he merely tolerates the associated evil of abortion. Therefore, Ted is not cooperating formally (illicitly) in the wrongdoer's act of abortion because rather than concurring in, or praising or supporting, the injustice of the act of abortion, he simply tolerates it. Ted is a material (or licit) cooperator in the evil of abortion since he is involved with the abortion for a good purpose and with a good means.

In sum, while Ted's connection to the abortion is only contingent or accidental to its performance, and has little or no chance of provoking scandal (most people have no idea the Janssen vaccine relies on aborted fetal cell lines), Ted is cooperating in the evil of the wrongdoer's act of abortion only materially, that is, nondirectly or mediately. Moreover, Ted can be confident he is cooperating in a morally licit way because his act of getting vaccinated is far removed, both temporally and morally, from the wrongdoer's act of abortion performed in 1985.

The duty to denounce immoral vaccines and promote moral alternatives
In my discussion with Ted, I reiterated that availing himself of an abortion-based COVID-19 vaccine is a morally legitimate form of cooperation in evil and, therefore, something Ted had a right to do. Nevertheless, he must never lose sight of the fact that production of vaccines from aborted fetal cell lines represents an unconscionable exploitation of aborted babies.

The 2005 letter from the Pontifical Academy for Life on abortion-dependent childhood vaccines is very clear about the duty to object to these morally tainted vaccines: “It is up to the faithful and citizens of upright conscience (fathers of families, doctors) to oppose, even by making an objection of conscience, the ever more widespread attacks against life and the ‘culture of death’ which underlies them [abortion-dependent vaccines].” *Dignitas personae* is equally forceful: “Thus...danger to the health of children could permit parents to use a vaccine which was developed using cell lines of illicit origin, while keeping in mind that everyone has the duty to make known their disagreement and to ask that their healthcare system make other types of vaccines available.”

Therefore, to avoid any kind of passive cooperation in abortion, Ted must carry out his corresponding duty to denounce publicly the abortion-dependent Janssen vaccines and/or to lobby for an abortion-free alternative vaccine.

Next I brought Ted from the hypothetical of our discussion to the reality at hand. Until he knows which COVID-19 vaccine candidate comes to market first, Ted should continue to do his homework, distinguishing the morally good vaccines from the bad. At the same time—while the vaccine candidates are in the process of development and testing—Ted can begin to carry out his duty to denounce publicly unethical vaccines (like Janssen's) and to openly promote morally sound ones.

**Call to action**

In talking to Ted, I outlined a plan of action—concrete ways he can fulfill his duty to engage pivotal actors in his fight for a moral COVID-19 vaccine.

**Political leaders:**

Look up the letters to President Trump from pro-life congressional and Senate leaders advising the president not to capitulate to criticism of his ban on taxpayer funding for aborted fetal-tissue research. If you find your congressperson or senator among the signatories, rally your pro-life friends to call or write these politicians urging their continued pressure on both the Trump administration and on FDA Commissioner Stephen Hahn to approve only a vaccine derived in an ethical manner.

Urge the federal lawmakers representing you to introduce legislation that would require all American universal vaccines to be produced free of reliance on aborted fetal tissue/cells.
Organize a peaceful demonstration in front of the FDA headquarters, stressing the theme: what Americans need now is a COVID-19 vaccine that's safe, effective, and morally sound. Or a variant theme: What Americans don't need is another universal vaccine that relies on the use of aborted fetal cell lines. As the 2005 letter from the Pontifical Academy of Life points out, the childhood vaccines for rubella (or for measles, mumps and rubella [MMR]) use the WI-38 cell line with “human diploid lung fibroblasts coming from a female fetus that was aborted because the family felt they had too many children,” while vaccines against hepatitis A, chicken pox, poliomyelitis, rabies, and smallpox use the MRC-5 line with “human lung fibroblasts coming from a fourteen-week male fetus aborted for ‘psychiatric reasons' from a twenty-seven-year woman in the United Kingdom.”

Church leaders:

Invite your friends to join you in writing or calling your bishop, as well as Bishop John F. Doerfler, chairman of the USCCB Subcommittee on Healthcare Issues. Ask these religious leaders to keep up the pressure on the Trump administration, on the Food and Drug Administration, on the Centers for Disease Control, on the National Institutes of Health, and on legislators to consider seriously your moral objection to abortion-dependent COVID-19 vaccine and your moral preference for an abortion-free vaccine.

Pharmaceutical companies and academic centers:

Write a letter of protest to the pharmaceutical companies or universities that are in the process of producing/testing abortion-dependent vaccines. Write a letter praising the vaccine producers who have invested their time and resources in vaccines that do not rely on aborted fetal cell lines. Pose this hypothetical: if your vaccine and another that is abortion-dependent should reach the finish line about the same time, what are the possibilities of mass-marketing both vaccines, providing those who conscientiously object to abortion-dependent vaccines a morally viable alternative?

Hospitals and hospital systems:

Write or talk to the ethicist or ethics committee at your local hospital(s) or at the hospital system level. Enlist their help in finding efficient and creative ways to lobby pharmaceutical vaccine producers to insure the COVID-19 “winner” vaccine will not only be safe and effective but unhampered by the exploitation of preborn life.

Pro-life organizations:

Financially support organizations committed to: the dignity of preborn human life through accurate scientific analysis and moral critique of all the COVID-19 vaccines, the development of an abortion-independent COVID-19 vaccine, and the promotion of ethical alternatives to fetal tissue research.
My final counsel for Ted? *Pray as though everything depended on God. Work as though everything depended on you* (St. Augustine).