

The Interim Plus + + + + +

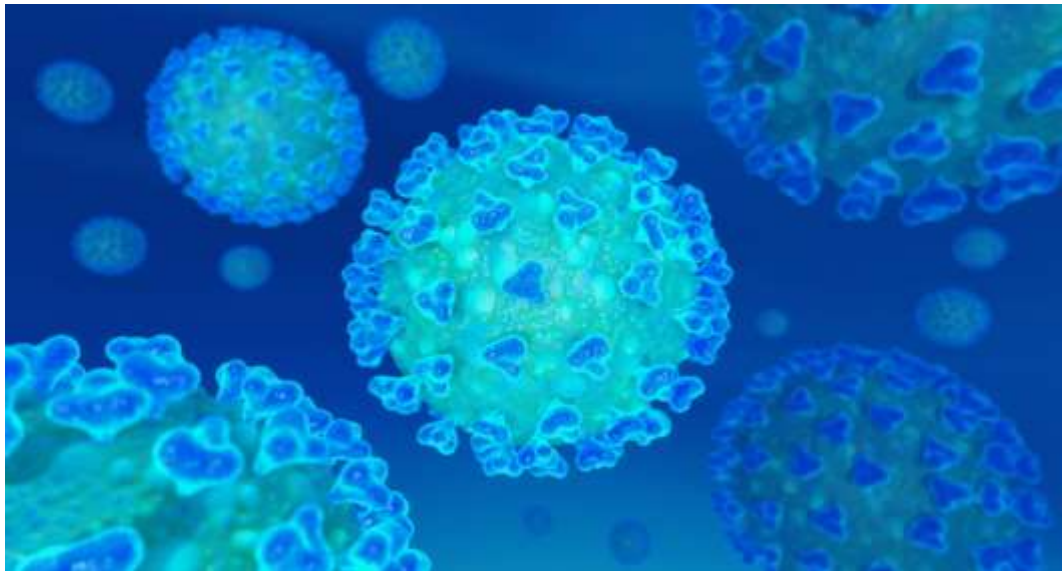
Curriculum Learning Resource

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The *Interim Plus* is a curriculum learning resource specifically designed to assist teachers in integrating life issues, from a moral perspective, into their lesson planning. The periodical is published bi-monthly by *The Interim Publishing Company*, 157 Catherine St. North, Hamilton ON L8L 4S4 416-204-1687 interimplus@theinterim.com
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Things are not normal. We have been living with and coping with a nasty pandemic. This fall edition of *The Interim Plus* +++ curriculum resource features the pandemic crisis that has raged across the planet since last December. The Covid-19 coronavirus has greatly impacted societies in all aspects of human life. The whole ongoing experience has raised questions, sown doubt, engendered fear (justified or not) and inspired courage at the same time.



The topic can be explored from any number of angles. We suggest the teacher assign a few select aspects to different groups within the class. Each study group could have 3 students as members and they would research and report on their assigned topic. The subject is too vast and complex to deal with as a single issue. The ramifications are all-encompassing. We have tried to provide useful internet links as well as an introductory narrative to the sections and finally some questions to guide reading, viewing and class discussion.

Part A: The Pandemic, Its Origins, Lethal Nature and Spread

There is much controversy regarding the origins of the virus known officially as COVID-19. Was it from a Wuhan fish, meat and live animal market? Was it manufactured in a research lab? If manufactured, was it released accidentally or deliberately? Did it simply evolve naturally from previous viruses? Are there Covid-19 mutations?

Theories abound. There seems to be no consensus agreement on this question of origin. or even when it started, sometime in 2019, early in that year, summer, fall? Everyone does agree that geographically it originated in China and was spread by Chinese and other travellers to the rest of the world.

Our perception of the world and our understanding of events are based on our own personal experience and the quality of information that we receive. Our knowledge and understanding of the pandemic crisis is evolving. Even after living with it and studying it for almost a year, scientists, health experts and other public authorities are not in agreement. Who are we to believe as to its origins, spread, and degree of danger? There are also considerable differences of opinion when it comes to the best ways to keep vulnerable people safe from being infected and what strategies should be adopted to mitigate the effects of the illness.

Since it appears that most Covid-19 related deaths were those of older people (over 75 years old) and living in nursing and retirement homes, are the huge restrictions really necessary and how much damage has been done by the lockdowns?



Numbers suggest that violence, abuse, drug addiction, alcoholism, and suicides are rising. Health systems may have been impaired or made it impossible to attend to others who had medical appointments and surgeries scheduled and then postponed. How many of these people end up dying because of the postponement? How many have had their life expectancy reduced as a consequence? Would people willingly accept an *app* that warned them of an infectious person being nearby?

Image <https://www.wired.com/story/how-ai-tracking-coronavirus-outbreak/>

Answers to these types of questions will depend on our sources of information and reliability of data. We can be easily manipulated by the internet, by algorithms, charts, computer models, scientific/medical daily briefings, political decisions, and by our own fears. Here are some internet sites that are worthwhile exploring, but, with the usual caveat, consult the source, trusting it to some extent, but verify by noting dates of publication and crosschecking and comparing multiple sources.

<https://www.nature.com/articles/s41591-020-0820-9>

<https://www.nature.com/articles/s41564-020-0771-4>

<https://www.sciencemag.org/news/2020/09/biologist-helped-trace-sars-bats-now-hes-working-uncover-origins-covid-19>

<https://www.biorxiv.org/content/10.1101/2020.06.25.171744v1>

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7295489/>

<https://www.sciencedaily.com/releases/2020/03/200317175442.htm>

<https://www.cdc.gov/coronavirus/2019-ncov/cdcresponse/about-COVID-19.html>

<https://www.sciencemag.org/news/2020/09/biologist-helped-trace-sars-bats-now-hes-working-uncover-origins-covid-19>

<https://www.youtube.com/watch?v=3bXWGxhd7ic>

<https://www.youtube.com/watch?v=cav-OCuNmBI>

<https://www.youtube.com/watch?v=3K3fy5eKeuM&list=PLzR3kwmG1G38oquT4ZYT3NuFk0T51Lg8t&index=134&t=0s>

<https://poddtoppen.se/podcast/1440051086/prognosis-coronavirus/the-true-origins-of-the-virus>

<http://www.alexberenson.com/an-excerpt-from-part-2-of-unreported-truths-a-brief-history-of-lockdowns/>

Questions

1. What are the key problems in getting at a clear understanding of the problems presented by the challenges of the Covid-19 pandemic?

Part B: The Pandemic and Government Reactions, Democracy, Taxes

Why did people so promptly acquiesce to government restrictions? Was it blind trust or fear? In Canada most seem to feel that in comparison with other nations (especially our neighbour to the south) the situation has been handled very well. Recent provincial election results seem to bear this out as the ruling governments have been re-elected regardless of their

party status (Conservatives in Nova Scotia, NDP in British Columbia) and the Trudeau Liberals are enjoying good standing in the polls despite many scandals. But, others argue that the response has been spotty and somewhat exacerbated by the Prime Minister's disabling Parliament by first limiting sittings and then proroguing Parliament altogether for a month. The government has spent huge amounts of money to stem the worst economic effects caused by the lockdowns. Opposition parties want real opportunities to ask questions about the government's policies in order to hold them accountable. They see that as their duty within a responsible system of government.



Image <https://www.bcna.ca/2020/03/the-coronavirus-explained-what-you-should-do/>

Nathan McDonald (<https://goldsilverfinancialnews.medium.com/get-used-to-it-covid-19-taxes-are-coming-will-remain-indefinitely-b4b1071f6f59>) as early as May, predicted that governments in Canada would have to introduce new taxes to pay for the generous relief plans enacted “*in a desperate attempt to keep their economies afloat.... Led by Prime Minister Justin Trudeau, Canada has decided to take a very socialist approach throughout this crisis, handing out fistfuls of money to just about everyone across the country and essentially putting in place a form of "universal income" in the short term.*

McDonald explained that “*program after program... is being enacted to: keep the economy afloat during a governmentally enforced economic shutdown; and keep people pacified and happy with the sitting government.*” And as he notes, “*governments can do this because they know that they are ultimately not going to be the ones paying for the stimulus programs—the people are....During these times of herculean expenditures and the immediate time period that follows, it has been a common tactic of governments to introduce new taxes to help pay for them.Take the income tax, for example, which was introduced on a temporary basis in 1917 to pay for the war effort. It has never gone away. The new tax too will be presented as being ‘temporary’—and heralded as a collective effort to pay down the historic amount of debt accumulated during the Covid-19 crisis.*

Governments elsewhere have been forced to adopt similar approaches, spending lavishly on public measures to frantically stave off the consequences of massive unemployment and avoid the total collapse of their economy due to the extreme actions taken to control the pandemic. They too will have to reckon with this problem of excessive public deficits and debt, not to mention the possible catastrophic devaluation of currencies or elimination of liquid cash as a means of conducting everyday transactions in the marketplace.

Who knows, perhaps people are making a choice in favour of safety and therefore willing to compromise their economic and other freedoms to be physically secure. Fear of death for oneself or for family members may lead people to panic, to hysteria and thus more susceptible to accepting drastic measures to remove that fear. They may be willing to give in to accept and trust the leadership, at various levels, unquestioningly.

There are dissident voices who question the vast expenditures and caution fiscal prudence. Governments should not burden future generations with this accumulating debt. Others also wonder out loud as to what political calculations are involved in the research, collection and dissemination of information regarding diseases in general and Covid-19 in particular. Certainly there are groups, companies and agencies that get funding from governments and from research foundations. Decisions may be influenced by these economic factors and freedoms may be sacrificed to some extent for the sake of a quick response to the health challenges.

On the international stage the World Health Organization concealed vital information regarding the origin and spread of the pandemic. Some accused the WHO of colluding with the Chinese Communist Party in this regard. Based on either fear or over zealotry or lack of real reliable information, governments imposed quarantines and lockdowns on their people. The drastic measures were introduced for the sake of public safety, it was explained. But after

the initial lockdown of three weeks (then extended to a couple of months for the sake of “flattening the curve”) there have been outbreaks of dissent in many parts of Europe and North America against the strategy of sustained lockdowns or renewal of same under the “second wave” surges. People, increasingly, are seeing it as an infringement of their freedoms. In different countries there has been push back on what governments have imposed, for example, in Ireland, US, Germany, U.K, France, Italy, Canada, Poland.

[Image vox.com](https://www.vox.com)



Many have questioned the rigour and length of the “lockdowns” as not worth the cost, since the harmful effects are worse on the poor, less educated and racially marginalized since these people are more susceptible to the coronavirus because of living conditions and type of jobs that they may hold. People rebel when the control measures take away personal liberty, reduce capacity to work and earn a living, and restrict sociability within groups, circle of friends and even within families.

One critic of extreme lockdowns stated that “*experience has shown that communities faced with epidemics or other adverse events respond best and with the least anxiety when the normal social functioning of the community is least disrupted.*” (<http://www.alexberenson.com/an-excerpt-from-part-2-of-unreported-truths-a-brief-history-of-lockdowns/>)

Another group’s extensive studies lead to this sombre conclusion: “*The Covid-19 pandemic has fueled a crisis for democracy around the world. Since the coronavirus outbreak began, the condition of democracy and human rights has grown worse in 80 countries. Governments have responded by engaging in abuses of power, silencing their critics, and weakening or shuttering important institutions, often undermining the very systems of accountability needed to protect public health.*” They cited examples of governments taking repressive measures, for example, in Sri Lanka where the government “*stepped up efforts to control independent reporting and unfavorable speech by ordering the arrest of anyone who criticizes or contradicts the official line on the coronavirus.*” (<https://freedomhouse.org/report/special-report/2020/democracy-under-lockdown>)

With the benefit of hindsight, even WHO officials are now voicing concerns over lockdowns. David Nabarro, a candidate for the position of director-general of the World Health Organization recently (October 11) urged governments to halt lockdowns as the primary means of controlling spread of the virus. Nabarro said that: “*The only time we believe a lockdown is justified is to buy you time to reorganize, regroup, rebalance your resources, protect your health workers who are exhausted, but by and large, we’d rather not do it.*” According to him the collateral damage that lockdowns are having worldwide, especially among poorer populations, is devastating: “*Just look at what’s happened to the tourism industry, for example in the Caribbean or in the Pacific, because people aren’t taking their holidays. Look what’s happened to smallholder farmers all over the world because their markets have got dented. Look what’s happening to poverty levels. It seems that we may well have a doubling of world poverty by next year. Seems that we may well have at least a doubling of*

child malnutrition because children are not getting meals at school and their parents, in poor families, are not able to afford it.”

Lockdowns are making poor people an awful lot poorer. Apparently, others are now expressing similar concerns. A number of medical or public health scientists and medical practitioners have signed the **Great Barrington Declaration**, which states that “current lockdown policies are producing devastating effects on short and long-term public health.” The declaration states: “The most compassionate approach that balances the risks and benefits of reaching herd immunity, is to allow those who are at minimal risk of death to live their lives normally to build up immunity to the virus through natural infection, while better protecting those who are at highest risk.”

https://www.theepochtimes.com/who-official-urges-world-leaders-to-stop-using-lockdowns-as-primary-method-against-ccp-virus_3534230.html?utm_source=newsnoe&utm_medium=email&utm_campaign=breaking

The WHO continues to stress that the problem is global in nature and as such requires the cooperation of states and scientists across the political spectrum and from all continents. Because of urbanization, population growth and the rapid movement of people and goods across borders, the global pandemic risks have been greatly heightened.



image [washingtonpost.com/opinions/2020/06/23/era-covid-19-our-fear-doesnt-have-define-us/?arc404=true](https://www.washingtonpost.com/opinions/2020/06/23/era-covid-19-our-fear-doesnt-have-define-us/?arc404=true)

Geopolitics and the global economy are being impacted: “if nations do not share real-time information about such diseases that really makes it extremely difficult to control. Then we are faced with terrible consequences, with markets falling, unemployment rising, supply chains breaking, and hysteria increasing. On top of all this, the shutdowns create more problems as cabin fever spreads and people rebel against the restrictions.” (<https://www.axios.com/pandemic-coronavirus-global-risk-a9203d75-8ddb-4e04-94d5-76ab66fae026.html>)

It is also wise to point out how things were seen at the very beginning. Here is an article first published on March 10 by Liz Specht, entitled *What does the coronavirus mean for the U.S. health care system? Some simple math offers alarming answers.* (How accurate were its projections for the United States?) It is amazing how far off this person’s opinion proved to be as to masks, beds, hospitalizations, deaths etc.. The projected statistics proved to be wildly and grossly inflated but it helped create the necessary sense of fear or panic, enough to have people submit to the governments’ draconian policies which continued unabated or being reinstated in places. <https://www.statnews.com/2020/03/10/simple-math-alarming-answers-covid-19/>.

The pandemic has raised many questions about human behaviour, what is important to people, and the meaning of many things either taken for granted or too highly prized in normal times. Celebrities, athletes, movie stars and even politicians are at odds with the common people like truckers, care workers, bus drivers, grocery clerks, garbage collectors, nurses, etc. who have been taking the risks and keeping society functioning, moving goods and providing essential services. People are beginning to realize that the impact of the pandemic has not been equitable. Working from home has been a luxury of the wealthy because the digital infrastructure has already been created. Public health policies during the pandemic should put the interests of the least well-off at their centre. The latter do not have that option of working from home and they are taking the risks on behalf of the others and they usually receive less remuneration as well.

But on the international stage there has been some growing tensions as nations erect barriers, tariffs and engage in a sort of global blame game further intensifying tensions between nations as they try to cope with the negative fallout of the pandemic. The adoption of quarantines and travel bans across the world is causing friction between nations and devastating certain sectors of the world economy like travel and tourism along with the airline and cruise ships that normally would serve this sector.

There has been a growth of hostile sentiments in various regions between nations as well (South Korea and China, Japan and China, United States and China). The latter has been blamed for much of the troubles unleashed by the virus that they failed to control and which infected the rest of the world.

In Europe the virus first broke out in Italy and quickly spread to the rest of the continent. The European Union has not acted in unison, but each nation has tried to look after its own people, thus creating rifts and distrust in the EU. As the political pressure mounted and economic effects ensued (unemployment, closed businesses, etc.) there was the obvious increasing danger that EU countries would take self-interested and uncoordinated actions.

The thinly veiled divisions within Europe flared up under the pressure illustrated by how nations reacted to the needs of those who suffered most economically. The Netherlands, Austria, Germany and Finland among others, opted for tough measures in terms of loans and the strict conditions attached to them, while France, Spain and Italy argued for easier terms. A sort of compromise was cobbled together trying to demonstrate “unity”.

The EU countries were also greatly concerned with a renewal of refugee pressure on their borders because of economic dislocation occasioned by the pandemic. Overcrowded refugee camps in Europe and the Middle East are vulnerable to the spread of contagion. These camps may swell further because of the unstable war-torn areas like Syria, Lebanon, Iraq, Afghanistan.

Many observers of public affairs have proffered opinions and commented on the effects of the coronavirus on politics and society. As early as February some felt that many governments were fuelling panic with excessive precautions. Others noted that microbes adapt and humans must also adapt because things have become more fragile from a public health point of view. Certain developments - like mass transport, climate change, increasing urbanization of the world’s population, the expansion and intensification of agriculture, increasing livestock farming and a steady deforestation have increased contact between humans and animals and made possible the easier transmission of viruses between species.



Image surreynowleader.co

One point was driven home, namely that nations must collaborate among themselves. Pandemics could be globally catastrophic, and nation-state governments might have to give up some sovereignty and control in order to save themselves and save others. The invisible virus respects no borders. Nations are obliged to build an information exchange system founded on trust, transparency, speed, and comprehensiveness.

And yet, pressures for self-defence still led some leaders to take old political action that now in retrospect may well have saved a significant number of human lives. Among such actions can be included China’s action to quarantine Wuhan city in Hebei province and President Trump’s closing of the flights from China and Europe.

<https://www.firstthings.com/web-exclusives/2020/04/freedom-isnt-just-another-word>

<http://www.alexberenson.com/an-excerpt-from-part-2-of-unreported-truths-a-brief-history-of-lockdowns/>

https://www.theepochtimes.com/who-official-urges-world-leaders-to-stop-using-lockdowns-as-primary-method-against-ccp-virus_3534230.html?utm_source=newsnoe&utm_medium=email&utm_campaign=breaking

<https://www.axios.com/panndemic-coronavirus-global-risk-a9203d75-8ddb-4e04-94d5-76ab66fae026.html>

<https://freedomhouse.org/report/special-report/2020/democracy-under-lockdown>

<https://www.statnews.com/2020/03/10/simple-math-alarming-answers-covid-19/>

<https://www.ft.com/content/fd8bfd8a-5a25-11ea-abe5-8e03987b7b20>

<https://www.thinkglobalhealth.org/article/politics-coronavirus-outbreak>

<https://www.eurotopics.net/en/236052/how-coronavirus-is-changing-our-lives>

<http://www.alexberenson.com/an-excerpt-from-part-2-of-unreported-truths-a-brief-history-of-lockdowns/>

<https://goldsilverfinancialnews.medium.com/get-used-to-it-covid-19-taxes-are-coming-will-remain-indefinitely-b4b1071f6f59>

Questions

1. Why and how was a lockdown adopted as a strategy? Are societies coming together or fragmenting under the social and economic pressures created?
2. Can shutdowns create a circular economic conundrum - no buyers because they are out of work - people afraid to go out either to buy or to work - so the fear feeds economic paralysis?
3. Why did some nations not adopt that strategy, but opted for a different, less drastic approach?
4. Are governments saving their people from medical chaos and harm, or have they made the situation intolerable in the long run? How much freedom are people willing to surrender in a fit of panic?
5. Why are some observers skeptical about some moves by governments and also questioning about the role of the World Health Organization?
6. In what way has the pandemic affected the general population inequitably and why?
7. Trust is essential for the sick and the healthy, but, as the coronavirus spread, people came to see each other as a source of infection. What would this do to societies based on trust and closeness?
8. What negative or positive impact has the pandemic had on international relations and tensions between nations?
9. Weigh the possible consequences of a Covid-19 tax being introduced in Canada to help pay for the huge deficit created by large expenditures on the pandemic?

Part C: The Pandemic and Science, Race for the Vaccine

There is a race to develop an effective vaccine that will protect people and render them immune to the virus. That is the hope. The race is not limited to American universities and drug companies. It is run all over the world. Russia has announced a vaccine. The United States claims to have 5 or 6 different companies on the verge of completing the research and volunteer clinical trials. Britain has companies working on the same thing and also Canada, China, and Israel. The task is very expensive. Tremendous resources are being thrown at it. But the financial rewards may be huge.

The students ought to be looking at definitions (e.g., what is a vaccine?), funding, essential steps, rate of development, concerns that may have developed along the way, the likely launch dates, and the preparedness or willingness of the general public to actually take a vaccine. There are enormous challenges and a lot of distrust despite the hopefulness of what the American government, in particular dubbed “operation Warp Speed”. Precisely because of the rapid pace of the development, many will be reluctant to take it because it will not have been done over a normal period of time, instead hurried and without respecting the usual steps and protocols in place for previous vaccines. Many ask the question of whether the vaccine can be trusted given the furious pace at which the pharmaceutical research teams have been working.

But the point has also been made that the research and regulatory approval process for new vaccines and medicines must change and speed up because during these kinds of “outbreaks there is neither the luxury of time nor money”.

Generally, the research teams are concentrating on three broad approaches to controlling and eliminating the virus: antiviral drugs that directly affect the coronavirus's ability to thrive inside the body; drugs that calm the immune system; and antibodies that can target the virus, taken from either survivors' blood plasma or made in a lab. In short, there are constant efforts to develop drugs (like remdesivir, regeneron, dexamethasone, etc.) which will reduce the worst consequences of the infection.

[Image theeconomist.com](https://www.theeconomist.com)



One unusual report mentions efforts to **rewrite or recode** the human genome. These research efforts could offer new modes of virus resistance, but the technology involved raises serious bioethical concerns. Sophie Fessl asks *Can We Protect Against Coronavirus by Rewriting Our Genomes?* (<https://daily.jstor.org/can-we-protect-against-coronavirus-by-rewriting-our-genomes/>). Fessl reports that a group of scientists are trying to prevent infections by editing the human genome, that is, creating a virus-resistant human cell line. This immunity would include all viruses. Fessl explains that “in the human genome each gene is written in a ‘four-letter alphabet,’ with the letters corresponding to four chemical bases: adenine, thymine, guanine and cytosine (often referred to as A, T, G and C.) Recoding would mean changing the way in which a cell uses and translates this genetic code, a process that has evolved over millions of years, with the goal of conferring viral immunity....The genetic code contains apparent redundancies. Genes instruct the cell to select among 20 amino acids, which are the building blocks of proteins. How the cell strings together amino acids to form a functional protein is determined by triplets of bases, referred to as codons. The codon TCA, for example, stands for the amino acid serine. TCA tells a part of the cellular machinery, the tRNA, to grab serine and add it to the growing protein. Another codon, TAC, tells it to grab and add tyrosine. TAA, on the other hand, is a stop codon, and tells the cellular machinery to stop adding amino acids. But AGT also means serine, as do a number of other combinations.....GP-write proposes to optimize this code. Optimizing would mean that, out of all the codons that code for serine, only one gets picked—for instance, TCA. Any instances of redundant serine codons, like AGT, are then replaced with a chosen codon. This frees up the redundant codons to take over new functions. For instance, a freed-up codon could code for one of the hundreds of amino acids out there, rather than just the 20 that living beings currently string together into proteins. Organisms could produce novel enzymes and other proteins, unlike those made by living beings so far.” But in the end Fessl concludes her report with a warning: “The technique has not produced anything as yet and with the danger that the technique also can be put to nefarious uses, producing and engineering infectious viruses, the opposite of what GP-write’s scientists set out to achieve....For practical and ethical reasons, making humans virus-resistant will have to wait. And genome recoding likely will not provide an answer to the coronavirus pandemic.”

Has Covid-19 Been Handcuffed? (August 11, 2020 by David F. Coppedge) tells of a grad student and a large American team finding a molecule that puts SARS-CoV-2 into a straitjacket. If it works, Michael Schoof, that grad student, could be a world hero. The press release said: *Led by UCSF graduate student Michael Schoof, a team of researchers engineered a completely synthetic, production-ready molecule that straitjackets the crucial SARS-CoV-2 machinery that allows the virus to infect our cells. As reported in a new paper, now available on the preprint server bioRxiv, experiments using live virus show that the molecule is among the most potent SARS-CoV-2 antivirals yet discovered.* (<https://crev.info/2020/08/has-covid-19-been-handcuffed/>)

Meanwhile the race for the magic vaccine has motivated scientists all around the world. They know the great rewards that await the team or pharmaceutical company that succeeds as being the first. Billions of dollars of profit and international fame will crown the achievement, not to speak of potential Nobel Prizes and the praise and gratitude of people everywhere. But they need to be held to ethical research methods, not cutting corners or tampering with the nature of the human species itself.

<https://www.bloomberg.com/features/2020-coronavirus-drug-vaccine-status/>
https://www.euractiv.com/section/health-consumers/special_report/transparency-in-the-race-for-a-covid-vaccine/
<https://www.nature.com/articles/d41586-020-02926-w>
<http://www.biotech.ca/canadian-solutions-for-global-pandemic/>
https://journals.lww.com/ajnonline/Fulltext/2020/10000/The_Race_to_Develop_a_COVID_19_Vaccine.7.aspx
<https://www.euronews.com/2020/10/21/coronavirus-vaccine-the-story-of-the-race-to-solve-the-covid-conundrum>
<https://sciencepolicy.ca/response-covid-19>
<https://www.ctvnews.ca/health/coronavirus/canadian-scientists-fight-coronavirus-pandemic-on-dozens-of-fronts-1.4863352>
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7331554/> <https://jamanetwork.com/journals/jama/fullarticle/2768397>
<https://www.the-scientist.com/careers/science-and-policy-collide-during-the-pandemic-67882>
<https://www.wsj.com/articles/what-the-pandemic-has-taught-us-about-science-11602255638>
<https://www.forbes.com/sites/startswithabang/2020/04/07/the-3-ways-science-will-get-us-through-the-covid-19-pandemic/#7efc5d452fc3>
<https://policyoptions.irpp.org/magazines/march-2020/the-coronavirus-pandemic-canadas-response/>
<https://ppforum.ca/wp-content/uploads/2020/06/ScienceDisinformation-PPF-June2020-EN.pdf>
<https://theyee.ca/News/2020/08/11/Science-Journals-Eliminating-Pandemic/>
<https://www.bbc.com/news/health-52354520>

Questions

1. What is science doing about the pandemic in addition to having identified its genome, investigating how it spreads and whether it may mutate?
2. What are some surprising breakthroughs?
3. Are effective vaccines likely to be developed?
4. What may make the general population skeptical and therefore reluctant to take a vaccine?
5. Are all vaccines produced from ethical sources? How does this complicate matters?
6. Would you take a vaccine, why or why not?



Part D: The Pandemic and Globalization, Migration Pressures

Globalization

One of the consequences of the coronavirus is that it looks likely to become a catalyst for deglobalization.
 Image velocityglobal.com

deglobalization. Who knows whether this in turn will be a good thing or not. At the centre of this will be the decoupling of the Chinese economy with developed economies and the US in particular. The world's three largest free economies – the European Union, the United States and Japan – are all drawing up separate plans to lure their companies out of China. Globalization is a complicated issue and its benefits and disadvantages, moreover, are not equally shared. Globalization perhaps is good for multinational corporations and Wall and Bay Streets as it opens up opportunities to produce goods at lower costs and to sell them along with services to much larger markets with greater profits.

The biggest problem for developed countries is that jobs are lost in the process. Supporters of globalization point out that it has brought about cheaper imported goods. But this benefit does not offset the decline of jobs and depressing of wages. Another problem for developed countries is that they lose domestic fiscal revenue when countries move production elsewhere. In developed nations like the US and Canada the process has cost not only many jobs, but also steadily increased the trade deficit and public debt.

China has been the biggest beneficiary of globalization. Since it joined the World Trade Organization in 2001, China has leapfrogged France (in 2005), Britain (in 2006), Germany (in 2007) and Japan (in 2010) to become the world's second-largest economy. But the pandemic and its multifaceted fallout has made the resolution of tariff problems and trade deficits more difficult. China has been blamed for the outbreak of the pandemic and that has placed it in a defensive posture.

Politicians, policymakers and business executives in developed economies have come to realise the hazard involved in over-reliance on China for critical supplies, particularly for medical equipment, pharmaceuticals and medicines.

Globalization and democracy was thought to go hand in hand but that has not been the case with China. For that and other strategic reasons the Trump administration in December 2017 classified China as a strategic rival that aimed to "undermine the American economy, values and interests". It is thought that the pandemic is accelerating the decoupling of many nations trade and production reliance on China.

The critics of globalization are quick to point out that the global spread of Copvid-19 has exposed the fragility of a globalized system of production, consumption and trade. The reduction of the international flow of money, goods, and people seems to have been abrupt and harmful to the well being of people everywhere. People are losing trust in those global networks forcing governments to rethink international travel, immigration, supply-chain risk, export controls, information sharing, etc.

Even before the outbreak of the coronavirus the systemic challenges within globalization had received blistering criticism from political leaders like Donald Trump. He partially got elected by creating and riding a populist wave as he targeted the global economic elite as the enemy of "the people." Trump challenged that elite and their orthodoxy of free trade by imposing tariffs on allies and adversaries alike and by withdrawing U.S. participation in big trade pacts, like the Trans Pacific Partnership and renegotiating existing trade treaties like NAFTA to get better terms for his own nation. As a consequence many fear that the pandemic may very well contribute to a trend of greater fragmentation of the world trade system.

The answer may be economic integration on a regional and bilateral level rather than globalized networks. Because of domestic political pressures the debate in many countries may focus on globalization's losers and the ways to protect workers from economic damage. But the problem with America First or Canada First or France First, etc. is that the preferred remedy, protective tariffs, may make many problems worse, not better. Leaders and advisers have to figure out how to protect workers without undermining globalization's economic benefits, including a higher standard of living for all.

Immigration



Yet another potentially destabilising consequence of the pandemic is human immigration. There is always a movement of people from one country to another. They emigrate or leave their country of origin for a host of reasons and most often legally, peacefully. They freely choose to leave one country by following an established protocol for entering another country. The receiving nation in turn agrees to accept the immigrant for any variety of reasons - skills, age, language, profession, religion, family reunification or entrepreneurship. [Image visplace.com](https://visplace.com)

The movement of people does not happen in a vacuum. It presupposes the existence of national identities, geographical boundaries, and defined borders between countries. The proper word for this movement of people is immigration, not migration, as the latter word as used by media is made to connote "open borders", no national identities.

Before the COVID-19 lockdown, Canada had a plan to welcome over 1 million new permanent residents between 2020-2022. Canada's newest immigrants before 2020 were coming (top ten sources) from India, China, Philippines, USA,

Nigeria, Pakistan, Syria, France, Iran and Brazil. Canada has also been one of the most generous in accepting refugee immigrants.

With respect to immigration policies and expectations there are several general models followed by receiving nations. Some nations favour or insist upon a policy of assimilation according to which the newcomers must fully embrace the receiving society's national identity and values (traditionally, the United States would have been in this category). Another approach is that of adopting multiculturalism wherein new immigrants are allowed to retain their cultural identities while the host society accommodates itself to these new cultures (Canada is an example of this approach). A third way is that of integration, some diversity is tolerated but national unity, values and identity of the host nation must be maintained. Many European nations are in this last category, but now are experiencing second thoughts, as many newcomers are not embracing the basic values of the host country. Some European nations fear the loss of ethnic identity. For example, Sweden went from no immigrants to 16 per cent very quickly. This has created tensions, with native citizens seeing foreigners as disrupting the sense of Swedish community and identity. Other places in Europe are taking on a similar attitude to control differences.

However, despite these concerns, in the long term, immigration is looked upon as beneficial and even necessary to compensate for the falling birth rate in most European nations. Immigrants usually mean high fertility rates and thus helps provide nations with a younger workforce and optimistic outlook. Pension payments to retired workers would become impossible if a young work force is not in place.



Creator: (David Ramos/Getty Images) | Credit: Getty Images

Some observers have gone to the extreme of suggesting that instead of countries guarding their borders and fighting for foreign workers, it should be left to the United Nations to properly distribute and reallocate immigrants of all kinds and place them where needed. National sovereignty is not going to be surrendered so this idea would not fly any time soon. Others argue that the global pandemic reduces even further the possibility of such a course of action, given the nature of the pandemic and most nations will not risk exposing its citizenry to a highly infectious disease..



Image theconversation.COM

What has happened to immigration levels because of the pandemic? Border restrictions have cut down drastically the numbers able to enter host countries. At the same time the refugee problem has worsened and prevented them from leaving a contagious area. Consider the impact that normal immigration plans were expected to have on the growth of world population and its spread or distribution across the various continents and individual nations. The United Nations projects an increase in population from 7.6 billion in 2017 to 8.6 billion by 2030 and to 9.8 billion in 2050. However, this increase is likely to be rooted in developing countries whereas developed countries will actually experience a population decline around 2040 or 2050.

Immigration contributes immensely to population growth and the developed regions have grown as a result. In fact, it is projected that starting after 2020, immigration will be the primary source of population growth for developed regions. However, by 2050, it is projected that immigration will no longer be sufficient enough to compensate for the deaths over births in developed regions, and as a result the population of developed regions will begin to decline. In developing regions, emigrations will not play much of a role in stemming population growth as the fertility rates continue to be higher and thus will maintain the level of growth despite the emigration of some to developed nations.

Some fear that the pandemic threatens this natural pattern or regular flow of people from developing/overpopulated regions to developed but underpopulated regions which are desperately in need of young workers to keep their economies running smoothly.

<https://www.theguardian.com/news/2018/sep/10/migration-how-many-people-are-on-the-move-around-the-world>
<https://www.brookings.edu/blog/future-development/2018/09/13/international-migration-what-happens-to-those-left-behind/>
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<https://www.weforum.org/agenda/2016/11/immigration-beneficial-or-detrimental-to-the-host-country>
<https://www.newscientist.com/article/mg23030680-700-the-truth-about-migration-how-it-will-reshape-our-world/>
<https://www.ft.com/content/319ec1f6-5d25-11e9-840c-530737425559>
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1414713/#:~:text=Individuals%20who%20migrate%20experience%20multiple,identity%20and%20concept%20of%20self.>
<https://www.bbc.com/news/world-us-canada-48696974>
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<https://www.weforum.org/agenda/2020/03/globalization-coronavirus-covid19-epidemic-change-economic-political>
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<https://www.weforum.org/great-reset/>
<https://www.politico.com/news/magazine/2020/03/19/coronavirus-effect-economy-life-society-analysis-covid-135579>

Questions

1. What is meant by globalization?
2. What are its ostensible advantages and disadvantages? Who gains? Who loses?
3. Has the pandemic had any serious impact on the movement of people from nation to nation? How are refugees affected by the situation? Better prospects or worse?
4. What could Canada do to help resolve the refugee problem?

Part E: The Pandemic and Climate Change

What if any impact has the pandemic had on the controversial issue of climate change? Christian Stöcker of the German magazine **Der Spiegel** wrote that the Covid-19 pandemic is only *“seemingly worse and more acute than climate change....The further away the presumed consequences of inaction seem to be - both in time and space - the less willing we humans are to change our behaviour. ... So our long-known cognitive distortions make the one thing seem more threatening than the other. In spite of the fact that from a global and human-historical perspective precisely the opposite is the case: the climate crisis and species extinction are far more threatening to humanity than one more viral disease, however threatening and potentially fatal this disease may be. ... It is the task of politicians to draw the necessary conclusions from these facts. And also to finally take action against the climate crisis.”*



Another journalist, Rui Ramos, in **Observador** concurred, offering the opinion that Covid-19 is having a bigger impact on the environment than all the climate activism of recent years. He asked rhetorically: *“How can it be that the virus has already reduced Chinese pollution by 25 percent even without a Greta campaigning for this? No matter how often it is stressed that the virus won't kill that many, people are still afraid; yet when people say that climate change will be the end of the world everything continues as before.”*

Image [grist.org](https://www.grist.org)

Is the Covid-19 pandemic then a boon for climate change exponents or a setback? Some feel that the pandemic has set back the fight against climate change because the urgent nature of the health crisis has pushed the climate issue off to the periphery. There is little attention or talk about the Paris Agreement abandoned by Trump.

Justin Worland noted *“the pandemic is a challenge for climate change action on multiple fronts. Covid-19 has already disrupted crucial negotiations ahead of a November conference in Glasgow that could determine the Paris Agreement’s success in reducing emissions. The outbreak may supplant climate concerns in the minds of the public, weakening political will at a key moment. And it may encourage burning fossil fuels in hopes of restarting the global economy.”*

Bold climate plans require spending political capital, and world leaders are likely to want to use their political energy to boost the economy in response to the coronavirus pandemic.

China is the world’s second-largest economy and largest emitter. Emissions there fell 25% in mid-February compared to just a few weeks earlier as the country’s industrial economy ground to a halt, but leaders have promised a giant stimulus to restore growth. In the past, such stimulus measures in the country have meant carbon-intensive infrastructure. It appears increasingly likely that the global coronavirus outbreak will cut greenhouse-gas emissions this year, as deepening public health concerns ground planes and squeeze international trade, but emissions are likely to rise again as soon as the economy bounces back. The fear of climate change supporters is that if the virus leads to a global pandemic and economic crash, it could easily drain money and political will from climate efforts. In addition, if capital markets lock up, *“it’s going to become incredibly difficult for companies to secure the financing necessary to move ahead with any pending solar, wind, and battery projects, much less propose new ones”*. On the other hand if people remain fearful of flying and don’t board cruise ships, or come to prefer remote working and virtual conferences the pandemic could prove a blessing.



Image oneyoungworld.com

You can look at the climate stuff from a public health point of view by asking the question that appeared in an article in Scientific American: What Could Warming Mean for Pathogens like Coronavirus? (Chelsea Harvey, E&E News on March 9, 2020). Harvey says that *“scientists expect to see changes in the timing, location and severity of disease outbreaks as global temperatures rise.....Research related to other illnesses suggest that the risk of pandemics is growing as rising temperatures ignite animal migrations and other changes.....Scientists aren’t sure what kinds of patterns to expect as it spreads or how it might be affected by weather and climate.....links between climate and infectious disease are a growing subject of interest among scientists.... And some experts believe climate change, along with other environmental disturbances, could help facilitate the rise of more brand-new diseases, like COVID-19.....there are more questions than answers. Take influenza, for instance. In temperate parts of the world, flu exhibits strong seasonal patterns and tends to peak in the winter. Experts believe the virus survives better in colder, drier conditions. Human behavior may have something to do with it, as well — people tend to stay indoors more in the winter, meaning they’re more likely to be in close quarters with one another and may infect others more easily.....In the warmer tropics, on the other hand, flu season tends to spread out throughout the year, with some spikes during the rainy season. As a result, some experts suggest that climate change may cause flu outbreaks in temperate regions to become less intense but more evenly distributed across the seasons.....a paper published earlier this year, suggested that rapid swings in the weather may also make flu epidemics worse.....Flu certainly isn’t representative of all directly transmitted diseases. But the research on flu, one of the most common and well-studied viruses in the world, helps demonstrate the challenges of parsing out the influence of climate change....climate change may cause diseases that are common in some places to shift into new geographic locations. That’s a particular risk with vector-borne diseases, as mosquitoes and ticks expand their ranges.....the disease itself isn’t unknown to the world — but it may be new to many of the places it affects in the future.....Scientists are working on ways to improve their projections of where these types of diseases may crop up in the future, so communities can prepare to deal with them.....It’s also possible that climate change may affect the emergence of entirely novel diseases, like COVID-19.....As the climate changes, many animal species are likely to change their behavior or migrate to new areas. It’s possible that in some cases, this could increase their likelihood of coming into contact with humans.....Climate change isn’t the only environmental disturbance to keep an eye on. Other human activities may also increase the likelihood of human-wildlife contact and the risk of emerging diseases.....Deforestation is one major potential factor. Wildlife markets are another.....That said, the effects of environmental disturbances on novel diseases remain highly uncertain.”*

Some have welcomed the pandemic and cheered it on because it was doing the work of Greta Thunberg. The economic shutdown of the world economy has resulted in cleaner air, fresh pure water. Some argue that the improved air quality may



end up saving 20 times as many lives as were taken by the virus. Even China as a whole has seen its carbon dioxide emissions drop by 25% in February alone. The grounding of airplanes has had an astounding effect. And the longer the quarantines, lockdowns and border closures go on the better. It will prolong the downward trend in pollution. The demand for oil has fallen because of reduced flights and fewer automobiles on the road. Even Venice's once-murky canals are now clear, and Venetians have spotted fish swimming in the waterways. There are no tourists and no jobs, but the water is clean and the fish are swimming again in the canals.

[Image insider.com](#)

<https://www.travelandleisure.com/travel-news/coronavirus-cleared-venice-canal-swans-fish>

<https://www.scientificamerican.com/article/what-could-warming-mean-for-pathogens-like-coronavirus/>

<https://www.forbes.com/sites/davekeating/2020/03/10/could-coronavirus-beat-green-deal-in-slowng-climate-change/#4c41e04339f4>

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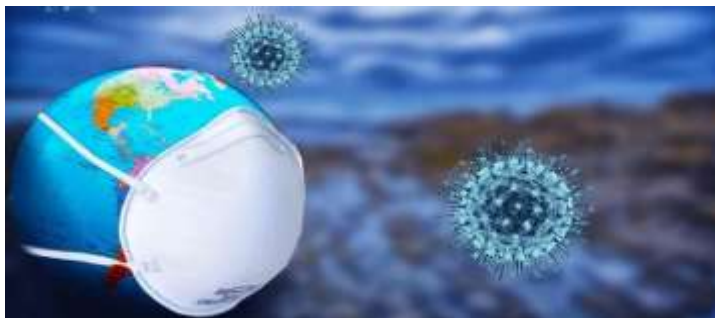
<https://www.technologyreview.com/s/615338/coronavirus-emissions-climate-change/>

<https://time.com/5795150/coronavirus-climate-change/> Justin Worland

<https://www.rt.com/op-ed/483438-greta-thunberg-coronavirus-climate/>

Questions

1. How do the pandemic and climate change interact?
2. What could be future complications caused by climate warming of the temperate zones?
3. If shutting down the economies of nations has had a salutary effect on the planet in terms of less pollution is this worth it in terms of increased joblessness and human angst?
4. Can the world avoid social instability amidst all the pressures that are already there?



Can the world survive with a mask?

[Image fes-mena.org](#)

Part F: The Pandemic and Health Care, Respect for Human Life and Dignity, Faith

The prolonged period of time that the pandemic has been around is causing much soul-searching. All kind of questions are being asked: Is the virus a sort of response to the modern Tower of Babel, technocracy and globalization? Is it merely an unprecedented health crisis? Is it a fundamental moral test? Some writers and thinkers believe that indeed our response to the pandemic “demonstrate(s) who we are, what we believe and what kind of society we are becoming. (Our response to the coronavirus pandemic reveals who we truly are. John Carr March 26, 2020)



Image [washingtonpost.com](http://www.washingtonpost.com)

Carr was writing in March, and he stated that “there is a compelling moral obligation to avoid actions, behaviors and attitudes which permit the virus to spread and threaten the life and health of others”. It follows that social distancing, avoiding crowds, wearing a face mask are obligatory. He concluded that calls by some people to reduce necessary protections of human life and dignity in order to help the economy represent a deadly calculation and ethical quicksand. His argument is that all life is precious and therefore “no matter how young or old, rich or poor, no matter your race, gender, nationality or utility.....Getting tested or getting needed care cannot depend on how much power, wealth or status you might have, whether you are an athlete or politician, how old you are or whether you have a disability, or where you come from and when you got here.”

Carr went on to say that because human life is sacred “we have a right to life and to those things that protect life and dignity: health care which sustains life; family and religious life; and decent work, housing and education. The absence of these rights makes every aspect of this pandemic worse.Our faith requires us to secure and protect these rights, not only for ourselves and our families, but for all God’s children. Pursuing universal health care is not just a policy goal; it is a moral obligation for a decent society. Assisting those who have lost jobs and income in the economic collapse that comes with this crisis is not just part of a stimulus package; it is a moral requirement. Defending the dignity of those who are hungry or homeless, immigrants and refugees, and others on the “peripheries” are biblical mandates. Protecting the lives, dignity and rights of people of color, women, persons with disabilities, the elderly and the most vulnerable is essential since scarcity and fear can intensify injustice. We must resist scapegoating and dismissing those who are old or disabled in these challenging times..... Restoring work, rescuing livelihoods and recognizing the needs and rights of workers should also be at the center of any economic recovery plan.In tough times we need to rediscover and practice solidarity, remembering that we are sisters and brothers, part of God’s one human family.....If solidarity is essential in responding to this crisis, subsidiarity is necessary to help structure the response and divide up the work. A crisis this big and dangerous requires all our institutions to work together.....At the same time, smaller institutions have the right and duty to call on larger institutions to meet needs or accomplish tasks that they cannot accomplish on their own..... The contest over who gets credit or blame should yield to shared responsibility and common action.....If we cannot work together as one nation for the good of all in this crisis...we will fail a fundamental human and moral test as a people.”

Pandemic Disease, Public Health, and Ethics: Maxwell Smith and Ross Upshur, [The Oxford Handbook of Public Health Ethics](#) Edited by Anna C. Mastroianni, Jeffrey P. Kahn, and Nancy E. Kass

This extract from a large book provides an excellent and clear explanation of the issues involved during the declaration of a pandemic. It weighs the various options that face the public authorities and the general public.

It is recommended that the full article be read at the original source

<https://www.oxfordhandbooks.com/view/10.1093/oxfordhb/9780190245191.001.0001/oxfordhb-9780190245191-e-69> .

Here we are providing just a synoptic table for the sake of brevity.

Table 68.1 Substantive and Procedural Values to Guide Ethical Decision-Making for a Pandemic Influenza Outbreak

Substantive value	Description
Individual liberty	<p>In a public health crisis, restrictions to individual liberty may be necessary to protect the public from serious harm. Restrictions to individual liberty should:</p> <ul style="list-style-type: none"> • be proportional, necessary, and relevant; • employ the least restrictive means; and • be applied equitably.
Protection of the public from harm	<p>To protect the public from harm, health care organizations and public health authorities may be required to take actions that impinge on individual liberty. Decision makers should:</p> <ul style="list-style-type: none"> • weigh the imperative for compliance; • provide reasons for public health measures to encourage compliance; and • establish mechanisms to review decisions.
Proportionality	<p>Proportionality requires that restrictions to individual liberty and measures taken to protect the public from harm should not exceed what is necessary to address the actual level of risk to or critical needs of the community.</p>
Privacy	<p>Individuals have a right to privacy in health care. In a public health crisis, it may be necessary to override this right to protect the public from serious harm.</p>
Duty to provide care	<p>Inherent to all codes of ethics for health care professionals is the duty to provide care and to respond to suffering. Health care providers will have to weigh demands of their professional roles against other competing obligations to their own health, and to family and friends. Moreover, health care workers will face significant challenges related to resource allocation, scope of practice, professional liability, and workplace conditions.</p>
Reciprocity	<p>Reciprocity requires that society support those who face a disproportionate burden in protecting the public good, and take steps to minimize burdens as much as possible. Measures to protect the public good are likely to impose a disproportionate burden on health care workers, patients, and their families.</p>
Equity	<p>All patients have an equal claim to receive the health care they need under normal conditions. During a pandemic, difficult decisions will need to be made about which health services to maintain and which to defer. Depending on the severity of the health crisis, this could curtail not only elective surgeries, but could also limit the provision of emergency or necessary services.</p>
Trust	<p>Trust is an essential component of the relationships among clinicians and patients, staff and their organizations, the public and health care providers or organizations, and among organizations within a health system. Decision makers will be confronted with the challenge of maintaining stakeholder trust while simultaneously implementing various control measures during an evolving health crisis. Trust is enhanced by upholding such process values as transparency.</p>
Solidarity	<p>As the world learned from SARS, a pandemic influenza outbreak will require a new vision of global solidarity and a vision of solidarity among nations. A pandemic can challenge conventional ideas of national sovereignty, security or territoriality. It also requires solidarity within and among health care institutions. It calls for collaborative approaches that set aside traditional values of self-interest or territoriality among health care professionals, services, or institutions.</p>
Stewardship	<p>Those entrusted with governance roles should be guided by the notion of stewardship. Inherent in stewardship are the notions of trust, ethical behavior, and good decision-making. This implies that decisions regarding resources are intended to achieve the best patient health and public health outcomes given the unique circumstances of the influenza crisis.</p>

Procedural values	Description
Reasonable	Decisions should be based on reasons (i.e., evidence, principles, and values) that stakeholders can agree are relevant to meeting health needs in a pandemic influenza crisis. The decisions should be made by people who are credible and accountable.
Open and transparent	The process by which decisions are made must be open to scrutiny, and the basis upon which decisions are made should be publicly accessible.
Inclusive	Decisions should be made explicitly with stakeholder views in mind, and there should be opportunities to engage stakeholders in the decision-making process.
Responsive	There should be opportunities to revisit and revise decisions as new information emerges throughout the crisis. There should be mechanisms to address disputes and complaints.
Accountable	There should be mechanisms in place to ensure that decision makers are answerable for their actions and inactions. Defense of actions and inactions should be grounded in the 14 other ethical values proposed above.

Ongoing Challenges: Lessons Learned

These sentiments reflect an acknowledgment that such outbreaks should never have occurred, and that, despite over a decade of attention to pandemic preparedness and response, the global community remains ill-prepared to prevent and respond to pandemics. Since the turn of the millennium, numerous infectious disease outbreaks and pandemics have prompted similar “wake-up calls” to improve pandemic preparedness and response, including outbreaks of SARS; H5N1, H7N9, and H1N1 influenza viruses; Middle East respiratory syndrome coronavirus (MERS-CoV); and the emergence of pathogens with antimicrobial resistance, including multidrug-resistant tuberculosis (Smith and Upshur, 2015). Taken together, these outbreaks and the recurring sentiment that they ought to serve as wake-up calls illustrate that the global health community has failed to heed the lessons of past outbreaks and pandemics.

Ultimately, this inability to learn is an ethical failure, and ought to serve to emphasize the importance of engaging with the ethics of pandemic preparedness and response. Commitments to improving global outbreak surveillance and early outbreak warning systems (i.e., technical improvements) must therefore be matched with commitments to cultivating the ethics lessons that emerge following outbreaks and pandemics. If future actions are guided by the same values that have led to these repeated ethical failures, there should be doubt as to whether any meaningful change to pandemic preparedness and response will occur.

(p. 808) Conclusion

This chapter reviewed salient ethical issues associated with preparing for and responding to pandemic disease. While each pandemic has its unique characteristics, recent decades have shown that there are predictable issues that arise regarding the use of public health measures, the scope and limits of the duty to care of health care workers, setting priorities for the allocation of resources, global governance, and research ethics. Significant scholarship has evolved around each of these issues, and despite a lack of universal consensus regarding how to properly address them, numerous guidance documents exist that will aid any health system in preparing for and responding to these challenges.

As noted in response to the 2014–2016 EVD outbreak, a failure remains for these guidance documents to be accessed and used in a timely fashion that informs and shapes responses to pandemics. Part of this failure may be explained by the fact that the ethics guidance documents largely exist as stand-alone documents and are not typically integrated into operational pandemic plans. Another part of this failure may be explained by the lack of attention to ethics education in medical and public health training programs. Yet another element may be the unfamiliarity with the type of reasoning required for ethical reflection and deliberation. Indeed, more deliberative approaches may be at odds with the command and control approaches often used in emergency situations. In addition, the need for broad engagement with a range of stakeholders may be perceived as an impediment to timely action.

However, research continues to highlight the need to engage key stakeholders and communities in pandemic planning, conduct widespread and inclusive deliberation on the aforementioned ethical issues, and translate and operationalize public health ethics values and principles for pandemic preparedness and response (Garrett et al., 2011). Future efforts should be devoted to ensuring that as much of this work is done in advance of responding to an urgent situation.



image caglecartoons.com



The situation has been made urgent by the lack of information and unpreparedness of the people in charge. But the biggest decision was the drastic one of imposing a lockdown. Because that has had an enormous wide-ranging impact on ordinary people, from economic distress to changes in daily life and behaviour. We have seen the demise of local small businesses, closing of malls, increase in online sales, dramatic shifts in the real estate field, norms of social interaction changing, shifts in radio listening and television watching,

the further decline of print media, people taking health more seriously, dependency on drugs increased, unemployment ballooned, people unable to worship together. Given all these

terrible effects, no wonder many people became depressed.

It would be easy to surrender to the virus and just call it a day and retreat from the rigours of life. Build a cocoon and stay in it comfortably. However, there are groups in society, many groups that think differently and still carry on with their missions and illustrate the finest qualities of human beings. They raise their game despite the odds. We call these people the every day heroes, the frontline workers who don't back away from the risks to their own personal health. They are the nurses, police, truckers, care givers, personal health workers, factory workers, warehouse workers, teachers, doctors, grocery clerks, stock boys, parcel delivery personnel, taxi drivers, bus drivers, ticket takers, bar and restaurant workers, bakers hospital attendants, ambulance drivers and paramedics. The list goes on and on. They love life and they serve regardless of the dangers. They are first responders very often.

A society can be judged by how it treats its most vulnerable members. Among these are to be found the unborn, the disabled and the fragile, increasingly dependent senior citizens. The current pandemic has thrown this situation into sharp relief and it seems that Canada has not done its best job in protecting its vulnerable members. Abortions have continued apace, being deemed an "essential" service, and the elderly have been virtually abandoned in the senior care centres and consequently have suffered the highest death rate by far of any segment of our population. If the situation is to be improved changes need to be made and attitudes must be more compassionate and understanding of our elderly and their needs.

Today, life expectancy for Canadians is about 81 years. But with longer life spans come also new problems as a significant portion of the total population advances into old age. Seniors tend to have greater health problems with aging, as is to be expected. Many of the senior citizens cannot take care of themselves for a host of reasons and they become more dependent on others, whether members of their extended families or on society at large. In the absence of family care, many seniors choose to live or are forced to live in retirement homes, or, when health problems worsen, in long-term care homes. These centres are not always either equipped or staffed adequately to meet the needs of the residents in a dignified and respectable manner. For example, during this pandemic some of the centres have experienced a "revolving door" of staff who may see multiple patients per day with scarce accessibility to the required PPE (personal protective equipment) and having to follow proper medical protocol.

Among other drawbacks associated with many of these care centres is that the vast majority of their healthcare workers are incredibly underpaid, with minimal benefits as well as minimal healthcare training requirements. Due to job insecurity and other social and economic factors, the care providers may continue to work even when they are sick, which puts the care facility at risk of viral outbreaks. Elderly individuals are unable to leave the care facilities in which they reside whereas the caregivers are granted the freedom to leave, and then return to work later in the same day or next day. Some of the caregivers are obliged to work in more than one care centre to make ends meet because of the low pay and inadequate number of hours given them for work. Many are employed as part time workers and therefore do not qualify to receive any work benefits.

It is estimated that of all deaths attributed to the Covid-19 virus in Canada, some 81% of the total were of seniors in long-term care centres. This is a tragic situation. What may have contributed to this terrible result? At one point, both Ontario and Quebec requested assistance from the Canadian armed forces to cope with the situation in nursing homes and senior care centres. After a couple of months the army personnel reported on conditions in some of the homes. They reported shameful conditions. Centres did not have adequate infection control procedures, despite care facilities being breeding grounds for disease due to the age of the residents and their susceptibility to contracting and transmitting viruses (pre-existing medical conditions, age and close proximity to other residents due to tight quarters in poorly kept homes).

Logically speaking, the protocol for infection control in these care centres should be equivalent to that of a hospital, as elderly individuals are higher risk patients; yet, it is evident that many long-term care facilities were unprepared, and its staff improperly trained to handle a viral outbreak. Among recommendations to improve the situation one would include the following: geriatric care providers need to be held to the same standard as ICU nurses, receive the required PPE, be paid fair wages, and receive extensive training to ensure the longevity and survival of nursing homes when a serious or calamitous challenge arises.

Many seniors who choose to stay in their own homes, nevertheless rely on providers to aid them with hygienic tasks, household chores such as cleaning and the provision of meals within the comfort of their own homes. Seniors receiving home care especially deserve to be provided with equally dignified care. The pandemic has exposed major issues and shortcomings in the Canadian home care system.

Throughout the pandemic, government officials prioritized hospitals in regard to the facility that would receive the majority of the required PPE, despite the devastating number of deaths that occurred in nursing homes. Healthcare workers began abandoning nursing homes entirely, leaving residents stranded and left to die. The government abandoned elderly care facilities and the consequence was horrific. Canadians need to prioritize the needs of the elderly due to their declining health and reliance on others for care. Our parents and grandparents deserve better from a society that claims to be the most enlightened and compassionate among modern nations.

<https://www.utoronto.ca/news/covid-19-exposes-gaps-canadian-home-care-system-u-t-researcher>.

Some observers claim that it is absolutely possible to invest in the well being of seniors while simultaneously allocating public funds in an equitable manner. Those with greater needs because of age, frailness and dependency require proper care and attention within the context of meeting all of society's needs, the young, the old, the teens and the mature adults.

The pandemic has exposed the abuse of elderly people in long-term care homes. One cannot abandon people because of loss



of productivity, infirmity, or other physical or mental limitations. The social contract is that governments exist for people. Circumstances change in life. People get injured and we care for them. People lose their jobs and we provide employment insurance payments. People get sick and we have hospitals and medical care. People get old and we need to make room at the table for them and care for them. It is not just a case of rewarding them for past contributions. It is a case of being a civilized society. The strong help the weak. The truly strong do not bully the weak. The wise seek wisdom from their elders. Those with a heart continue to love the seniors and honour them, especially during a nightmare pandemic.

[Image healthaffairs.org](https://www.healthaffairs.org)

Briefly, another anti-life paradox is the incidence of abortion during a crisis like the pandemic. On the one hand much time, energy and money is expended to save people, old and young, from the ravages of the pandemic, and even protect people - including school children from a possible infection - but then on the other hand abortion is declared an "essential service" during the lockdown. People cannot attend church. They cannot travel. Surgeries are postponed. But the termination of innocent human life is permitted. And the Canadian federal government goes even further with its odd priorities. It has introduced legislation (Bill C-7) to further expand assisted suicide so children can also be included in the assisted death protocol.

The pandemic is creating very strange ironies. Consider this bizarre example from the United States. George Floyd loses his life unjustly and there are riots, looting, arson in reaction to it because organizations took up the cause and said that black

lives matter. In the same United States, as of October 29, there were more black children killed by abortion in 2020 (approximately 425,000) than the total of American deaths (233,000) attributed to the Covid-19 virus.

Faith During the Pandemic

Are people in the grip of fear and terror? One observer commented that “we are, by and large, psychologically and culturally underequipped for the current coronavirus pandemic”. Faith should be a source of strength during this horrendous challenge.

Lyman Stone writes that:

“For Christians, it is better that we should die serving our neighbor than surrounded in a pile of masks we never got a chance to use. And if we care for each other, if we share masks and hand soap and canned foods, if we “are our brother’s keeper,” we might actually reduce the death toll, too.”

The Christian motive for hygiene and sanitation does not arise in self-preservation but in an ethic of service to our neighbor. We wish to care for the afflicted, which first and foremost means not infecting the healthy. Early Christians created the first hospitals in Europe as hygienic places to provide care during times of plague, on the understanding that negligence that spread disease further was, in fact, murder.

But it’s not that at all. The coronavirus leaves over 95 percent [actually now more than 97.8%] of its victims still breathing. But it leaves virtually every member of society afraid, anxious, isolated, alone, and wondering if anyone would even notice if they’re gone. In an increasingly atomized society, the coronavirus could rapidly mutate into an epidemic of despair. Church attendance serves as a societal roll call, especially for older people: Those who don’t show up should be checked on during the week. Bereft of work, school, public gatherings, sports and hobbies, or even the outside world at all, humans do poorly. We need the moral and mental support of communities to be the decent people we all aspire to be.

The Christian choice to defend the weekly gathering at church is not, then, a superstitious fancy. It’s a clear-eyed, rational choice to balance trade-offs: We forgo other activities and take great pains to be as clean as possible so that we can meaningfully gather to support each other. Without this moral support, as the citizens of Wuhan, China, can attest—and perhaps soon the people of Italy—life can quickly become unendurable. Even non-Christians who eschew church-going can

appreciate the importance of maintaining just one lifeline to a community of mutual care and support.



Be eager to sacrifice for others, even at the cost of your own life. Obsessively maintain a scrupulous hygienic routine to avoid infecting others. Maintain a lifeline to a meaningful human community that can care for your mind and soul. These are the guiding stars that have shepherded Christians through countless plagues for millennia. As the world belatedly wakes up to the fact that the age of epidemics is not over, these ancient ideas still have modern relevance.

Image realmoney.thestreet.com

Is the cure worse than the disease?

As Trump and other leaders are realizing, the shutdowns may be worse than the pandemic itself in terms of harm to society. The crisis does offer an opportunity to rethink our priorities, our goals, the purpose of government. Some have gone deeper than that – what is the meaning of life itself when faced with these challenges.

One blog writer does that on a regular basis. Mystically, he warns about global machines with gears - political, economic, social, and technological – that have been operating throughout the world separately for many decades. These machines will converge to mesh into one global machine called “*Totalitarianism*.” Mark Mallett mentions that no one *could have foreseen the swiftness, power and control that has placed vast portions of the world under near martial law in just a matter of days.*



Image markmallett.com

Whether or not the extreme measures being taken against the coronavirus are justified, the world will never be the same. Even if the coronavirus abates, the mechanisms being implemented to control, censor and confine vast populations have proven effective beyond globalist’s wildest dreams. Already, there is the beginning of censorship, neighbors ratting on each other, and police chasing people off the streets.

No doubt this pandemic experience continues to affect all sectors of life, whether the concept of community, uses of technology, the health and science fields, biomedical research, role of government, attitudes toward government, elections and democracy, how parliament conducts its business, global economy and nationalism, regional independence, lifestyle, how they spend their free time, freedom and rights, and right down to how people worship.

The global coronavirus has kept people contained in their homes for weeks and perhaps to be extended into months with second and third waves. If leaders are serious about meeting the climate goals like those of the Paris Agreement or the Green New Deal in the United States, they will demand lifestyle changes that if necessary will be enforced with the machinery of the state.

The social credit approach introduced by China to control its citizens depends on an “*omnipresent and omniscient*” surveillance system, coupled with draconian punishment and withdrawal of privileges for those who violate the lockdown and fail to maintain a high enough “social credit score”. Is this the nightmare scenario we are moving into as governments usurp citizens’ rights and freedoms and use the danger posed by the ever present pandemic as a powerful justification to regulate the “*smallest details of everyday life.*”

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Questions

1. How has the pandemic shaken society to its core, in every conceivable sector of life and thought?
2. Is the extract *Pandemic Disease, Public Health, and Ethics* a good guide for the handling of the pandemic?
3. What are the main points it covers? Which are most important to you?
4. How has the pandemic response exposed deep problems in Canada's long term and home care systems?
5. What steps are recommended to improve the systems?
6. How would you prioritize these steps/actions?
7. Should there be national standards of care for our senior citizens?
8. Should senior care be considered part of a national health care system to ensure such standards and to ensure adequate funding?
9. How was the pandemic truly a wake-up call for the government regarding the malpractice in many care facilities?
10. What should be the reaction of Canadians to the problems exposed? What can you do about this situation?
11. How can care facilities be better monitored in order to protect the residents?
12. What factors have helped to create the problem of elder abuse?
13. Due to the high death rate suffered by seniors in care centres during the pandemic, was the virus truly responsible for the high mortality rate or could it have been neglect and a lack of proper care?
14. Have we abdicated our own ethical and political principles in helping to fight the pandemic?
15. Have we surrendered too many freedoms and too easily, and therefore open to that "global machine" of totalitarianism?

Part G: The Pandemic and Media, Communications, Social Unrest

But who created the hysteria? Should governments be trusted? The media been there supporting them all the way. One could ask if the media in fact has become a significant danger to our democratic freedoms and our health and security.

The role of the media has been crucial for better or worse throughout the pandemic era. Its defenders stress the important daily briefings and updates that the media carries, so no one can say they have been left ignorant, not knowing what to do and not aware of the public health authority's guidelines – such as social distancing, wearing a mask in public, and washing one's hands or using a sanitizer. But others claim that the media has not been critical enough of public decisions taken by government authorities who have been allowed to take all kinds of actions without any degree of accountability for them.

Is the current Covid-19 challenge designed to teach us about our human mortality, about the foolishness of feeling in charge of things. Imagine how quickly everything can be turned upside down by nature, A virus, incredibly small and minute can wreak havoc, creating panic mode among the general population and test our smartest medical people. The death toll may be only in the thousands, but the mental anxiety and fears unleashed are of another order of magnitude.

Columnist Raul Gabriel in the newspaper (**AVVENIRE (IT)** / 27 February 2020) warned that an inadequate information policy can create panic. So what should be done? He says: *"There are two options. Either further information about the specific threat of the coronavirus, about its mutations and its potential evolution is suppressed, or one relies on indiscriminate and totalising prophylactic measures due to an inability to contain the problem and tackle it rationally. ... Prophylactics that nevertheless fuel a general hysteria which ends up obscuring any reasonable relation to reality. ... The communications oscillate between those of experts who give reasonable instructions on how to prevent infection and those of alarmed reporters who coquettishly announce that an imminent and inevitable apocalypse is already underway."*

Some have actually seen the pandemic as an opportunity to rethink capitalism and to reset all economic and social structures. The restrictions put in place can serve as inspiration for a more sustainable world, one based on a fairer distribution of property and goods, with the aim of ensuring the livelihood of the inhabitants of our planet in a sustainable manner.

Others are adamant and happy to say that we will never return to normal, that social distancing is here to stay for much more than a few months. On March 17, 2020 (MIT Technology Review, Gideon Lichfield declared <https://www.technologyreview.com/2020/03/17/905264/coronavirus-pandemic-social-distancing-18-months/> that to stop the coronavirus it was imperative *"to radically change almost everything we do: how we work, exercise, socialize, shop, manage our health, educate our kids, take care of family members."*

Questions

1. How can plagues or pandemics lead to totalitarianism in the name of public safety?
2. Is there any evidence of things moving in that direction based on actions taken by governments in various nations?
3. What about the enforcement against religious practices, public worship?
4. What is the effect of such imposition on the practice of the faith? What about celebrities' role during the pandemic. Have they been responsible or stupid in their utterings?
5. Would people accept a life of isolation and deprivation as the 'new normal', all in the name of saving the planet?
6. Is the coronavirus an expression of human failing, a sort of hubris, being cut down to size?

Even great and serious challenges like a global pandemic may bring out a sense of optimism in people. When people are still able to laugh and enjoy humour, all is not lost all. Here are some lighter moments in the form of cartoons and the pandemic. This too provides a healthy perspective. Teachers may wish to have students respond to the cartoons as to what is the theme, what is the issue being portrayed and how does the cartoonist achieve his/her objective – whether that be to inspire, to calm down, to give hope, to mock in fun, to help people see the lighter part of a problem, etc.

