

## Review Article

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## Assay of Reflections on Human Rights and Bioethics in the COVID-19 Pandemic

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### Introduction

In the wake of this pandemic, the Government took several preventive measures to contain its spread, mainly ensuring physical and social distance. Some of the initial measures included the partial blocking of commercial and social activities, closing of all educational institutions, suspension of all community services and political meetings, among others. Some of the initial measures also included: recommended and, in some cases, mandatory hand washing; deny students studying in China to return home; voluntary quarantine; mandatory institutional quarantine at own expense; suspension of public and private transport; and imprisonment for non-compliance with the measures.

While these measures are potentially very effective in reducing infections among humans, some of them present latent ethical and human rights controversies despite the general legitimacy of limiting and derogating from human rights during Public Health Emergencies (EPS).

Such legitimacy is partially derived from Carbonari (2020); the Principles, in particular; and Public Health Law. According to these sources, governments may justifiably limit the exercise of individual freedoms and freedoms, such as freedom of movement and association or the right to privacy, especially if such exercise is deemed likely to harm public health in the form of the spread of infectious diseases or causing injury.

Although ethics and human rights are sometimes treated as fields separate, in the context of public health, they largely overlap. Most of the ethical controversies about public health measures arise from the manner and extent to which these measures affect people's rights and freedoms. Consequently, certain ethical and human rights considerations must guide such limitations. For this reason, in addition to declaring COVID-19 an International Public Health Emergency (PHEIC), the Director-General of the World Health Organization (WHO) advised countries to strike a balance between protecting health and respecting health. human rights. While WHO had already made efforts to encourage governments to ensure ethical preparedness by developing ethical frameworks

for policies, public health programs and immediate responses during public health pandemics, very few countries, if any, had sufficient guidance in place to provide them with indisputable decisions during the COVID-19 outbreak.

The general objective of the work was to analyze, through a systematic review, the essay on reflections on human rights and bioethics in the COVID-19 pandemic.

### Methodology

The type of study is a systematic review, research of the type has the primary objective of exposing the attributes of a given phenomenon or statement among its variables. Thus, it is recommended that it presents characteristics such as: analyzing the atmosphere as a direct source of data and the researcher as a switch instrument; not to broker the use of statistical artifices and methods, having as a greater apprehension the interpretation of phenomena and the imputation of results, the method should be the main focus for the approach and not the result or the fruit, the appreciation of the data should be achieved from intuitively and inductively through the searcher.

The systematic review method allows including experimental and non-experimental research, obtaining a combination of empirical and theoretical data that can lead to the definition of concepts, identification of gaps in the study areas, review of theories and methodological analysis of studies on a given topic. This method requires resources, knowledge and skills for its development [1].

Considering the classification proposed by Gil it can be said that "this proposal is better represented through an exploratory research, whose objective is to provide greater knowledge about the problem, in order to make it clearer or helping to formulate hypotheses". In the author's understanding, the main objective of this type of research can be both the improvement of ideas and the discovery of intuitions, which makes it a very flexible option, generating, in most cases, a bibliographic research or a case study[1].

## Results and Discussion

**Table 1 : describes the information from the studies found in this review**

| REFERENCE                       | OBJECTIVE  | METHODOLOGY       | CONCLUSION   |
|---------------------------------|--|-------------------|--|
| OKOTH et al., 2020              | Explain why, despite this orientation, this challenge still persists and suggest conceptual resources that can help make sense of this problem and, eventually, mitigate it.   | Literature review | Existing ethical guidelines on how to obtain valid consent for health-related research are what they should be - general, presumptive, and context-neutral. This explains their apparent inadequacies whenever they are being applied to concrete situations.  |
| RICH; BOTGRD; XAVIER, 2020      | The goal is containment, mitigation, and suppression plans that must be as inclusive as possible or may undermine response efforts.  | Literature review | The global spread of COVID-19 has generated aggressive medical and public health responses, including testing, screening, contact tracking, social distancing, travel restrictions, and orders to stay home when ill or exposed.   |
| SSELWANGA, 2020                 | This review aims to analyze and synthesize the scientific evidence on the effects of physical exercise on COVID-19 precaution and the main recommendations on the practice of physical activity during and after the pandemic. | Literature review | A maioria das evidências recomendam a realização de atividade física moderada regular durante e após a pandemia. No entanto, recomendações mais específicas sobre a intensidade, o tipo de exercício, séries e duração do treino precisam de further investigations.   |
| WORLD HEALTH ORGANIZATION, 2020 | The widespread use of safe and effective vaccines for COVID-19 can save many lives, prevent disease, and allow for the safe relaxation of other public health measures.  | Literature review | In response to the need for ethical guidance to inform policy and decisions regarding the potential development of such research programs, WHO developed key criteria that COVID-19 challenge study programs would need to meet to ensure that such research is conducted. in accordance with the highest ethical standards Fonte: elaborado pelo autor. |

Ethical principles such as reciprocity, transparency, non-discrimination, responsibility, non-maleficence, equity and others have been recommended to guide any implementation of restrictive and costly public health measures. It was also observed that these ethical principles have intrinsic value and are important to guarantee the effectiveness of the adopted measures [2].

However, when designing and implementing public health measures, including during PHEICs such as the COVID-19 pandemic, one is likely to consider ethical and human rights considerations of secondary importance. This is more likely in severely resource-constrained settings and other similar contexts in low-income countries [3].

The reasons are obvious: since there is often not enough time and resources to facilitate careful ethical deliberations in these circumstances, the focus should be exclusively on implementing measures with *prima facie* potential effectiveness. This is what some claims in the media have revealed in response to some of the potentially morally controversial measures taken by the government to curb the spread of COVID-19 [4].

The rationale for the explicit integration of ethical considerations into public health policies and program evaluation was articulated as a complement to traditional 'evidence'. The motivating concern for this view is that the traditional concept of 'evidence' focuses exclusively on the potential effectiveness of alternative policy measures, without reflecting on how subsequent actions will impact ethics-related public health objectives[2].

Therefore, this position is based on the need to capture some of the common but mostly implicit ethical goals of public health - 'doing good', 'avoiding harm', 'preventing or reducing avoidable health disparities (health equity), among others'. This suggests the need

to go beyond the traditional and mechanistic approach to health policy evaluation that is based on 'evidence' [5].

It is important to note that in uncertain situations, where there are overwhelming burdens on health systems, such as those presented by the COVID-19 pandemic, it is extremely difficult to implement public health measures that are free from ethical controversy. This is even more difficult in countries with severely limited resources. This is because, as warned in reference to responses to the H1N1 influenza pandemic, in similar circumstances, minimalist measures are likely to be ineffective, while maximalist and disproportionate measures have potential long-lasting negative effects on community trust, public services, social order and economics [4].

Generally, ethical controversies over public health measures can result from perceived deception in the form of deliberate underreporting of pandemic statistics or exaggeration of the same statistics, mandatory institutional quarantines at own expense, or judicial detention of potentially infectious patients who do not cooperate[3].

It should be noted that some ethically controversial measures often come with seemingly robust pragmatic justifications. However, failure to comply with ethical and human rights criteria will undermine its effectiveness. For example, misunderstanding in the form of deliberate underreporting of the magnitude of the pandemic may be justified by the aim of staving off the devastating psychological impact of true reporting on the economy[4].

The emerging perception is that the importance of explicitly integrating ethics and human rights considerations in choosing effective policies and measures cannot be overstated. The argument is that public health policies and measures chosen following a

more holistic approach that combines ‘evidence’ and ‘ethical and human rights considerations’ as their criteria have a better chance of success than a mechanistic mechanism that relies only on ‘evidence’<sup>4</sup>. Therefore, if ‘evidence’ is the only input to such decisions, then there is a strong case for revisiting the traditional concept of ‘evidence’ as it applies to public health, to include the potential ethical and human rights impact of alternative policies and programs and measures[5].

In bioethics, it is generally accepted that social, economic, and other circumstances are fundamental to an appreciation of the ethical evaluation of human choices and actions. Therefore, before starting an assessment of the ethical ownership of some of the measures taken by the government against COVID-19, it is important first to highlight some of these circumstances to guide this reflection. The assumption here is that social and economic vulnerabilities, including poverty, income inequality and insufficient resources in health systems, increase susceptibility to violations or failures of human rights and many ethical values[4].

In the wake of the COVID-19 outbreak, the Ugandan government adopted a series of public health measures with great potential to effectively contain the importation of the first cases and, later, localized widespread infection. As mentioned earlier, precarious social and economic circumstances increase the vulnerability of its population to human rights violations or failures due to highly restrictive and costly public health measures[3].

Based on similar reasoning, the Principles allow national governments to limit and derogate from some human rights in certain situations, including public health emergencies. Consequently, the moral question is not whether individual freedoms and freedoms can be limited and derogated from in order to achieve public health goals, but whether such burdens meet certain basic ethical criteria. benefits and burdens of adopted public health programs or measures as opposed to being supported by some[4].

From the above ethics and human rights recommendations, we can identify at least six ethical criteria for evaluating public health programs and responses to PHEICs. This is not intended to be a complete set of ethical and human rights criteria for evaluating public health policies, programs and responses, but is simply intended to be used to demonstrate the process of explicitly integrating ethical and human rights considerations into design and implementation. of public health interventions, including during PHEICs[2].

- 1) Effectiveness: as it is the government’s obligation to protect the health of its population, the measures adopted must have the potential to achieve the public health goal in question. In this case, the goal is to contain the spread of COVID-19;
- 2) Strict need for measures: This criterion requires that if the measures taken are too restrictive and costly for individuals and communities, there must be evidence that such measures are necessary to achieve the public health objective in question. In this case, being required means that it is impossible to reach the target goal without such measures;
- 3) Proportionality of measures to threat: this requires that minimal threats to public health do not lead to the imposition of extremely onerous and highly restrictive measures, but rather those that are just enough to meet the public health goal in question;
- 4) Reasonableness of measures: Various context-specific factors such as affordability by the public to comply with measures,

long-term impact of measures on the lives of individuals and communities economically, socially, psychologically, among others, combine to determine the reasonableness of measures. measures taken. Reasonableness would also involve the extent to which the measures taken affect other competing public health goals and interests;

- 5) With less restrictive measures: this criterion is based on the assumption that normally, in each public health situation, there are alternative paths to the fulfillment of a public health objective, which impose unequal burdens on individuals. Therefore, it is morally preferable that the least restrictive or costly of these measures be implemented to minimize the burden or mitigate the harm to individuals;
- 6) Equitable distribution of burdens: in bioethics in general, justice requires that the burdens and opportunities for good health be distributed proportionately to all involved and observe the principle of non-discrimination.

These criteria are a rough summary of the various ethical and human rights considerations for public health programs, policies and measures, as reviewed above. While this is not a perfect summary, we hope that, if complied with, it will go a long way towards addressing most of the common ethical and human rights issues around public health measures, even more so those adopted during EPS(SSELWANGA , 2020).

Earlier, we argued that integrating ethical and human rights considerations into the design and implementation of public health measures is partially important to improving their effectiveness. In other words, failure to adopt measures that meet basic ethical and human rights criteria has great potential to undermine efforts. These theoretical statements are supported by the findings of this study[4].

Media analyzes attributed the maneuvers to avoid quarantine to exorbitant quarantine fees. Furthermore, during one of the media interviews about this problem, the Minister of Health lamented the bad example set by high-profile people who refused to be quarantined, which made the measure’s application extremely difficult [2].

## Conclusion

This article was intended to reflect on the ethical ownership of some of the Ugandan measures taken to contain the spread of COVID-19. To reinforce the relevance of this work, we begin by demonstrating the importance of integrating ethical and human rights considerations into the design and implementation of public health measures, including during EPS. The results revealed that the ethical legitimacy of public health measures is fundamental, especially to guarantee their effectiveness, and this legitimacy depends on the extent to which these measures satisfy the basic criteria of ethics and human rights.

Consequently, in the design and implementation of public health measures, with or without PHEICs, ethical and human rights concerns are a necessary complement to traditional evidence.

Even though it is difficult to determine moral culpability stemming from governments’ initial responses to COVID-19, this potential exemption from strict moral culpability does not offset either the negative impact of ethical gaps in the effectiveness of such measures, nor the long-term negative impact of such measures on the livelihoods of those who have suffered extreme restrictive and onerous measures. Furthermore, it was found that, although some of the measures initially adopted fell somewhat short of ethical

and human rights criteria, the Government showed a willingness to improve the ethical status of such measures.

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