Using Abortion-Derived Vaccines: A Moral Analysis

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Introduction: Object of this study

"I came that they may have life, and have it abundantly," said Jesus Christ (Jn 10:10), who offers eternal life through union with him by divine grace.[3] In the words of John Paul II, this is the "Gospel of Life" which proclaims the inherent dignity of each human life "from its very beginning to its end"—a dignity that every person sincerely open to truth and goodness can recognize. All are called to "affirm the right of every human being to have this primary good respected to the highest degree," for, the Pope explained, "Upon the recognition of this right, every human community and the political community itself are founded."[4] In the past year (2020-2021), the biological and spiritual life of nearly the entire world has been negatively affected by the SARS-CoV-2 (COVID-19) virus, whether directly or indirectly, sometimes in devastating ways.

Media provided daily updates about infection rates and death-counts, about rising debt levels, about government-mandated measures including incarceration of citizens within their homes and, more recently, the diffusion of vaccines for a majority of citizens. These vaccines are a source of hope for many. Camus, in his psychologically-astute novel, *The Plague* (1947), describes how citizens shut up for months by an epidemic longed to leave the confines of their municipality. For a time, guards would gun down anyone who tried to escape. But when the plague had run its course and claimed numerous lives, the gates of the town finally opened and the people jubilantly rejoined long-separated loved ones. In our day, many see the whole world like Camus's disease-stricken town and many hope that safe vaccines will open the gates of their lockdown and provide a passport to a healthier world. Tens of millions have already received vaccines for COVID-19, and hundreds of millions, if not billions, are slated to do so.

Vaccine use has provoked controversy however. For years, some vaccines have been designed, developed and produced using cells derived from aborted fetuses. Many vaccines for COVID-19 have followed suit. Large numbers of Catholics and other people of good will are in a state of perplexed conscience, not knowing what course of action is morally acceptable. Even worse, they are not receiving unanimous guidance, because some authorities have strongly declared themselves in favor of the vaccines whereas other authorities are strongly against them. Nearly the entire world is being drawn into a moral relation to the vaccines: deliberately taking or rejecting them is a moral decision. It is therefore appropriate to consider these issues in an orderly and sober manner, so that neither bodies nor souls may be harmed in this situation. For the sake of thoroughness and clarity, we address some issues found in treatises of moral theology, for many of the treatises disagree with each other, or present only partial treatments of relevant material, or include errors.

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[2] Original formulation of the issue; first drafts of sections 1.2, 3.5.2, and 5, along with editing throughout the text and additional research.
[3] Thomas Aquinas, *Super Evangelium S. Ioannis lectura,* (Rome: Marietti, 1952), c. 10, I.3, no. 1396.
[4] John Paul II, *Evangelium Vitae: On the Value and Inviolability of Human Life*, (1995): §1.

The object of this inquiry is to investigate the morality of receiving vaccines which have been developed by using cells derived from one of the gravest evils in our time, namely, through the direct killing of innocent children in the womb. Through this investigation, we hope to show that certain conditions may render receiving such vaccines is morally acceptable, although receiving unethically-derived vaccines is not recommendable without qualification, and in every choice the pandemic offers the Catholic Church and all people of upright conscience a chance to recommit to upholding and defending the inviolable dignity of human life.

Much of the impetus of this article comes from requests received from many different quarters to address the morality of receiving vaccines derived from illicit sources. Disagreement about this issue has created significant rifts among Catholics of good will. By the time this work is published, the decision of whether to receive a vaccine or not will have already been made by a majority of people. Nevertheless, we hope that the principles outlined here can provide a model for moral decision-making in the future, and help put to rest concerns that receiving the vaccines is intrinsically evil.

1. Background to the COVID-19 vaccines

1.1 Danger of COVID-19

As with any medical treatment, a person must have good reasons to hold that the vaccine will truly help his health, or prevent a sufficiently grave risk to his health or the health of others. That is, one should have at least probable reasons for holding that the virus poses serious risks to health. Pending evidence to the contrary, we will argue that even if the precise numbers of infections and deaths are uncertain, COVID-19 poses grave health risks especially for the elderly, and serious risks for other vulnerable people.

One way to measure the danger of the COVID-19 virus is to measure hospitalizations. This gives an indication of the virus's burden on healthcare systems, especially since downstream effects of a disproportionately high number of hospitalizations could lead to loss of care for many other kinds of patients. Numbers of hospitalizations, however, has greatly varied depending on regions (e.g., in Bergamo, Italy, the hospitals were overwhelmed in spring of 2020, but not in Rome). Also, this measure is not entirely accurate, because fear could drive a disproportionate number of people to seek hospitalizations when it is not necessary, creating a negative feedback cycle with the following elements: (a) high numbers of infections and deaths lead to negative media reports; (b) widespread incessant negative media cycles—driven by news, celebrities, governments—spread fear throughout a population; (c) exacerbated fear causes disproportionate numbers of people to seek unnecessary hospital care, thereby threatening to crash the healthcare system; (d) lack of hospital beds drives further negative media, continuing the cycle. If that were the case, then solutions other than vaccines could more directly resolve the danger of healthcare system collapse. That is, the media could make concerted efforts to avoid fearmongering and convey the truth about the real risks of the virus.

The model above suggests that the danger of COVID-19 is more accurately gauged by the deaths it causes rather than hospitalizations considered alone. On 3 March 2020, Dr. Tedros Adhanom Ghebreyesus, the director general of the World Health Organization (WHO) said that there was a 3.4% case fatality rate (CFR) in China, making it one of the deadliest viruses ever known.[5] Because this number was partly on account of Wuhan's concentrated aged population and the lack of adequate infrastructure response, the WHO later

[5] Tedros Adhanom Ghebreyesus, "WHO Director-General's Opening Remarks at the Media Briefing on COVID-19 - 3 March 2020," *WHO*, 3 March 2020, https://www.who.int/director-general/speeches/detail/who-director-general-s-opening-remarks-at-the-media-briefing-on-covid-19---3-march-2020.

published an estimated Infection Fatality Rate (IFR) to 0.23% based on seroprevalence data.[6] Other evidence suggests an even lower fatality rate.

According to official data collected by the COVID-19 Data Repository at Johns Hopkins University, there have been worldwide 162.52 million confirmed cumulative cases and 3.37 million deaths within about a year from the beginning of the outbreak,[7] which is high compared to an estimated 389,000 annual influenza-associated death globally in 2017.[8] For the United States alone, the numbers given are 32.92 million cases and about 585,700 deaths (1.77% CFR),[9] considerably higher than the lower-end estimate of 0.82% CFR based on global data.[10] Fatality rates for those infected (IFR) is estimated at between 0.1% and 0.35%.[11] As of 19 March 2021, the CDC currently gave a "best estimate" CFR of 0.4% and IFR of 0.26%.[12] The deadliness of COVID-19 becomes apparent when the relatively more viral but benign H1N1 flu, which in 2009-2010 caused in the U.S. a "pandemic" with an estimated 60 million cases and about 12,500 deaths (0.02% IFR).[13] Likewise, an influenza

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[6] John P. A. Ioannidis, "Infection Fatality Rate of COVID-19 Inferred from Seroprevalence Data," *WHO*, 14 October 2020, https://web.archive.org/web/20210305020849/https://who.int/bulletin/volumes/99/1/20-265892/en/.

[7] Max Roser et al., "Coronavirus Pandemic (COVID-19) - Statistics and Research," *Our World in Data*, 2020, https://ourworldindata.org/coronavirus.

[8] John Paget et al., "Global Mortality Associated with Seasonal Influenza Epidemics: New Burden Estimates and Predictors from the GLaMOR Project," *Journal of Global Health* 9, no. 2 (2019), https://doi.org/10.7189/jogh.09.020421.

[9] Roser et al., "Coronavirus Pandemic (COVID-19)."

[10] Jason Oke and Carl Heneghan, "Global Covid-19 Case Fatality Rates," *The Centre for Evidence-Based Medicine*, 17 March 2020, https://www.cebm.net/covid-19/global-covid-19-case-fatality-rates/.

[11] Ibid.

[12] CDC, "COVID-19 Pandemic Planning Scenarios," *CDC*, 19 March 2021, https://www.cdc.gov/coronavirus/2019-ncov/hcp/planning-scenarios.html.

[13] CDC, "The Burden of the Influenza A H1N1pdm09 Virus since the 2009 Pandemic," *CDC*, 10 June 2019, https://www.cdc.gov/flu/pandemic-resources/burden-of-h1n1.html.

denominated as "severe" in 2017-2018 resulted in about 45 million infections and 61,000 deaths (0.13% IFR).[14]

Looking at a more granular level, the danger of the COVID-19 virus is best measured in light of individual circumstances, since fatality rates vary greatly depending on factors such as age and pre-existing conditions. Data from the CDC and elsewhere suggest that, "For every 1,000 people infected with the coronavirus who are under the age of 50, almost none will die. For people in their fifties and early sixties, about five will die — more men than women. […] For every 1,000 people in their mid-seventies or older who are infected, around 116 will die."[15] To put it another way, 93% of COVID-19 deaths are among people aged 50 and older; 80% are those over 65;[16] biological sex also matters: "8.5% of men and 4.9% of women in their 70s with no known conditions besides covid-19 died."[17] In contrast, the recovery rate of younger persons from COVID-19 is more than 99.9%: the risk of a younger person dying from the virus is far less than driving in a car.[18] However, obesity increases fatality risk by 90%.[19] Other significant risk factors include Type-2 diabetes, chronic liver, kidney, and obstructive pulmonary diseases.[20]

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[14] CDC, "2017-2018 Estimated Influenza Illnesses, Medical Visits, Hospitalizations, and Deaths and Estimated Influenza Illnesses, Medical Visits, Hospitalizations, and Deaths Averted by Vaccination in the United States," *CDC*, 22 November 2019, https://www.cdc.gov/flu/about/burden-averted/2017-2018.htm. Some challenges suggest that infections and deaths have been far fewer than suggested by mass media. For example, an analysis by over a dozen experts criticized the publication upon which the WHO relied for the PCR test protocols that were utilized throughout US and Europe, namely, Corman et al., "Detection of 2019 novel coronavirus (2019-nCoV) by real-time RT-PCR." The title of the critique by Borger et al., "External peer review of the RTPCR test to detect SARS-CoV-2 reveals 10 major scientific flaws at the molecular and methodological level: consequences for false positive results," speaks for itself (*Corman-Drosten Review Report*, November 27, 2020, https://cormandrostenreview.com/report/). According the opinion of the scientists' consortium, "if someone is tested by PCR as positive when a threshold of 35 cycles or higher is used (as is the case in most laboratories in Europe & the US), the probability that said person is actually infected is less than 3%, the probability that said result is a false positive is 97%." Another preliminary estimate showed that the rate of operational false-positive swab tests in the UK could lead to false results well over 50% of the time (Rita Jaafar et al., "Correlation Between 3790 Quantitative Polymerase Chain Reaction–Positives Samples and Positive Cell Cultures, Including 1941 Severe Acute Respiratory Syndrome Coronavirus 2 Isolates," *Clinical Infectious Diseases*, 28 September 2020, https://doi.org/10.1093/cid/ciaa1491). The reason for this is that the PCR test does not distinguish between virus particles, which have little effect on health or transmission, and the dangerous full-length virus. In partial confirmation of these findings, on 13 January 2021 the WHO issued a "medical product alert," which acknowledged that in the absence of "clinical presentation" of the virus (e.g., difficulty breathing, fever, cough), the PCR is inadequate to detect the virus: "a new specimen should be taken and retested" (WHO, "Nucleic Acid Testing (NAT) Technologies That Use Polymerase Chain Reaction (PCR) for Detection of SARS-CoV-2," *WHO*, 2021, https://www.who.int/news/item/20-01-2021-who-information-notice-for-ivd-users-2020-05). In response to claims that the numbers of infections and deaths are irresponsibly inaccurate and exaggerated, one could note that China, Taiwan, Korea, and other countries have utilized other protocols for detecting COVID-19, but they have nevertheless reported high numbers of infections and virus-related deaths.

[15] Smriti Mallapaty, "The Coronavirus Is Most Deadly If You Are Older and Male — New Data Reveal the Risks," *Nature* 585, no. 7823 (2020), https://doi.org/10.1038/d41586-020-02483-2, 16.

[16] California Department of Public Health (CDPH), "Cases and Deaths Associated with COVID-19 by Age Group in California," *CDPH*, 23 June 2021, https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/COVID-19-Cases-by-Age-Group.aspx.

[17] Economist, "Our Covid-19 Model Estimates Odds of Hospitalisation and Death," *The Economist*, 13 March 2021, https://www.economist.com/graphic-detail/2021/03/13/our-covid-19-model-estimates-odds-of-hospitalisation-and-death.

[18] Insurance Information Institute (III), "Facts + Statistics: Teen Drivers," *III*, 2018, https://www.iii.org/fact-statistic/facts-statistics-teen-drivers; Insurance Institute for Highway Safety, Highway Loss Data Institute (IIHS-HLDI), "Fatality Facts 2019: Teenagers," *IIHS-HLDI*, 2019, https://www.iihs.org/topics/fatality-statistics/detail/teenagers.

[19] Elisabeth Mahase, "Covid-19: Why Are Age and Obesity Risk Factors for Serious Disease?," *BMJ* 371 (2020), https://doi.org/10.1136/bmj.m4130.

[20] Economist, "Our Covid-19 Model."

COVID-19 has a number of complex non-lethal effects, since it "attacks the body in many different ways, ranging from mild to life threatening. Different organs and tissues of the body can be affected."[21] For many, especially the young, the virus causes mild flu-like symptoms, such as a persistent cough and runny nose, shortness of breath, pain or tightness in the chest, headache and fever, fatigue, and a loss of the senses of taste and smell.[22] For others, it can cause lung injury and lead to pneumonia, Acute Respiratory Distress Syndrome (ARDS), and sepsis.[23] Sometimes COVID-19 causes cause blood clots, which in turn affect the kidneys, the skin causing reddish or purple rashes, and the nervous system (sometimes causing strokes),[24] and medium to long-term brain injury with negative effects on memory, attention, and executive function.[25] Negative long-term effects of COVID-19 (also called late sequalae and post-COVID syndrome, among other similar names) on many organs have been documented "in most, if not all, body systems including cardiovascular, pulmonary, renal, dermatologic, neurologic, and psychiatric."[26]

1.2 Use of aborted human fetal cell lines

Given the serious dangers posed by COVID-19, to grasp the moral import of receiving abortion-tainted vaccines, we must first consider the facts regarding abortions and vaccines in the medical industry, and then evaluate those facts from a moral perspective.

1.2.1 Abortions and the medical research industry in general

Records attest that abortions have been committed for millennia, but in pre-modern times the body of the aborted fetus was not used for medical purposes; it was either buried or simply disposed of.[27] As medical technology advanced, however, this changed. In 1921, physicians in the United Kingdom reported having grafted tissue "from a foetus just after death" onto the testicle of a man suffering from Addison's disease.[28] In the early 1960s, Leonard Hayflick was able to obtain aborted baby parts quietly and illegally for the Wistar Institute in Philadelphia in a bid to create cell lines.[29] By 1972, an editorial in the *British Medical Journal* reported, "The use of fetal tissues has long been necessary in virology, cancer research, immunology, and other work."[30] The use of fetal tissue had become a point of intense discussion, because two years prior Norman St. John-Stevas had stated in Parliament, during a discussion of a proposed bill to permit more abortions, that "aborted live

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[21] Panagis Galiatsatos and Robert Brodsky, "What Does COVID Do to Your Blood?" *Johns Hopkins Medicine*, 18 November 2020, https://www.hopkinsmedicine.org/health/conditions-and-diseases/coronavirus/what-does-covid-do-to-your-blood.

[22] CDC, "Symptoms of COVID-19," *CDC*, 22 February 2021, https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html.

[23] Panagis Galiatsatos, "COVID-19 Lung Damage," *Johns Hopkins Medicine*, 2021, https://www.hopkinsmedicine.org/health/conditions-and-diseases/coronavirus/what-coronavirus-does-to-the-lungs.

[24] Galiatsatos and Brodsky, "What Does COVID Do to Your Blood?"

[25] Andrew E. Budson, "The Hidden Long-Term Cognitive Effects of COVID-19," *Harvard Medical School: Harvard Health Publishing*, October 8, 2020, https://www.health.harvard.edu/blog/the-hidden-long-term-cognitive-effects-of-covid-2020100821133.

[26] CDC, "Post-COVID Conditions: Information for Healthcare Providers," *CDC*, 8 April 2021, https://www.cdc.gov/coronavirus/2019-ncov/hcp/clinical-care/post-covid-conditions.html.

[27] John M. Riddle, *Eve's Herbs: A History of Contraception and Abortion in the West*, (Cambridge, Mass.: Harvard University Press, 1999). Specific page number?

[28] A.F. Hurst, W.E. Tanner, and A.A. Osman, *Addison's Disease, with Severe Anaemia, treated by Suprarenal Grafting*, Proc R Soc Med 15 (1922): 19-20.

[29] Leonard Hayflick, "The Limited in vitro Lifetime of Human Diploid Cell Strains," *Experimental Cell Research* 37, no. 3 (March 1965): 614-36.

[30] British Medical Journal, "On the Fetus," vol. 2, no 5813 (1972): 550.

fetuses have been sold for medical experiments."[31] Soon after *Roe v. Wade* (1973), similar practices in the United States were openly acknowledged. In the words of one author: "Experimentation with live human fetuses—those with discernible heartbeats—has occurred both in utero and upon aborted fetuses."[32]

The collaboration between the abortion industry and medical research continued—and controversies did not abate. The American news show "20/20" alleged in 2000 that a company was profiteering from the illegal sale of fetal tissue. This allegation led to a bi-partisan Congressional request for investigation by the Department of Justice and the Federal Bureau of Investigation.[33] In 2015, secretly recorded video footage from the Center for Medical Progress showed that Planned Parenthood was making fetal tissue available to medical researchers, apparently illegally. Investigations in over twelve states were initiated, and in 2019 Planned Parenthood representatives and others testified under oath that they regularly supplied fetal tissue to researchers.[34] The Charlotte Lozier Institute estimates that as of 2019, the National Institutes of Health had funded over $500 million for fetal tissue projects through the years, with more than $100 million in 2019 alone.[35] These body parts were harvested from babies who died by elective abortion or even by the act of harvesting itself.

1.2.2 Vaccine use of abortion-derived cell lines

Multiplying human cells is necessary for many kinds of experiments and medical applications, but the process is difficult in a lab: because of the limited number of times they can divide, cells eventually grow "old." Young and fresh human cells are preferred, and it is often argued that those from human fetuses are optimal. Cells taken from a baby are multiplied into many cells of the same kind. These can be further multiplied, creating lines of cells that are sometimes used for experiments. The difficulty of establishing viable cell lines—unless they are harvested *in vivo*—means that these cell lines almost certainly derive from an induced abortion, not a miscarriage.[36] The production of vaccines has for some time involved the use of abortion-derived cell lines.

This section will discuss how some cell lines used in vaccines were derived from abortions. We do this to show the human face of the issue, as well as to reveal the real practices that have been used and, in some cases, continue to be used. It has been claimed that the use of current cell lines from aborted babies is firmly established, and no new abortions are required.[37] Unfortunately, this does not appear to be upheld by the facts. As we will see, abortionists and harvesters continue to abort babies so that the tissue may be harvested from a still-living child and can be used for new cell lines.

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[31] British Medical Journal, "Experiments on the Fetus," vol. 2, no. 5707 (1970): 433.
[32] Gary L. Reback, "Fetal Experimentation: Moral, Legal, and Medical Implications," *Stanford Law Review* 26, no. 5 (1974): 1195.
[33] John D. Dingell, "Congress Requests DOJ, FBI Investigation inot Sale of Fetal Tissue," *Inside Washington's FDA Week*, vol. 6, no. 11 (2000): 9-11.
[34] Center for Medical Progress Staff [hereafter CMP], "Planned Parenthood Testimony On Selling Baby Parts Unsealed, New Videos Released: Testimony" *Center for Medical Progress,* 26 May 2020, https://www.centerformedicalprogress.org/2020/05/planned-parenthood-testimony-on-selling-baby-parts-unsealed-new-videos-released/.
[35] Tara Sander Lee and James L. Sherley, "A Policy and Funding Evaluation of Human Fetal Tissue Research," *Charlotte Lozier Institute,* 11 September 2020, https://lozierinstitute.org/a-policy-and-funding-evaluation-of-human-fetal-tissue-research/.
[36] Alvin Wong, "The Ethics of HEK 293" *The National Catholic Bioethics Quarterly* 6 (Autumn 2006): 473-495.
[37] Christopher O. Tollefsen, "Research Using Cells of Illicit Origin and Vaccines from Fetal Tissue" *The Public Discourse*, 27 May 2020, https://www.thepublicdiscourse.com/2020/05/63447/.

1.2.2.1 Aborted children and vaccine cell lines

1) WI-38 (Girl) - Wistar Institute, cell strain 38

This was developed from the lung tissue of a Swedish baby girl, 3 months gestation, aborted in 1962 by parents who felt they had too many children. The baby's tiny organs were extracted without the mother's knowledge or permission, packed on ice and flown to the Wistar Institute in Philadelphia, where Leonard Hayflick dissected them (Hayflick 1965; Wadman 2013). Almost immediately cells from this child were exploited for the manufacture of vaccines, which involved harvesting additional aborted babies in order to find viruses to infect existing WI-38 cells. Doctor Stanley A. Plotkin, one of the chief virologists in the world, reported:

> Virus was obtained from an aborted rubella-infected human fetus. The 25-year-old mother was exposed to rubella eight weeks after the last menstrual period. […] The fetus was surgically aborted seventeen days after the maternal illness and dissected immediately. Explants from several organs were cultured and successful cell growth was achieved from lung, skin, and kidney. […] This harvest was inoculated on stationary WI-38 diploid lung fibroblasts, to initiate infection in these cells.[38]

The tissue culture for rubella virus RA 27/3 (**R**ubella, **A**bortus, **27**th fetus, **3**rd tissue culture explant) was so named because of the number of abortions performed for this single study (Plotkin et al. 1969).[39] All in all, over 80 fetuses were used for this study on rubella alone, including WI-38 and RA 27/3.[40]

This cell line was used to develop vaccines for viruses including measles, mumps, rubella, varicella (chicken pox), rabies, and hepatitis A.[41] **It was not used in relation to COVID-19.**

2) HEK-293 (Girl) – Human Embryonic Kidney cells, attempt 293

Developed from kidney cells from a baby girl of unknown gestational age around 1972 in the Netherlands, where, at the time, abortion was illegal. The head of the lab which used the cells, Alex Jan van der Eb, recounted his recollections about the fetal source of the tissue, asserting that it was an abortion: "The fetus, as far as I can remember was completely normal. Nothing was wrong. The reasons for the abortion were unknown to me. I probably knew it at that time, but it got lost, all this information."[42] His associate Frank Graham transfected these cells with adenovirus to make them "immortal." After 292 failed attempts, he succeeded in creating an immortalized cell line, naming it HEK-293.[43] Graham later said that, "to the best of his knowledge, the exact origin of the HEK-293 fetal cells is unclear.

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[38] S.A. Plotkin, D. Cornfeld, and T.H. Ingalls, "Studies of Immunization with Living Rubella Virus: Trials in Children With a Strain Cultured From an Aborted Fetus," *American Journal of Diseases of Children* 110 (1965): 381-82. https://doi.org/10.1001/archpedi.196502090030401007.

[39] S.A. Plotkin, J.D. Farquhar, M. Katz, and F. Buser, "Attenuation of RA 27/3 Rubella Virus in WI-38 Human Diploid Cells," *American Journal of Diseases of Children* 118 (1969): 178-85. https://doi.org/10.1001/archpedi.1969.02100040180004.

[40] Rene Leiva, "A Brief History of Human Diploid Cell Strains," *The National Catholic Bioethics Quarterly* 6 (Autumn 2006): 443-51.

[41] S.J. Olshansky and L. Hayflick, "The Role of the WI-38 Cell Strain in Saving Lives and Reducing Morbidity," *AIMS Public Health* 4: 127-38. https://doi.org/10.3934/publichealth.2017.2.127.

[42] United States of America Food and Drug Administration, Center for Biologics Evaluation and Research, Vaccines and Related Biological Products Adivosry Committee [USDA Committee], meeting transcription, 2001: 81. https://web.archive.org/web/20170516050447/https://fda.gov/ohrms/dockets/ac/01/transcripts/3750t1_01.pdf

[43] F.L. Graham, J, Smith, W.C. Russell, and R. Nairn, "Characteristics of a human cell line transformed by DNA from human adenovirus type 5," *J Gen Virol* 36 (1977): 59-74. https://doi.org/10.1099/0022-1317-36-1-59.

They could have come from either a spontaneous miscarriage or an elective abortion."[44] The imprecision comes from the label "'abortus" used at the time, which could mean either an induced abortion or a miscarriage. It may be noted that that Graham was willing to accept these cells and experiment on them, whatever their source may have been.

Cell line HEK-293 has been used for COVID-19 vaccines produced by AstraZeneca,[45] Moderna with the National Institutes of Health,[46] and Pfizer,[47] among others. It should be noted that, while HEK-293 cells were used for preclinical or clinical vaccine response testing (e.g. pseudovirus neutralization assays used to assess the sera of vaccinated animals or people for anti-viral activity), they are not used in the vaccine production itself. Hence: the Moderna and Pfizer products that are physically put into people's arms have not actually ever contacted fetal tissue, whereas the AstraZeneca product (Vaxzevria) specifically comes from a manufacturing process requiring them.

3) PER.C6 (Boy) – Primary human Embryonic Retinal cells, Clone 6

Developed by Alex van der Eb from an isolated retina of a baby boy about 18 weeks gestation, aborted in 1985 in the Netherlands. Van der Eb chose to sample the baby's retina because studies had shown not long before that human embryonic retina could more readily be transformed. He recounted that the abortion was elective "simply because the woman wanted to get rid of the fetus. […] The father was not known, not to the hospital anymore, what was written down [was an] unknown father, and that was, in fact, the reason why the abortion was requested"[48]

Cell line PER.C6 has been used for COVID-19 vaccines produced by Johnson & Johnson,[49] among others.

4) WALVAX 2 (Girl) – Walvax Biotech Inc.

Developed from the lung tissue of a baby girl in China, 3 months gestation, who was aborted "because of the presence of a uterine scar from a previous caesarean birth by a 27-year-old healthy woman."[50] This girl was ultimately selected from among nine aborted babies in 2009.

China's Walvax Biotechnology company has declared its intention to create a vaccine as an alternative to AstraZeneca's vaccine, foreseeing a capacity of up to 200 million doses a year.[51] Although the details of the study, still in Phase I, have not been published, the inference is that Walvax will use WALVAX-2, their own cell line, for the vaccine.

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[44] Nicanor Austriaco, "Moral Guidance on Using COVID-19 Vaccines Developed with Human Fetal Cell Lines, *The Public Discourse*, 26 May 2020, https://www.thepublicdiscourse.com/2020/05/63752.

[45] Neeltje van Doremalen et al., "ChAdOx1 nCoV-19 vaccine prevents SARS-CoV-2 pneumonia in rhesus macaques," *Nature* 586 (2020): 578-82. https://doi.org/10.1038/s41586-020-2608-y. Note that the publication names only HEK-293 cells as having been used. In response to claims that MRC-5 cells were used in the development of its COVID-19 vaccine, a spokesperson for AstraZeneca confirmed that it did not use MRC-5 cells.

[46] Kizzmekia S. Corbett et al., "SARS-CoV-2 mRNA vaccine design enabled by prototype pathogen preparedness," *Nature* 586 (2020): 567-71. https://doi.org/10.1038/s41586-020-2622-0.

[47] Annette B. Vogel et al., "A prefusion SARS-CoV-2 spike RNA vaccine is highly immunogenic and prevents lung infection in non-human primates," *bioRxiv* (2020). https://doi.org/10.1101/2020.09.08.280818.

[48] USDA Committee, 91, 99.

[49] Lisa H. Tostanoski et al., "Ad26 vaccine protects against SARS-CoV-2 severe clinical disease in hamsters," *Nature Medicine* 26 (2020): 1964-1700. https://doi.org/10.1038/s41591-020-1070-6.

[50] Bo Ma et al., "Characteristics and viral propagation properties of a new human diploid cell line, Walvax-2, and it suitability as a candidate cell substrate for vaccine production," [hereafter Walvax-2] *Hum Vaccin Immunother* 11 (4) (2015): 999. https://doi.org/10.1080/21645515.2015.1009811.

[51] Reuters, "China's Walvax to make COVID-19 vaccine candidate similar to AstraZeneca's – media," *Thompson Reuters Foundation News*, 27 December 2020, https://news.trust.org/item/20201227085437-yec70/.

1.2.2.2 Continuing evil methods used for obtaining fetal tissue

Methods of abortion unfavorable to obtaining tissue from the embryo include surgical abortions, such as suction curettage in which the baby is sucked into a hollow vacuum tube, and dilation and evacuation in which an abortionist extracts the parts of the baby piece by piece with forceps. The death and damage done to the body, as well as the contamination risk to the fetal tissues (exposed to various bacteria), make these procedures unsuitable for tissue harvesting.

In contrast, methods described by Deborah Nucatola, senior director of medical research for Planned Parenthood, ensure that sought-for organs and tissues can be obtained. In Nucatola's words:

> "I'd say a lot of people want liver. And for that reason, most providers will do this case under ultrasound guidance so they'll know where they're putting their forceps. We've been very good at getting heart, lung, liver, because we know that, so I'm not gonna crush that part, I'm gonna basically crush below, I'm gonna crush above, and I'm gonna see if I can get it all intact."[52]

These sorts of procedures are performed both to obtain particular intact organs, as described, as well as to harvest sources of cells that can be used for research purposes.

Killing an infant born alive is illegal in countries such as England[53] and the United States.[54] Consequently, physicians performing abortions must ensure that a fetus is dead at the time of abortion. Hence, in these countries a physician will use chemicals to induce death in the womb (feticide), including saline, lidocaine, and potassium chloride, when the labor-inducing chemical does not cause death.[55] A significant percentage of live births have been recorded for induced pregnancies in the absence of feticidal chemicals: 0-50% with misoprostol,[56] 1-21% of vaginal inductions with PGE2,[57] 8.5-13% with oxytocin,[58] and 18% with prostaglandin.[59]

Feticidal chemicals have a negative effect on tissue quality. Research shows that fetal tissue "must be 'harvested' within a few minutes of delivery. […] Drugs which reduce physiological activity need to be avoided. The fetus therefore is in as alive and aware a state as possible when being opened."[60] Such was the practice in virological research in the 1950s, as reported in one study: "Human embryos of two and one-half to five months gestation were obtained from the gynaecological department of the Toronto General Hospital. They were

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Chinese Clinical Trial Register [hereafter ChiCTR], "A Phase I clinical trial to evaluate the safety, tolerance and preliminary immunogenicity of different doses of a SARS-CoV-2 mRNA vaccine in population aged 18-59 years and 60 years and above." http://www.chictr.org.cn/showprojen.aspx?prog=55524.

[52] Sandhya Somashekhar and Danielle Paquette, "Undercover video shows Planned Parenthood official discussing fetal organs used for research," *Washington Post*, 14 July 2015, https://www.washingtonpost.com/politics/undercover-video-shows-planned-parenthood-exec-discussing-organ-harvesting/2015/07/14/ae330e34-2a4d-11e5-bd33-395c05608059_story.html.

[53] Royal College of Obstetricians and Gynaecologists [hereafter RCOG], *The Care of Women Requesting Induced Abortion: Evidence-based Clinical Guideline Number 7*, (London: RCOG Press, 2011), 6.21.

[54] "Born-Alive Infants Protection Act of 2002," Pub. L. No. 107-207, 116 Stat 926 (2002). https://www.govinfo.gov/content/pkg/PLAW-107publ207/pdf/PLAW-107publ207.pdf

[55] S. Lalitkumar, M. Bygdeman, and K. Gemzell-Danielsson, "Mid-trimester induced abortion: a review" *Hum Reprod Update* 13 (2007), 45. https://doi.org/10.1093/humupd/dml049.

[56] Lynn Borgatta, "Labor induction abortion in the second trimester," *Contraception* 84 (2011b).

[57] Lynn Borgatta, "Labor Induction Termination of Pregnancy," *Glob libr. Women's med* (2011a). https://doi.org10.3843/GLOWM.10444.

[58] Borgatta, "Termination of Pregnancy" and Borgatta, "Second Trimester"

[59] Borgatta, "Termination of Pregnancy."

[60] Priscilla Alderson, "The Foetus as Transplant Donor: Scientific, Social and Ethical Perspectives," *Journal of Medical Ethics* 14 (1) (1988): 51.

placed in a sterile container and promptly transported to the virus laboratory. […] [I]n many of the embryos the heart was still beating at the time of receipt in the virus laboratory."[61] Another report stated, "tissue cultures from live aborted fetuses are valuable in the production of vaccines."[62] Dissecting live embryos continued for the following decades,[63] and sworn testimony affirms that **this practice has not ceased**.[64] The foundation Judicial Watch revealed proof that the US Food and Drug Administration (FDA) had spent tens of thousands of dollars to buy human tissue from aborted children for reasons that included to create "humanized mice" to test "biologic drug products"; tissues included fetal livers, brains, eyes, and lungs.[65] Emails show that the FDA's purchases knowingly targeted babies after 20 weeks gestation—after which survival outside of the womb is possible—and that partial-birth abortions were likely used in many cases.[66]

The words of cell line makers themselves suggest that they continue to dissect children while they are still alive. Scientists in China divulged using a method called "water bag" abortion to "guarantee a high quality cell strain" from uncompromised tissues for the WALVAX-2 cell line.[67] This abortion procedure is relatively simple, reduces delivery time, and can help ensure the baby is born alive and without any anesthetics.[68] The researchers' report, "The tissues from the freshly aborted fetuses were immediately sent to the laboratory for the preparation of the cells," may indicate that the child was operated upon while her heart was still beating.[69]

1.3 Moral evaluation of using aborted human fetal cell lines in vaccines

Having seen some of the most salient facts about how aborted human fetal cells are extracted by researchers, from a Catholic moral perspective we evaluate the usage of these cells. We begin by reviewing principles regarding moral acts, and then proceed to consider the morality of abortion. Finally, we respond to the argument that using cells derived from an abortion is good because it can help save lives.

1.3.1 Basic structure of a human act: object, end, and circumstances

Considered from the broadest perspective, a human act is morally good, "when it attests to and expresses the voluntary ordering of the person to his ultimate end and the

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[61] Joan C. Thicke et al., "Cultivation of Poliomyelitis Virus in Tissue Culture," *Canadian Journal of Medical Sciences* 30 (3) (1952): 232.
[62] Reback, "Fetal Experimentation," 1196-97.
[63] Pietro Croce, *Vivisection or Science?: An Investigation Into Testing Drugs and Safeguarding Health,* (Massagno/Lugano: Zed Books, 1991).
[64] CMP, "Planned Parenthood Testimony." Here is an excerpt of the sworn court testimony of Planned Parenthood "procurement manager," Perrin Larton: Q: By not alive do you mean that they were not moving?
A: Correct.
Q: And do you mean that they did not have a heartbeat?
A: It would depend.
Q: And when you say it would depend, what do you mean?
A: There are, I can see hearts that are in, not in an intact POC [Proof of Conception, i.e., embryo] that are beating independently. (https://youtu.be/lHh5IFXao-4?t=359)
[65] Judicial Watch, "Judicial Watch Obtains Additional Records of FDA Purchases of Fetal Tissue for 'Humanized Mice' Progject: Agency Wanted 'Fresh, Shipped on Wet Ice' Fetal Organs," press release, April 1, 2021, https://www.judicialwatch.org/press-releases/humanized-mice-fda/.
[66] Edie Heipel, "Federal Government Caught Buying 'Fresh' Flesh of Aborted Babies Who Could Have Survived as Preeemies," *The Federalist*, 15 April 2021, https://thefederalist.com/2021/04/15/federal-government-caught-buying-fresh-flesh-of-aborted-babies-who-could-have-survived-as-preemies/.
[67] Ma, "Walvax-2," 1006.
[68] Pi-Chao Chen, "China's Population Program at the Grass-Roots Level," *Studies in Family Planning* 4, no. 8 (1973): 227.
[69] Ma, "Walvax-2," 1006.

conformity of a concrete action with the human good as it is acknowledged in its truth by reason."[70] On a fine-grain level, one can evaluate the morality of a human act by considering its three primary elements or "fonts": (1) the moral object or end of the act itself, (2) the intention of the acting agent, (3) the circumstances of the act, including its effects.[71] Each of these fonts must be good and in unison for an act to be good:[72] the agent must choose a morally good object, his intention must be good, and the immediate circumstances of the act must also be good.[73] At the same time, as we will see, all three elements are not equally important for evaluating the nature and goodness of the act.

(1) *Object*. The object of a moral act is a rationally apprehended good, that is, some existing good understood under a formality of "suitable for the agent" according to reason.[74] Ultimately, an act's object makes the act either in conformity with right reason informed by the natural law or divine precepts, or contrary to such right reason. The goodness or evil of an act is derived primarily from the object. Every act that is directed toward an evil object (one contrary to right reason) is by that very fact evil.[75] To knowingly perform an act that is directed to an object contrary to right reason is to choose evil, that is, it entails ordering one's choice only to an apparent good and not to the true good, or avoiding a true good as if it were evil. In contrast, an act directed toward a good object is a good act as such.[76]

Reason and divine revelation show that there are some acts which by their very object are radically contrary to man's good and therefore are incapable of being ordered to human flourishing and ultimately to God.[77] Whatever extenuating circumstances may exist, and whatever pressures may weigh upon a person, intrinsically evil acts which by their very object constitute "grave faults," may never licitly be chosen and acted upon, and they have both temporal and eternal consequences.[78]

(2) *End*. The end can be described as that intended good towards which the agent directs the object of the act. When a person chooses to perform some particular act, he may intend to direct that act to some further end, that is, some purpose or motive over and above the object of the act.

Consider a hit man who, in order to pay his living expenses, takes orders from his boss to murder someone and incinerate his body. When he takes the steps to paying his bills with fees received from his boss, he is not primarily concerned with the mediate steps, that is, the murder and incineration. Rather, he chooses the murder because it leads to his chosen end: to pay his bills. In this case, the act of murder considered as a whole is an object chosen under a particular formality—that of "work for paying bills." The end intended by the will (bill payment) serves to unite and form the other acts that lead up to it: it is *profit-furthering murder*, which is different from other kinds of murder, such as arising from anger or sadism. We are now positioned to see why intended ends—that is, "intentions"—do not intrinsically change the moral quality of the object. Even if there are good reasons why the hit man must pay his bills—such as having a family to care for—those reasons do not justify the murder. Family-helping-murder remains murder. And murder is intrinsically evil: it always exists out

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[70] John Paul II, *Veritatis Splendor* [*VS*], (1993): §72.
[71] Thomas Aquinas, *Summa Theologiae* [*ST*], I-II, q. 18, a. 4; q. 19, aa. 2, 3, 7. *Catechism of the Catholic Church* [*CCC*] (Vatican City: Libreria Editrice Vaticana, 2005): §1750. Surendra Arjoon, "Ethical Decision Making: A Case for the Triple Font Theory," *Journal of Business Ethics* 71, no. 4 (2007): 395-410. John Paul II, *VS*, §74.
[72] *ST*, I-II, q. 19, a. 6, ad. 1.
[73] Ibid., q. 18, a. 4, ad. 3.
[74] Ibid., I-II, q. 18, aa. 1, 5.
[75] John Paul II, *VS*, §79.
[76] *ST*, I-II, q. 18, a. 6; II-II, q. 32, a. 1, ad. 1
[77] John Paul II, *VS*, §80.
[78] Ibid., §79.

of harmony with the moral good, with the dignity of the innocent victim, with the murderer's dignity, and with the murderer's union with God.[79]

(3) *Circumstances*. In the context of human acts, a circumstance is a condition that stands outside of an act, and "touches" the act.[80] Circumstances thus are accidents with respect to the substance of the act as determined by its object and end.[81] By definition, a circumstance is not a cause of the substance of a human act, and in that way is not properly a "font" of an act, although no act can exist without circumstances surrounding it, just as no created substance is without properties or accidents. As extrinsic to the act, circumstance are conditions joined to the act, giving it a particular quality, such as when the act takes place, by whom, by what means, and so on.[82] Good effects of one's act, along with emotions and mere wishes that do not change one's volition or choice in the matter at hand, are also circumstances. Hence, the mere fact that an action results in good effect does not guarantee moral goodness, for outcomes do not make an object or end good per se. Likewise, one's subjective enjoyment of an act, or a feeling of righteousness, or a repugnance upon performing it, are non-essential to the substance of the act even when they influence it. How one "feels" or emotional state of mind about performing a chosen act does not change its essential voluntariness and moral quality; rather, the morality of feelings should be measured by the nature of an object which elicits them.

1.3.2 Intrinsic evil of all abortions

The *object* of procured abortion is directly to kill a child in the womb of its mother. As such, it is always morally evil per se. No one can, in any circumstance, claim the right to kill directly an innocent human being.[83] This moral truth is known by all who have an upright conscience, for it is contained in the natural law, in God's commandment revealed to Israel (Ex 20:13; Dt 5:17), and in the teachings of Christ (Mt 19:16-19).

Some propose good *ends* to justify abortion—such as the "psychological health" of the mother, financial difficulty, or, much worse, for procuration of tissue for medical purposes—but nothing can justify the abominable violation of innocent life, especially in its most vulnerable stage when fully dependent in the protective womb of the mother. Aquinas articulates a fundamental moral principle with admirable clarity: "no evil can be excused because it is done with a good intention."[84]

Some point to *circumstances* that seem to justify abortion—such as a great need for medicines that could be made from tissues of aborted children—but this is incorrect: the evil of destroying innocent life remains inviolable, notwithstanding even the most compelling humanitarian circumstances.[85]

For these reasons, the Catholic Church has perennially, clearly, unanimously, and definitively taught that abortion "willed as an end or as a means, *always* constitutes a grave moral disorder."[86] This teaching is of Catholic faith and remains unchangeable.[87] Indeed, abortion is a crime "which no human law can claim to legitimize."[88]

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[79] Ibid., §82.
[80] *ST*, I-II, q. 7, a. 1; a. 2, ad. 2.
[81] Ibid., I-II, q. 7, a. 1; a. 4, ad 3.
[82] Ibid., I-II, q. 7, a. 2, ad 3; *CCC* 1754
[83] Congregation for the Doctrine of the Faith [CDF], *Donum Vitae: Instruction on Respect for Human Life in its Origin and on the Dignity of Procreation*, (1987): §5.
[84] Thomas Aquinas, *De decem praeceptis*, Bibliotheque Thomiste 52, ed. J.P. Torrell, (Paris: J. Vrin, 2000): a. 1, co.
[85] John Paul II, *Evangelium Vitae* [*EV*], (1995): §58.
[86] Ibid., §62 emphasis added.
[87] *CCC* §2271.
[88] John Paul II, *VS*, §73.

1.3.3 Criteria for morally licit tissue donation

Organ or tissue donation, whereby a physician surgically removes an organ or tissue from a donor and either transfers it to a host or uses it for medical purposes, can be a moral good, when "performed in an ethically acceptable manner, with a view to offering a chance of health and even of life itself to the sick who sometimes have no other hope."[89] The conditions for morally upright tissue donation include:

(a) the procedure cannot kill the donor and the tissue cannot be necessary for the donor's life: "living transplantation of a heart is thus precluded;"[90]

(b) the procedure cannot result in serious permanent injury, whether physical or psychological;[91]

(c) the tissue cannot be indissolubly linked with personal identity, as in the brain and gonads;[92]

(d) the donor or those who legitimately speak for him must give consent to the donation, since tissue donation is never an obligation but instead is an expression of a gift of self.[93]

Many of these criteria for tissue *donation* are extensions of the famous Nuremberg Code that addressed *experimentation*.[94] In the cases of a live birth of a dissected child, an impermissible grave moral evil is committed, namely, the direct killing of an innocent. Furthermore, criteria (a) and (b) are violated. When the child is killed first, the criterion (d) requiring consent is violated: the pre-natal child obviously gives no consent, and where the mother gives consent on behalf of the child to the donation the child's tissue, her capacity for impartial and unbiased decision-making is compromised by her prior decision to terminate the life of the child through abortion.[95]

1.3.4 Evil may never be done that good may result

Significantly, some present-day vaccine researchers appear to make use of the arguments used by Nazis to justify their experiments on prisoners including Jews. The Nazi doctor, Gerhard Rose, considered one of the most eminent scientists on trial, made a pragmatic argument based on positive outcomes. Rose said he came to be in favor of the experimentation on human subjects—which led to their suffering, mutilation, and often death—for pragmatic reasons: the Reich was losing more than 1,000 men a day whereas such experiments were conducted on only 100 or 200 subjects total.[96] The vast reduction in numbers dying on a relative basis were proposed to justify the killings. Similarly, Hayflick estimates that vaccines made from the aborted girl's WI-38 cell line have treated about 4.5

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[89] John Paul II, *EV*, §86.

[90] G. Laurie, S. Harmon, and E. Dove, *Mason and McCall Smith's Law and Medical Ethics*, 11th ed. (Oxford: Oxford University Press, 2019): 18.12; *CCC* 2296.

[91] Elio Sgreccia, *Personalist Bioethics: Foundations and Applications*, trans. John A Di Camillo and Michael J. Miller, (Philadelphia: The National Catholic Bioethics Center, 2012): 640; *CCC* §2296).

[92] Pontifical Academy for Life [PAV], "Prospects for xenotransplantation: scientific aspects and ethical considerations," (2002): 11.

[93] *CCC*, §2296; Sgreccia, *Personalist Bioethics*, 643.

[94] That is, (a) corresponds to Nuremberg Code [NC] no. 5, regarding the need to avoid death; (b) corresponds to NC nos. 4 and 5, regarding the need to avoid suffering and disabling injury; (d) corresponds to NC no. 1, regarding the necessity of voluntary consent.

[95] James T. Burtchaell, "Fetal Tissue Transplantation Research Testimony: Hearing before the Subcomittee on Health and Environment of the Committee on Energy and Commerce," *One Hundred First Congress*, *Second Session*, no. 101-135 (1990): 16-92 at 17.

[96] Arthur L. Caplan, "The Doctors' Trial and Analogies to the Holocaust in Contemporary Bioethical Debates," in *The Nazi Doctorees and the Nuremburg Code: Human Rights in Human Experimentation*, ed. George J. Annas and Michael A. Grodin, (Oxford: Oxford University Press, 1992), 267.

billion people globally and averted the deaths of about 10.3 million people globally.[97] The direct implication is that the abortions as well as the use of vaccines derived from cell lines developed from them were justified because of the downstream tangible and widespread public health good results.

In response, we must say that whereas the saving of life on such a vast scale is certainly laudable, this does nothing to alter the reality that the means for developing these vaccines was and remains evil. These evils include: (a) the unnecessary extraction of a child from the womb before birth; (b) depriving the child of baptism; (c) torture; (d) murder; (e) desecration of the body; (f) trafficking of the illicitly-derived tissues; (g) violation of the child's rights.[98] Following St. Paul, St. Thomas and all of Catholic tradition insists that one may not do evil so that good may result from it (Rom 6:1).[99] We have seen, for instance, that WI-38 was derived from a child who was "dissected immediately" after abortion. Treating another human being this way is horrific. The inescapable disorder of procured abortion, its character as "intrinsically evil," entails that no end, no matter how good, and no circumstance, no matter how significant, can justify the act. No good result can transform an intrinsically evil act and make it morally licit. Even when abortion is not performed *for the sake* of procuring tissue from the fetus, "the use of human embryos or fetuses as an object of experimentation constitutes a crime against their dignity as human beings who have a right to the same respect owed to a child once born, just as to every person."[100] In an extended way, trafficking cells derived from abortions and using them in research must be considered illicit and should be prohibited, and one must distance oneself from the evil aspects of that system to avoid a "toleration or tacit acceptance of actions which are gravely unjust."[101] For these reasons, terms such as *abortion-derived vaccines*, or *vaccines derived from illicit means*, or other equivalents are used to signify that evil means were used to originate such vaccines, and which is wholly consistent with Church's description of them as "human 'biological material' of illicit origin."[102]

2. Authorities on Vaccine Use

Having seen the grave evils perpetrated in developing the cell lines used for some vaccines, we can now ask whether not it is morally acceptable for an individual to be inoculated with such a vaccine of "illicit origin."[103]

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[97] S.J. Olshansky and L. Hayflick, "The Role of the WI-38 Cell Strain in Saving Lives and Reducing Morbidity," *AIMS Public Health* 4 (2017): 127-138. https://doi.org/10.3934/publichealth.2017.2.127.

[98] See Don Pietro Leone, "The COVID-19 Vaccination Debate: Chains of Evil," *Rorate Caeli*, 15 April 2021. https://rorate-caeli.blogspot.com/2021/04/don-pietro-leone-chains-of-evil.html. Leone differs in detail.

[99] Thomas Aquinas, *Super Epistolas S. Pauli lectura*, c. 3, I.1, no. 269; *CCC* § 1756.

[100] John Paul II, *EV*, 63.

[101] See CDF, *Donum Veritatis*, I.4; CDF, *Dignitas Personae: Instruction on Certain Bioethical Questions* (2008): §35. One controversy regards whether or not the cells derived an aborted fetus constitute the cells *of the original fetus*. This does not seem to be the case, because the original cells of the fetus were of a finite number, and the number multiplied from them *after the original extraction* are of a much, much greater number (millions if not billions more). However, there is undoubtable continuity between the original cells and derived cells: formal continuity exists insofar as they share similar (but distinct) genetic structures; material continuity would exist if there were debris from the original cells that persist in the new ones. Such seems to have been the case for vaccines made from the MRC-5 cell line (see https://www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/B/excipient-table-2.pdf); but does not seem to be the case for the covid vaccines: https://www.vaccinesafety.edu/Components-Excipients%2021-0115.pdf and https://www.hackensackmeridianhealth.org/HealthU/2021/01/11/a-simple-breakdown-of-the-ingredients-in-the-covid-vaccines/

[102] CDF, *Dignitas Personae*, §34; Nicanor Austriaco, "Using Biological Materials of Illicit Origin," *Catholic Healthcare Ethics: A Manual for Practitioners*, 3rd ed., ed. Edward J. Furton, (Philadelphia: The National Catholic Bioethics Center, 2020).

[103] CDF, *Dignitas Personae*, §35.

There are two major sorts of arguments that can be proposed in this regard: extrinsic arguments from authority, and intrinsic arguments that consider the act itself. These are treated in section 2 (here) and 3 (following).

It should be openly noted that one of the great difficulties in evaluating these matters is that the COVID-19 has been politicized from its first emergence in public awareness. Most, if not all, of the information from nearly every outlet has been filtered through an increasingly all-encompassing imbalanced discourse obstructs frank rational analysis and an honest open-minded search for truth, and instead promotes one apocalyptic narrative or another. Consequently, political, scientific, and other authorities suffer from a widespread forfeiture of credibility, and difficulties abound in assessing the accuracy of their claims. Hence, we will simultaneously argue for the following.

On the one hand, the *onus probandi* (burden of proof) is on public and scientific authorities to make clear, compelling, consistent, and logical arguments for the measures they are taking and recommending, with only the authentic common good in mind.

On the other hand, it is reasonable for the general public to receive the vaccines in good conscience based on recommendations of public health authorities and the Congregation for the Doctrine of the Faith. It would be unreasonable to expect the average person to follow the complex arguments about the validity of the science of the vaccines, or the moral evaluation of them (including this essay).

2.1 Principles for evaluating pronouncements of authority

In order to choose to perform an action because an authority declares it to be morally good, one must accurately identify the type of authority who speaks; how to interpret authoritative pronouncements; what to do if authorities conflict. These issues are treated successively in what follows.

2.1.1 Kinds of authorities and authoritative statements

There are two types of authorities: *de jure* and *de facto*. A *de jure* authority possesses administrative power or status, derived from an invested office or recognized position that confers a right to teach, to issue edicts, to command, or to influence, based on the official position held.[104] A *de facto* authority is derived from specialized competency on a given subject matter, or expertise "in a field of knowledge in such a manner that his pronouncements in this field carry a special weight of presumption," which is greater than the claims of a non-expert in the same field.[105]

God is the ultimate, overarching authority *de jure* as Creator, and *de facto* as possessing all wisdom, all knowledge, and all understanding in Himself. He speaks authoritatively in natural law, in divine law, and through His authoritative ministers.

The Catholic Magisterium, which derives its *de jure* authority from Christ himself (Lk 10:16; Jn 13:20), teaches doctrines that, among themselves, may call for different levels of assent.[106] At the highest level are definitive irreformable dogmas taught directly by the pope or an ecumenical council, and when bishops worldwide universally agree on some doctrinal matter. Statements issued by the Congregation for the Doctrine of the Faith expressly approved by the Pope participate in the ordinary magisterium of the successor of Peter.[107] Statements issued by individual bishops directly regarding faith or morals, when in conformity of the perennial Catholic teaching, also are expressions of the Church's

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[104] Douglas Walton, *Appeal to Expert Opinion: Arguments from Authority* (University Park, PA: The Pennsylvania University State Press, 1997): 78.
[105] Ibid., 77.
[106] CDF, "Doctrinal Commentary on the Concluding Formulary of the *Professio fidei*," (1998).
[107] CDF, *Donum Veritatis*, §18.

magisterial authority albeit on a lower level.[108] Within official documents of the Magisterium, there may also be statements that do not directly pertain to faith or morals.[109] It should be especially noted that there may be statements of a Catholic authority that involve "certain contingent and conjectural elements," of the prudential order that may be subject to change.[110]

Next, there are statements from legitimate political authorities *de jure*. These have some compelling force in themselves, insofar as such persons ultimately derive their authority from God and have care for the common good (Rm 13:1-7; 1 Pet 2:13-15).[111]

Finally, there are experts who possess some authority *de facto* "based on a claim to special knowledge in a field of skill, competence, or factual knowledge."[112] Statements from experts are authoritative only insofar as they fall within the field of the individual's expertise, usually recognized by other experts, in the subject matter relevant to his pronouncement.

The two kinds of authority are often confused. In part, the confusion arises because individuals and institutions can embody both kinds of authority. Not a few authorities appeal partly to their *de jure* office, and partly to a *de facto* expertise. For example, a medical official within civil government may have a quantum of jurisdictional authority, but primarily possesses scientific expertise that gives greater weight to his claims. Similarly, a theologian may enjoy a degree of authority because of his position at a prestigious university, but the greater part of his authority comes from proven expertise within his particular field of study. Conversely, when a de jure authority expresses a pronouncement as authoritative as if it came from expertise, when in fact it does not, or when an expert expresses a pronouncement as if it compelled belief or obedience as if it came from some authoritative office, then a fallacious appeal to authority is being made.[113]

It may be noted that, from a Catholic perspective, the argument from Tradition seems to involve both *de jure* and *de facto* matters. On the one hand, perennial Tradition has a sort of apostolic authority (*de jure*), since it stems from the apostles themselves even though it may not exist entirely in written documents. Nor does Tradition belong to a single administrative authority as such; but rather, it relies upon numerous Catholic administrative authorities to protect, explain, defend, and promulgate its sacred content. Yet on the other hand, insofar as Tradition contains the deepest truths as taught by Christ and handed on by the apostles, its sacred content is the substance of *de facto* Catholic theological expertise.

2.1.2 Principles for interpreting authoritative pronouncements

Within the Catholic Church, an opinion is designated as "private" insofar as it is directed to a limited number of people, or is *not* intended to invoke one's expertise or an exercise of office. Hence, when a pope expresses conjecture even on matters regarding faith or morals in some non-official way, not invoking his authority as successor to St. Peter, then he is expressing "mere" private opinion, even if it is globally broadcast or widely publicized. In contrast, an authoritative pronouncement is some act of speech or word which is meant to be believed or obeyed by the authority's subordinate on the basis of the authority's invoked office, expertise, or both.

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[108] CDF, *Donum Veritatis*, §19; Second Vatican Council, Dogmatic Constitution on the Church *Lumen Gentium*, (1964): §25.
[109] Jimmy Akin, *Teaching with Authority* (El Cajon, CA: Catholic Answers Press, 2018): nos. 360-393.
[110] CDF, *Donum Veritatis*, §24.
[111] *CCC* §2239-40.
[112] Walton, *Appeal to Expert Opinion*, 77.
[113] Ibid., 234-38.

The *genre* of the authority's pronouncement, and the document or context in which it exists, must always be considered. The language used by the authority ought to mark clearly the nature of the pronouncement.

As a genre, laws and commands use declarative and imperative language, such as, "you *must* do this," and, "all people *will* do that." Laws and commands of legitimate superiors call for obedience when they are within the sphere of the authority's proper power, when they are in accord with the demands of the moral order, with the fundamental rights of persons, and the teachings of the Gospel.[114] In general, St. Alphonsus, citing Aquinas, Augustine, and a host of others, argues that we should give authorities the benefit of the doubt unless some manifest good reason suggests otherwise.[115] Hence, laws and commands of civil authorities ought to be obeyed, except when they contradict natural law, divine law, Church law, or a prudential application of exceptions.

As a genre, exhortations, recommendations, and counsels of *de jure* authorities use language that is conditional or encouraging, such as, "you *ought to* do this," and, "*if* you want that outcome, *then* do that," and, "I *recommend* that you do this." By their very nature, exhortations and counsels do not compel absolutely: "a counsel is left to the option of the one to whom it is given."[116] However, exhortations by a legitimate authority of the Church regarding concrete, particular matters that are addressed to the faithful call for a willing submission, unless there are well-founded and grave reasons for avoiding action or doing the contrary: "disagreement could not be justified if it were based solely upon (a) the fact that the validity of the given teaching is not evident or (b) upon the opinion that the opposite position would be the more probable or (c) the judgment of the subjective conscience of the individual."[117]

Recommendations of experts can be considered a type of counsel. Their *de facto* authority is limited to the sphere of expertise claimed by the individual. As the medieval logician Peter of Spain—often identified with Pope John XXI—stated, "Any expert should be believed in his own field of knowledge."[118] Hence, to weigh an expert's opinion, the following critical questions of pedigree should be considered:[119]

(a) *Expertise*: How credible is the person as an expert source?
(b) *Field*: Is the person an expert in the field that his recommendation is in?
(c) *Trustworthiness*: Is this person personally reliable as a source?

If the person proposed as an expert is truly an expert, as demonstrated through publications or some other display of detailed knowledge, or as recognized by other experts; if the expert is speaking within the field of his expertise, including applications of that expertise; and if the expert is trustworthy, then the recommendation ought to be weighed heavily by non-experts and can be followed when it is not clearly contrary to any known moral obligation. However, the recommendation has little to no weight to it if the person has only shallow knowledge or imprecision and not expertise, such as political opinions based on one's celebrity status; where the person is speaking completely outside of his expertise, as when a scientist opines about an intricate point in theology; or if the person is untrustworthy, as indicated by demonstrated self-interest or bias in the issue, by past lies, or by a history of incompetence.

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[114] *CCC* §2242.
[115] Alphonsus Liguori, *Theologia Moralis*, ed. Leonardo Gaudé (Rome: Typographica Vaticana, 1953): lib. I, tract. 2, c. 1, d. 1, q. 3, 80-81.
[116] *ST* I-II, q. 108, a. 4
[117] CDF, *Donum Veritatis*, §28. Slightly altered for clarity.
[118] Norman Kretzmann and Eleonore Stump, *The Cambridge Translations of Medieval Philosophical Texts: Volume 1: Logic and Philosophy of Language* (Cambridge: Cambridge University Press, 1988): 243.
[119] Walton, *Appeal to Expert Opinion*, 223.

2.1.3 When authorities disagree

Outside of the complete and perfect harmony experienced within the beatific vision, authorities this side of heaven are surely bound to disagree on occasion. Fortunately, there are some principles to guide us in that eventuality.

First, when authorities of unequal office express contradictory declarations, the higher authority prevails, all other things being equal. To apply this principle, one must know both the *de jure* position of the authority as well as the *specific* pronouncement he is making.

A definitive statement from a pope or ecumenical council prevails over any other statement of a lower authority in matters of faith and morals. With respect to contingent matters *solely considered from the perspective of moral authority*, a papal exhortation or counsel bears more weight than non-papal exhortations. Likewise, a definitive pronouncement of the Congregation for the Doctrine of Faith, since it participates in the magisterial office of the successor to St. Peter, prevails over pronouncements of individual bishops.

Pronouncements proceeding from apostolic authority prevail over those of civil authority, if they ever contradict each other (Acts 5:29).[120] When applied to those within their jurisdictions, a pronouncement by a bishop prevails over a recommendation of an expert.

Second, when equal authorities express contradictory pronouncements, then the situation is one in which there is no obliging law or command. To resolve cases like this, St. Alphonsus articulated the principle that came to be known as equi-probabilism, i.e., that the individual has the freedom to choose between two equally probable opinions proposed by authorities or experts: both are choice-worthy options.[121] At the same time, when the matter is serious, to inform one's individual prudential decision between the two, one should employ one's powers to a reasonable extent and consider the intrinsic arguments of the issue (as we do in section 3).

2.2 Catholic authorities on use of the vaccines

Given that social media can be used as a platform to publicize both personal opinions as well as authoritative pronouncements, the average person must have a means for filtering out what is less morally important in order to listen more carefully to what is more important. When Catholic authorities have spoken, their voices deserve primary consideration. Here we will consider Catholic authorities against and others in favor of receiving COVID-19 vaccines derived from illicit means. Not treated here, further study would be needed to address the morality of various decisions of politicians.

2.2.1 Authorities against receiving the vaccines

We may begin with authorities who have publicly declared opposition to receiving the vaccines.

The first statement, issued 7 May 2020, states: "Let us also remember, as Pastors, that for Catholics it is morally unacceptable to develop or use vaccines derived from material from aborted fetuses."[122] Among others, this was signed by:

- Mgr. Carlo Maria Viganò, Archbishop, Apostolic Nuncio [primary author]
- Cdl Gerhard Ludwig Mueller, Prefect emeritus of Congregation of the Doctrine of the Faith
- Cdl Joseph Zen Ze-kiun, Bishop emeritus of Hong Kong

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[120] *CCC* §2242.

[121] Liguori, *Theologia Moralis*, lib. I, tract. 1, c. 3, no. 83.

[122] Edward Pentin, "Cardinals, Bishops Sign Appeal Against Coronavirus Restrictions," *National Catholic Register*, 7 May 2020. https://www.ncregister.com/blog/cardinals-bishops-sign-appeal-against-coronavirus-restrictions.

- Cdl Janis Pujats, Archbishop emeritus of Riga, Latvia
- Mgr Joseph Strickland, Bishop of Tyler, Texas
- Mgr Athanasius Schneider, Auxiliary Bishop of Astana, Kazakhstan

Other signatories included a number of doctors, including immunologists and virologists, and representatives of pro-life groups. Also signed were a number of journalists, theologians, professors, lawyers, and other professionals.

A second statement was issued on 11 December by a smaller set of prelates in document entitled, "On the moral illicitness of the use of vaccines made from cells derived from aborted human fetuses."[123] Therein, these prelates indicate that in their judgment receiving the vaccines is intrinsically evil, that is, never acceptable on any grounds whatsoever, and specifically: "The crime of abortion is so monstrous that any kind of concatenation with this crime, even a very remote one, is immoral and cannot be accepted under any circumstances by a Catholic once he has become fully aware of it," and that allowing for the use of these vaccines is "extremely anti-pastoral and counterproductive, especially when one considers the increasingly apocalyptic character of the abortion industry."[124] Similarly, on 22 June 2021 Archbishop Viganò spoke against what he called "the intrinsic immorality of experimental vaccines produced with fetal material derived from abortions."[125]

Third statement, from a document entitled, "The Voice of Women in Defense of Unborn Babies and in Opposition to Abortion-tainted Vaccines": "We will not be complicit in the modern-day Massacre of the Holy Innocents and we therefore refuse to accept any and all vaccines made using cells derived from aborted human fetuses."[126] This was signed by 86 women from 25 countries around the world, many of whom included doctors and directors of Human Life International offices, and other pro-life workers and activists.

Fourth statement, from a document entitled, "Statement of Conscience to Awaken Conscience": "even if, as a matter of general principles, it is not always morally illicit to use such abortion-tainted vaccines temporarily, in extreme necessity, and even then under strenuous protest, the use of such vaccines must never be advanced as mandatory, or as a universal duty. Because some of us in conscience believe that we are called to refuse to take them."[127] This was initially signed by Bishop Joseph Strickland as well as Catholic professors and heads of a pro-life group called "Children of God for Life." Later, retired Catholic moral theologian Janet Smith signed the statement, along with nearly 3500 other signatories.

2.2.2 Authorities in favor of receiving the vaccines

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[123] Bishop Athanasius Schneider, "Covid Vaccines: 'The Ends Cannot Justify the Means,'" *Crisis Magazine*, 11 December 2020. https://www.crisismagazine.com/2020/covid-vaccines-the-ends-cannot-justify-the-means

[124] Ibid.

[125] Archbishop Carlo Maria Viganò, "About some declarations of Professor Roberto de Mattei which recently appeared at 'Corrispondenza Romana'," *LifeSiteNews*, 22 June 2021, https://www.lifesitenews.com/opinion/abp-vigano-about-some-declarations-of-professor-roberto-de-mattei-which-recently-appeared-at-corrispondenza-romana

[126] Catholic News Agency Staff [CNA], "Catholic women issue statement opposing use of 'abortion-tainted' vaccines," *Catholic News Agency*, 9 March 2021. https://www.catholicnewsagency.com/news/246797/catholic-women-issue-statement-opposing-use-of-abortion-tainted-vaccines.; Voice of Women Group, "The Voice of Women in Defense of Unborn Babies and In Opposition to Abortion-tainted Vaccines," Edward Pentin Blog, 8 March 2021. https://edwardpentin.co.uk/wp-content/uploads/2021/03/STATEMENT-The-Voice-of-Women-in-Defense-of-Unborn-Babies-and-in-Opposition-to-Abortion-tainted-Vaccines-WORD-DOC.pdf

[127] Joan Frawley Desmond, "COVID-19 Vaccine Ethics: Sorting Out the Statements," *National Catholic Register*, 19 March 2021. https://www.ncregister.com/news/covid-19-vaccine-ethics-sorting-out-the-statements. Christine Ruth Pakaluk, "Statement of Conscience to Awaken Conscience," *Children of God for Life.org*, https://mailchi.mp/7742dd12483f/statement-of-conscience-to-awaken-conscience/.

A number of Catholic authorities have spoken clearly in favor of combatting COVID-19 by using, under certain conditions, even vaccines derived from illicit means.

In 2005, the Pontifical Academy for Life (PAV) issued a document, "Moral Reflections on Vaccines Prepared from Cells Derived from Aborted Human Fetuses," penned mostly by Cardinal Elio Sgreccia, states that the use of abortion-derived vaccines may be morally acceptable by person who "*are exposed to considerable dangers* to their health," on a "temporary basis," as an act of *mediate remote passive material cooperation* with the abortion.[128] The Academy issued another document in 2017, stating, "we believe that all clinically recommended vaccinations can be used with a clear conscience."[129]

In 2008, the Congregation for the Doctrine of the Faith (CDF) issued the instruction *Dignitas Personae*, which clearly stated that for serious need, and when avoiding scandal, individuals could licitly receive "a vaccine which was developed using cell lines of illicit origin."[130]

In 2020, the CDF issued a "Note on the morality of using some anti-Covid-19 vaccines," citing the documents above, stating: "when ethically irreproachable Covid-19 vaccines are not available […] it is morally acceptable to receive Covid-19 vaccines that have used cell lines from aborted fetuses in their research and production process."[131]

Recently, in an interview with an Italian television network, Pope Francis said, "I believe that ethically everyone must take the vaccine; it is an ethical choice. … I am signed up. One must do it."[132] Later, it was widely publicized that Pope Francis and Pope Emeritus Benedict XVI both received the Pfizer-BioNTech vaccine.[133]

Other prelates explicitly in favor of using and disseminating such vaccines include Cardinal Peter Turkson;[134] Archbishop Ivan Jurkovič, the Holy See's Permanent Observer to the United Nations;[135] Bishops' conferences of England and Wales[136] and the United States of America[137] and in the Diocese of Alberta and the Northwest Territories of Canada[138], among others.

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[128] PAV, "Moral Reflections on Vaccines Prepared from Cells Derived from Aborted Human Foetuses," *Natl Cathol Bioeth Q* 6, no. 3 (Autumn 2006): 541-37.
[129] PAV, "Clarifications on the medical and scientific nature of vaccination," 31 July 2017. http://www.academyforlife.va/content/pav/en/the-academy/activity-academy/note-vaccini.html.
[130] CDF, *Dignitas Personae*, §35.
[131] CDF, "Note on the morality of using some anti-Covid-19 vaccines," 21 December 2020, §2.
[132] Francis, "Papa Francesco: 'Il vaccino si deve fare, l'assalto al Congreesso Usa mi ha stupito,'" *TGCOM24*, January 10, 2021. https://www.tgcom24.mediaset.it/televisione/domenica-sera-in-esclusiva-su-canale-5-lintervista-a-papa-francesco_27387990-202102a.shtml
[133] Gerald O'Connell, "Pope Francis and Benedict XVI have received Covid-19 vaccine," *America: The Jesuit Review*, 13 January 2021. https://www.americamagazine.org/faith/2021/01/13/pope-francis-receive-covid-19-vaccine-239704
[134] Vatican News Staff, "Cardinal Turkson advocates for equal access to Covid-19 vaccines," *Vatican News*, 10 February 2021. https://www.vaticannews.va/en/vatican-city/news/2021-02/patent-vaccine-coronavirus-turkson.html
[135] Lisa Zengarini, "Holy See: 'Covid-19 vaccines must be accessible to all," *Vatican News*, December 10, 2020, https://www.vaticannews.va/en/vatican-city/news/2020-12/holy-see-jurkovic-covid-19-vaccine-accessible.html
[136] Catholic Bishops' Conference of England and Wales [CBCEW], "COVID-19 and Vaccination," 24 September 2020. https://www.cbcew.org.uk/home/our-work/health-social-care/coronavirus-guidelines/covid-19-and-vaccination/. CBCEW, "Update on COVID-19 and Vaccination," 3 December 2020. https://www.cbcew.org.uk/home/our-work/health-social-care/coronavirus-guidelines/update-on-covid-19-and-vaccination/
[137] United States Conference of Catholic Bishops: Charimen of the Committee on Doctrine and the Committee on Pro-Life Activities [USCCB], "Moral Considerations Regarding the New COVID-19 Vaccines," 11 December 2020. https://www.usccb.org/resources/moral-considerations-regarding-new-covid-19-vaccines-1.
[138] Catholic Bishops of Alberta and the Northwest Territories [CBANT], "Letter to the Faithful on Vaccines," 2 December 2020. https://www.cccb.ca/wp-content/uploads/2020/12/2020_12_02_Letter-to-the-faithful-on-Vaccines.pdf_English.pdf

At least two groups of non-prelates publicly declared themselves in favor of receiving the vaccines: The National Catholic Bioethics Center, with specified conditions for use,[139] and the Ethics and Public Policy Center,[140] whose signatories included bioethicists, a professor of moral theology, and other professors, with no conditions for use.

2.3 Assessment of Arguments from Authority

Here we assess the positions of Catholic authorities *solely from the perspective of their authority* (*de jure*). After this, we will consider major intrinsic arguments proposed about the issue. By hewing to this distinction, we can more easily consider the weight of all arguments involved, both from authority and from the matter itself.

2.3.1 Analysis of arguments from episcopal authority against receiving the vaccines

The cardinals and bishops directly invoke their authoritative position as pastors of Christ's flock. This document, issued on 8 May 2020, makes no reference to other ecclesial documents on the issue, but states that receiving the vaccines is "morally unacceptable" and says that the situation "means taking a stand: either with Christ or against Christ," with the clear conclusion that those in favor of taking the vaccines are objectively against Christ.[141]

On 11 December 2020, a smaller subset of prelates invoked their authority as "Successors of the Apostles and Shepherds responsible for the eternal salvation of souls."[142] Given that that this latter document was issued *before* the Congregation of the Doctrine of the Faith's unambiguous "Note" on the matter issued on 20 December 2020,[143] one cannot conclude that it is a rejection of that Note. Nevertheless, the categorical language of the 11 Dec document rejects the reasoning and conclusion of the CDF as expressed in the document *Dignitas Personae*[144] (CDF 2008, 35), **which is the same reasoning and conclusion in the 2020 CDF Note.** The 11 December document references *Dignitas Personae* by name and argues that the conclusion held by the CDF is "a clear contradiction" of "the Catholic doctrine to categorically, and beyond the shadow of any doubt, reject abortion in all cases as a grave moral evil that cries out to heaven for vengeance," and therefore "[t]o argue that such vaccines can be morally licit if there is no alternative is in itself contradictory and cannot be acceptable for Catholics."[145] It calls the position of the CDF "extremely anti-pastoral" and declares that, "Now more than ever, Catholics categorically cannot encourage and promote the sin of abortion, even in the slightest, by accepting these vaccines."[146]

In view of the above, there is undoubtedly an irreconcilable contradiction between (a) the statements issued on 7 May and 11 December and (b) the reasoning and conclusion of the CDF as expressed both in 2008 and 2020.

Applying the above framework, when considered as a matter that concerns the entire Catholic Church, the decision of the CDF is clearly more authoritative (*de jure*), thus outweighing the statements of the individual bishops. As noted previously, the CDF is a

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[139] National Catholic Bioethics Center [NCBC], "Points to Consider on the Use of COVID-19 Vaccines," 7 December 2020. https://static1.squarespace.com/static/5e3ada1a6a2e8d6a131d1dcd/t/5fd3ce39e679895094dd1e49/1607716409962/NCBCVaccineStatementFINAL.pdf

[140] Ethics and Public Policy Center [EPPC], "Statement from Pro-Life Catholic Scholars on the Moral Acceptability of Receiving COVID-19 Vaccines," 5 March 2021. https://eppc.org/news/statement-from-pro-life-catholic-scholars-on-the-moral-acceptability-of-receiving-covid-19-vaccines/

[141] Pentin, "Cardinals, Bishops Sign Appeal."

[142] Schneider, "Covid Vaccines."

[143] CDF, "Note on Morality."

[144] CDF, *Dignitas Personae*, §35.

[145] Schneider, "Covid Vaccines."

[146] Ibid.

magisterial office of the Church that participates in the authority of the Successor of St. Peter when teaching about faith and morals.[147] Furthermore, the CDF's document of 2008 was explicitly approved by Pope Benedict XVI and the document of 2020 was explicitly approved by Pope Francis. Although the particular conclusions about vaccine use represent contingent matters that may be subject to change, nevertheless as noted "disagreement could not be justified if it were based solely upon (a) the fact that the validity of the given teaching is not evident or (b) upon the opinion that the opposite position would be the more probable or (c) the judgment of the subjective conscience of the individual."[148] Given the CDF's definitive note of 2020, it may be that the cardinals and bishops would now offer a more moderated version of their perspective.

In conclusion, solely considered on the grounds of authority, the position of the CDF must prevail. Although there may good reasons for the cardinals and bishops to have difficulties with the conclusions of the CDF, the difficulties of the prelates on their own do not constitute sufficient reasons for individual Catholics to reject the CDF's decision. From the perspective of St. Alphonsus, this is not a matter of equi-probabilism, in which a Catholic possesses the prudential freedom to choose between the two positions. Rather, this is a clear case of structural Church hierarchy in which the authority of one (CDF) outweighs the authority of another (cohort of like-minded prelates) such that the choice of the dutiful Catholic should be to follow the greater authority as a matter of *de jure* rank, which is the CDF. However, if an individual Catholic has difficulties with the decision of the CDF, his difficulties alone should not lead him to reject the CDF's decision; rather, he has the personal responsibility to consider the issue more deeply in a spirit of open inquiry for the truth: to facilitate this, we provide section 3 below.

2.3.2 Analysis of other arguments against receiving the vaccines

Arguments against receiving the vaccine that come from Catholics who are not bishops must rest on their *de facto* authority, that is, on expertise or some special access to the truth. Clearly their *de jure* authority within the Church is lower than that of the CDF and bishops in favor of the vaccine. Here we consider arguments *solely on the basis of authority*; the substance of the arguments proposed will be considered in the next major section.

2.3.2.1 Arguments *ad verecundiam*

The statement "The Voice of Women …" introduces itself in this way: "We, as women, wish our feminine cry to be heard round the world. This declaration comes from the depth of our maternal hearts."[149] It cites the CDF's 2020 document directly, as well as the USCCB's 2020 document.[150] It calls upon Church authorities to reevaluate their position, claiming that "statements that justify the use of the abortion-tainted COVID vaccine candidates […] ignore the gravity and immediacy of the crimes committed against the unborn."[151] The womens' document suggests that the position of the CDF is complicit with an "immense infanticidal cult" and entails "offer[ing] this grain of incense to Moloch."[152]

The womens' document, considered from the point of view of authority, offers an argument classically called *ad verecundiam*, that is, an appeal to "reverence" or "shame."[153]

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[147] See 2.1.1, 2.1.3; CDF *Donum Veritatis*, §18.
[148] CDF, *Donum Veritatis*, §28
[149] VOW, "The Voice of Women in Defense of Unborn Babies and in Opposition to Abortion-tainted Vaccines," 1.
[150] Ibid, p. 2 nn. 23 and 24.
[151] Ibid, 3.
[152] Ibid.
[153] Douglas Walton, *The Place of Emotion in Argument* (University Park, PA: The Pennsylvania University State Press, 1992), 58-59.

Sometimes the argument *ad verecundiam* is fallacious, as when an arguer shames his opponent for not agreeing with a position because the arguer has supposed moral superiority, expertise, authority, or because holding the opposed position is considered "evil," "stupid," or undesirable in some way. Such arguments are little better than name-calling. Less often, arguments *ad verecundiam* are meant to highlight the arguer's reverence for some good that the opponent does not fully recognize. One form of this argument at least implicitly states, "If you had the same reverence for this good in question, you would agree with me. But you do not agree, therefore you should be ashamed." The arguer does not rely on (theological) expertise, but on some special reverence for the goods at stake. Such seems to be the case when the women state that the CDF and bishops "ignore the gravity" of abortion when they allow for the use of vaccines, implying that the bishops are encouraging people to be complicit with idolatry and "an infanticidal cult."[154] The argument seems to be that the women—in virtue of being women—possess a greater reverence for unborn children than the bishops, and therefore their position regarding the vaccines outweighs that of the bishops.

In response, the bishops could try to show how they have demonstrated care for the unborn in their pro-life initiatives, or how their position doesn't support abortion, or that they are not promoting idolatrous cult practices. Likewise, the CDF and bishops could rightly note that their *de jure* authority from Christ to speak about moral matters for Catholics supersedes any supposed *de facto* expertise of particular doctors and activists. But shaming arguments are always difficult to respond to, especially when they are broadly sweeping, ignore proper context, or draw upon the generalized sentiment of the affected audience.

The "Statement of Conscience to Awaken Conscience" also seems to employ an argument *ad verecundiam* as well, although of a gentler sort, insofar as it notes inadequate efforts of pro-vaccine supporters to adequately address the scandalous evils of abortion that led to the vaccines in the first place.[155] In response to that, the CDF, bishops, and others in favor of receiving the vaccines, could note that they are not *commanding* Catholics to take the vaccines, nor stating that taking the vaccine is a universal duty. In fact, on this very point, the CDF states explicitly: "practical reason makes evident that vaccination is not, as a rule, a moral obligation and that, therefore, it must be voluntary" (CDF 2020, 5).[156] At the same time, because viruses spread through society and have the potential to harm not only individuals but groups, "the duty to pursue the common good […] may recommend vaccination" in the absence of other equally effective mean.[157]

2.3.2.2 Arguments *ad populum*

Another argument against vaccines seems to follow the argument scheme called *ad populum*, that is, an "appeal to the people" whereby an argument's legitimacy simply rests in whole or part on the weight of popular support.

In favor of taking the vaccines, we find an enormous, coordinated worldwide effort to recruit the populace to take the vaccines by means of celebrity and religious endorsement, as seen in the Vatican's "Unite to Prevent" 2021 conference, which included Deepak Chopra, Chelsea Clinton, Joe Perry from the band Aerosmith, and the CEOs of Pfizer and Moderna, among others. Many other lesser events have been programmed in what appears to be a

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[154] VOW, "The Voice of Women in Defense of Unborn Babies and in Opposition to Abortion-tainted Vaccines," 3.
[155] Pakaluk, "Statement of Conscience to Awaken Conscience."
[156] Congregation for the Doctrine of the Faith [CDF], "Note on the morality of using some anti-Covid-19 vaccines," 21 December 2020, https://www.vatican.va/roman_curia/congregations/cfaith/documents/rc_con_cfaith_doc_20201221_nota-vaccini-anticovid_en.html, 5.
[157] Ibid.

massive propaganda campaign from which governmental and business elites greatly benefit. Pro-vaccine campaigns coordinated by big business, government, and media, create enormous social pressure to take a vaccine, to declare openly that one has taken the vaccine, and to hold in suspicion those who have not been vaccinated. Thus, the social benefits are real and the social risks are serious.

The faithful might suspect a biased judgment rendered by the CDF in favor of the moral liceity of receiving the vaccines under specific circumstances, because of what appears to be a conflict of interest, given the Pope's personal stance very much in favor of the vaccine and that the Vatican, through another organ (the Council for Culture), has taken vaccine manufacturer's sponsor dollars for their conference that showcases the vaccines and distributes awards to that industry. Just the appearance of a conflict of interest could seem to compromise the trustworthiness of the moral teaching office of the CDF. As will be discussed extensively below, however, arguments from reason and the faith corroborate the soundness of the CDF's judgment.

On the other hand, against the vaccines the "fallacy of popularity" seems to have been utilized. In pointing to thousands of people who have signed the statement of conscience against the vaccines, an author says, "We, the Trasancos and the Pakaluk families, along with Bishop Joseph Strickland and thousands of voices, urge our ethicists to resist a premature "consensus" about abortion-tainted SARS-CoV-2 vaccines. […] It is our hope, therefore, that this statement and this stand will provide the pressure to keep us all on the straight and narrow path of life" (Trasancos 2021).[158] Such an appeal would be the *fallacy of popularity* if it were arguing that because everyone (or a large number) possesses a belief, therefore the belief is true.[159] But Catholics know that arriving at truth is not a democratic process, determined by majority vote, even by a vote of devout churchgoers. Perhaps, then, the argument follows the more reasonable and non-fallacious argumentation which holds that "presumptions concerning commonly accepted ways of doing something can be part of a legitimate basis for concluding to an action in some cases."[160] In this case, the implication would be that the signatures of thousands of *pro-life advocates* indicate what *pro-life advocates* believe; and that is what should (or may?) be believed if one means to be a pro-life advocate. This sort of argument can be helpful: it shows that it may well be reasonable to follow their *example*, though it does *not* establish as a matter of truth that using the vaccines is anti-life or necessarily undermines the pro-life position.

Another appeal *ad populum* regards the *sensus fidei*.

The *sensus fidei* (sense of faith) "is a gift that the Spirit gives to all the faithful" whereby "the entire body of the faithful" exercises "supernatural discernment in matters of faith when 'from the Bishops down to the last of the lay faithful' they show universal agreement in matters of faith and morals."[161] This "sense" is "a sort of spiritual instinct that enables the believer to judge spontaneously whether a particular teaching or practice is or is

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[158] Stacy Trasancos, "How to Object to an Abortion-Tainted COVID-19 Vaccine," *National Catholic Register*, 21 December 2020, https://www.ncregister.com/commentaries/how-to-object-to-an-abortion-tainted-covid-19-vaccine.

[159] Walton, *The Place of Emotion in Argument*, 76.

[160] Walton, *The Place of Emotion in Argument*, 94.

[161] John Paul II, *Familiaris Consortio: On the Role of the Christian Family in the Modern World*, 22 November 1981, http://www.vatican.va/content/john-paul-ii/en/apost_exhortations/documents/hf_jp-ii_exh_19811122_familiaris-consortio.html#_ftnref10, 5; Catholic Church, *Lumen Gentium: Dogmatic Constitution on the Church* [*LG*], 21 November 1964, http://www.vatican.va/archive/hist_councils/ii_vatican_council/documents/vat-ii_const_19641121_lumen-gentium_en.html, 12.

not in conformity with the Gospel and with apostolic faith."[162] In other words, the *sensus fidei* is an estimation about what constitutes the Catholic Faith: "The sensus fidei is a criterion for discerning whether or not a truth belongs to the living deposit of the Apostolic Tradition. […] It is certainly not a kind of public ecclesial opinion and invoking it in order to contest the teachings of the Magisterium would be unthinkable."[163]

This theological foundation helps us weigh the statement of the prelates who rejected the vaccines and appealed to the *sensus fidei*:

> This statement was written at the advice and counsel of doctors and scientists from various countries. A substantial contribution also came from the laity: from grandmothers, grandfathers, fathers and mothers of families, and from young people. All of those consulted — independent of age, nationality and profession — unanimously and almost instinctively rejected the idea of a vaccine derived from the cell lines of aborted children. Furthermore, they considered the justification offered for using such vaccines (i.e. "material remote cooperation") as weak and unsuitable. This is comforting and, at the same time, very revealing: their unanimous response is a further demonstration of the strength of reason and the *sensus fidei*. (Schneider 2020).[164]

The appeal to *sensus fidei* here is ambiguous. Recall that one of the criteria for a claim to truly reflect the *sensus fidei*, it must reflect "universal agreement in matters of faith and morals" (LG 12).[165] However, there is no indication whatsoever of the "entire body of the faithful" being in agreement with the analysis proposed against the vaccines. In fact, the opposite is quite apparent, namely, that there is broad disagreement of the faithful on the matter.

This appeal to the *sensus fidei* would also fail if it were simply a specie of the *fallacy of popularity*, that is, if the argument is simply equating the *sensus fidei* with the numbers of pious faithful consulted who reject the vaccines, and therefore concluding that the evil of vaccines is verified strictly by virtue of their saying so. John Paul II noted that the *sensus fidei* "does not consist solely or necessarily in the consensus of the faithful," no matter which group one counts as the "faithful": "The Church values sociological and statistical research. […] Such research alone, however, is not to be considered in itself an expression of the sense of faith."[166] As the Congregation for the Doctrine of the Faith noted:

> Dissent sometimes also appeals to a kind of sociological argumentation which holds that the opinion of a large number of Christians would be a direct and adequate expression of the "supernatural sense of the faith". Actually, the opinions of the faithful cannot be purely and simply identified with the "sensus fidei". […] Although theological faith as such then cannot err, the believer can still have erroneous opinions."[167]

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[162] International Theological Commission [ITC], "*Sensus Fidei* in the Life of the Church," 2014, http://www.vatican.va/roman_curia/congregations/cfaith/cti_documents/rc_cti_20140610_sensus-fidei_en.html, 49.

[163] Benedict XVI, "Address to the International Theological Commission on the Occasion of Its Annual Plenary Assembly," 7 December 2012, http://www.vatican.va/content/benedict-xvi/en/speeches/2012/december/documents/hf_ben-xvi_spe_20121207_cti.html.

[164] Athanasius Schneider, "Covid Vaccines: 'The Ends Cannot Justify the Means,'" 11 December 2021, https://www.crisismagazine.com/2020/covid-vaccines-the-ends-cannot-justify-the-means.

[165] *LG* 12.

[166] John Paul II, *Familiaris Consortio*, 5.

[167] CDF, *Donum Veritatis: Instruction on the Ecclesial Vocation of the Theologian*, 24 May 1990, http://www.vatican.va/roman_curia/congregations/cfaith/documents/rc_con_cfaith_doc_19900524_theologian-vocation_en.html, 35.

Supposing, then, that the errors listed above are not being made, it might be that the argument takes the following valid form:

- Everyone (or everyone in some group) accepts A as a true proposition.
- These people are in a position to know that A is true, or at any rate, presumably have some reason for accepting A.
- Therefore, A may be accepted as true.[168]

What would be the basis that the people consulted are in a position to know the truth about the vaccines? Because they have the *sensus fidei*? We have already established that the mere fact that the faithful consulted hold the belief is insufficient evidence that the belief is of the faith. But perhaps these ordinary people have a true, uncorrupted *sensus fidei* because of their devotion and can recognize that some action like taking the vaccine is incompatible with the faith when they see it—unlike those who claim to have the faith but are corrupted, suggested by the phrase "The Lord said that in the end times even the elect will be seduced."[169] Even then, the argument is not very convincing. It does not seem that the sample of the faithful consulted was controlled for cross-contamination of other ideas (a rejection of all vaccines, for example, would lead a person to reject COVID-19 vaccines of any origin); or that the sample size was large enough and from enough diverse backgrounds to truly be representative of "the *devout* faithful" on the matter at hand. It could be that those who were consulted happened to be more similar than different, as perhaps belonging to groups interested in particular liturgical forms, for example.

The further a matter is from the articles of the Creed, the essence of the faith especially as laid out in dogmatic definitions and solemn statements, the less it is subject to the instinct that identifies what is of the faith and what is not. Consequently, the more a particular teaching or practice regards contingent prudential matters, the more difficult it is for the "spiritual instinct" to discern accurately.[170]

In this light, it is reasonable to consult the faithful to ask whether or not the Immaculate Conception of the Blessed Virgin Mary is a truth of faith; but it is less reasonable to ask them whether or avoiding particular vaccines is a practice necessitated by the faith, because the latter contingent matter depends on a lot of particular information for an accurate judgment and consequently is much less clear. As Paul VI learned when drafting *Humanae Vitae*, consulting the faithful in matters of contingent prudential matters that deeply affect the emotions is fraught with difficulty. As was true in his time, and remains true now, the *sensus fidei* of the faithful, to truly be in coherence with Catholic faith, must be guided by the Church's magisterial authority.[171] Therefore, any consultation of the *sensus fidei fidelium* should always be prefaced by teaching the faithful that the supreme Magisterial authority of the Church has declared that receiving the vaccines, under certain conditions, is acceptable.

2.3.3 Analysis of arguments from authority in favor of receiving the vaccines

Starting from the least authoritative to the most authoritative voices in favor of the vaccine, the following comments may be helpful for their proper interpretation.

First, it will be noted that governments, employers, and schools have all used various measures to encourage vaccination of the population. Nevertheless, the fact that the powerful

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[168] Walton, *The Place of Emotion in Argument*, 77.
[169] Schneider, "Covid Vaccines: 'The Ends Cannot Justify the Means.'"
[170] Indeed, as is well known, many have appealed to the "sensus fidei" in ways that undermine the teaching of the Church. Recently, for instance, Jesuit Fr. James Martin has invoked the "sensus fidei" to explain why "the L.G.B.T. community" does not accept Catholic teaching about sex and marriage. See Gregory Brown, "'Sensus Fidei' and Fr. Martin: Gregory Brown," *First Things*, 7 August 2017, https://www.firstthings.com/web-exclusives/2017/08/sensus-fidei-and-fr-martin.
[171] ITC, "*Sensus Fidei* in the Life of the Church," 97.

have leveraged the crisis, and even exacerbated it, and implemented continually changing rules, does not prove that the hazards of the virus are unreal. Our purpose here is not to provide a taxonomy of which laws surrounding the COVID-19 situation may be just or unjust, reasonable or unreasonable, but it must be insisted that natural and divine rights—of individuals and of groups—cannot be flouted for the sake of population health. A citizen should obey just laws, which are by definition reasonable: a manifestly unjust, absurd, or arbitrary law is no law at all, for it is no longer an ordinance of reason.[172] Hence, there are some laws a citizen must not obey: "We ought to obey God rather than men" (Acts 5:29). The mere fact that the state is using some coercive power in favor of the vaccines, however, is not in itself illegitimate. Aquinas insists that law and the government possess coercive power by nature.[173] The mere threat of punishment does not remove voluntariness, though it may diminish willingness and culpability.[174]

Second, Pope Francis's comments in favor of using the vaccine, and his own example, although clearly publicized to influence opinion, did not invoke his papal authority, nor were they expressed as part of any official teaching, and do not appear to bear episcopal authority of any sort. Therefore, they retain the authority of mere private opinion and should be weighed in light of the criteria that give force to arguments from personal authority: his credibility as a source, his expertise in the field about which he is speaking, and his trustworthiness as a guide.[175]

Third, groups such as the National Catholic Bioethics Center and the Ethics and Public Policy Center, and the members therein, are well-known as upholding the Catholic faith, even truths that are unpopular, sometimes at great cost to themselves. Additionally, their bioethical expertise is of the highest degree. Similar here is the Pontifical Academy for Life, a non-magisterial body that nevertheless deserves respect according to criteria already laid out. Therefore, the positions of all the above-mentioned groups at the very least merit to be considered as "probably true," as *de facto* authorities, and given their quantum of expertise, are of higher authority than the anti-COVID-19 vaccine womens' group, but of a lower authority than the *de jure* authority of cardinals and bishops against the vaccines.

Fourth, bishops in favor of using the vaccines are of an equal authority to bishops against using the vaccines. Even when a bishop's moral authority, recognized through his outstanding virtue, may be greater than that of another bishop, this factor in itself does not necessarily outweigh the *de jure* authority of one with less moral authority. Their authority as successors to the apostles is equal, even if their virtue, expertise, or special knowledge is vastly different.

Fifth, there is no additional authoritative weight to a document delivered by bishops simply by virtue of the fact they do so as a group instead of individually: even a document issued by a doctrinal committee of a bishops' conference does not add weight to a teaching per se. However, when there is a formal union of bishops beyond mere "group" status, their doctrinal statements can have greater authority when they are: (a) issued by an episcopal conference in a plenary session; (b) approved with at least two-thirds vote of deliberative members; (c) approved with the *recognitio* of the Holy.[176] It follows that, according to St. Alphonsus's principle of equi-probabilism, a Catholic in good conscience could choose to

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[172] ST I-II, q. 90, a. 1, ad 3
[173] See ST I-II, q. 96, a. 5; II-II, q. 65, a.2
[174] See ST I-II, q. 6, a. 6
[175] Walton, *Appeal to Expert Opinion*, 223.
[176] See John Paul II, *Apostolos Suos: Motu Proprio on the Theological and Juridical Nature of Episcopal Conferences*, May 21, 1998, http://www.vatican.va/content/john-paul-ii/en/motu_proprio/documents/hf_jp-ii_motu-proprio_22071998_apostolos-suos.html, 22; Francis A. Sullivan, "The Teaching Authority of Episcopal Conferences," *Theological Studies* 63, no. 3 (2002): pp. 472-493, https://doi.org/10.1177/004056390206300302, 485.

follow the position articulated by either group of bishops (in favor or against the vaccines) after a prudential consideration of the intrinsic arguments and issues that concern him in particular. However, the principle of equi-probabilism applies only to equal authorities, that is, in the absence of other more definitive rulings.

Sixth, and decisively, the pronouncements issued by the Congregation for the Doctrine of the Faith on the matter of vaccines in 2008 and 2020 are official and magisterial teachings that share in the teaching office of the Successor of St. Peter. As such, even though this teaching in favor of receiving the vaccines is not "per se irreformable," it calls for a willing and loyal submission.[177] The CDF clearly states that receiving the vaccine remains voluntary, non-obligatory. Conditions for licit reception of a COVID-19 vaccine derived from illicit sources include : (a) there is a serious reason to receive the vaccine; (b) there are no other equally effective options available; (c) the recipient takes steps to avoid scandal, including making known their opposition to the source of the vaccine and asking their healthcare system to make morally licit vaccines available (more will be said about scandal in section 3.5).[178]

2.4 Conclusion

2.4.1 Summary of findings

The conclusions from our analysis of the arguments from authority may be stated briefly:

- Existing authoritative teachings by the Magisterium of the Church are sufficient grounds for taking vaccines. To act morally, no Catholic need study the matter further unless he has particular qualms, difficulties, or other concerns to resolve.
- Existing authoritative teachings note that although there may be good reasons for receiving the vaccines—and some authorities exhort people to receive the vaccines—reception is ultimately non-obligatory and for reasons of conscience a person may licitly refuse to receive the vaccines.
- Given the Church's clear teaching, expressed by the Congregation for the Doctrine of the Faith, universal and unqualified rejections of the morality of receiving the vaccines do not carry sufficient authoritative weight to be accepted as more probably true. Such opinions should not be accepted as more authoritative than magisterial teaching.

2.4.2 Further concerns

The argument from authority presented here is meant to clarify some of the grounds that have been proposed by various voices in favor of and against the disputed COVID-19 vaccines. For many, these arguments from authority may prove unsatisfying and unconvincing. Loss of trust for *all* official authority in our day is widespread, not least because of ways in which official authorities have often demonstrated a lack of trustworthiness and credibility. Hence, many people around the world are suspicious of claims from official scientific, political, and ecclesial authorities. However, this post-modern situation should not induce faithful Catholics to reject magisterial authority as such, or to pick and choose whichever authoritative pronouncements fit their fancy. To fail to give respect to a more authoritative teaching threatens to unravel the entire teaching authority structure established by Christ, who gave to St. Peter and his successors primacy within the Church.

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[177] CDF, *Donum Veritatis*, 24.

[178] CDF, *Dignitas Personae: Instruction on Certain Bioethical Questions*, June 20, 2008, http://www.vatican.va/roman_curia/congregations/cfaith/documents/rc_con_cfaith_doc_20081208_dignitas-personae_en.html, 35.

There are established and proper ways for individuals, and even groups, to proceed when they have difficulties with the teachings of the Magisterium. As the Church herself has taught in words that apply to bishops, priests, and laity, to theologians and non-theologians:

- "Even if the doctrine of the faith is not in question, the theologian will not present his own opinions or divergent hypotheses as though they were non-arguable conclusions."[179]
- "If, despite a loyal effort on the theologian's part, the difficulties persist, the theologian has the duty to make known to the magisterial authorities the problems raised by the teaching in itself, in the arguments proposed to justify it, or even in the manner in which it is presented."[180]
- It is recommended that those who have difficulties with magisterial teachings should avoid having recourse to "mass media," because "seeking to exert the pressure of public opinion" often does not contribute to rendering service to the truth.[181]

Although these guidelines were formulated with respect to other matters, they remain true in our time.

Although as demonstrated above it is morally licit for the faithful to take COVID-19 vaccines, because Catholics in good faith have difficulties with magisterial teaching, and because many questions persist regarding the grounds for or against receiving these vaccines, and because St. Alphonsus recommend a prudential consideration of arguments before acting with a perplexed conscience in serious matters, we now turn to consider the intrinsic arguments about receiving the.[182] We hope that this consideration will help resolve serious difficulties, aid mutual understanding, and promote reconciliation among those who have disagreed.

3. Reasoned Arguments Regarding Vaccine Use

Arguments from authority may be called "extrinsic" because they do not treat the matter in question. In contrast, "intrinsic" arguments treat the matter in itself; these may be called "reasoned" arguments insofar as they employ evidence, formulations of their positions, and reasoning to support their conclusions. Here we address reasons for and against using vaccines derived from illicit sources. The issues are as follows:

- Are there good ends for receiving the vaccines? (3.1.1)
- Is receiving the vaccines intrinsically evil? (3.1.2)
- Does receiving the vaccines constitute *formal* cooperation with evil? (3.2)
- Does receiving the vaccines constitute *material* cooperation with evil? (3.3)
- Does receiving the vaccines constitute unjustifiable benefitting from evil? (3.4)
- Does receiving the vaccines constitute scandal? (3.5)

3.1 Foundational reasoned arguments

Given that the elements of a human act are its object, end, and circumstance, a rejection of an act as evil must refer to one or more of those elements.

Here we begin by showing that there are some good ends for receiving the vaccines. Next, we evaluate the primary question, namely, whether the object of the act of receiving an abortion-derived vaccine is intrinsically evil.

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[179] CDF, *Donum Veritatis*, 27.
[180] Ibid, 30.
[181] Ibid.
[182] See Alphonsus Liguori, *Theologia Moralis*, lib. 1, tr. 1, diss., n. 57; c. 1, n. 10.

3.1.1 Good ends for taking abortion-derived vaccines

There can little doubt that good ends (goals, motives) can exist for people who desire to receive even vaccines derived from illicit sources. Among serious reasons are the following:

- A concern for the common good, insofar as public health is threatened by the virus;
- Personal health, if a person is particularly vulnerable to the effects of the virus;
- Preservation of one's job, insofar as some companies are requiring a vaccine in order to maintain employment.

Therefore, it should not be said that the intention to receive the vaccine necessarily demonstrates "selfishness" or "callousness" towards life, as if there were no good intentions for doing so. Each person should care about the common good, even in matters of health; and for personal health; and for the preservation of livelihood and employment. Additionally, the good ends people have for receiving vaccines must not be conflated with the distinct intentions of vaccine makers, government officials, media personalities, powerful geopolitical figures, and so on, which might be less good or even evil.

3.1.2 Is it intrinsically evil to receive the vaccines?

If receiving a vaccine derived from illicit means is intrinsically evil, then by definition no good end and no circumstances can justify their reception. Intrinsic evils "are [evil] always and *per se*, in other words, on account of their very object. […] They remain 'irremediably' evil acts; per se and in themselves they are not capable of being ordered to God and to the good of the person."[183] Some prelates used very similar language to John Paul II to articulate their opposition to using the vaccines: "for Catholics it is morally unacceptable to develop or use vaccines derived from material from aborted fetuses"; and, "To argue that such vaccines can be morally licit if there is no alternative is in itself contradictory and cannot be acceptable for Catholics," and that taking the vaccine "is immoral and cannot be accepted under any circumstances."[184] This is what Pruss has named the "radically restrictive" position.[185]

In discussing how the object of an act specifies its moral quality as good or evil, Aquinas explains: "It is evil for the soul to act contrary to reason, and for the body to act contrary to nature" (Aquinas, q. 2, a. 4, co).[186] Therefore, whatever act has as its object something contrary to reason, or contrary to nature, is intrinsically evil. Lists of intrinsic evils may be found in the words of Christ himself, in St. Paul's letter to the Galatians, and in his first letter to the Corinthians.[187] *Lumen Gentium* lists a series of evils that it identifies as "infamies," which would count as intrinsically evil: "(a) whatever is opposed to life itself, such as any type of murder, genocide, abortion, euthanasia or willful self-destruction [suicide]; (b) whatever violates the integrity of the human person, such as mutilation, torments inflicted on body or mind, attempts to coerce the will itself; (c) whatever insults

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[183] John Paul II, *Veritatis Splendor: Regarding Certain Fundamental Questions of the Church's Moral Teaching*, 6 August 1993, http://www.vatican.va/content/john-paul-ii/en/encyclicals/documents/hf_jp-ii_enc_06081993_veritatis-splendor.html, 80.

[184] Edward Pentin, "Cardinals, Bishops Sign Appeal Against Coronavirus Restrictions," *National Catholic Register*, 7 May 2020, https://www.ncregister.com/blog/cardinals-bishops-sign-appeal-against-coronavirus-restrictions; Schneider, "Covid Vaccines: 'The Ends Cannot Justify the Means.'"

[185] Alexander R. Pruss, "Cooperation with Past Evil and Use of Cell-Lines Derived from Aborted Fetuses," *The Linacre Quarterly* 71, no. 4 (2004): pp. 335-350, https://doi.org/10.1080/20508549.2004.11877730, 337.

[186] Thomas Aquinas, *Summa theologiae* (Rome: Editiones Paulinae, 1955), II-II, q. 2, a. 4, co.

[187] Mark 7:21-23; Galatians 5:19-21; 1 Corinthians 6:9-10.

human dignity, such as subhuman living conditions, arbitrary imprisonment, deportation, slavery, prostitution, the selling of women and children."[188]

When considering a vaccine as a vaccine, that is, as some biological serum that contains particles of some toxic microorganism from which the recipient can acquire active acquired immunity, it is a good for individual and public health provided that its materials truly contribute to health.[189] Likewise, the act of receiving a vaccine is not bad in itself; this is something the Church has recommended. As one historian notes, obligatory vaccination is not the brainchild of some modern totalitarian government. In 1801, the Catholic king of Naples, Ferdinand IV, established a program to vaccinate the entire populations of Naples and Palermo. Likewise, on June 20, 1822, Pope Leo XII as political sovereign established through his Cardinal Secretary of State a central Vaccination Commission in order to vaccinate everyone within the Papal States.[190]

We have called the vaccines "of illicit origin." One cannot rightly call them "illicit vaccines" as if they could only be used for evil purposes, as is the case for blasphemous poetry, pornography, torture devices, and other items whose proper use is contrary to the good.[191] In the case of the vaccines, however, the disorder comes not from the good end for which it can be used (health, etc.); nor from the fact that it bears a human origin, for tissue donation is not itself evil. Every human body is made to the image and likeness of God, and even parts of a dead body retain some inherent dignity.[192] If a grave digger unearths a corpse to be used for dissection in Dr. Frankenstein's lab, the sin—the illicitness of the act—is to be ascribed to the thief and not to the corpse itself.

Using a vaccine of illicit origin, that is, receiving a vaccine shot in the arm (the usual mode of delivery), does not in itself oppose life, nor directly violate the integrity of the vaccinator or recipient, nor directly insult human dignity, nor violate a natural or divine law. Hence, one can accurately speak of *abortion-derived* or *abortion-tainted* vaccines, but such terms should always be understood as referring to **the past evil acts** that led to the vaccine and not to the vaccine **as a thing** in itself.[193] Accordingly, to receive such a vaccine is not intrinsically evil.

3.2 Arguments about formal cooperation with evil

Even though receiving the vaccines derived from illicit means may not be intrinsically evil, the action might still remain unjustified if it constitutes formal cooperation with the original evil act: "from the moral standpoint, it is never licit to cooperate formally in evil."[194]

In order to evaluate what sort of act receiving the vaccines may be, here we will define cooperation and related acts, and then treat formal cooperation. Later sections will consider the other kinds of acts.

3.2.1 Definitions of secondary acts in relation to a primary evil act

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[188] Slightly changed for clarity; Catholic Church, *LG*, 27.
[189] Concerns about potential dangers of the COVID-19 vaccines will not be addressed here as they are distinct from our question about the morality of receiving the vaccines given their origin.
[190] Roberto De Mattei, *Sulla Liceità Moral della Vaccinazione*, (Rome: Edizioni Fiducia, 2021), 54.
[191] John A. McHugh and Charles J. Callan, *Moral Theology: A Complete Course Based on St. Thomas Aquinas and the Best Modern Authorities*, Volume I, Revised and Enlarged by Edward P. Farrell (New York: Joseph F. Wagner, 1958), no. 1533.
[192] Pius XII, "Discours à l'association des donneurs de cornée et à l'union italienne des aveugles," (*Libreria Editrice Vaticana*: 1957), http://www.vatican.va/content/pius-xii/fr/speeches/1956/documents/hf_p-xii_spe_19560514_cornea.html
[193] CDF, *Dignitas Personae,* 34-35; PAV, "Clarifications on the medical and scientific nature of vaccination."
[194] John Paul II, *Evangelium Vitae*, 74.

It will be useful to recall that the moral object of an act includes the physical movement and its material term understood by reason under a certain formality (e.g., walking to a store to buy groceries), as we can define various situations in which the action of one agent bears upon the act of another agent. Any difference of the elements could distinguish one act from another, but it is primarily the *relation to reason* that distinguishes the object of one act from other similar acts. More detailed discussions follow in subsequent sections.

Complicity with another's act means that two or more agents by coordination provide necessary aspects for a single act to be fulfilled: "an accomplice acts as an equiprincipal or coordinate agent with another in the commission of the same sin, performing his own proper part or share of the joint act of sin."[195] Two adulterers are accomplices complicit in the same act of adultery. Three men may be complicit in a single murder: one by stabbing, one by holding the victim's arms, one by pointing a loaded gun at the victim.

Cooperation indicates that at least two separate agents perform two distinct operations with separate objects, and the agents knowingly join their actions together such that the secondary agent ("cooperator") performs some act that helps the primary agent (or "principal") achieve a presupposed end.[196] Cooperation can occur simultaneously with some action, or it can anticipate some future action. In order for one act to constitute cooperation with another, the secondary act must exert some *causal influence* upon a distinct primary act which it helps. As Kevin Flannery notes: "to cooperate is to do something (*operari*) that somehow contributes to what someone else does (or some others do). Thus, if someone is to be judged guilty of immoral cooperation, he will have to have been involved somehow as a cause in the malefactor's (or malefactors') misdeed."[197] Given these definitions, we must definitively reject Kampowski's claim that "one can cooperate even with past evil."[198] It is metaphysically impossible that one's present action and intention can somehow *cause* a past action to take place.[199]

Cooperation with evil exists in two basic types. St. Alphonsus Liguori, provides the basic and well-known definition: "[Cooperation] is formal which concurs with the evil intention of the other, and [this] cannot be without sin; true material [cooperation] is that which concurs only with the evil action of the other, aside from the intention of the cooperator."[200] Accordingly, formal cooperation offers *formal causality* on the evil act, contributing some *reason* for the performance of the evil deed. In contrast, material cooperation only contributes *material causality* on the act.

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[195] McHugh and Callan, *Moral Theology*, no. 1507.

[196] Aquinas, *ST* I-II, q. 111, a. 2, ad 3.

[197] Kevin L. Flannery, *Cooperation with Evil: Thomistic Tools of Analysis* (Washington, D.C.: The Catholic University of America Press, 2019), 159.

[198] Stephan Kampowski, "Cooperation, appropriation, and vaccines relying on fetal cell line research." *Catholic World Report*, January 24, 2021, https://www.catholicworldreport.com/2021/01/24/cooperation-appropriation-and-vaccines-relying-on-fetal-stem-cell-research/.

[199] Kampowski cites Pruss, who speaks about one kind of formal cooperation as "being 'an accessory after the fact,' say, by praising the agent or by helping the agent avoid the just consequences of the action." This argumentation confuses *moral causality* of some present or future act with what civil law recognizes as *legal* culpability of obstructing justice for a *past* act: Brian A. Garner, *Black's Law Dictionary*, Ninth edition (St. Paul, MN: West 2009), 16. Most civil authorities do not consider an "accessory after the fact" to be an "accomplice" of the act, thus indicating a difference in the causal relation to the primary agent's action (Garner, *Black's Law Dictionary*, 18): "accessory after the fact should not be regarded as a form of complicity. […] Even in Blackstone's time, the crime of being an accessory after the fact was 'always an offence of a different species of guilt, principally tending to evade the public justice . . . ' Accessories after the fact do not help or influence the principal in his commission of wrongdoing—they make no contribution to the wrong itself," Miles Jackson, *Complicity in International Law* (Oxford: Oxford University Press 2015), 11. Serving as an accessory after the fact may be morally wrong, but it is distinct from the evil of cooperating in the perpetration of an act.

[200] Liguori, *Theologia Moralis*, lib. 1, tract. 3, c. 2, dub. 5, art. 3, no. 63.

Benefitting from evil is to profit from a good which is the result of another's evil deed. It is distinct from complicity and cooperation when the beneficiary has no causal influence on the original deed, and instead benefits temporally *after* the original.[201]

Scandal, in its most basic form, is an act whereby one person is the occasion of another's sin by advice, inducement, or example (Aquinas 1955, ST II-II, q. 43, a. 1; CCC 2284) (see 3.4 below).[202]

3.2.2 Immorality of formal cooperation in evil

Formal cooperation cannot be reduced to a person's intention, such as an interior approval with someone else's action. Formal cooperation is an *action* that assists another's act *along with* the cooperator's interior concurrence, understood as agreement of intention, with the primary agent's evil intention in some way. John Paul II defines formal cooperation by taking into account both the object of the cooperative act and the intention of the cooperator: "It is never licit to cooperate formally in evil. Such cooperation occurs when an action, either by its very nature or by the form it takes in a concrete situation, can be defined as a direct participation in an act," which constitutes sharing the same evil object of the act of the primary agent, "or a sharing in the immoral intention of the person committing it."[203] Another theologian puts it this way: "Formal cooperation in another's sin is every cooperation which, by its inner purpose or meaning (*finis operis*) or by deliberate intent (*finis operantis*) is characterized as complicity[204] in the other's sinful action. That means that the formal cooperator places himself directly in the service of evil. Through his own intention or by inner approval of the principal sinful deed, or through a cooperation which, by its very nature, is approval of the action, he formally makes the deed his own."[205] Accordingly, formal cooperation can occur in a number of different ways, as can be illustrated by considering an act of abortion.

- A nurse formally cooperates when she performs some act that concurs with Doctor's intention regarding the material aspect of the object his act (*finis operis materialiter*), and hands him forceps during the abortion. In this case, Nurse's act is not merely "handing forceps" or "assisting a doctor"; it is "handing forceps to a doctor during abortion." That act is necessarily pointed toward helping the Doctor successfully complete his own action, which includes using the forceps for the abortion. Some moral theologians call this *implicit* formal cooperation, because the cooperator intends the end of the primary agent's external act, namely, the successful completion of the primary act (which the primary wrongdoer also intends).
- A medical research company that wants freshly-aborted tissue formally cooperates when they assist the act and concur with a doctor's intention regarding the formal object of abortion (*finis operis formaliter*). They would intend that their promise of using the tissue, and whatever help they provide (such as payment for tissue), would encourage the doctor to successfully perform an abortion, without which they would not receive tissue. Note that by intending the formal object of the evil act, they thereby necessarily also intend the material aspect of the object, that is, the physical acts necessary for a successful abortion.

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[201] See McHugh and Callan, *Moral Theology*, no. 245.
[202] Aquinas, *ST* II-II, q. 43, a. 1; CCC 2284.
[203] John Paul II, *Evangelium Vitae*, 74.
[204] It seems that the author means "help" as a coordinated but distinct act, not "complicity" as one and the same act albeit with different elements contributed by different agents.
[205] Bernard Häring, *Free and Faithful in Christ: Moral Theology for Priests and Laity,* Volume 2 (Middlegreen: St. Paul Publications, 1979), 479-480; McHugh and Callan, *Moral Theology*, no. 1511.

- Vaccine makers and researchers formally cooperate when they assist the act and concur with the Doctor's intention to achieve his desired end for the act, which includes making the tissue available for a researcher (*finis operantis*). In this case, the vaccine company would signal its intent that a researcher would utilize the aborted fetus's tissue to make cell lines for vaccines. Note that the vaccine maker's intention necessarily includes the successful completion of the abortion, for whoever intends the end of an action also intends the action. Intending the end of the act also counts as *explicit* formal cooperation, and sometimes as *complicity*. It often manifests itself not only in cooperation in the *act* by facilitating it, but also in some communicated expression that accepts the immoral act, such as documented approval.
- A researcher who creates cell lines for vaccines formally cooperates when he concurs with the Doctor to benefit from an effect of the abortion that characteristically occurs upon the successful completion of the act. For example, the researcher might intend that the Doctor be justly paid for the act of abortion. Here too the researcher could intend that his successful cooperation with the abortion-performing doctor might contribute to advancing his own professional career.

This analysis provides some significant results. We find that formal cooperation has a much wider scope than is often acknowledged. Even what seems to be a "remote" intention still constitutes formal cooperation, for it forms the act of cooperating such that a successful abortion is included in the intended end. One can perform a bad act, knowing it is bad, and even with some emotional repugnance for its negative aspects, but preferring to do it than to give up the good to which it is united. It follows that formal cooperation does not mean that the cooperator intends evil per se, but rather that he shares the wrongdoer's intention for a good that is contrary to right reason, something that does not serve the ultimate flourishing of the acting person in that concrete situation.

Further circumstances in the situation, such as serious peer-pressure on the Nurse, or grave need of cell lines for research, or a further intention of helping patient suffering from a virus, would not change the essential structure of these kinds of formal cooperation. Those added layers are like accidents with respect to the substance of the act: even if cooperation were more understandable to an outsider, and perhaps garnered some sympathy, it would remain formal cooperation with an intrinsically evil act. In sum, formal cooperation with grave evil is itself gravely evil and is never licit, for by it one intends evil and deliberately acts so that it may come about.

3.2.3 Formal cooperation and the vaccines

Kampowski has made the astonishing claim that by formal cooperation "one can cooperate even with past evil."[206] That claim unfortunately reduces formal cooperation to its *intentional* aspects, and overlooks that cooperation is an *action* with causal force that assists some present or future action to take place. Given the definitions laid out previously, receiving or administering a vaccine can never constitute formal cooperation with an abortion or cell line development that led to the creation of the vaccine. The abortion and cell line development occurred in the 1960s-80s, and the vaccine development occurred prior to one's administration or reception of it: one's action in the present day (2021) cannot have some retroactive effect on past acts. Even if a person *approves* of an abortion and other connected evil acts, his approval does not *cause* those past acts to exist. Such an act of the will may constitute formal *approval* but it is impossible for it to constitute formal *cooperation*.

[206] Kampowski, "Cooperation, appropriation, and vaccines relying on fetal cell line research."

Scientists who worked with the original abortion-performing doctors and the companies or foundations that funded them in order to obtain fresh tissues committed *formal cooperation* with the killings. Their promises of payment and support of the killings directly contributed to the killings. It cannot be said that they merely benefitted from the abortions when collaboration had to take place *prior* to the abortions to ensure a successful harvesting of original organs and tissue.

Does receiving a vaccine constitute formal cooperation with the "abortion industry"? Directly, it cannot, for the very act of receiving a vaccine—even one derived from abortions—does not necessitate the intention that some future abortion take place.

- It does not directly contribute to the material aspect of the object of abortion, that is, killing an pre-born infant or related acts (*finis operis materialiter*), because vaccines have nothing *per se* to do with the physical acts involved in abortions.
- It does not directly contribute the formal object of abortion (*finis operis formaliter*), namely, the killing of a child in its mother's womb.
- It does not somehow contribute to the Doctor's further intentions that he had when performing the past abortion (*finis operantis*).

However, perhaps in some scenario a person might receive the vaccine *both* for the primary intended purpose of the vaccine (protection against an infectious disease), as well as for the intention of contributing to the abortion-and-research industry that led to the vaccine. In that case, his use of the vaccine could constitute scandal by somehow encouraging an abortionist's or researcher's intention for some future act of abortion (see section 3.5).

3.3 Arguments about material cooperation

Many discussions about the vaccines center around the issue of material cooperation with the original abortion and related acts.

On the side of justifying the use of the vaccines, the PAV has argued that, for those who need to use the vaccines for health reasons, receiving them would bear the following relations: "(a) a form of *very remote mediate material cooperation*, and thus very mild, in the performance of the original act of abortion, (b) a *mediate material cooperation*, with regard to the marketing of cells coming from abortions, and (c) *immediate*, with regard to the marketing of vaccines produced with such cells."[207] Later, it reaffirmed this same conclusion, saying that because the use would be "very distant" from the original abortions, there was no "morally relevant cooperation" with evil involved.[208] The CDF makes the same basic argument: "The fundamental reason for considering the use of these vaccines morally licit is that the kind of cooperation in evil (*passive material cooperation*) […] is, on the part of those making use of the resulting vaccines, remote."[209]

On the contrary side, Cardinal Pujats and his episcopal colleagues argue that receiving the vaccines is not justified *even if* the act counts only as material cooperation, saying, for example: "we see a clear contradiction between the Catholic doctrine to categorically, and beyond the shadow of any doubt, reject abortion […] and the practice of regarding vaccines derived from aborted fetal cell lines as morally acceptable in exceptional cases of 'urgent need' — on the grounds of remote, passive, material cooperation"; "The theological principle of *material cooperation* is certainly valid […]. However, this principle can hardly be applied to the case of vaccines made from fetal cell lines, because those who knowingly and voluntarily receive such vaccines enter into a kind of concatenation, albeit very remote, with the process of the abortion industry."[210] Similarly, the womens' declaration rejects the

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[207] PAV, "Moral Reflections on Vaccines Prepared from Cells Derived from Aborted Human Foetuses."
[208] PAV, "Clarifications on the medical and scientific nature of vaccination."
[209] CDF, "Note on the morality of using some anti-Covid-19 vaccines," 3.
[210] Schneider, "Covid Vaccines: 'The Ends Cannot Justify the Means.'"

reasoning which accepts taking the vaccines, in some cases, because cooperation with evil is remote.[211]

To evaluate the claim and counter-claim, we must consider the nature of material cooperation in itself, and then in relation to the vaccines.

3.3.1 Nature and kinds of material cooperation

We can begin by noting that some acts are mere *occasions* for the sin of others; they do not constitute material *cooperation* if they do not in some way *help* the evil of others to come about by some concurrence between the secondary and primary agent. Christ's presence at his mock trial did not constitute material cooperation with the false accusations that led to his death.

To consider the nature of material cooperation, we may return to St. Alphonsus's basic definition: "true material [cooperation] is that which concurs only with the evil action of the other, aside from the intention of the cooperator."[212] How does a person who materially cooperates with another "concur" with the action of the other? Not through some concurrence, agreement, or intention of the end of the wrongdoer; that would be formal cooperation. In material cooperation, giving help to evil is "aside from the intention of the cooperator." Hence, material cooperation merely concurs with "the evil action" of the wrongdoer: the action of the cooperator runs alongside that of the wrongdoer, and helps a primary agent to perform his evil act, but it is performed such that the cooperator's intention is distinct from the evil intentions of the primary agent. Merely material cooperation in evil involves an act whose object is specifically distinct from the object of the primary agent, but is misused or misappropriated through the evil intention of the malefactor and thus directed to the service of sin.[213] It should be understood that "material" cooperation could include any condition supplied by the secondary agent (the "cooperator") that may be used for the evil end intended by the primary agent. Material cooperation may provide more than just some physical means, such as providing information about something.

Many moral theologians have noted that material cooperation may be analytically considered from different perspectives, such as the concepts of immediacy, proximity and remoteness.

The concept of *immediacy* connotes whether the cooperative act assists the primary act without the interposition of *means* or with some series of means. *Immediate* cooperation directly contributes to the execution of the evil act *per se*, that is, with no series of means that stand in between the assistance provided and the evil act. Because no act is merely physical, the formality of the act includes the fact that it directly helps accomplish some evil deed. As argued above, within the context of an abortion procedure, a nurse's concrete act is more than "handing over forceps" or "assisting a doctor"; it is "handing forceps to a doctor so the doctor can use it *immediately* for an abortion." The intelligibility of the physical act of itself necessarily points toward helping the doctor successfully complete the abortion with the forceps. Accordingly, immediate material cooperation in this particular case is a form of formal cooperation when there is no other primary intelligibility for the immediate cooperating act other than to facilitate the accomplishment of the primary evil act. In other words, when considering his action, an agent might conclude: "My action (handing the doctor the forceps) would be meaningless if it didn't ensure the other person's sin (the abortion). In fact, under the present circumstances, if I do this, I would commit part of the sin as well."

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[211] VOW, "The Voice of Women in Defense of Unborn Babies and in Opposition to Abortion-tainted Vaccines," 2.

[212] Liguori, *Theologia Moralis*, lib. 1, tract. 3, c. 2, dub. 5, art. 3, no. 63.

[213] Flannery, 36, 94; Dominicus M. Prümmer, *Manuale Theologiae Moralis*, vol. 1 (Rome: Herder, 1958), no. 617, p. 448.

The concepts of *proximity* and *remoteness* together describe the relative "closeness" that cooperation has to the primary at. Hence, one can speak of cooperation as proximate to an act if it is close in time, place, or relation: "the nurse's help is closely (proximately) related to the doctor's act of abortion"; or as remote if it is far in time, place, or relation: "the electric company's provision of electricity is very remotely related to the abortion." Although proposed as a distinct analytical category, the concept of *proximity* largely overlaps with *immediacy*, because "relation" can indicate how one thing relates to another with respect to means, that is, its relation to causal necessity for achieving a presupposed end: "the nurse's 'handing of forceps' is *closely related* to the doctor's act of abortion because it is the *immediate means* used by the doctor for the abortion, and it is a *necessary* means for the particular procedure chosen by the doctor." Notice, too, that being closely related to an act in performance usually entails being close in time or place. Because immediate cooperation may be one version of formal cooperation, proximate cooperation may be formal cooperation as well; they are always illicit when they assist in the destruction of innocent life.[214] Other than immediate material cooperation, other kinds of material cooperation always involve some means that stand between it and the primary evil act: it is "mediate" *per se*. Consequently, it is not strictly necessary for the commission of the evil act, but only indirectly provides an occasion for it.

3.3.2 Moral evaluation of material cooperation

The conditions under which it is possible to materially cooperate with evil are the same as those articulated in what is called the "Principle" or "Doctrine" of Double Effect," or "Double Effect Reasoning":[215]

(a) The act must be objectively good in itself;
(b) The end for which the cooperator works must be good;
(c) The good effect cannot be caused by the foreseen but direct undesired bad physical effect;
(d) There must be a sufficiently, or proportionately, good reason to perform the act and tolerate the bad effect.

St. Alphonsus gives an example of licit immediate material cooperation: opening one's own strong-box for a thief who threatens your life or honor in order to steal your treasure: opening one's safe is a good act in itself though the thief directs the act towards his own evil end.[216]

The first two conditions of the principle of double effect are straightforwardly necessary as parts of any good act. Criterion (c) is based on the fact that we can foresee yet not intend evil effects that may flow from our good act. Some consequences of acts are natural, that is, they always or in most cases are the effects that come from the action-type that one is performing (*effectus finis operis*). Thus in the case of a nurse's cooperation with a doctor in the act of abortion, this criterion fails since the "good effect" *is in fact* caused by both a *foreseen* and *desired "*bad effect" since the to-be-expected effect of handing a doctor forceps during an abortion procedure is that he will use them to grasp parts of the fetus to effect the abortion. Other consequences may be merely foreseen, as when they come about not through one's act but through the intention of another agent (*effectus finis operantis*):

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[214] PAV, "Moral Reflections on Vaccines Prepared from Cells Derived from Aborted Human Foetuses."
[215] McHugh and Callan, *Moral Theology*, nos. 104, 1515; Nicanor Austriaco, *Bioethics and Beatitude: An Introduction to Catholic Bioethics* (Washington, DC: The Catholic University of America Press, 2011), 37-41; Joseph Boyle, "The Relevance of Double Effect to Decisions About Sedation at the End of Life," in *Sedation at the End-of-life: An Interdisciplinary Approach*, Philosophy and Medicine 116, ed. P. Taboada (Dordrecht: Springer Science+Business Media, 2015), 55-71; PAV, "Moral Reflections on Vaccines Prepared from Cells Derived from Aborted Human Foetuses."
[216] Liguori, *Theologia Moralis*, lib. 3, tract. 5, c. 2, dub. 2, no. 517, p. 67.

assisting a doctor to perform an abortion may (indirectly) help him pay for his new boat. In both cases, for a cooperation to be licit, the good effects sought in one's act cannot be caused by the moral evil, for the end does not justify the means.

Criterion (d) concerns a "sufficiently" good reason for cooperating, in other words, a reason that is "proportionately" better than not cooperating. There must be a strong presumption *against* material cooperation, for the first principle of morality is to pursue good and avoid evil.[217] However, there may be good reasons and sufficiently weighty circumstances that justify performing a good act that also results in evil as side effect. In this regard, it should be noted that the more particular means that stand in between some cooperative act and the accomplishment of the sinful act, the less one needs a grave reason for so acting. In contrast, one needs graver reasons for acting given the following conditions[218]:

- The graver the evil end to which the act is being diverted;
- The greater the dependence of the evil act on one's cooperation;
- The greater the certainty that one's act will be used for evil;
- The greater the probability that one's refusal to cooperate could prevent the evil;
- The graver the harm which may come upon the cooperator, including the spiritual harm of discounting the nature of evil;
- The greater the difficulty in avoiding scandal and leading third parties into sin;
- The easier the possibility of achieving the same or a sufficiently similar good could by alternative licit means;
- The more one is obliged to prevent the particular act of sin.

The gravity of reasons for material cooperation with evil corresponds to the importance of the goods in question, as McHugh and Callan argue:

- A grave reason for cooperation exists when, if one refuses it, a great good will be lost or a great evil incurred—such as two month's wages or extended separation from friends and family.
- A very grave reason for cooperation corresponds to the gain or retention of a very great good, or the avoidance of a very great evil—such as a significant portion of one's possessions, a severe or long-lasting illness, and unemployment.
- Even graver reasons include the contraction of an incurable disease, the loss of a hand or member of the body, severe or perpetual imprisonment.
- The gravest reasons for cooperation include "the public safety of Church or State, loss of all one's property, death."[219]

3.3.3 Material cooperation and the vaccines

At the beginning of 3.3, we saw that the PAV and CDF argue that receiving vaccines developed from abortions could constitute justifiable material cooperation, whereas Cardinal Pujats and others argue that material cooperation in the current circumstances would be unjustifiable.

For the same reasons that vaccine use cannot constitute formal cooperation with the past abortion and other actions that led to the vaccine, so it cannot constitute material

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[217] Anthony Fisher, *Catholic Bioethics for a New Millennium* (Cambridge: Cambridge University Press, 2012), 93.
[218] See see Prümmer *Manuale Theologiae Moralis*, no. 619; McHugh and Callan, *Moral Theology*, no. 1519; Fisher, *Catholic Bioethics for a New Millennium*, 92-93.
[219] *Moral Theology*, no. 1520.

cooperation with the same. However, is it an unjustifiable "concatenation, albeit very remote, with the process of the abortion industry"?[220] To argue this, one must do more than to point out that the evil spoken of is very grave; that circumstance is a given. Nor is it sufficient to assert that by taking a vaccine one is materially cooperating in the medical industry which promotes abortions: because the logical fallacy of *begging the question* arises if one merely claims that the action is unjustifiable *merely because* it constitutes material cooperation. The question is whether or not receiving the vaccines in some circumstances constitutes *justifiable* material cooperation.

Let us evaluate the justifiability of receiving the vaccines in light of the four criteria listed above (3.3.2).

(a) The act of receiving a vaccine is good; as we have already noted, it is not intrinsically evil (3.1.2).
(b) The vaccines would be received primarily for a good end, such as personal health and protecting others from the disease (3.1.1).
(c) The good effect at which one aims, such as good of health, is not an effect of whatever evil might result. Clearly, protection from the virus would be caused by the vaccine and not by the industry's potential benefit. Accordingly, one's reception of the vaccine could be justified even if the abortion industry indirectly and remotely benefits from vaccine production and dissemination.

The last criterion (d), a sufficiently weighty reason for material cooperation, deserves a lengthier treatment.

First, it should be noted that cooperation requires *foresight* that one's action will somehow assist another person: without that rational connection, then one's action merely helps the other agent, but the two people do not co-operate (perform two actions that are coordinated by choice). Consequently, if a vaccine recipient estimates that her action might influence others to commit more abortions in the future, and the vaccine use is not somehow coordinated with the act of future abortions, then her action constitutes not cooperation but potential *scandal*, which is treated later (3.4).

Second, regarding material cooperation with the "abortion industry" in general, one can apply the criteria above (3.3.2).

- A grave reason for receiving the vaccine exists for many, including the potential of being reprimanded in their job, and losing wages.
- A very grave reason exists for those whose very jobs are at stake if they do not receive the vaccine.
- An even graver reason exists for those whose health is seriously threatened by the virus.

Most treatments of receiving the vaccine have omitted to discuss the case of the individual physician's role in distributing the vaccines. However, we consider the two issues as inextricably bound up with one another, even though they are different acts. If it is moral to receive a vaccine, as justifiable passive, remote material cooperation with the abortion industry, then it must be morally acceptable for an individual doctor to distribute a vaccine as active, remote material cooperation with the industry. Often an individual doctor has little choice in distributing the vaccines, which sharply contrasts with the greater freedom of those in the industry who help create, market, and distribute the vaccines.

[220] Schneider, "Covid Vaccines: 'The Ends Cannot Justify the Means.'"

Finally, whereas strict justice does not *forbid* reception of the vaccines, the virtue of charity may lead Christians to *forgo* them, both to protect their own souls and to witness to the dignity of life.[221]

3.3.4 Moral dangers in choosing to cooperate materially with evil

Alongside grave reasons for taking an abortion-derived vaccine, one must also consider some of the moral dangers related to materially cooperating with evil. Archbishop Anthony Fisher frames the issue poignantly: "love of neighbor might be said to ground a presumption *against* material cooperation in evil because we should help our neighbor be and do good. […] Love for innocent third parties (such as unborn children) will also make us particularly sensitive to any foreseeable harm to them."[222] At the same time, it is entirely unrealistic to suppose that one can escape all material cooperation with evil.[223] As Germain Grisez notes, "Some unreflective and/or unsophisticated people imagine problems regarding cooperation can (and perhaps should) be avoided by altogether avoiding cooperation. That, however, is virtually impossible and sometimes inconsistent with doing one's duty."[224] Even Christ paid the Temple taxes, though its rulers would later commit terrible atrocities on his own person (Mt 17:27). Nevertheless, it is entirely inaccurate to suppose that only *formal cooperation* poses serious problems.

Grisez highlights many significant but typically overlooked negative side-effects of material cooperation, even aside from the bad results of the primary evil act. Of particular concern are the detrimental consequences that habitual material cooperation may have on the soul. He notes:

> If material cooperation is ongoing or becomes a regular practice, it is likely to have more and graver such consequences than would an isolated act. […] Performance, especially repeated performance, tends to become habitual; interaction with wrongdoers tends to generate psychological bonds and interdependence. Thus, cooperation often leads to opportunities and temptations to engage in further cooperation.[225]

The result is that even when some initial material cooperation is warranted, later acts of cooperation might corrupt the cooperator. He might come to think that the evil with which he cooperates isn't "all that bad"; or that it might be justifiable to perpetrate evil that good might result; or that circumstances can justify nearly any action. Thus, Grisez says, by eroding cooperator's sense of right and wrong, "material cooperation often is an occasion of grave sin."[226] Additionally:

- Material cooperation can lead to disharmony between the cooperator and victims of the wrongdoing.
- Material cooperation can impede the cooperator from being a credible witness against the wrongdoing, as might happen if the Church overly emphasizes the legitimacy and potential need of the vaccines without an even stronger protest against their illicit origins.

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[221] Pakaluk, "Statement of Conscience to Awaken Conscience."
[222] Fisher, *Catholic Bioethics for a New Millennium*, 95.
[223] See Häring, *Free and Faithful in Christ: Moral Theology for Priests and Laity,* 483.
[224] Grisez, *The Way of the Lord Jesus, Volume 3: Difficult Moral Questions,* 871.
[225] Ibid., 880.
[226] Ibid.

- Material cooperation can impede the cooperator from carrying out his vocation in other respects, as when a researcher's use of illicitly-derived embryonic cells might undermine his commitment to supporting life through his research.[227]
- Finally, material cooperation "always not only accepts a bad situation but makes it workable—and so, usually, more likely to endure and harder to overcome,"[228] as has been predicted as an effect of widespread vaccine use with respect to the abortion industry as a whole.

Because materially cooperating in evil can constitute the first decisive step on a slippery downward slope, the apostles commanded Christians "to avoid" those who create dissentions in opposition to received doctrine; to not "associate with immoral men," such as one who is an idolater, reviler, drunkard, or robber; to not be "unequally yoked" with unbelievers; to "keep away from any brother who is living in idleness and not in accord with the tradition" of the Church, and so on (Rom. 16:17-18; 1 Cor 5:9-11; 2 Th 3:6. See also 2 Th 3:14; 2 Tim 3:2-5; 2 John 1:10-11). Following this train of thought, Fisher notes that the moral dangers of material cooperation in sin "will require sacrificing our personal preferences, our desire to get on well with others, our institutional commitments or even the great goods that our actions might otherwise achieve."[229]

The Church clearly teaches that scientists who purposely use the cell lines (or embryonic stem cells) derived from aborted children for research purposes commit *unjustifiable immediate material cooperation* with the distribution of the materials—and the distribution is unjust, because there must be "no complicity in deliberate abortion" and, "the risk of scandal [should] be avoided. Also, in the case of dead fetuses, as for the corpses of adult persons, all commercial trafficking must be considered illicit and should be prohibited."[230] As noted above, an individual's reception of a vaccine is not *cooperation* since it is less a positive action and more a passive and remote *benefit* from the abortion industry. In contrast, a researcher's *active use* of the abortion-derived cells constitutes a wrongful manipulation of human tissue obtained without consent and even by terrible violence, which is a violation of the dignity and respect due to parts of a dead human person. Use of such cells in research also constitutes cooperation with the abortion industry, although it does not constitute cooperation with the past abortion, which is impossible. Such cooperation with the abortion industry in this case would be *formal* if the researcher actively requested or the tissue or in any way contributed to the procuration of the tissue through abortion. It would constitute unjustifiable *immediate* material cooperation with the abortion industry if a researcher knowingly makes use of the illicitly-derived tissue of cells themselves, because it violates the norm of using human tissue only derived from willing and informed donors. Furthermore, his use of tissues or cells creates a market for future abortions and thus causes grave scandal (discussed in 3.5). Consequently, "it is necessary to distance oneself from the evil aspects of that system in order not to give the impression of a certain toleration or tacit acceptance of actions which are gravely unjust."[231]

3.4 Arguments about benefitting from evil

Having considered the nature of cooperation, we may now address questions about what moral relation vaccine use has with respect to the past abortions, cell line development,

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[227] See CDF, *Donum Vitae,* I.5. PAV "Declaration on the Production and the Scientific and Therapeutic Use of Human Embryonic Stem Cells." CDF, *Dignitatis Personae*, §32, 34-35.
[228] Grisez, *The Way of the Lord Jesus, Volume 3: Difficult Moral Questions,* 882.
[229] Fisher, *Catholic Bioethics for a New Millennium*, 97.
[230] CDF, *Donum Vitae,* I.4.
[231] CDF, *Dignitatis Personae*, §35, See CDF, *Donum Vitae*, I.4.

etc., that produced the vaccines. To explain this, this section discusses the nature and kinds of benefitting from evil, it establishes moral norms for licit benefit from evil, and it applies those considerations to vaccine use.

3.4.1 Definition and kinds of benefit

To benefit is to profit from something, that is, to enjoy the good effect of some cause. An analysis of a beneficiary's causal relation among situations and persons shows that benefit can occur in many ways.

(1) *Circumstantial* benefit is that which results from some circumstantial conjunction between the beneficiary and that from which he benefits. Although the beneficiary may choose to make use of circumstantial benefits, the availability of the benefits to him is purely accidental: he benefits from the weather; he benefits from finding an unclaimed buried pearl; he benefits from Newton's explanation of gravity.

(2) *Relational* benefit is that which results from a real relation between persons; it necessarily is more than a happenstance situation.

(2.a) Some relational benefits accrue to a person from nature: a relation of *natural benefit* (or a *natural-relation benefit*) accrues to a child because of his relation to his parents and other primogenitors, as when a child benefits from his parents' innate intelligence.

(2.b) Other relational benefits are *intentional* (*intentional-relational* benefits): they accrue to a person because of some previous chosen action.

(2.b.1) Sometimes a person is intentionally involved in causing a situation in which he benefits from the action of another. *Benefit from formal cooperation* is the good that accrues to a person who has formally cooperated with some action, which is distinct from *benefit from material cooperation*. *Contractual benefit* occurs when the beneficiary of an act makes a contract with another, or in some way promises another some restitution upon completion of the other's action, then the two have a shared intention to be mutual beneficiaries of their respective but coordinated actions. Each has a fiduciary right to benefit from the action of the other. When the beneficiary alone chooses to make use of another's action that the beneficiary somehow caused without the other's person's full choice, this would constitute *benefit from intentional manipulation*.

(2.b.2) Other times a person benefits not from his own choice, but solely because of the choice of another. Perhaps the most common case is when a person is the beneficiary named in another's will, or included in such a group ("my family"), such that goods accrue to the beneficiary upon the testator's death (*benefit of legal heir*). When a beneficiary is not included in another's will, nor belongs to a particular group intentionally benefitted by another (*specific intended benefit*) (e.g., "graduates of this university"), then the beneficiary and the one from whom he benefits bear no formal or real relation and instead have only a circumstantial relation, resulting in *general* or *circumstantial benefit*.

3.4.2 Moral evaluation of benefitting from evil

With respect to the nature of the benefit, one can distinguish among the following: (A) *formal* benefit, which arises from the intentional nature of the act itself (*effectus operis formaliter*), such as when a king enjoys the very act of worship his subjects offer to him as a divinity, and (B) *material* benefit that arises from the act as some secondary effect (*effectus operis materialiter*), such as when a king enjoys the gold offered in tribute to his supposedly divine status. Enjoying a *formal benefit* of evil is never morally licit, for that would be directly to enjoy the evil itself. Likewise, benefitting from formal cooperation with evil is never morally licit: one may not commit evil with another in order to benefit from it.

While those conclusions should be abundantly clear, other significant questions remain: May one enjoy *material benefits* of evil? May one licitly benefit from *material*

cooperation with evil? Can one benefit from intrinsic evil deeds that one has not caused in any way, such as benefitting from an abortion—and related evil acts—by receiving an abortion-derived vaccine? A very strict position would argue that even circumstantial and material benefits from the gravest evils are illicit, whereas another position might argue that only more *intentional* benefits from evil are wrong, such as *contractual benefits*. To answer these questions, we will look to St. Paul and St. Thomas Aquinas for guidance.

3.4.2.1 St. Paul on eating meat offered to idols

An understanding of benefitting from past evil may be seen from St. Paul's famous case of eating food offered to idols. In the course of explaining the one true sacrifice of Jesus Christ, in which Christians partake through the reception of the Holy Eucharist (1 Cor 10:16), St. Paul also addresses whether eating meat that had been offered idols could constitute illicit "participation" in idolatry.[232] Much of the meat available in that time was sacrificed ritually to idols and was then available to be eaten *inside the pagan temple itself*. This created a question of conscience for Christians, especially since they knew that Jews rejected any meat that was not slaughtered in a kosher manner.[233] St. Paul makes the dilemma—to eat sacrificed meat or not—pointed by saying "what pagans sacrifice they offer to demons and not to God. I do not want you to be partners with demons" (1 Cor 10:20).

Since idolatry is a grave intrinsic evil, the question becomes: can a Christian benefit from one of the gravest intrinsic evils committed by others?

The strictest, and morally safest, position would be to reject the idolatry-tainted food entirely. One might expect St. Paul to say "unequivocally no" to eating the food offered to demons. But he does not say this.

First, St. Paul notes that some Christian converts from paganism believe erroneously that idols have power over them: "some, through being hitherto accustomed to idols, eat food as really offered to an idol; and their conscience, being weak, is defiled" (1 Cor 8:7). To overcome such false fear of idols, St. Paul states that the idols "are nothing" (1 Cor 8:4). By that, however, St. Paul means that in comparison with the "one God, the Father, from whom are all things and for whom we exist," the idols are as nothing (1 Cor 8:6). The implication is that, now that the Christian has true knowledge regarding God's power over demons, he need not avoid what could be called "idolatry-derived" food. Nevertheless, it seems St. Paul would also say that if a person's conscience is harmed by the eating, he should avoid the food until he can more fully live by faith. This is the principle of avoiding *proximate material cooperation* because of one's own moral weakness.

Second, St. Paul says that the *material* of the meat does not defile: "Food will not commend us to God. We are no worse off if we do not eat, and no better off if we do" (1 Cor 8:8). Therefore, one can eat the food previously offered to idols, and not participate in the sin in idolatry: "Eat whatever is sold in the meat market without raising any question on the ground of conscience. […] For why should my liberty be determined by another man's scruples?" (1 Cor 10:25, 29). In such cases, a Christian would physically benefit from an idolatrous act by receiving into oneself the material that was created through the idolatry. His life would be sustained because others committed grave evil. Nevertheless, such benefit can be acceptable. St. Paul therefore is saying in simpler language that the object of eating the food would not be intrinsically evil: when certain conditions hold, one may *materially benefit from a very grave evil*. Properly speaking, receiving a material benefit from an evil in this case is not cooperation of any sort, for the individual in no way collaborated or assisted with the previous evil act. Nevertheless, the fresh piece of meat as a *circumstantial benefit* links

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[232] Hans Conzelmann, *1 Corinthians*, trans. James W. Leitch, ed. George W. MacRae (Philadelphia: Fortress Press, 1975), 174.
[233] Ibid., 176.

him closely to the gravely evil deed—through in a material, passive way—which was an act of idolatry to demons.

Third, as we will see (3.5.2) this legitimate action must be avoided if it will lead a good but weak person to sin. Expressed as a principle: avoid *scandalizing the weak*.

In sum, St. Paul's teaching about the liceity of receiving meat derived from an idolatrous act shows the liceity of *passive material benefit* from evil in the following conditions:

1. The beneficiary does not commit the evil from which he benefits.
2. The beneficiary will not be led into sin by benefitting.
3. The beneficiary does not lead weak Christians into sin by the act of enjoying the benefit. That is, he avoids giving scandal.

The first two conditions, of course, are conditions for performing any action. It is the third which is most important here. As the classic Thomist Francisco de Victoria said, "Notwithstanding the interdict on idolatry, with no scandal it is allowable to eat food offered to idols."[234]

3.4.2.2 St. Thomas Aquinas on benefitting from another's evil

St. Thomas explicitly considers the question of whether it is morally licit to "to make use of another's sin for a good end."[235] He argues that yes, one may do so. To prove the moral liceity of using another's sin for one's own good, Aquinas employs a problem that vexed many medieval Christians, namely, whether or not to benefit from a non-Christian's usurious loan. Although the example might seem trivial to modern sensibilities, Catholics held that usury is intrinsically evil: "To take usury for money lent is unjust in itself" (*secundum se iniustum*).[236] Nevertheless, sometimes a person might be in need of cash and the only loans available are through usurious lenders. Consequently, *charging* usury is intrinsically evil, and it is by no means licet to *induce* someone to lend under usury. However, Aquinas makes a perhaps surprising move by saying, *borrowing* under conditions of usury can be allowable: "under a certain necessity, in so far as he needs to borrow money which the owner is unwilling to lend without usury"[237] even though receiving the money clearly would mean immediately benefitting from the grave sin of the person who charges usury.

It may be noted that St. Thomas follows St. Augustine in holding that it is possible to request a good to which an evil is attached, and it is possible to foresee and accept that evil will be done when good is requested, and that it is possible to reward a good to which evil is attached, all without the beneficiary being guilty of evil. To prove these points, St. Thomas first offers a theological reason drawn from St. Augustine's *Enchiridion* (XI): "it is licit to make use of another's sin for some good, since even God uses all sin for some good, since He draws some good from every evil." If God can do this, so can we—provided the right conditions are in place. Next, Thomas refers to a difficult case that Augustine resolved by applying this larger principle: "when Publicola asked whether it were licit to make use of an oath taken by a man swearing by false gods (in which he manifestly sins by giving divine honor to them) Augustine (Ep. 47) answered that he who uses, not for evil but for good, the oath of a man that swears by false gods, is a party, not to his sin of swearing by demons, but to his good promise whereby he kept his word. If however he were to induce him to swear by

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[234] Francisco de Victoria, "De Temperantia" in *Relectiones Theologiae*, Tomus Primus, (Lyon [Lugduni]: Jacobum Boyerium, 1557), 61.
[235] ST II-II, q. 78, a. 4, co.
[236] ST II-II, q. 78, a. 1, co.
[237] ST II-II, q. 78, a. 1, ad 7.

false gods, he would sin."[238] This astonishing case, making use of another's pact with demons, shows how confident Augustine and Thomas were that benefitting even from other's grave immediate evil can be possible without sin.

With St. Augustine, St. Thomas is arguing that there are some acts whereby one person gives another "an occasion" to do good, but which the other twists to his own evil end: the good act requested and rewarded is formally separate from the evil end which the evildoer accidentally attaches to it: "He who borrows for usury gives the usurer an occasion, not for taking usury, but for lending; it is the usurer who finds an occasion of sin in the malice of his heart."[239] Significantly, Aquinas acknowledges that "there is no active scandal on the part of the person who seeks to borrow," for requesting money in occasions of need is good, not bad. The fact that he foresees the other will sin should not deter him from making the request, Aquinas states, because the evildoer is led to evil "not from weakness or ignorance but from malice."[240]

From this example, we can derive general principles for determining when "making use of" or benefitting from another's present evil may be acceptable.

1. The potential *beneficiary* cannot "induce" the potential evildoer to commit evil. Inducement would include requesting the evil as such (and not merely the good attached to the evil), performing part of the evil himself in complicity, formally cooperating with the *finis operis materialiter* or *formaliter*, agreeing with or furthering the proposed evil end of the evildoer (*finis operantis*), promising a reward for the evil as such (distinct from rewarding good parts of the act), or in any way indicating that the evil should be done. In such situations, the potential beneficiary foresees that evil will be done without having caused the evil, much as God "uses all evil for some good."[241]
2. The potential evildoer (the usurer) must *independently manifest* that he is "ready" to do evil. St. Alphonsus uses even stronger language, speaking of a person who is willfully "determined" to do evil, and who cannot be persuaded entirely to desist from the generic evil he has in mind.[242] A sign that the potential evildoer is determined to commit an evil act his past performance of the act habitually and without compunction. In this case, he is one who "practices" usury regularly. It may be noted here that the fact that the evildoer is ready to do evil reduces or eliminates the possibility of scandal: one's use of the evil does not induce the wrongdoer to do evil.
3. The potential *beneficiary* must have a serious good end in mind. In the case of cooperating with usury, Aquinas speaks of the "relief" of one's own or another's "need." Later tradition came to describe this condition in material cooperation by saying that a person must have a "sufficiently" or "proportionately" good reason in order to justify material benefit from evil.[243]

Regarding the last condition, it should be noted that the criteria listed above for justifiable material cooperation (3.3.2) also apply here—but given that *benefitting* from evil is even further from the evil act than *materially cooperating* with it, the justifying criteria can be proportionately less serious.

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[238] ST II-II, q. 78, a. 4, co.
[239] ST II-II, q. 78, a. 4, ad 2.
[240] ST II-II, q. 78, a. 4, ad 2.
[241] ST II-II, q. 78, a. 4, co.
[242] Liguori, *Theologia Moralis*, lib. 3, tract. 5, c. 2, dub. 2, no. 563.
[243] See Liguori, *Theologia Moralis*, lib. 2, tract. 3, c. 2, dub. 5, art. 3, no. 47.

In order to distinguish a legitimate sort of benefitting from evil from committing evil oneself, some clarifications of this third condition may be useful.

First, benefitting from evil is not formal cooperation, for the beneficiary in no way intends the evil that the wrongdoer perpetrates: the borrower would be quite happy if the lender did not loan with usury. However, the borrower because of his genuine need *permits* and does not need to correct the evil of the lender, since it is hopeless that the usurer will change his will.

Second, this situation could be understood as immediate material cooperation, for the beneficiary performs no action that bolsters the wrongdoer's evil intention, which is manifested and unchangeable. However, the borrower provides *the occasion* which the lender bends to his own evil purpose: even though the borrower can foresee that the lender will likely commit a grave sin of usury, the action of requesting a loan does not *of itself* demand evil.

Third, St. Thomas here develops the principles laid out by St. Paul in 1 Corinthians, and by St. Augustine in his forty-seventh letter. One is not bound to avoid all *circumstantial benefit* from sin; nor even from *contractual benefit* from intrinsic evil. However, the causal line must be clear: one cannot *contract* evil, that is, induce any evil to be done by request, persuasion, encouragement, etc. Nevertheless, in cases of real and immediate necessity, one can *enter into a contract* in which one party agrees to do evil which somehow results in a benefit that is not formally part of the evil but is so only materially.

3.4.2.3 Summary and test case: benefitting from murder

So far, we have seen that St. Paul, St. Augustine, St. Thomas Aquinas, and St. Alphonsus, when considered all together, provide six principle for when it is morally acceptable to benefit from another's evil deed, even such very grave evils such as idolatry.

1. The beneficiary does not commit the evil from which he benefits.
2. The beneficiary is not led into sin by benefitting.
3. The beneficiary must have a sufficiently serious good end in mind.
4. The beneficiary must not induce the potential evildoer to commit the evil.
5. The primary potential evildoer must *independently manifest* that he is "determined" to do evil and cannot be persuaded entirely to desist from it.
6. The beneficiary must avoid active scandal to third parties who might learn about his benefit from evil.

To gauge the reasonableness of these guidelines, we will consider them in light of a difficult case, that of cannibalism.

Since it was brought to court in 1884, *Regina v Dudley and Stephens* has proved to be a touchstone for wide-ranging discussions regarding murder, necessity, jurisdiction, and so on.[244] The basic facts are these. Four men were stranded in a small dinghy after their larger yacht had capsized in a storm with land more than one thousand miles away. For twelve days their only food was a couple of tins of turnips salvaged from the wreck and a small sea turtle. Under the hot sun, they caught little rain, and resorted to drinking their own urine. Two men, Dudley and Stephens, argued in favor of drawing straws to determine who should die, and accept being eaten by the others, but Brooks disagreed. Eight more days passed without food or drink, so Richard Parker, the youngest of the crew, resorted to drinking sea water. This put him into a partial coma. Dudley and Stephens then agreed to kill Parker in order to eat his flesh and save themselves. The fourth man, Brooks, made no sign of assent or dissent. Dudley then said a prayer and plunged his knife into the cabin boy's neck while Stephens

[244] Richard Frederick Clarke, "The 'Mignonette' Case as a Question of Moral Theology," *The Month* 53 (1885): 17-28. Malcom Woolrich, "R v Dudley and Stephens: Degeneration, the Christian Mindset and Judicial Reasoning," *Ecclesiastical Law Journal* 22 (2020): 15-35.

held his feet. Like maddened wolves, all three tore into his body and committed cannibalism. Four days later they were saved by a passing ship.

Once returned to England, Dudley and Stephens were arrested and charged for murder. As for Brooks, murder charges were dropped. Instead, he served as a witness in the trial of his fellow shipmates. After an initial hearing, the recommendation of clemency from both lower judge and jury was referred to the higher Court of the Queen's Bench. The five-judge panel unanimously agreed that Dudley and Stephens had committed murder. The sentence was death. The Queen, however, followed the Home Secretary's course of agreeing to the clemency recommended by the lower court: the two men's death sentence were commuted to six months' imprisonment.

Ethical discussions of *R v Dudley and Stephens* often focus on issues regarding intentional killing and necessity, as well as cannibalism.[245] Classic Catholic discussions about the morality of cannibalism offered a range of opinions. The Spanish theologian Francisco de Victoria argued that cannibalism is contrary to nature and therefore never allowed.[246] However, he also cited other authors to the contrary and said it was "probable" that in extreme necessity cannibalism either was not a mortal sin, or not a sin at all.[247] Over time, majority opinion disagreed with Victoria, despite his Thomistic argumentation; the "more probable" opinion held that although eating the flesh of a human being is *contrary to natural human appetite*, it is permissible in cases of extreme necessity.[248]

The reasoning proposed by the Salamancan school is of particular relevance to the issue of vaccines. It held that it is *not contrary* to nature to make use of the human body for medicinal purposes when a sick person is near death. Citing a number of medical authors and other moral theologians, the Salamancan Carmelites explained that, in their day, the bodies of mummies—Egyptian and otherwise—were ground up and used in medicines in order to alleviate rare but debilitating diseases. Such practices in Western medicine have been documented in England, Germany, and the United States up to the early 1900s.[249] The Salamancans also argued that in rare cases, the blood of humans could save the life of another person. Consequently, they concluded, if the body-parts of humans may be used for medicine in rare instances, it is much more acceptable for body-parts of humans to be used for food in cases of extreme necessity. In general, Christian moral reasoning has tended to agree with the Salamancan school: eating human flesh in extreme necessity has been accepted as a regrettable least-worst choice. Relatedly, aside from the dubious utility of using bits of mummies for medicines, and the particular mode of making use of human flesh for one's health, the Catholic Church has for decades recognized that tissue transplants and blood transfusions are acceptable—even when taken from the living, provided the conditions described above, including the free choice of the donor, etc. (see 1.3.3 above for criteria of licit use of another's tissues).

It should be noted that Dudley and Stephens were not tried by the British crown for the crime of cannibalism; rather, they were tried and convicted for murder. Brooks, in contrast, was not tried. He was considered innocent by all parties, including the brother of Richard Parker, free of legal *and moral* wrong because he had not taken part in the murder—

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[245] See Cătălin Avramescu, *An Intellectual History of Cannibalism*, trans. by Alistair Ian Blyth, (Princeton: Princeton University Press, 2009).
[246] Victoria, "De Temperantia," 78.
[247] Ibid., 76.
[248] See Paul Laymann, *Theologia Moralis,* Tomus Primus, (Lugundi: Petrum Valfray, 1703), 250; Francisco de Jesús Maria, *Cursus theologiae moralis*, (Venetiis: Nicolaum Pezzana, 1728), 64; Constantino Roncaglia, *Universa Moralis Theologia*: *Tomus I.* (Luca: Joseph Justi, 1833), 99; McHugh and Callan, *Moral Theology*, no. 2471.
[249] See Karen Gordon-Grube, "Anthropophagy in Post-Renaissance Europe: The Tradition of Medicinal Cannibalism." *American Anthropologist* 90, no. 2 (1988): 405-409.

even though he freely admitted to eating the flesh of the young man. The case of Brooks in this situation can therefore serve to illustrate the following moral principle: one may *benefit from grave evil*, even when that evil is immediate and proximate, under the following conditions:

1) Brooks did not commit the murder from which he benefitted by cannibalism, and arguably had insufficient strength to defend Parker from the murder;
2) By benefitting from the death of his shipmate, Brooks was not led into the sin of acquiescing to the killing;
3) Brooks had a "sufficiently serious" reason for cannibalism: to save his life;
4) Brooks did not induce Dudley and Stephens to commit the murder;
5) Dudley and Stephens independently manifested their determination to commit the murder, and Brooks probably could not have stopped them without risking all of their lives;
6) Brooks' actions did not actively scandalize third parties. Rather, there was widespread public sympathy for Dudley, Stephens, and Brooks, which reflected a common recognition of the permissibility of their eating, as custom accepted by seafarers, despite the impermissible murder committed.[250] It was widely recognized that eating the flesh of a dead human in extreme necessity would not lead to acceptance of murder or cannibalism in general. A similar public understanding was accorded to the survivors of the Andes flight disaster in 1972, in which rugby team members and others reluctantly resorted to cannibalism in order to survive their ordeal.[251]

3.4.3 Cooperation and benefitting from past abortions

Having applied the principles for licitly benefitting from grave evil to cases of cannibalism in extreme necessity, we may now apply them to the question of benefitting from the grave evil of abortion.

First, we may recall that it constitutes *unjustifiable material cooperation* for scientists to use the cell lines derived from aborted children for research purposes (see section 3.3.4). The Church has also indicated that it constitutes *unjustifiable benefitting* from a past evil, for it would almost certainly lead to scandal, that is, more widespread acceptance of abortions for medical purposes: "there is a duty to refuse to use such 'biological material' even when there is no close connection between the researcher and the actions of those who performed the artificial fertilization or the abortion, or when there was no prior agreement with the centers in which the artificial fertilization took place. This duty springs from the necessity to *remove oneself,* within the area of one's own research, *from a gravely unjust legal situation and to affirm with clarity the value of human life*."[252] In this regard, different situations may arise that may call for different prudential responses, for example, regarding senior scientists who discover that their lab project is utilizing these materials, which is different from junior scientists who have much less influence in the issue and whose livelihoods are more precarious.[253]

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[250] See A. W. Brian Simpson. *Cannibalism and Common Law: A Victorian Yachting Tragedy* (London: The Hambledon Press, 2003), 81-83.
[251] See Piers Paul Read, *Alive: The Story of the Andes Survivors*, (London: J.B. Lippincott Company, 1974).

[252] CDF, *Dignitatis Personae*, §35.
[253] See Nicanor Austriaco, "Using Biological Materials of Illicit Origin." *Catholic Health Care Ethics: A Manual for Practitioners*, Third Edition, ed. by Edward J. Furton, (Philadelphia: National Catholic Bioethics Center. 2020), 29.3-5.

Second, we may consider whether receiving vaccines can constitute justifiable benefit from the past abortions by considering the six conditions laid out above.

1. Receiving the vaccines does not in any way constitute committing the evil of abortion.
2. The act of receiving a vaccine does not, of itself, lead a person to assent to past abortions or other related evils: a person can coherently reject the evil which took place while assenting to the beneficial results therefrom.
3. Sufficiently serious reasons to receive the vaccines exist for many people, including grave concerns for health, keeping one's job, remaining enrolled in school, etc.
4. Receiving the vaccines does not *of itself* induce vaccine makers to commit abortions or related evils.
5. The vaccine makers and distributors have independently manifested their intentions to continue developing, manufacturing, and distributing vaccines, as seen in contracts with governments, through published plans for vaccine rollouts, and so on.
6. If scandal can be avoided in taking the vaccines, that is, if the act of taking the vaccines does not directly contribute to a lessening of respect for the dignity of life, and if others are not led to sin because of the act, then it may be acceptable.

Commentary on some of the above points may help to elucidate these considerations.

Criterion 2 is that benefitting from evil is acceptable only if the beneficiary avoids committing evil himself—this includes avoiding *assenting* to or *ratifying* the evil performed, rather than merely *accepting* or *permitting* it. To assent to a past evil is to be pleased with it because one judges that it was good and justifiable in some way. Although assenting to abortions and related evils can be avoided when a person benefits from the vaccines, there remain the danger that accepting and benefitting from evil can lead to such assent. This is because the moral dangers entailed by material cooperation with evil (see section 3.3.4), are also present when a person chooses to benefit from evil. In her seminal article on the topic, M. Catherine Kaveny presents "appropriation of evil" as a form of benefitting from evil, namely, "an action that makes use of the fruits or byproducts of a morally objectionable act performed by the auxiliary agent."[254] A comparison between cooperation and appropriation reveals significant results. Whereas the fundamental moral evil for potential cooperators is intending the evil intended by the principal agent, a parallel evil for potential appropriators is ratifying the evil of which they make use. Ratification involves an appropriator intentionally affirming the evil that occurred, that is, believing that the evil was justified and accepting or affirming it in one's will. If another's evil acts contribute in one's own objectives, particularly in an ongoing manner, it is difficult not to view them in a more positive light than one might otherwise. Moreover, it is tempting to accustom oneself to the benefits that flow from appropriation. Similarly, self-deception about one's motives is also possible in appropriation cases.

Criterion 3, the need for sufficiently grave reasons for receiving the vaccines, can be weighed in light of the criteria laid out above for morally acceptable material cooperation with evil (3.3.2). Since benefitting from evil is more remote than material cooperation, the criteria for allowable benefit are proportionately less strict.

Criterion 4 regards the nature of vaccine reception in itself, that is, the very act of using the vaccines for addressing an individual's health needs: as such, the act does not cause abortions even when it benefits from them. Insofar as it might provide some occasion for future evils, it could constitute material cooperation with evil or passive scandal.

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[254] Catherine M. Kaveny, "Appropriation of Evil: Cooperator's Mirror Image," *Theological Studies* 61 (2000): 280-313 at 287.

Criterion 6, the issue of scandal, is the one of the chief issues of dispute among Catholics who reject the vaccines. We turn to consider it now.

3.5 Arguments about scandal

We have established that receiving an illicitly-derived vaccine has no causal relation to past acts, and therefore cannot constitute formal cooperation or material cooperation with any past illicit act. However, some of the greatest concerns is that using the vaccines will encourage *future* evils, that is, they will create scandal.

Cardinal Pujats and colleagues, for instance, have said: "Any link to the abortion process, even the most remote and implicit, will cast a shadow over the Church's duty to bear unwavering witness to the truth that abortion must be utterly rejected," otherwise the Church will be weakened as "the last stronghold against the evil of abortion"; and that affirming the acceptability of the vaccines in some cases is "counterproductive," especially because doing so might seem to "encourage and promote the sin of abortion, even in the slightest, by accepting these vaccines."[255] Similarly, the "Statement of Conscience" states, "The acceptance of the use of tissues derived in the past does have implications for incentivizing this industry [of trafficking in aborted fetal body parts]."[256] Finally, the "Voice of Women" statement claims that evils including "the collecting and trafficking the bodies of murdered unborn babies for use in research […] are only perpetuated and promoted by passive acceptance of a morally tainted vaccine on a 'temporary basis.'"[257]

If these claims are accurate, then all people of upright conscience have strong reasons to avoid taking the vaccines; and perhaps *all* vaccines derived from morally illicit sources should be avoided on prudential grounds. Therefore, it is of the highest importance to our study to consider the nature of scandal in itself, and as it relates to this difficult moral issue.

3.5.1 Definition and kinds of scandal

St. Thomas Aquinas treats scandal among the vices against charity, which is willing goods for the sake of God. Scandal comes in four basic types, and various sub-types.

When the action of an agent in some way causes another to sin by example, that is *per se* scandal.[258]

(1) *Per se* active scandal, that is, intentional scandal, arises when the agent purposely intends to draw another into sin. This includes: (a) directly intentional scandal, also called diabolical scandal, when a person acts with the explicit purpose to lead others into sin, for example, by temptation or suggestion. This also includes (b) indirectly intentional scandal: "when the purpose of the scandalizer is to perform some action whose nature is such that it will lead others to the guilt of sin, and he is determined to perform that action, although not directly willing the neighbor's guilt that will result," as when a manager who does not want his subordinates to steal, nevertheless takes company property while knowing that his example encourages them to follow suit.[259]

(2) *Per accidens* active scandal, or unintentional scandal, arises when the agent's action draws another into sin though he does not intend that to happen.[260] This includes: (a) when a person performs an objectively good act, that also appears good, and he has no intention whatsoever that it should lead others into sin. It also includes (b) when a person

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[255] Schneider, "Covid Vaccines: 'The Ends Cannot Justify the Means.'"
[256] Pakaluk, "Statement of Conscience To Awaken Conscience."
[257] VOW, "The Voice of Women in Defense of Unborn Babies and in Opposition to Abortion-tainted Vaccines," 2.
[258] ST II-II, q. 43, a. 1, ad 4. Prümmer, *Manuale Theologiae Moralis*, no. 606.
[259] McHugh and Callan, *Moral Theology*, no. 1450.
[260] ST II-II, q. 43, a. 3, co.

performs an act that is evil, or appears so, although the agent is inculpably unaware of the scandal it may cause.[261]

Scandal can also be passive: (3) scandal of the imperfect, the simple, the ignorant, the "little ones," who are led into sin because some inordinateness of a primary agent's act affects their weakness; (4) and Pharisaical or hypocritical scandal, "which is a fall into sin occasioned by conduct irreproachable in itself, but wrongly interpreted" because of the scandalized person's own wickedness.[262]

There are three relations among the types of scandal: (a) sometimes there is active scandal in a person who acts inordinately and simultaneous passive scandal in another who is led thereby into sin; (b) sometimes there is active scandal, either intentional or unintentional, without passive scandal—as when a person does not consent to another's inducement to sin; (c) sometimes there is passive without active scandal, as in the case of the weak who might misunderstand the good actions of another, or in the case of hypocrites who use the occasion of another's good to justify doing evil.[263]

3.5.2 Scandal, shock, and the "yuk factor"

Common speech at times speaks of something "scandalous" in a wider sense than the narrower, more precise moral-theological meaning offered above, as when something good is shockingly enlisted in the work of evil: a politician's affair is a scandal because he is supposed to be a moral leader. This situation implies a scandal in the theological sense insofar as the person, law, or institution which ought to be a moral exemplar in some way instead becomes an "exemplar cause" of evil. That is, when something which ought to be good is perceived as evil, that disjunct in reality, that unfittingness, has the power to shock and disturb innocent onlookers as well as to draw them away from the good when they consider imitating it.

When considering emotional and perceptual repulsion to unfitting behaviors and realities, the philosopher Mary Midgley, describes a kind of visceral rejection of some biotechnologies, which "are described as '**the yuk factor**.'"[264] She argues that "this sense of disgust and outrage, is in itself by no means a sign of irrationality."[265] Rather, a perception of "something's being wrong because it is ***unnatural***" and therefore deeply repulsive to our entire person.[266] Understood in the wider sense of the term, this too is scandalous insofar as it is disturbing to the moral sense.

In the debate over abortion-derived vaccines, many of the laity—despite the assurances of their shepherds that these vaccines may be licitly used—have felt a revulsion, and struggled to articulate this. This "Yuk Factor" felt by so many prayerful Catholics is surely a sign of their moral perception of evil, an element of the *sensus fidelium* which recognizes that that situation should never exist: people should not be forced, even by exterior circumstances, to benefit from a crime against the dignity of a human being. In 1732, an English prosecutor in an abortion case declared, "[T]he misdemeanor for which the prisoner stands indicted, is of a most shocking nature […] that I cannot well display the nature of the crime to you, but must leave it to the evidence: It is cruel and barbarous to the last degree."[267] In 2000, when Congress was informed that the tissue of aborted babies was

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[261] McHugh and Callan, *Moral Theology*, no. 1451.
[262] ST II-II, q. 44, a. 7, co. Also, McHugh and Callan, *Moral Theology*, no. 1464.
[263] ST II-II, q. 44, a. 1, ad 4.
[264] Mary Midgley, "Biotechnology and the 'Yuk Factor'" in *The Myths we Live by* (London, UK: Psychology Press, 2004), 105.
[265] Ibid.
[266] Ibid., 106.
[267] John Keown, *Abortion, Doctors and the Law: Some Aspects of the Legal Regulation of Abortion in England from 1803 to 1982*, (Cambridge, UK: Cambridge University Press, 1988), 9.

being sold for research, "almost all the representatives expressed their disgust," and most expressed "shock" that the Department of Justice, the FBI, and the National Institutes of Health had known about this situation and had not investigated further.[268] Similarly, the practice of receiving into oneself any material derived from abortions, even if distant in some way, is by its nature morally repulsive. This is why some Catholics "lament" having any connection with abortion, a connection which "should cause our indignation, sorrow, and determination to change."[269]

It may be that some do not have this perception because, as John Paul II noticed, "today, in many people's consciences, the perception of its gravity has become progressively obscured. The acceptance of abortion in the popular mind, in behaviour and even in law itself, is a telling sign of an extremely dangerous crisis of the moral sense, which is becoming more and more incapable of distinguishing between good and evil."[270] At the same time, this perception must be guided by the Magisterium (see section 2.3.2.1), as well as by reason. Midgley argues that we need to "supplement" visceral moral perceptions "by thought, analyzing their meaning and articulating them in a way that gives us coherent and usable standards."[271] Consequently, this moral perception of the unfittingness of receiving abortion-derived vaccines may help Catholics to voice their opposition to the exploitation of human life, and to support more strongly initiatives that respect the dignity of life, even if in some circumstances receiving such a vaccine remains allowable when necessary, though lamentable by reason of its connection to abortion.

3.5.3 Moral evaluation of scandal

There are occasions when some action might be allowable except if it should cause scandal. Similarly, there are occasions when one must relinquish some good in order to avoid scandal. This section therefore works to articulate the conditions in which scandal is never acceptable (and therefore one must be willing to lose or forego certain goods to avoid it), and the conditions that might render scandal an acceptable by-product of a good worth pursuing.

3.5.3.1 Avoiding scandal

First, it may be noted that, like complicity and formal cooperation with sin, per se active scandal is always evil: it is never morally allowable deliberately to draw another into sin. St. Paul exhorts us to "decide never to put a stumbling block or scandal in the way of a brother" (Rom 14:13). However, scandal is distinct from complicity and cooperation with evil, although sometimes they can coexist in the same act. Cooperation helps with the commission of sin, whereas scandal influences a person to evil by suggesting the sin;[272] cooperation presupposes a primary agent has a will directed toward sin, whereas scandal influences the will of another to become evil by choosing sin;[273] cooperation is completed with commission of the act, whereas the scandalous effects of a person's evil deed might continue for years after his death. In sum, scandal is not said to be an efficient or agent "cause" but instead an "occasion" of another's moral downfall: "which indicates an imperfect cause, not always a cause *per accidens*."[274] One is therefore bound to avoid active scandal, whether directly or indirectly intentional: one may not tempt another to sin, nor perform some evil act that one knows will likely lead another to sin.

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[268] Dingell, "Congress Requests DOJ, FBI Investigation into Sale of Fetal Tissue," 9-10.
[269] Pakaluk, "Statement of Conscience To Awaken Conscience."
[270] John Paul II, *EV*, 58.
[271] Midgley, "Biotechnology and the 'Yuk Factor," 106.
[272] McHugh and Callan, *Moral Theology*, no. 1460b.
[273] Prümmer, *Manuale Theologiae Moralis*, no. 617.
[274] ST II-II, q. 43, a. 1, ad 3.

Second, sometimes one is bound to avoid even morally acceptable acts that may result in *passive scandal of the weak*.

As noted previously, St. Paul teaches that eating meat sacrificed to idols is not evil in itself—since Christ showed that food of its nature does not defile (Mt 15:11, 20; Mk 7:15-19). Therefore, in principle Christians are allowed to partake of such food (1 Cor 8:8; 10:25). Nevertheless, one should omit this practice if it leads weak Christians to think that it constitutes "acceptable" participation in demon-worship. Willing participation in demon-worship is never acceptable. Therefore, St. Paul teaches that those whose consciences are not troubled by such idolatrous offerings should at times avoiding eating them nonetheless in order to avoid leading their weaker brothers into sin. He says: "take care lest this liberty of yours somehow become a stumbling block to the weak" (1 Cor 8:9), and "for conscience's sake—I mean his conscience, not yours—do not eat it" (1 Cor 10:29).

It follows that, at times, charity obliges a person to forego or relinquish certain goods if by using them he leads God's "little ones" into sin. The following principles may help guide these considerations.[275]

- Goods that are relatively uncertain or small should be set aside when the evil of scandal is certain and grave;
- Good works that are of counsel only (such as pious exercises abstaining from meat on a non-fast day: e.g., one should not abstain from meat if it leads people to suppose that one has abandoned Catholicism for Hinduism), and those that are obligatory only under certain conditions (such as almsdeeds), may be more easily put aside to prevent serious scandal (e.g., one should not give almsdeeds if one is morally certain that doing so will lead a drug dealer to exploit the recipient of alms);
- Goods of which one is not the owner, nor the custodian or administrator, may not be surrendered at will on account of scandal; for no one has the right to give away the property of others, nor gravely endanger the public;
- If one is obliged to give a good example, or correct a sinner, or to impede their evil—as is the case for parents, priests, or civil judges, as it were—even less can one lead them to sin by council or example.[276]

In sum, charity obliges us to avoid scandal when we can do so easily: one should avoid scandalizing the weak except in cases that would be gravely inconvenient.[277]

3.5.3.2 Allowing scandal

There are times when it may be permissible to do good while nevertheless foreseeing that it may be an *occasion* for another's sin. This can be seen in light of the fact that even God knows all things and yet permits sins, and He foresees all sins that will come about and yet does not stop them—rather, "to permit sin is not evil in itself," for God allows good to exist that nevertheless may be misunderstood and even be turned to sin.[278] Christ did not actively scandalize anyone, even though his life and teachings were occasions for the sin of the Pharisees; nor did St. John the Baptist, though his preaching became an occasion for the sin of Herodias; etc.

In discussing such cases, St. Alphonsus says that when a person is performing an act that is not intrinsically evil, that is, which can be good in some circumstances, "you are not obliged except from charity to abstain from it lest another misuse it in order to sin; for when

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[275] See ST II-II, q. 43, aa. 7-8, co. Also, Prümmer, *Manuale Theologiae Moralis*, no. 610. McHugh and Callan, *Moral Theology*, no. 1481-85.

[276] See Liguori, *Theologia Moralis*, lib. 2, tract 3, c. 3, dub 5, a. 1, no. 45, p. 339.

[277] ST II-II, q. 43, a. 8, ad 3. Also, Prümmer, *Manuale Theologiae Moralis*, no. 610.2; McHugh and Callan, *Moral Theology*, no. 1480b.

[278] Prümmer, *Manuale Theologiae Moralis*, no. 610.3.

you otherwise fear grave injury, you can licitly permit the sin of the other."[279] This is for two reasons, St. Alphonsus says: (a) charity does not oblige a person to incur grave harm in order to avert another's sin; (b) another's wickedness cannot transform a good action into something intrinsically evil. To reinforce point (a): goods that are gravely necessary for oneself *may* be relinquished to avoid scandalizing the weak, but *charity does not oblige* such a heroic sacrifice. Consequently, if a criminal threatens you to induce your material cooperation with his theft, and if you have a just cause for doing so, Alphonsus says, "It is not true that you formally concur with the sin of theft, for this [formal concurrence] *would* be the case if you positively brought your influence into his bad will; but when you contribute only those actions that the thief afterwards ill uses in order to inflict damage, your action will not be the cause of the damage but only the malice of the thief will be."[280] In other words, there may be times when doing good may be permissible despite another's probable *passive scandal*, which one does not will and does not directly cause. These activities are similar to those in which the Principle of Double Effect can be legitimately be invoked,[281] namely:

- One must perform an act objectively good in itself;
- One must not intend the potential scandal that one foresees is likely to occur;
- One must have a sufficiently serious reason to pursue the good from which scandal might flow. All of the considerations for weighing the gravity of matter have already been discussed (section 3.3.2).

In light of what has been said, we formulate the following principles for the permissibility of performing an action despite a probable side effect of scandal:

- If scandal *will* likely place a weak person in grave spiritual need, that is, in proximate danger of sinning gravely, one should be willing to surrender temporal goods or even forego spiritual goods to avoid scandal.[282]
- If scandal will not place one's neighbor in a state of grave spiritual danger, one is not obliged to surrender serious goods, but only things of minor value.[283]
- If one will likely lose a serious good, then one is not obliged to avoid the potential for passive scandal—since charity does not oblige grave injury to oneself.[284]
- If one will likely lose a less serious good, one is still not obliged to avoid the potential for passive scandal if the scandal is fairly unlikely, or will be of a proportionately less grave sort.
- One need not omit any good deed to avoid scandalizing hypocrites or the wicked.

The above considerations show that when scandal is a possibility, one must attempt to weigh whether or not one may perform a morally allowable deed, one must weigh one's own needs and interests, as well as the "good faith" and relative propensity toward sin of the witness. In general, one should be more careful to avoid scandal than to allow it, since it is very difficult to weigh accurately the potential effects of one's bad example, and knowing the character of others is not easy: "no matter how good or how bad the witnesses may appear to him, they may not be as fixed in character as he thinks, and his misconduct may be the starting point for them of a downward course or of a more rapid descent into evil."[285]

3.5.4 Scandal from using the vaccines

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[279] Liguori, *Theologia Moralis*, lib. 2, tract 3, c. 3, dub 5, a. 3, no. 66, p. 359.
[280] Liguori, *Theologia Moralis*, lib. 3, tract. 5, c. 2, dub. 2, no. 571, p. 67. Emphasis added.
[281] Prümmer, *Manuale Theologiae Moralis,* no. 610.3.
[282] McHugh and Callan, *Moral Theology*, no. 1485a.
[283] Ibid., no. 1485b.
[284] Liguori, *Theologia Moralis*, lib. 2, tract 3, c. 3, dub 5, a. 3, no. 66, p. 359.
[285] McHugh and Callan, *Moral Theology*, no. 1462b.

We are now in a position to evaluate how receiving illicitly-derived vaccines might relate to scandal.

Regarding active scandal, it would constitute diabolical scandal if a person were to receive the vaccine as a sign and distant means of supporting the abortion industry—a symbolic act, as it were, of "solidarity" and agreement with the evil that led to the vaccines, a signal of acceptance for similar future evils for the sake of community health or some other goal. This would clearly be unacceptable.

The concerns of prelates and others against the abortion-derived vaccines, quoted at the beginning of section 3.5, are not to eliminate diabolical or Pharisaical scandal: they do not exhort abortion supporters to change their minds. Rather, the groups mean to dissuade Catholics of at least some good faith to avoid taking the vaccines, which indicates a concern that taking the vaccines could constitute: (a) indirectly intentional scandal, or (b) unjustifiable unintentional scandal.

Regarding whether receiving the vaccines would constitute (a) indirectly intentional scandal, which would be morally unacceptable, it is one thing to worry that an act may scandalize someone; it is another thing to have some evidence showing scandal will likely come about. By itself, the mere possibility or fear of scandal may be sufficient to warrant foregoing a trivial act when a small good is at stake: little would be lost. However, in the absence of strong reasons or proof of scandal for an action that is seriously needed, then one may perform the action despite a tenuous possibility that scandal may arise from it. In other words, when graver matters are at issue, as in the case of the vaccine—one's health, the health of the community, one's employment, etc.—then some stronger reason or proof is needed to show that performing the act may likely pose moral dangers to others. It is insufficient to argue that receiving the vaccine for healthy young people would constitute unjustifiable material cooperation with the abortion industry. For the action to be designated as directly and necessarily scandalous, one would need strong reasons or proof to show that such an action would likely *induce* (cause) doctors to perform abortions, or researchers and others to seek out abortions, or to perform some other gravely evil act, in the future.

One of the strongest particular arguments against using abortion-derived vaccines now is that doing so will create a market for future abortions from which baby parts will be harvested. As Fr. James Burtchaell testified before Congress in 1990 about using tissues derived from abortions: "this research is, if accepted, going to be big business. […] We think that this, which would not give payment for tissue but would practically double the cash flow of the abortion industry, could not help but create an increased inducement on their part."[286] Another reason that this could create inducements to abortion, is that parents are more inclined to seek abortions if they believe "medical use" of their child's tissue is possible,[287] an outcome shown by various studies.[288] With respect to abortion-derived cell lines and vaccines, more recently it has been claimed that, "There is no necessary connection between continued use of the HEK-293 line," from which the AstraZeneca, Moderna, and Pfizer vaccines have been derived, "and the use of fetal tissue from contemporary and continuing abortion."[289] Similarly, it has been claimed that, "it is unheard of for a vaccine manufacturer

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[286] Burtchaell, "Fetal Tissue Transplantation Research Testimony."

[287] Ibid.

[288] R.C. Cefalo and H.T. Engelhardt, "The use of fetal and anencephalic tissue for transplantation," *J Med Philos* 14 (1989): 25–43, https://doi.org/10.1093/jmp/14.1.25. Andrew F. Shorr, "Abortion and fetal tissue research: some ethical concerns," *Fetal Diagn Ther* 9, (1994): 196–203. DK Martin et al, "Fetal tissue transplantation and abortion decisions: a survey of urban women," *CMAJ* 153, (1995): 545–552. Shizuko Takahashi et al, "The decision-making process for the fate of frozen embryos by Japanese infertile women: a qualitative study." *BMC Medical Ethics* 13, 9 (2012), https://doi.org/10.1186/1472-6939-13-9.

[289] Christopher O. Tollefsen, "Research Using Cells of Illicit Origin and Vaccines from Fetal Tissue," *The Public Discourse* (2020), https://www.thepublicdiscourse.com/2020/05/63447/.

to seek out new human fetal cells from a recent abortion," because doing so would waste time, effort, and money.[290] Surprisingly, the same author admits that Chinese researchers have done this very thing in 2015, although he says it was "unnecessary."[291] However, the Chinese researchers argue that harvesting tissues from aborted babies was necessary for economic and scientific reasons: cell lines are very difficult to obtain—or not available at all—and some strains are in diminishing supply, "continuous and primary cell lines used for vaccine production suffer from the limitation of being potentially strongly tumorigenic," that is, they become cancerous eventually," and the cells reach a limit to their utility after so many divisions in their production.[292]

It could be argued that some mediate and remote evil *might* result from taking abortion-derived vaccines, since vaccine usage provides some conditions for future evil, especially profits that *could* be used to promote more abortions. However, the likelihood of abetting future abortions is based more on estimations of general industry behaviors rather than on some cause-and-effect connection, as would be the case, for example, if interested parties (abortionists, vaccine makers, researchers) manifested an intention to perform more abortions based on vaccine use. Usage of the vaccines would not cause the future evil *per se*, and the individual recipient's responsibility for that potential evil would be *material* and *diminishingly* minor. In contrast, those who made decisions to pressure such cooperation on the aggregate scale—government officials and vaccine makers—bear the weight of the responsibility both not resolving a gravely unjust situation that makes use of illicitly-derived vaccines, as well as any future plans for evil that are contingent on the side-effects of widespread vaccine reception.

Regarding whether receiving abortion-derived vaccines would constitute (b) unjustifiable unintentional scandal, one might point to the Congregation for the Doctrine of the Faith's document *Dignitas Personae*, which speaks about the use of embryos for stem cell researching, saying, "is necessary to distance oneself from the evil aspects of that system in order not to give the impression of a certain toleration or tacit acceptance of actions which are gravely unjust. Any appearance of acceptance would in fact contribute to the growing indifference to, if not the approval of, such actions in certain medical and political circles."[293] In response to arguments that such actions would constitute *remote material cooperation*, and therefore would be justifiable, the CDF strongly argues that, "[T]he duty to avoid cooperation in evil and scandal relates to their ordinary professional activities, which they must pursue in a just manner and by means of which they must give witness to the value of life by their opposition to gravely unjust laws. […] This duty springs from the necessity to remove oneself, within the area of one's own research, from a gravely unjust legal situation and to affirm with clarity the value of human life. Therefore, the above-mentioned criterion of independence is necessary, but may be ethically insufficient."[294]

In light of the CDF's uncompromising statement to scientists, one could argue that if it constitutes unjustifiable scandal for researchers to use embryonic stem cells in their research because the act would "contribute" to favorable opinions about abortion, and would undermine their duty to witness to the dignity of life, then receiving the vaccines would also constitute unjustifiable scandal for the same reasons.

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[290] Austriaco, "Moral Guidance on Using COVID-19 Vaccines Developed with Human Fetal Cell Lines."
[291] Ibid.
[292] Ma, "Characteristics and viral propagation properties of a new human diploid cell line, Walvax-2, and its suitability as a candidate cell substrate for vaccine production," 999. Chen-ling Shen, et al., "The tumorigenicity diversification in human embryonic kidney 293 cell line cultured in vitro," *Biologicals* 36 (2008): 263–268.
[293] CDF, *Dignitas Personae*, §35.
[294] Ibid.

In response to such an argument, however, one can point out differences between the two situations. First of all, *actively* using the abortion-derived cells for research or profit is intrinsically evil since manipulating the cells causes a situation which does not respect the dignity of their origin, whereas receiving a vaccine is not an active performance of evil, but rather a passive acceptance of it, which does not cause the situation to come about. Consequently, scientists would be culpable of active scandal, whereas those who are pressured to receive the vaccines are less culpable of scandal. Second, the reasons for the actions may significantly differ in gravity. The gravest reasons for scientists to use the materials could include to promote saving the lives of others by developing medicines or vaccines; however, evil cannot be done in order that good for one's neighbor might come about. In contrast, the gravest reasons for receiving the vaccines would be to save one's own life, or to perform some other gravely necessary action for oneself.

Given all of these considerations regarding scandal, it is likely that receiving the vaccine may be justifiable for those who have grave reason to do so, since such reception is not evil in itself, and evils that might result from reception would be foreseen but neither intended nor caused directly by its recipients.

3.5.5 Avoiding passive scandal

Because of the real and present danger that Catholics who receive abortion-derived vaccines could create scandal, potentially in ways outlined in the section above, the Congregation for the Doctrine of the Faith has clearly stated that vaccine recipients have "the duty to make known their disagreement and to ask that their healthcare system make other types of vaccines available."[295] Similarly, the Pontifical Academy for Life has said, "[D]octors and fathers of families have a duty to take recourse to alternative vaccines (if they exist), putting pressure on the political authorities and health systems so that other vaccines without moral problems become available. They should take recourse, if necessary, to the use of conscientious objection with regard to the use of vaccines produced by means of cell lines of aborted human fetal origin. Equally, they should oppose by all means (in writing, through the various associations, mass media, etc.) the vaccines which do not yet have morally acceptable alternatives, creating pressure so that alternative vaccines are prepared, which are not connected with the abortion of a human fetus, and requesting rigorous legal control of the pharmaceutical industry producers."[296] And for people who are more vulnerable who for grave reasons must take the abortion derived vaccines, "there remains a moral duty to continue to fight and to employ every lawful means in order to make life difficult for the pharmaceutical industries which act unscrupulously and unethically."[297] The fact that these directives were omitted in the 2020 document of the CDF is regrettable, but that does not mean that they have been repudiated. In the absence of contradictory directives, one must hold that they remain in force for they indicate what is necessary to help others avoid being scandalized.

Undoubtedly, the mass vaccine rollout by governments and insurance companies precludes the choice of most people: most are unable to choose among vaccines, or even to choose whether or not take the vaccine. This creates an "ethical dilemma" as Archbishop Anthony Fisher argues, for receiving abortion-derived vaccines will be "as near to mandatory as possible" in order to participate in ordinary life, to have a job, and so on.[298] On the one hand, this situation *reduces* the possible scandal that may arise from receiving the vaccine—since it will be widely recognized that a person does so with little free choice given the

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[295] Ibid.
[296] PAV, "Human Embryonic Stem Cells."
[297] Ibid.
[298] CNA, "Ethical Coronavirus Vaccine."

coercion caused by government, big business, and general social pressure. On the other hand, this situation highlights the power and importance of witnessing to the dignity of human life in such trying circumstances, even when such witness might seem to result in small gains. A number of pro-vaccine groups and bishops have worked to eliminate passive scandal by helping people to pressure vaccine makers to change the cell lines they use, as well as to stop abortions for medical experimentation. The USCCB, for instance, begins its discussion of the vaccines by reaffirming its unequivocal support of the dignity of life, saying, "because of this respect for the human person that the USCCB, in collaboration with other organizations working to protect human life, has been engaged in a campaign advocating for the development of a vaccine for COVID-19 that has no link to abortion."[299] Archbishop Joseph F. Naumann and Bishop Kevin C. Rhoades also raised their "moral concerns" about vaccines with illicit origins, while allowing for their use.[300] The Catholic Medical Association, for its part, has created a letter that can be sent to vaccine makers to protest their use of abortion-derived cell lines.[301] Stacy Trasancos, meanwhile, explains a number of ways Catholics can object to abortion-tainted COVID-19 vaccines, and thereby work toward the good and reduce scandal.[302]

The CDF clearly states that "the licit use of such vaccines does not and should not in any way imply that there is a moral endorsement of the use of cell lines proceeding from aborted fetuses."[303] Unfortunately, many voices in favor of the vaccines have not been as clear. To the contrary, not a few Catholic prelates and others have prominently promoted abortion-derived vaccine use without simultaneously speaking clearly against the evil origins of the vaccines and promoting whatever alternatives may be available. This is despite the fact that prelates and all clergy have the primary duty to give voice to the Catholic faith on the dignity of life. Although this imbalanced approach may come from good intentions, that is, to encourage as many people as possible to protect health by receiving the vaccines, the unintended side-effect may be widespread scandal, namely, what the CDF has called "giving the impression of a certain toleration or tacit acceptance of actions which are gravely unjust," and the "appearance of acceptance" of very grave evil for the sake of some good.[304] Such seems to be the case as seen by such headlines as, "Vatican Approves Use Of COVID-19 Vaccines Made From Abortion Cell Lines,"[305] and, "Covid: Vatican says coronavirus vaccines 'morally acceptable.'"[306] Likewise, Catholic bioethicists have inaccurately declared the vaccines to be "ethically uncontroversial" and "not morally compromised."[307] When Catholics fail to do what is necessary to protect their neighbor from potential grave passive scandal, the result appears to be capitulation to a culture of pragmatism in which temporal

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[299] USCCB, "Moral Considerations," §1.
[300] Nora Mishanec, "Catholic Leaders Raised 'Moral Concerns' over COVID Vaccines. Here's How S.F.'s Archbishop Weighed In," *San Francisco Chronicle*, 3 March 2021, https://www.sfchronicle.com/local/article/Catholic-leaders-raised-moral-concerns-over-15998397.php.
[301] Catholic Medical Association, "Vaccine Letter in Objection Template," 11 January 2021 https://www.cathmed.org/vaccine-letter-in-objection/.
[302] Stacy Trasancos, "How to Object to an Abortion-Tainted COVID-19 Vaccine," *National Catholic Register*, 21 December 2020, https://www.ncregister.com/commentaries/how-to-object-to-an-abortion-tainted-covid-19-vaccine.
[303] CDF, "Morality of using some anti-COVID-19 vaccines," §4.
[304] CDF, *Dignitas Personae*, §35.
[305] Frances D'Emilio, "Vatican Approves Use Of COVID-19 Vaccines Made From Abortion Cell Lines," *HuffPost*, 21 December 2020, https://www.huffpost.com/entry/vatican-approves-covid-vaccines_n_5fe0fc3fc5b60d416344e522.
[306] BBC News, "Covid: Vatican Says Coronavirus Vaccines 'Morally Acceptable'," *BBC News*, 22 December 2020, https://www.bbc.com/news/world-europe-55409693.
[307] Trasancos, "Awakening Consciences About Abortion-Tainted Vaccines."

and short-term goods are sought without the perspective of virtue and man's final end. Pope John Paul's words to university researchers are a challenge to everyone with this mindset:

> Before they can have a cultural influence, professional and ethical values should characterize their teaching activities and interpersonal relationships in the context of university life. They must give a living witness in daily life … in a world which will often be fascinated by [a] utilitarian and pragmatic outlook.[308]

As the same pope warned, "pragmatic attitudes" are approaches that increasingly claim "full cultural and social legitimacy," which involves a loss of faith and a "decline or obscuring of the moral sense," even within the Church.[309]

At the same time, it may also be noticed that any unnuanced rejections of the vaccines would be scandalous to the extent that they explicitly reject the teachings of the Congregation for the Doctrine of the Faith, and thereby undermine the Church's legitimate authority to teach even on contingent moral matters. Although here too good motives seem to be present, calls for a universal refusal to be vaccinated where they rest on rejection of CDF teachings might not only endanger the health, employment, and education of many people—it might also bind the conscience of well-intentioned but only partly-informed Catholics, and lead them to reject official Church teaching, or to consider it optional not only on this point but in general, and thus to erode their supernatural faith. Such unnuanced positions are strongly reminiscent of the moral rigorism condemned by Pope Alexander VIII, when he anathematized the proposition that "It is not licit to follow a probable opinion, even the most probable,"[310] since, as has been shown, the CDF's position is "more probably" true on the grounds of both authority and reason.

3.5.6 The duty to repair scandal

Although abortion-derived cell lines have been in use for decades, the current widespread concern about their use in COVID-19 vaccines is an opportunity for Catholics to clearly proclaim the Gospel of Life in its fullness. If indeed scandal has been occasioned by any unnuanced promotion of illicitly-derived vaccines, or in using hyperbolic language about their moral goodness, and also in claims about the unqualified moral evil of the vaccines, then those scandals need to be repaired.[311] The obligation of repairing scandal is derived from one's commitment to the truth, from the nature of charity which is a desire for the good of the soul of one's neighbor, and even from justice insofar as inaccuracy and error undermines the truth.[312] There are a number of steps that can be taken to ameliorate any scandal that has been given:[313]

- The full position of the Church must be publicly proclaimed and explained, both the points in favor of receiving the vaccines in some circumstances as well as the points about the need to oppose the evil origins of the vaccines;
- Any exaggerations, misrepresentations, erroneous judgments, or false statements that have been published should be retracted and removed from circulation if possible;
- One should publish explicit corrections of all scandalous statements and apologize publicly for any scandalous statements.

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[308] Quoted in Wong, "The Ethics of HEK 293," 494.
[309] John Paul II, *Veritatis Splendor*, §106.
[310] Heinrich Denzinger, *Enchiridion Symbolorum: A Compendium of Creeds, Definitions, and Declarations on Matters of Faith and Morals*, ed. Peter Hünermann and Helmut Hoping, trans. Robert L. Fastiggi and Anne Englund Nash, 43rd ed. (San Francisco, CA: Ignatius Press, 2010), 2303.
[311] Aquinas, *Super Epistolas S. Pauli lectura*; ST II-II, q. 43, a. 7; McHugh and Callan, *Moral Theology: A Complete Course*, no. 1488.
[312] Prümmer, *Manuale Theologiae Moralis*, no. 612.
[313] McHugh and Callan, *Moral Theology: A Complete Course*, no. 1492.

4 Weighing Potential Risks and Benefits of the Vaccines

We have said that there are a number of sufficiently grave, or very grave, reasons that "warrant" receiving the vaccines for COVID-19. However, that does not mean that receiving a vaccine in every case, for every person, is thereby justified. A warrant is a sufficiently good enough reason to *allow* doing something; a justification is a *moral approval* for actually doing it. Some deeds might be morally allowable (warranted), but nevertheless for circumstantial reasons should not be done in a particular case (not justified). Although an action type may not be intrinsically evil (thus warranted in principle), it might be morally dangerous for a particular person or groups of persons (thus unjustifiable when those conditions hold). For instance, although it might not be intrinsically evil for an alcoholic to meet a friend at a bar (thus warranted in principle), doing so would ordinarily be a proximate occasion of sin and therefore unjustifiable except for some very serious reason, such as to escape death. Similarly, receiving an abortion-tainted vaccine might be warranted in general, but circumstances could render the act unjustifiable for some people.

We have seen that the likelihood of grave scandal can negate the moral justifiability of receiving the vaccine. Here we will discuss other relevant circumstances that should be considered. It may be noted that we are not subject matter experts for what follows, but this is a valuable exercise nonetheless, for although our selection and interpretation of the data may call for revision from authorities in this field, our approach objectively schematizes the chief issues and how to evaluate them within a Catholic moral framework.

4.1 Weighing the benefits of the vaccines

Just as food is eaten primarily for the good of the individual eater, even if the food secondarily benefits others, as when a mother eats food so as to have nourishment to give her nursing newborn, so every medical treatment is aimed at the good of the individual, even if it has secondary benefits for others. The individual should not be instrumentalized as means for transferring medical benefits to others through a medical treatment that does not help him. It follows that the chief reason for taking a vaccine is personal health, even though the chief aim of a national immunization program for a communicable disease like measles is to eliminate it from the population and protect everyone through community protection (i.e., achieve herd immunity). Hence, a person should estimate to best of his ability whether not receiving the vaccine is indicated for his personal health needs, and secondarily whether or not it would benefit others—especially those under one's care, such as elderly family members, friends, or coworkers—with little risk of harm to himself.

Research indicates that for those particularly vulnerable to COVID-19—especially the elderly, the obese, and those with other serious diseases—the benefit value of receiving a COVID-19 vaccine is high when the risks of the vaccines are proportionately lower. For those under the age of 50 who are not particularly at risk, the value of the vaccine is comparatively low for their own individual health considered against the clear benefit for an elderly population. This is particularly true of children who appear to fare better than older people who COVID-19.

There are presently more than two dozen COVID-19 vaccines. Each vaccine has its own unique design, development, production, testing, and dissemination factors. Having already discussed their moral import with respect to origin, here we will discuss only a few of the more widely-used vaccines in order to weigh their potential benefit, which should also be considered as a secondary circumstance that affects their moral use.

There is a commonly-accepted distinction between vaccine *efficacy* and vaccine *effectiveness*. Vaccine efficacy refers to the results from randomized clinical trials, whereas

effectiveness refers to vaccination in real-world conditions as estimated from observational (non-randomized) studies.[314]

When considering the value of receiving a vaccine, even one derived from illicit means, it should first be noted that these are well above the 50% efficacy standard of the US Food and Drug Administration.[315] They are all above that threshold even for variants of COVID-19.[316] In contrast, a typical seasonal flu vaccine has no greater than 60% efficacy, depending on various flu strain factors.[317] It has been estimated that the following vaccines were 100% effective at preventing severe disease, but the various manufacturers differed greatly in crucial matters that measure the efficacy of their vaccines.[318] With respect to efficacy in preventing risk of a *moderate* symptom, Johnson & Johnson/Janssen rated between 66.9-72% overall, and 86% effective against severe disease in the US.[319] Meanwhile, AstraZeneca/Vaxzevria has a reported efficacy of between 60.3%[320] and with a suggested 76% effectiveness at reducing the risk of symptomatic disease.[321] Many of these numbers, however, must be considered as interim and subject to revision. For example, the Pfizer-BioNTech vaccine was rated 93-95% effective in preventing severe symptoms of the original virus, but a reported 64% effectiveness against the delta variant, raising questions about future reductions in effectiveness as the virus mutates.[322]

4.1.1 Asymptomatic transmission

It has been argued that even if individuals will not benefit much (if at all) from the vaccine because of their relative low proclivity to experience severe disease manifestation from the virus—a for younger people in good health—nevertheless they should receive it in

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[314] WHO, "Evaluation of COVID-19 Vaccine Effectiveness," *WHO*, 17 March 2021, https://www.who.int/publications/i/item/WHO-2019-nCoV-vaccine_effectiveness-measurement-2021.1, 6.
[315] Food and Drug Administration (FDA), "FDA Briefing Document: Vaccines and Related Biological Products Advisory Committee Meeting: October 22, 2020: Development, Authorization and Licensure of Vaccines to Prevent COVID-19," *FDA*, 2020, https://www.fda.gov/media/142723/download, 14.
[316] Institute for Health Metrics and Evaluation [IHME], "COVID-19 Vaccine Efficacy Summary," *IHME*, 4 June 2021, http://www.healthdata.org/covid/covid-19-vaccine-efficacy-summary.
[317] CDC, "Vaccine Effectiveness: How Well Do the Flu Vaccines Work?," *CDC*, 6 May 2021, https://www.cdc.gov/flu/vaccines-work/vaccineeffect.htm.
[318] Some researchers have noted the need for standardization in measurement and reporting these matters: "With the use of only RRRs [relative risk reduction], and omitting ARRs [absolute risk reduction], reporting bias is introduced, which affects the interpretation of vaccine efficacy. … Unfortunately, comparing vaccines on the basis of currently available trial (interim) data is made even more difficult by disparate study protocols, including primary endpoints (such as what is considered a COVID-19 case, and when is this assessed), types of placebo, study populations, background risks of COVID-19 during the study, duration of exposure, and different definitions of populations for analyses both within and between studies, as well as definitions of endpoints and statistical methods for efficacy. Importantly, we are left with the unanswered question as to whether a vaccine with a given efficacy in the study population will have the same efficacy in another population with different levels of background risk of COVID-19. … Assessing the suitability of vaccines must consider all indicators, and involve safety, deployability, availability, and costs." Piero Olliaro, Els Torreele, and Michel Vaillant, "COVID-19 Vaccine Efficacy and Effectiveness—the Elephant (Not) in the Room," The Lancet Microbe 2, no. 7 (July 1, 2021): e279–80, https://doi.org/10.1016/S2666-5247(21)00069-0.
[319] Katella, "Comparing the COVID-19 Vaccines."
[320] Catharine Chambers, "Comparing Vaccines: Efficacy, Safety and Side Effects," *Healthy Debate*, 11 March 2021, https://healthydebate.ca/2021/03/topic/comparing-vaccines/.
[321] Katella, "Comparing the COVID-19 Vaccines."
[322] Anna Nowogrodzki, "COVID-19 Vaccines: What Does 95% Efficacy Actually Mean?," *LiveScience*, 11 February 2021, https://www.livescience.com/covid-19-vaccine-efficacy-explained.html; Kathy Katella, "Comparing the COVID-19 Vaccines: How Are They Different?," *Yale Medicine: Family Health*, 23 June 2021, https://www.yalemedicine.org/news/covid-19-vaccine-comparison. Alona Kuzmina et al., "SARS-CoV-2 Spike Variants Exhibit Differential Infectivity and Neutralization Resistance to Convalescent or Post-Vaccination Sera," Cell Host & Microbe 29, no. 4 (April 14, 2021): 522-528.e2, https://doi.org/10.1016/j.chom.2021.03.008.

order to reduce spreading the virus to others. Among other issues, this involves asymptomatic transmission. On the one hand, a computer model proposed that asymptomatic spread of the virus is up to 50% of cases;[323] and *pre*-symptomatic spread occurred in 12.6% and 6.4% of cases.[324] On the other hand, a study of actual cases with contact tracing found that there were no positive tests amongst close contacts of completely asymptomatic cases;[325] and another study showed only 0.7% asymptomatic and presymptomatic household transmission of the virus.[326]

In this light, the potential scandal of receiving problematic vaccines such as AstraZeneca, a positive witness to the need to preserve pre-born children from being used in the medical-industrial complex, the uncertainty regarding the actual danger of the virus, as well as the low likelihood of asymptomatic transmission, all seems to give sufficient justification for some of those not at risk to avoid the vaccine. This conclusion is bolstered by the fact that herd immunity from COVID-19 is rapidly approaching, since up to 1/3 of the population (of the US) has antibodies from the virus, another significant portion is naturally immune, and still more are vaccinated.[327]

4.1.2 Other treatments appear less effective

It should be noted that although other non-vaccine treatments exist, a few have demonstrable good effects, but none of them can compare to the efficacy and effectiveness of the vaccines currently on the market.

In the case of the much-touted hydroxychloroquine (HCQ), a meta-analysis of 245 studies leads to the following results from randomized controlled trials: early treatment can lead to between 46-64% improvement and up to 72% lower mortality; because of the widespread positive effects of early treatment, the probability of this happening for ineffective treatment is low; however, only 5% of HCQ studies show zero negative effects from COVID-19 after treatment; despite these benefits, which are less than that of vaccines but not insignificant, there is substantial evidence of bias towards publishing negative results of HCQ.[328]

As for ivermectin, early treatment or prophylaxis has been shown to lead to 73-83% improvement, with 81-96% lower mortality; the probability of ineffective treatment (no change) is estimated to be 1 in 2 trillion, although 29% of studies show "zero events in the treatment arm."[329]

Vitamin D peer-reviewed, randomized studies, studies report between 55-81% improvement for early treatment, although only 4% of studies show zero events in the treatment arm. Hence, multiple approaches to solve the virus-related effects are required.[330]

Monoclonal antibodies are perhaps even more effective in preventing symptoms of COVID-19. One study showed that the Eli Lily antibody reduced the risk of becoming ill with COVID-19 in the following 8 weeks by 57%, and that the risk of COVID-19 illness

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[323] Michael A. Johansson et al., "SARS-CoV-2 Transmission From People Without COVID-19 Symptoms," *JAMA Network Open* 4, no. 1 (2021), https://doi.org/10.1001/jamanetworkopen.2020.35057.
[324] Wycliffe E. Wei et al., "Presymptomatic Transmission of SARS-CoV-2 - Singapore, January 23–March 16, 2020," *CDC*, 16 March 2020, https://www.cdc.gov/mmwr/volumes/69/wr/mm6914e1.htm.
[325] Shiyi Cao et al., "Post-Lockdown SARS-CoV-2 Nucleic Acid Screening in Nearly Ten Million Residents of Wuhan, China," *Nature Communications* 11, no. 5917 (2020), https://doi.org/10.1038/s41467-020-19802-w.
[326] Zachary J. Madewell et al., "Household Transmission of SARS-CoV-2: A Systematic Review and Meta-Analysis," *JAMA Network Open* 3, no. 12 (2020), https://doi.org/10.1001/jamanetworkopen.2020.31756.
[327] Marty Makary, "Herd Immunity Is Near, Despite Fauci's Denial," *Wall Street Journal*, 24 March 2021, https://www.wsj.com/articles/herd-immunity-is-near-despite-faucis-denial-11616624554.
[328] "HCQ for COVID-19: Real-Time Meta Analysis of 245 Studies," https://hcqmeta.com/.
[329] "Ivermectin for COVID-19: Real-Time Meta Analysis of 56 Studies," https://ivmmeta.com/.
[330] "Vitamin D for COVID-19: Real-Time Meta Analysis of 78 Studies," https://vdmeta.com/.

dropped by 80% among nursing home residents who are among the most at-risk.[331] Another study indicated that monoclonal antibodies may be successful in preventing COVID-19 infection as an alternative to vaccination for people who cannot take a vaccine or need more immediate prophylaxis either before or after exposure.[332] According to the NIH, treatment appears most effective as soon as a patient receives a positive result of COVID-19 infection, but use of monoclonal antibodies is not recommended for patients hospitalized with the virus.[333] Despite certain advantages of this treatment, it remains more expensive, more rare, and harder to administer to patients—making vaccination a more rational option for the majority of people.

4.2 Potential health risks of the vaccines

The potential dangers of COVID-19 need to be weighed against the potential side effects of the vaccines: the cure should not be worse than the disease. To date, all authorized COVID-19 vaccines have passed safety standards set for licensed vaccines in use, while due to their limited track record in the population, or population subgroups, safety surveillance is an important feature of learning more. Presently, the overall safety-based evidence acquired to date suggests potential negative side effects are on par with licensed vaccines currently in use for other pathogens and they are far less than the dangers of COVID-19. Rare but serious clinical entities (e.g. Thrombosis with thrombocytopenia syndrome (TTS)) exist after vaccination, but the absolute risk of these entities is so low that they should not be reasonably expected to alter the decision making process of an individual—similar to how fear of the rare but serious possibility of anaphylaxis to penicillin should not interfere with receipt of that antibiotic. Although non-experts might reasonably want to avoid the injections, especially because of their experimental nature, there is more probability that taking the vaccines will be of benefit without significant dangerous side-effects. Therefore, it would be more reasonable to receive a vaccine if one faces some risks to contracting the virus, rather than avoiding the vaccines merely on the grounds that they pose dangers.

Every medical intervention, including medicines and vaccines, has an inherent risk. A risk-averse person would like to have zero chances of negative side effects for a vaccine, but that is impossible. Side effects can be measured in terms of frequency: more common, less common, rare, very rare; or in terms of severity: life-threatening, very dangerous/severe/grave, somewhat dangerous, bothersome/mild. Pharmaceutical companies are legally required to disclose potential negative side effects of their products, but only recently has there been developed a standardized side-effect measure in terms of frequency, intensity/severity, and burden of side effects,[334] and a robust method that can predict the frequencies of drug side effects in the population.[335] Adverse drug reactions (ADR) is much more frequent than is commonly known: a meta study showed that ADR is responsible for

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[331] Jon Cohen, "Monoclonal antibodies can prevent COVID-19—but successful vaccines complicate their future," *Science Magazine*, 22 January 2021, https://www.sciencemag.org/news/2021/01/monoclonal-antibodies-can-prevent-covid-19-successful-vaccines-complicate-their-future

[332] Myron S. Cohen, "Monoclonal Antibodies to Disrupt Progression of Early Covid-19 Infection," *New England Journal of Medicine* 384, no. 3 (January 21, 2021): 289–91, https://doi.org/10.1056/NEJMe2034495.

[333] National Institutes of Health, "The COVID-19 Treatment Guidelines Panel's Statement on the Emergency Use Authorizations of Anti-SARS-CoV-2 Monoclonal Antibodies for the Treatment of COVID-19," *NIH,* 11 June 2011, https://www.covid19treatmentguidelines.nih.gov/therapies/statement-on-anti-sars-cov-2-monoclonal-antibodies-eua/

[334] Stephen R. Wisniewski et al., "Self-Rated Global Measure of the Frequency, Intensity, and Burden of Side Effects," *Journal of Psychiatric Practice* 12, no. 2 (2006), https://doi.org/10.1097/00131746-200603000-00002.

[335] Diego Galeano et al., "Predicting the Frequencies of Drug Side Effects," *Nature Communications* 11, no. 4575 (2020), https://doi.org/10.1038/s41467-020-18305-y.

3.6 % of all hospitalizations; it occurs in about 10% of all patients during hospitalization; and there are about 197,000 deaths annually from ADR.[336]

Because of their higher potential for toxicity, some drugs are described as "high-alert medicines"—including commonly-prescribed Coumadin as a blood thinner, Percocet for moderate pain relief, and different types of insulin—which can be safe and effective when taken under normal conditions but require a greater level of vigilance about potential ADR.[337] Common side effects of common NSAID medications such as aspirin includes: 1% to 10% increased bleeding tendencies; and 0.01% to 0.1% (rare) anaphylactic reactions including shock.[338] For over-the-counter ibuprofen, effects include:

- Very common (10% or more): Nausea (up to 57%), vomiting (up to 22%), flatulence (up to 16%), diarrhea (up to 10%);
- Common (1% to 10%): abdominal distress, indigestion, constipation, abdominal cramps/pain, GI hemorrhage;
- Very rare (less than 0.01%): Peptic ulcer, perforation, hematemesis, mouth ulceration.[339]

The above considerations may help a person weigh the risks of not taking a vaccine and potentially suffering effects of COVID-19 with the risks of taking the vaccine and its potential negative side-effects. It should be noted that vaccines are always required to reach a higher safety threshold in testing, because they go into healthy people, whereas the risk/benefit ratio is inherently different in a patient with atrial fibrillation at risk for stroke and therefore is taking Coumadin. Anyone who has received a vaccine in the past knows that it is normal to experience mild-to-moderate side effects, including fatigue, muscle soreness, or even fever: these are signs that one's immune system is effectively responding to the vaccine. The WHO notes that none of the approved vaccines themselves contain COVID-19 and therefore cannot infect the recipient with the virus.[340]

Normal side-effects for the vaccines are similar to those of most vaccines: fatigue, headache, muscle pain, joint pain, chills, nausea and vomiting. Common adverse effects for hydroxychloroquine, for instance, were more common than for a placebo, and included nausea, loose stools, and stomach pain.[341]

More dangerous side-effects can occur with the vaccines, but relatively rarely.[342] CDC data show that anaphylaxis might occur with some of the vaccines; such responses are extremely rare: "2.5 cases per one million doses given of the Moderna vaccine, and 4.7 cases

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[336] Jacoline C. Bouvy, Marie L. De Bruin, and Marc A. Koopmanschap, "Epidemiology of Adverse Drug Reactions in Europe: A Review of Recent Observational Studies," *Drug Safety* 38, no. 5 (2015), https://doi.org/10.1007/s40264-015-0281-0.

[337] Institute for Safe Medication Practices (ISMP), "Medication Safety Tools," *ConsumerMedSafety.org*, 2021, https://consumermedsafety.org/tools-and-resources/medication-safety-tools-and-resources.

[338] Drugs.com, "Aspirin Side Effects: Common, Severe, Long Term," *Drugs.com*, 2021, https://www.drugs.com/sfx/aspirin-side-effects.html.

[339] Drugs.com, "Ibuprofen Side Effects: Common, Severe, Long Term," *Drugs.com*, 2021, https://www.drugs.com/sfx/ibuprofen-side-effects.html.

[340] WHO, "Side Effects of COVID-19 Vaccines," *WHO*, 31 March 2021, https://web.archive.org/web/20210608100449/https://www.who.int/news-room/feature-stories/detail/side-effects-of-covid-19-vaccines.

[341] Drugs.com, "An Update: Is Hydroxychloroquine Effective for COVID-19?," *Drugs.com*, 2021, https://www.drugs.com/medical-answers/hydroxychloroquine-effective-covid-19-3536024/.

[342] Talita Duarte-Salles and Daniel Prieto-Alhambra, "Heterologous Vaccine Regimens against COVID-19," The Lancet 0, no. 0 (June 25, 2021), https://doi.org/10.1016/S0140-6736(21)01442-2.

per million doses of the Pfizer."[343] For patients with a history of blood problems, the Johnson & Johnson vaccine could lead to life-threatening thrombosis events, such as blood clots or low platelet levels, but this is extremely uncommon: as of April 2021, only 15 cases had been reported among nearly 20 million who have received the vaccine.[344] It seems that the danger was particularly acute for young women using contraception, which leads to greater blood clotting.[345]

Another concern is about unusually high numbers of deaths from COVID-19 as reported on the U.S. Vaccine Adverse Event Reporting System (VAERS). In response to claims that there has been an unusually high number of deaths in response to the vaccines, the CDC explains: "Over 259 million doses of COVID-19 vaccines were administered in the United States from December 14, 2020, through May 10, 2021. During this time, VAERS received 4,434 reports of death (0.0017%) among people who received a COVID-19 vaccine," which would count as "extremely rare" and is far lower than the CFR of 0.4% and IFR of 0.26% from COVID-19.[346] The CDC further says, "A review of available clinical information, including death certificates, autopsy, and medical records has not established a causal link to COVID-19 vaccines."[347] It is likely that some of the deaths related to the COVID-19 vaccines would have happened anyway—similar to how people who contracted the virus would have died without the virus: "35% of the people who died were over 90 years old, 46% were older than 80, and almost all were over 70 years old," with comorbidities.[348] The CDC's investigation of reports from VAERS is from an abundance of caution, since anyone can report to the system, including the general public,[349] and a study has shown that people interested in winning lawsuits against vaccine makers have inserted biased information into VAERS.[350]

Similar issues arose when researchers attempted to measure the dangers of the vaccines in The Netherlands based on similar reports of adverse events that followed vaccination. They concluded that a lack of clear benefit should cause governments to rethink their vaccination policy.[351] However, within a few days of publication the article was retracted, as the editors explained that reports of correlated adverse effects does not constitute proof that the effects were caused by the vaccines: "the authors have called the events

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[343] Helen Branswell, "Comparing the Covid-19 Vaccines Developed by Pfizer, Moderna, and Johnson & Johnson," *STAT*, 2 February 2021, https://www.statnews.com/2021/02/02/comparing-the-covid-19-vaccines-developed-by-pfizer-moderna-and-johnson-johnson/.

[344] FDA, "FDA and CDC Lift Recommended Pause on Johnson & Johnson (Janssen) COVID-19 Vaccine Use Following Thorough Safety Review," *FDA*, 23 April 2021, https://www.fda.gov/news-events/press-announcements/fda-and-cdc-lift-recommended-pause-johnson-johnson-janssen-covid-19-vaccine-use-following-thorough.

[345] William Petri, "Johnson & Johnson Vaccine: Why It's Worth the Minuscule Risk," *Inverse: Mind and Body*, 2021, https://www.inverse.com/mind-body/restart-johnson-and-johnson-vaccine.

[346] CDC, "Selected Adverse Events Reported after COVID-19 Vaccination," *CDC*, 23 June 2021, https://www.cdc.gov/coronavirus/2019-ncov/vaccines/safety/adverse-events.html.

[347] Ibid.

[348] Aude Lecrubier, "Elderly Deaths After COVID Vaccine: False Alarm?," *WebMD*, 22 January 2021, https://www.webmd.com/vaccines/covid-19-vaccine/news/20210122/elderly-deaths-after-covid-vaccine-false-alarm.

[349] CDC, "Vaccine Adverse Event Reporting System (VAERS)," *CDC*, 8 April 2021, https://www.cdc.gov/vaccinesafety/ensuringsafety/monitoring/vaers/index.html.

[350] Michael J. Goodman and James Nordin, "Vaccine Adverse Event Reporting System Reporting Source: A Possible Source of Bias in Longitudinal Studies," *Pediatrics* 117, no. 2 (2006), https://doi.org/10.1542/peds.2004-2687.

[351] Harald Walach, Rainer J. Klement, and Wouter Aukema, "The Safety of COVID-19 Vaccinations—We Should Rethink the Policy," *Vaccines* 9, no. 7 (July 2021): 693, https://doi.org/10.3390/vaccines9070693.

'effects' and 'reactions' when this is not established, and until causality is established they are 'events' that may or may not be caused by exposure to a vaccine."[352]

Despite the evidence suggesting that taking the COVID-19 vaccines are much more likely to help than to hurt; and that for those at risk to adverse effects of the virus it would be more reasonable to risk the vaccines than the virus, nevertheless many people are choosing not to receive the vaccines. Here Daniel Kahneman's insights into decision-making are helpful. Kahneman notes that it would be inaccurate to suppose that when people are considering a potential risk, they consider the status quo to have a value of zero.[353] For people who are not infected with the virus, and who believe they are not at high risk for adverse effects from the virus, the status quo (uninfected with normal health) has a positive value that they want to maintain. Kahneman also notes that extreme loss aversion could make people weigh losses about twice as much as gains.[354] Hence, those who think they would risk losing their normal health with a vaccine will weigh not merely the statistical likelihood of whether they will be negatively affected, but also *how much worse* it would be to lose the good they have and experience the effects of the vaccines rather than to do nothing and suppositionally remain in a healthy state. Finally, we are more likely to feel regret for the negative effects of actions we voluntarily performed than for doing nothing. In other words, we tend to avoid doing things that we think we might regret, because we feel responsible for our actions that have bad results. In contrast, even if our chosen inaction somehow makes us more susceptible to suffering, we feel less responsible if the suffering comes from external source to which we did not contribute.[355] It seems that a similar dynamic is at work for some who are hesitant to receive vaccines. Some of these decisions reflect a widespread loss of trust in authorities of all stripes, such that many prefer to risk the virus rather than risk being subject to what could be called the medical-industrial-governmental complex. Others might not be aware of the statistical analysis of potential risks and benefits of the vaccines, as outlined above. Still others feel that they would prefer to risk contracting the virus—especially if they think it is unlikely, and would not be their fault since they would not *choose* to get the virus—rather than being responsible for risking bad effects of a vaccine *they chose*. Such considerations are important but because of the imprecision in calculation should not be determinative for one's decisions.

5 Summary and Conclusions

1. The presence of material derived from fetal cells within some COVID-19 vaccines is not evil in itself, nor is it evil to use fetal cells for medical purposes, since such cells might conceivably be harvested in licit ways. The evil comes from the original direct abortions, and the subsequent use of abortion-derived cell lines in the development, production and testing of vaccines. mRNA vaccines such as Pfizer and Moderna are touted as not being produced from such cell lines, but there is more to the story. The cell lines are involved in expression of the viral spike protein during development and its modification, and the cell lines are used again in "confirmatory testing," which could be repeated on every batch before dispatch for use.

2. Cooperation in the evil of abortion comes in different grades:
    - Marketing of cells from the abortions – ***mediate formal cooperation***

[352] Vaccines Editorial Office, "Retraction: Walach et al. The Safety of COVID-19 Vaccinations—We Should Rethink the Policy. Vaccines 2021, 9, 693," *Vaccines* 9, no. 7 (July 2021): 729, https://doi.org/10.3390/vaccines9070729.
[353] Daniel Kahneman, *Thinking, Fast and Slow* (Farrar, Straus, and Giroux, 2011), 287.
[354] Kahneman, *Thinking, Fast and Slow*, 288.
[355] See Kahneman's discussion of regret and responsibility, *Thinking, Fast and Slow*, 347-52.

- Marketing of vaccines produced with such cells – ***immediate material cooperation***
- Use of the vaccines for grave reasons – ***very remote material cooperation*** **and** ***circumstantial benefit from evil***

3. The Church has taught that the use of abortion-derived vaccines could be morally accepted as benefitting from a previous evil under the following conditions: **for grave reasons**, especially for the **protection of the vulnerable**, and on a **temporary basis**. Because of the sin of scandal that toleration may court, one should use alternative vaccines if they exist and are available, and one has a duty to do whatever is reasonable to manifest dissent from the practice and to get the practice changed. The following are suggested especially for policy-makers, industry leaders, doctors, and heads of families:[356]

- to put pressure on the political authorities and health systems so that ethical vaccines are made available,
- to have recourse, if necessary, to the use of conscientious objection to abortion-derived vaccines (i.e. to refuse the vaccinations),
- to create pressure so that alternative vaccines which are ethical are prepared,
- to request rigorous legal control of the pharmaceutical industry producers,
- to fight and to employ lawful means in order to frustrate the pharmaceutical industries which act unscrupulously and unethically.

4. All scandal regarding the vaccines must be avoided by Catholics, and any scandal already given must be repaired. This can help promote the Gospel of Life, the dignity of every human being, respect for the Church's teaching authority, and induce physicians, researchers, and pharmaceutical workers to find alternative sources for cell lines for vaccines and other medicines.

5. Despite signs of media bias, scientific evidence indicates that the pandemic is real, although less dangerous than originally anticipated. Granted that precise numbers of infections and deaths are uncertain, studies show that COVID-19 can pose grave risks for the elderly, and serious risks for other vulnerable people (especially the obese)—prime candidates for receiving the vaccine without fault. Non-vulnerable populations (such as the young) may want to forgo the vaccines, but it would likely be wise for the elderly (over 65) to receive a vaccine, provided there are no comorbidities (which could be life-threatening) or other counter-indications.

6. A survey of some objections to the experimental vaccines on risk mitigation grounds, such as potential grave side-effects, shows that they do not appear to be upheld by scientific studies. Although other treatments may do good, their overall effectiveness appears lower than that of the approved vaccines and should not be considered a complete alternative to COVID-19 for grave cases. However, the effects of the vaccines should be monitored closely as they are deployed, so that their true utility, safety, and danger can be more accurately assessed.

7. Signs of governmental and broader cultural pressure to take a vaccine provides little precise information about the morality or safety of the vaccines, although the messenger is part of the message. Neither does widespread lobbying prove that vaccine reception is intrinsically evil, or even circumstantially evil. Serious potential social risks that could justify getting vaccinated include the likelihood of losing one's job; getting demoted within a job;

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[356] See PAV, "Human Embryonic Stem Cells."

enduring long-term social isolation; and other similar serious considerations. However, the desire to avoid participating in what are perceived as absurd, arbitrary, or tyrannical laws may be sufficient to justify some avoiding the vaccine—provided the health risks to them or those with whom they come in contact are indeed low. All people have a right to object to being unwilling test subjects for medical and social experiments.