

**ON THE MORAL ACCEPTABILITY OF COVID-19 VACCINES
GENERATED FROM FETAL CELL LINES DERIVED FROM ABORTIONS**

The news announcing the availability of Covid-19 vaccines (e.g., *Pfizer* and *Moderna*) that have been positively tested to be safe and effective, was greeted with *excitement* and *enthusiasm* by the world community. In fact, these vaccines have gained immediate *approval* by some countries (e.g., the UK, USA and Canada), whose regulators have already granted authorization for their *emergency use*. Within the Catholic community worldwide, the news was somewhat also welcomed the same way, at the same time, however, that it has also generated *apprehension* and *disquiet* among morally conscientious Catholics. The source of such a negative reaction comes from the information that the aforementioned vaccines have links with cell lines derived from *directly aborted human fetuses* in the 1960's and 1970's. Given such a dubious provenance, the question naturally in many a people's mind is whether or not it is morally permissible for Catholics to receive such tainted vaccines. Quite predictably the question drew two opposite views, one in favor, and the other against.

Statement from the USCCB

Among those who issued a favorable statement was the *U.S. Conference of Catholic Bishops (USCCB)*, through its *Doctrine and Pro-Life Committees*.¹ Attempting to clear the ensuing seeming confusion and to allay the fears of Catholics unsure of Catholic teaching on the subject, the USCCB defended the view that **when no other alternatives were available and were there to be a serious risk to health, it would be morally licit for Catholics to accept vaccination even if this were made from fetal cell lines**. In support of this position, the USCCB cited three official statements from the Holy See, namely, a) the Pontifical Academy for Life (PAFL) 2005 study "*Moral Reflections on Vaccines Prepared from Cells Derived from Aborted Human Fetuses*";² b) the Congregation for the Doctrine of the Faith's (CDF) 2008 *Instruction on Certain Bioethical Questions (Dignitas Personae)*³; and c) the PAFL's 2017 *Note on Italian Vaccine Issue*.⁴

That besides, the USCCB's view appears to be buttressed by the information that the vaccines being touted do not (directly) involve the use of cell lines derived from aborted fetuses. It states that:

*Neither the Pfizer nor the Moderna vaccine involved the use of cell lines that originated in fetal tissue taken from the body of an aborted baby at any level of **design, development, or production**. They are not completely free from any connection to abortion, however, as both Pfizer and*

¹ The USCCB Statement was issued on November 23, 2020 by *Bishop Kevin Rhoades* of Fort Wayne-South Bend, Indiana, Chairman of the USCCB Committee on Doctrine, and *Archbishop Joseph F. Naumann* of Kansas City, Kansas, Chairman of the USCCB Committee on Pro-Life Activities.

² See PONTIFICAL ACADEMY FOR LIFE, "*Moral Reflections on Vaccines Prepared from Cells Derived from Aborted Human Fetuses*," in *The National Catholic Bioethics Quarterly* 6/3 (2006), pp. 541-549.

³ See CONGREGATION FOR THE DOCTRINE OF THE FAITH, *Instruction on Certain Bioethical Questions (Dignitas Personae)*, Vatican, 2008, nos. 34-35.

⁴ See www.academyforlife.va/content/pav/en/the-academy/activity-academy/note-vaccini.html.

Moderna made use of a tainted cell line for one of the confirmatory lab tests of their products. There is thus a connection, but it is relatively remote.

That statement suggests that there may be a need to distinguish between the actual *production* of the vaccine and the *test* that was conducted to ensure the vaccine's safety and effectiveness. Thus, while fetal cell lines may have been used during the *testing phase*, the finished product does not contain any trace of such fetal cell lines since these were never used during the production phase. Such information has been confirmed by prominent Catholic bioethicists of the *National Catholic Bioethics Center* (NCBC) in Philadelphia (Pa, USA) and those of the *Charlotte Lozier Institute* (CLI), a pro-life organization in Arlington (Va, USA). *Joseph Meany*, for instance, President of NCBC, validates such information, saying that *Pfizer* vaccine, in particular, does not involve fetal cells as it is a new type of vaccine of the *mRNA* type similar, to *Moderna* vaccines, which do not use any cell line whatsoever, neither in its development nor in its production.⁵ *David Prentice*, Vice President and Research Director of CLI, makes the same claim, saying that there is no trace of such cells of what actually would be injected into the body.⁶ Yet both Meany and Prentice acknowledge that such cell lines may have been used during the testing phase. Prentice, in particular, points out that testing should be thought of as a kind of quality control, a confirmatory test on the finished product as to whether anti-bodies are produced by those lines. The testing though, he adds, does not connect *directly* to the product that goes into the recipient – it is another level removed – but there is still a matter of concern since these cell lines were used after all.

Separating the *testing phase* from the *production phase* seems crucial in the argument, as it is what allows the USCCB statement to minimize the connection between the vaccines in question with abortion.⁷ If there is such a connection, the statement insists, it is *relatively remote*. This would seem to suggest that production is a more proximate form of cooperation with evil while testing might be reckoned only an instance of *mediate remote passive material cooperation*,⁸ which, according to the PAFL, should generally be avoided but may nonetheless admit of moral justification. That is, should there be a serious threat to health especially in a situation when no other alternatives are available (*infra*). That would be sufficient for as long as one further calls

⁵ <https://www.youtube.com/watch?v=eEx1SSV5IW8>.

⁶ <https://www.youtube.com/watch?v=bTNjhooySgo>.

⁷ On this Brett Salkeld has this to say: “*Such false framing – sometimes innocently, sometimes intentionally – makes Church teaching look arbitrary and inconsistent.*” See B. SALKELD, *How to Vaccinate Like a Catholic: A Guide Through the Prickly COVID-19 Issues* (<https://churchlifejournal.nd.edu/articles/how-to-vaccinate-like-a-catholic/>)

⁸ M. Schneider has another way of demonstrating the “remoteness” of cooperation in the present instance. He says, “In speaking of this remoteness, we need to look at the steps removed. *First*, the abortion or miscarriage... was not done for the cell line, but was happening anyways (sic). *Second*, the cells were not created for this experiment but already existed. *Third*, this was a *test of the vaccine not the production of the vaccine*. *Fourth*, in one test done by each company, the test didn't even use HEK293 [the cell line in question] directly but used mice descendant from a mouse edited with HEK293 to produce human rather than mouse lung-lining proteins. So, yet another step removed.” See M. SCHNEIDER, L.C., “12 Things Less Remote Cooperation in Evil than COVID Vaccines,” in *Through the Catholic Lenses* (<https://www.patheos.com/blogs/throughcatholiclenses/2020/12/12-things-less-remote-cooperation-in-evil-than-covid-vaccines/>).

for appropriate expressions of protest against the origins of these vaccines as well as for vigorous efforts to promote the creation of ethically licit alternatives.

Past and Present Statements from the Holy See

As mentioned earlier, the USCCB statement invokes three past statements from the Holy See. The first of these is a study that directly addresses the issue, though not necessarily in reference to Covid 19, and entitled “*Moral Reflections on Vaccines Prepared from Cells Derived from Aborted Human Fetuses*”⁹ issued by the Pontifical Academy for Life (PAFL) in 2005. The USCCB echoes the PAFL’s position, namely, that it would be morally licit to receive vaccines prepared from cells derived from aborted human fetuses on the following conditions:

- a) no other alternatives are available
- b) there is a serious (grave) threat to health
- c) the recipient calls for appropriate expressions of protest against the origins of these vaccines and for vigorous efforts to promote the creation of morally licit alternatives.

The connection with the *evil of abortion* is justified by appealing to the traditional distinction between *formal cooperation* and *material cooperation* in evil. PAFL asserts that it is morally illicit to share the *evil intention* in the action of those who have performed a voluntary abortion for that would make one formally complicit, thus a participant, in the same morally evil act (*active formal cooperation*). One would even participate in the evil act just the same were one to refrain from denouncing or criticizing this illicit action, in spite of having the moral duty to do so (*passive formal cooperation*).

It would also be morally illicit for one, who may not formally share in the immoral intention of the person who has performed the abortion, but gets involved in the preparation, distribution and marketing of vaccines generated from such an act, because such involvement could *contribute* in encouraging the performance of similar acts, with the purpose of producing such vaccines (*active material cooperation*). Such would similarly be the case if one were a producer of these vaccines and fail to denounce and reject publicly the original immoral act (i.e., the voluntary abortion), and expend no effort to promote alternative ways, exempt from moral evil, for the production of vaccines for the same infections (*passive material cooperation*).

Those, however, who need to use such vaccines for reasons of health, who resort to the use of such vaccines in spite of knowing their origin (i.e., voluntary abortion), but without necessarily intending the abortion, carry out only a form of *very remote, mediate material cooperation*. The most that might be said of these agents, especially if they pose an objection of conscience, is that the use of these vaccines constitutes only at least a *remote, mediate, passive material cooperation* to the abortion. It is in this way that the use of tainted vaccines generated from aborted fetal cell lines may admit of moral justification.

Dignitas personae (DP), CDF’s *Instruction on Certain Bioethical Questions* issued in 2017, also addresses the same concern under the heading, “*The use of human ‘biological material’ of illicit*

⁹ See footnote 2.

origin.” DP echoes PAFL’s assertion that *grave reasons* may be *morally proportionate* to justify the use of “biological material” derived from an illicit origin. Danger to the health of children, for instance, could permit parents to use a vaccine which was developed using cell lines of illicit origin.¹⁰

DP also insists that those who find themselves having to make use of such vaccines of dubious provenance, should this be legitimate at all, have the duty to make known their disagreement and to ask that their health care system make other types of vaccines available. DP further cautions that “*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.*”¹¹ DP warns that “*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.*” The difficulty inherent in all this, of course, is how an agent could actually dissociate himself/herself from wrongdoing when one decides to deliberately benefit from it.

The difficulty is felt especially because DP rejects the notion that the *criterion of independence*¹² is “*...sufficient to avoid a contradiction in the attitude of the person who says that he does not approve of the injustice perpetrated by others, but at the same time accepts for his own work the ‘biological material’ which the others have obtained by means of that injustice.*” In fact, DP argues, there is a duty to refuse the use of such a ‘biological material’ even when there is no close connection between the beneficiary and those from whose illicit act the biological material has been obtained. This duty springs from the necessity to distance oneself from the illicit act and *to affirm with clarity the value of human life.*

In 2017, the PAFL returned to the issue in a document commenting on the Italian vaccine issue. Drawing from its 2005 Moral reflections about vaccines prepared from cells of aborted human fetuses, the PAFL noted that “the cell lines currently used are (already) very distant from the original abortions and no longer imply that *bond of moral cooperation* indispensable for an ethically negative evaluation of their use.”

While PAFL reiterates the urgency of the moral obligation to guarantee the vaccination coverage necessary for the safety of others, it tackles once more the question of vaccines that used or may have used cells coming from voluntarily aborted fetuses in their preparation. This time, PAFL introduces something new into the argument, namely, that the moral “wrongness” resides in the action (abortion) and not in the vaccines or the material itself (product of the action).

Thus, PAFL insists that all clinically recommended vaccinations can be used with a clear conscience and that the use of such vaccines does not signify some sort of cooperation with voluntary abortion. The commitment, however, to ensuring that every vaccine has no connection in its preparation to any material originating from an abortion goes hand in hand

¹⁰ DP no. 35.

¹¹ DP n. 35. JOHN PAUL II’s Encyclical Letter *Evangelium vitae*, n. 73 (AAS 87 [1995]) is cited as basis of this caution.

¹² According to this criterion, the use of *biological material* of illicit origin would be ethically permissible provided there is a clear separation between the perpetrators of the illicit act and the beneficiaries who later take advantage of the outcome of such an act.

with the moral responsibility to vaccinate if only to avoid serious health risks for children and the general population.

In the wake of the present pandemic, the emergence of new vaccines produced to combat Covid 19 but believed to have links with past abortions once again has brought the issue of the *use of tainted vaccines* to the fore. The controversy surrounding the issue elicited an explanatory note from the Holy See—once again from the Congregation for the Doctrine of the Faith (CDF)—on December 21, 2020. On close inspection, the CDF on this occasion simply reiterates what it has already taught in the past, namely, that it would be morally licit to receive (use) vaccines produced with cell lines of illicit origin (i.e., procured abortion), on the following conditions:

- a) other ethically irreproachable Covid-19 vaccines are *not available* (CDF Note, n.2);
- b) if there is a *grave danger* to health, such as the otherwise uncontrollable spread of a serious pathological agent—in this case, the pandemic spread of the SARS-CoV-2 virus that causes Covid-19 (CDF Note, n. 3);
- c) one is—it is assumed—*formally opposed* to the practice of abortion even if this were the source of the cell lines used in the production of the vaccine in question (CDF Note, nn. 3 & 4).

As regards the first condition, CDF details how and why ethically irreproachable vaccines may not readily be available:

- a) Countries do not make them available to physicians and patients.¹³
- b) The distribution of these vaccines is more difficult due to special storage and transport conditions.
- c) Various types of vaccines are distributed in the same country but health authorities do not allow citizens to choose the vaccine with which to be inoculated.

One will observe that these reasons are beyond the control of the vaccine-recipient, who may, therefore, be *forced* to avail of only whatever vaccine is available in a moment of urgent need.

The second condition seems obvious enough. The spread of a serious pathological agent, in this case, the spread of the SARS-CoV-2 virus that causes Covid-19 is becoming uncontrollable, thereby posing a *serious* and *grave* threat to the health and safety of *individuals* and *communities* of pandemic proportions. The news that the virus has mutated into a new more infectious Covid strain and that its spread would even be harder to contain further exacerbates the situation.

It is the third condition which requires a bit of explanation and the CDF does oblige. It proceeds to argue that there need not be *formally consent* to the moral evil of procured abortion (*formal cooperation*) when one decides to receive vaccines produced from cell lines obtained from aborted fetuses in the past. *Cooperation* by the vaccine-recipient in the procured abortion from which the vaccine's cell lines originate is already *remote* and constitutes simply an instance of *passive material cooperation*. The use of these types of vaccines, in the particular conditions that

¹³ One can only surmise as to what reasons there might be why health authorities or national governments in these countries would deliberately not make these vaccines available.

make it *licit*, does not in itself constitute a *legitimation*, even *indirect*, of the *practice of abortion*. Moreover, the CDF continues, 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. (CDF Note, n. 4)

It would seem that opposing the practice of abortion solely in the *level of intention* would suffice since the CDF this time does not necessarily stipulate what the PAFL had previously done so, though nothing has been said to prevent one from supposing that this is just the same implied. That is, that the individual vaccine-recipients had the duty to make known their opposition to illicit ways of procuring vaccines and at the same time ask that the healthcare system provide instead morally licit types of such vaccines. The CDF instead does this in behalf of all Catholics when it encouraged both pharmaceutical companies and governmental health agencies “to produce, approve, distribute and offer ethically acceptable vaccines that do not create problems of conscience for either health care providers or the people to be vaccinated.” (CDF Note, n. 6)

Finally, the CDF has a word for those who continue to oppose the use of vaccines either on ethical grounds, or out of concern for safety and effectiveness. According to the CDF, vaccination may not be a *moral obligation* as it ought to be *voluntary*. In other words, it cannot be forced on anyone. Yet it must be borne in mind that vaccination is not just about the protection of *individual health* as it is also about ensuring the *common good* (public safety). Should one refuse vaccination for either of the above reasons, it becomes *morally imperative* that one avoids “by other prophylactic means and *appropriate behavior* becoming vehicles for the transmission of the infectious agent.” (CDF Note, n. 5)

Ethical Objections to the Use of Tainted Vaccines

While the USCCB was swift in issuing a statement favorable to the use of tainted vaccines based on conditions already outlined above, some Catholic bishops, notably Bishop Athanasius Schneider of Astana, Kazakhstan,¹⁴ explicitly reject such use as an instance of a *good end justifying an evil means*. Bishop Schneider insists that using tainted vaccines contradicts Catholic doctrine that rejects *abortion in all cases as a grave moral evil*. Invoking St. John Paul II’s teaching in *Christifideles Laici* (n. 38), he points out that “using vaccines made from the cells of murdered unborn children *contradicts* a ‘*maximum determination*’ to defend unborn life.” He further argues that using such vaccines cannot be justified using the *principle of cooperation in evil* because anyone “who knowingly and voluntarily receive(s) such vaccines enter(s) into a kind of concatenation, albeit very remote, with the process of the abortion industry.” In other words, it is not just possible for one who decides to use such vaccines to distance himself/herself from the immorality of the crime of abortion as *Dignitas personae* had wished for (*supra*). Any such

¹⁴ Bishop A. Schneider, Auxiliary Bishop of the Archdiocese of Saint Mary (Astana, Kazakhstan), is joined by other prelates in a statement expressing disagreement with the position taken by the Holy See on the use of vaccines made from fetal cells. These include *Cardinal Janis Pujats* (Metropolitan Archbishop Emeritus of Riga), *Archbishop Tomash Peta* (Metropolitan Archbishop of the Archdiocese of Saint Mary in Astana), *Bishop Jan Pawel Lenga* (Archbishop/Bishop Emeritus of Karaganda), and *Bishop Joseph E. Strickland* (Bishop of Tyler, USA). See A. SCHNEIDER, *Covid Vaccines: ‘The Ends Cannot Justify the Means’* (<https://www.crisismagazine.com/2020/covid-vaccines-the-ends-cannot-justify-the-means>).

concatenation, however remote, is always immoral and will (always) “cast a shadow over the Church’s duty to bear unwavering witness to the truth that abortion must be utterly rejected.”

Bishop Schneider’s line of argumentation goes further. Using a *vaccine derived from fetal cell lines* is no other than a violation of the God-given Order of Creation. Such use would link one to a double violation of God’s holy Order: the *abortion itself* and the *heinous business of trafficking and marketing the remains of aborted children* – both of which “can never be justified, not even on the grounds of preserving the health of a person or society through such vaccines.” On the other hand, Bishop Schneider reminds everyone that health is not the highest good, nor is it an absolute value.

Reacting to the first condition that has been stipulated by the Holy See on the licit use of tainted vaccines, Bishop Schneider questions whether one could truly just presuppose that “there is no alternative”. To him, this is simply a myth and that it would be best were we to “...proceed with the hope and conviction that *alternatives exist*, and that human ingenuity, with the help of God, can discover them.”

At this point, one might simply ask why even the *remotest link* to a morally illicit act in the past would also constitute a *grave moral evil*, especially if the evil involved is *praeter intentionem* (St. Thomas’ vocabulary) and *unavoidable* in the pursuit of an *urgent good* – i.e., a matter of life and death.¹⁵ Would culpability not even be diminished, if not removed, in this instance considering that the freedom exercised in placing the action of receiving tainted vaccine is impeded by force of circumstance?¹⁶

Moreover, health may not be the highest good nor an absolute value, and indeed it ought not be regarded as such, but is not the preservation of health also an expression of respect for human life – of the unborn no less – which in itself is neither the highest good nor an absolute value as well? Is one, in fact, confronted here with a choice that pit the life of the unborn against the lives of multitudes, so that each use of vaccines of remote fetal origin aimed at saving the lives of millions is expended *necessarily* at the expense of the unborn, even if this were outside one’s intention?

It may be good to think that alternatives exist, but what if they have not yet been discovered – in a situation of grave risk to health and life, which is where frontliners (those in the medical and health professions) find themselves to be, what should one do in the meantime? Instead of receiving tainted vaccines, do these frontliners need to quit their jobs and further deplete hospital personnel in order to avoid incurring a grave moral evil? What if such alternatives are discovered, yet government authorities do not make them available to their countries’ citizens?

¹⁵ One is reminded here of St. Thomas’ double effect reasoning in *Summa Theologiae* II-II, q. 64, a. 7. Here, evil (death of an aggressor) is permitted to occur when it is *praeter intentionem* in the defense of oneself, and the situation is such that *forces* one to choose a means (the moderate use of force) in defense of oneself (commensurate good) but may also cause the death of the aggressor (inevitable/unavoidable evil).

¹⁶ One is reminded here of the traditional impediments to human freedom listed in the moral manuals that could diminish if not remove moral responsibility and culpability. See for instance, H. JONE, *Katholische Moraltheologie, auf das Leben angewandt*, Paderborn: Ferdinand Schöningh, 1961, “Die Hindernisse der menschliche Handlungen,” pp. 26-31, esp. pp. 28-29; D. PRÜMMER, *Handbook of Moral Theology*, 5th ed., Cork: Mercier Press, 1963, pp. 14-19.

Bishop Schneider certainly has raised some valid points, but these are just some questions that he and those who share his views need to address, considering that the situation worldwide is at risk of becoming more grave at each passing day. And if ever there is some relief from this gravity, many would certainly attribute this now to the availability of vaccines and to the fact that many have consented to receiving them regardless of their origin.

A Different Perspective: The Prism of Appropriation

It was easy for the PAFL and the CDF to minimize the connection (i.e., *remote, mediate and passive*) between the evil act of elective abortion and the use of tainted vaccine derived from it within the perspective of the moral category of “*cooperation in evil*”, thereby finding enough justification for such use in the present context. A number of moral theologians, however, have observed that the principle of cooperation may not be an accurate prism through which the issue should be analyzed.¹⁷ One contributes to an act, direct abortion in this case, *usually* prior to or simultaneously with it. To view the use of tainted vaccine as a contribution to the morally illicit act of abortion that has already happened in the past would then sound somewhat inaccurate.

Of course, one may also be complicit to a past action if one contributes to the repetition of the same action in the future by way of encouragement. The use of tainted vaccines may be seen in this light. The fact, however, is that fetal cell lines have been used to develop vaccines for so many years now but this has not encouraged the abortion of new fetuses. As pointed out by *Stanley Plotkin*, Professor-Emeritus of Pediatrics at the University of Pennsylvania and inventor of the *rubella* vaccine, there is practically no need for new abortions to provide fetal cells in making life-saving vaccines at this time. That is because the original fetal cells that were obtained from two aborted fetuses in the 1960’s and 1970’s, one from Sweden and the other from England, had long been cultivated to multiply again and again, stored in freezers and now used to grow vaccine viruses.¹⁸ Since these cells could be multiplied indefinitely any number of times and then preserved, fresh fetal cells are no longer necessary in growing vaccine viruses.

Besides, as N. Austriaco notes, not only could such fetal cell lines—in particular what has been labeled as HEK293—be efficiently reproduced, they are also simply the best cells cheaply available today, unmatched by any other possibly more robust alternative, that there is practically no need to seek out fresh fetal cells from recent abortions. Such descendant fetal cells, Austriaco further observes, are well characterized and had been validated for their safety long time since, compared to new fetal cells that are yet *uncharacterized, unvalidated and unapproved* by regulatory agencies.¹⁹

¹⁷ See for instance JANET SMITH, *The Morality of the COVID-19 Vaccines*, op. cit.

¹⁸ S. PLOTKIN, *How Can We Still Use a Fetal Cell Line from the 1960s to Make Vaccines Today?* (<https://www.youtube.com/watch?v=to8SI6eDVbY>)

¹⁹ N. AUSTRIACO, *Moral Guidance on Using COVID-19 Vaccines Developed with Human Fetal Cell Lines* (<https://www.thepublicdiscourse.com/author/nicanor-austriaco/>).

The point in all this is that it shows how any such use of descendant fetal cells can hardly be seen as an encouragement for future abortions and should therefore dispel any notion that it remains as an instance of *material cooperation*. The link, however, with the illicit origin of these fetal cells does not altogether disappear. Using them may not encourage future abortions but it does benefit from the usefulness of these illicitly generated cells. It is for this reason that a growing number of moral theologians would rather see this as an issue of *appropriation* than that of *cooperation*.²⁰

From the perspective of moral appropriation, the question that needs to be addressed is not so much whether or not an agent would participate in the wrongful action (elective abortion) of another by performing an action that is dependent on such a wrongdoing and the end result obtained therefrom—and to the extent of such participation (i.e., formal or material) determine moral licitness and culpability. Such a question is only *consequential* to a more *fundamental* if not *essential* question, that is, whether it is morally licit to benefit, i.e., by appropriating, from the wrongdoing (and/or its end-result and incidental outcomes) of another that has already taken place, however remote this might be. Or, in other words, may an agent take advantage of the end-result or incidental outcomes of somebody else's wrongdoing in order to achieve one's own moral intent? Would not doing so, in fact, constitute a *ratification* of the wrongdoing itself as it would appear that such wrongdoing is the means to the perceived benefit the agent would now wish to obtain by taking advantage of its end-result and incidental outcomes?

These questions only make it clear that using tainted vaccines—and similar actions—is first of all an issue of moral appropriation before it may be considered as an issue of moral cooperation, which brings an agent—an *appropriator*, nay a *cooperator*—in closer proximity to the moral evil (its causes and effects) which is the object of appropriation. That being the case, a much *graver reason* would be required to justify the action being contemplated, i.e., using tainted vaccine, much more than if the same action were to be seen in the context of cooperation, where the agent's involvement is deemed far removed (remote) from the moral evil he/she is thought to be enabling or promoting.

PAFL's and CDF's reasoning does have a way of diminishing the proximity of a conscientious agent, mainly the vaccine-recipient, to moral evil and that is to require the same agent to call for appropriate expressions of protest against the wrongdoing itself. But this may not be enough. For the question is, how can one *honestly* protest against something one is willing, albeit reluctantly, to benefit from? Would it not sound *insincere* to denounce something as morally evil but from which one allows oneself to derive some urgent benefit? Would not such an act of appropriation *validate* the moral intent of the original principal agent, the *malefactor* or the abortionist, who performed the wrongful action precisely for such purpose the appropriator would now wish to carry out his/her own action and would hope to achieve? It would mean that the original wrongful action would have served its purpose were an appropriator to take

²⁰ The need to develop the category of appropriation of evil was first proposed by M. CATHLEEN KAVENY in her "Appropriation of Evil: Cooperation's Mirror Image," in *Theological Studies* 61 (2000), pp. 280-313. See also KATE WARD, "Presence, Privilege, and Moral Appropriation: Reading Zubik as an Act of Protest," in *Expositions* 11.1 (2017) 60-71; T. STEPHENS, *Natural Law, the Object of the Act, and Double Effect: Moral Methodology for Catholic Health Care Ethics*, Ph.D. dissertation, Duquesne University, Pittsburgh, PA, 2019, pp. 215-220. For an application of the *Principle of Appropriation* to the issue of the morality of Covid-19 vaccines see N. AUSTRIACO, *Ibid.*

advantage of its end-result or incidental outcomes. Furthermore, with the original intent of the wrongdoing validated and found useful, the appropriator might even feel indebted to the original principal agent, the *malefactor* or the abortionist, for being his/her unwitting *enabler*.

Seen in this way, it becomes difficult to distance the appropriator from the moral evil that is now the means to achieve his/her own ends, or to dismiss the link/connection between the appropriator and the moral evil as mediate, remote and passive. Indeed, using tainted vaccine may pass the test of licitness in the context of cooperation but not necessarily so in the context of appropriation. Thus, to simply express protest against the vaccine's dubious provenance is not enough. Something more needs to be done. For one thing, this is where Bishop Schneider's objection sounds strongest because the act of appropriation of something evil would appear as though it were the means to a good end, which according to him may never be justified. If the PAFL 2017 statement, however, were to be believed, one need not think that an evil means is necessarily involved here since the moral "wrongness" one is obliged to reject and thus avoid resides in the action (abortion) and not in the vaccines (by-product of abortion).

That said, something else is required. Not only should the vaccine-user protest against the illicit origin of the vaccines and urge manufacturers to develop and produce licit alternatives, the same vaccine-user should also make it clear that should there be other licit alternatives, he/she would rather prefer this and reject morally objectionable options, thereby strengthening opposition to illicit ways of obtaining life-saving vaccines. This would also show that the vaccine-user is simply forced by circumstance, there being no other alternatives and there being a grave threat to health and life that requires immediate and urgent remedy. The link to wrongdoing by appropriation, should one be forced in such wise, can therefore be reckoned as *unavoidable* if not *inevitable* that may therefore be justified for a grave and proportionate reason.

Some Concurring Opinions of Catholic Moral Theologians

Faced with such conflicting claims, what is the conscientious Catholic to think and do especially when confronted by the task of having to decide whether or not to have oneself vaccinated? The fact is, more and more Catholic moral theologians concur with the moral guidance provided by the Holy See on this subject.

The *National Catholic Bioethics Center* (NCBC), in its official statement declared that "serious reasons may permit people to use vaccines produced with abortion-derived cell lines to protect their own lives and health and those of others if no effective alternative vaccines are available."²¹ T. Pacholczyk, one of NCBC leading bioethicists, invoking *Dignitas Personae* also maintains that Catholics do not have a moral duty to decline an inoculation if it was unethically produced using a cell line that came from an abortion. For a serious reason, he further argues,

²¹ NATIONAL CATHOLIC BIOETHICS CENTER (NCBC), *Points to Consider on the Use of COVID-19 Vaccines* (<https://static1.squarespace.com/static/5e3ada1a6a2e8d6a131d1dcd/t/5fd3ce39e679895094dd1e49/1607716409962/NCBCVaccineStatementFINAL.pdf>)

Catholics may receive a COVID-19 vaccine having an association with abortion, and a serious reason could include a threat to one's health and well being.²²

J. Haas, president emeritus and senior fellow at the *National Catholic Bioethics Center*, also voiced the same opinion. He reiterates the teaching of *Dignitas Personae* that "those who are far removed from the evil act of abortion and who were in no way involved in it or in the development of the cell lines developed from it and, indeed, may be completely unaware of its origins, could, for grave reasons make use of such vaccines if no others were available." Grave reasons (e.g., danger to the health of children), he said, may be *morally proportionate* to justify the use of vaccines derived from cell lines of illicit origin. Such derivation Haas would describe as already "very distant" since the cell lines in question were never used for the manufacture of the vaccines, though admittedly they were used for confirmatory testing.²³

J. Smith, though generally sympathetic to the objections posed by Bishop Schneider and Bishop Strickland, still believes that "if the vaccines are as effective and safe as touted, the benefits will be enormous and proportionate: lives will be saved, the economy could recover, and we could get back to our normal lives." In her view these "are very significant benefits that arguably balance any connection the vaccines have with abortion, especially if we intensify our objections to abortion and the use of cell lines from abortion." She concludes that "...to receive the current vaccine is not intrinsically immoral."²⁴ She stresses, however, the need for Church leaders to vigorously "protest the use of cell lines from aborted fetuses in development of medical treatments, and spear-head(ing) a campaign of letter-writing to pharmaceutical companies and legislators" to this effect.

N. Austriaco for his part echoes the view of the Holy See that any such use of medical therapy (i.e., availing of a COVID-19 vaccine developed with the use of cell lines derived from an aborted fetus) would be morally justifiable only if its use did not contribute to future evil acts and if its use was occasioned by a grave proportionate reason.²⁵

Conclusion: Some Points to Consider

If the moral guidance provided by the Holy See were to be heeded, certain points need to be ascertained.

First, there is indeed a grave threat to human health and well-being, if not to life itself. The pandemic is real. It could be that in some places the standard testing for the virus may have been rushed thus yielding inaccurate results. It could be that those infected could be fewer than

²² T. PACHOLCZYK, "Must Catholics refuse a COVID-19 vaccine made with a cell line from an abortion?" in *The Catholic Spirit* (<https://ct.dio.org/item/5143-must-catholics-refuse-a-covid-19-vaccine-made-with-a-cell-line-from-an-abortion.html>).

²³ J. HAAS, *Catholics Should Use Vaccines That Have Absolutely No Connection to Abortion, If Available* (see <https://www.ncregister.com/interview/john-haas-on-covid-vaccines>)

²⁴ JANET SMITH, *The Morality of the COVID-19 Vaccines* (<https://www.ncregister.com/commentaries/the-morality-of-the-covid-19-vaccines>).

²⁵ N. AUSTRIACO, O.P., *Moral Guidance on Using COVID-19 Vaccines Developed with Human Fetal Cell Lines* (<https://www.thepublicdiscourse.com/author/nicanor-austriaco/>)

it is reported in the media and that many of the Covid-19 cases have been improperly labeled. It could be that the rate of mortality has been inflated with any death with a positive test labeled as a covid death. There could be many of these suspicions, but the reality stares one in the face. Many in the hundreds of thousands have already died and some if not many more are dying. Hospitals are bursting to the seams. To say that all this is overhyped or is a hoax, or simply the result of political failure and negligence is counter-intuitive. The threat is real and there is a grave need to protect lives from Covid-19.

Second, to ascertain that there are no other morally licit alternatives available as a condition is absolutely required. A combination of this condition and the existence of a grave threat to life and health creates the only situation thinkable where it might be justifiable to use tainted vaccines. To consider this condition, however, should take into account the fact that people are differently situated. For some people, the more prudent thing to do might be to wait but for others the need for vaccination may be that urgent and immediate. It seems that for most people, the time has not yet come when one can truly say there are no alternatives.

For one thing, research is still going on. So many other types of vaccines are still being developed. The *Charlotte Lozier Institute*, for instance, provides an updated list of such vaccines and such list shows vaccines that are being developed that do not use cell lines at all.²⁶ The same Institute claims that majority of operation warp speed vaccines are being produced without using abortion-derived cells.²⁷ Another group of physicians, the *Front Line COVID-19 Critical Care Alliance* (FLCCC Alliance), whose president is Dr. Pierre Kory, also proposed another alternative—the use of *ivermectin*—in the prevention and treatment of Covid-19.²⁸ There is yet no consensus on the validity of FLCCC’s claims, but these would certainly be worth looking into if only to exhaust all possibilities in the search for alternative ways of dealing with Covid-19 that are morally legitimate.

Another reason for waiting is that this early, there are already cases of vaccine-recipients who have had to suffer adverse effects (e.g., allergy and fainting) from being inoculated with the vaccines that are now available. Those who are concerned with safety and effectiveness have reasons to be anxious and fearful and need not therefore be pressured into submitting themselves for vaccination.

The case, however, with frontliners (e.g., physicians, nurses and other health care practitioners), the elderly and most vulnerable may be different as there may be no time for them to wait. Frontliners, in particular, are most vulnerable since they are directly in contact with Covid-19 victims almost on a daily basis. The effort to avoid the threat of infection is a constant struggle. For these people vaccination may be an urgent need and the grave situation where they find

²⁶ See D. PRENTICE, *Update: COVID-19 Vaccine Candidates and Abortion-Derived Cell Lines* (<https://lozierinstitute.org/update-covid-19-vaccine-candidates-and-abortion-derived-cell-lines/>). Cfr. <https://s27589.pcdn.co/wp-content/uploads/2020/12/COVID-19-Vaccine-Candidates-and-Abortion-Derived-Cell-Lines.pdf>.

²⁷ See <https://lozierinstitute.org/cli-analysis-majority-of-operation-warp-speed-vaccines-not-produced-using-abortion-derived-cells/>

²⁸ See <https://www.newswise.com/coronavirus/dr-pierre-kory-president-of-the-flccc-alliance-testifies-before-senate-committee-on-homeland-security-and-governmental-affairs-looking-into-early-outpatient-covid-19-treatment>

themselves in may leave them without any other choice and may thus *force* them to submit themselves for vaccination. Not only do they need to preserve their health for the sake of their own well-being, they also need to stay healthy to enable them to continue caring for those who have fallen ill. Seen in this light, the frontliners' having to receive tainted vaccine may thus be morally justified; that besides, they actually may be pressed to do so by sheer *force* of circumstance. Such is the predicament of similarly situated people who find themselves in countries where other alternatives may not be available simply because government authorities in these countries would not make them available. Having to decide under constraint and pressure undoubtedly diminishes moral responsibility.

All this considered, it goes without saying that should there be a choice, should there be a morally licit alternative, and should this be readily available, opting to receive another alternative of illicit origin can never be morally justified.

Third, there is a need to ascertain that there is no "*formal*", that is, "*intentional*" connection—whether this be through cooperation or appropriation—between the vaccine-user and the moral evil of abortion. Where such connection exists one would incur moral guilt and culpability. On the other hand, where some form of a connection remains, there is need to establish that such a connection is remote, i.e., very distant to the point of being morally inconsequential, and therefore morally justifiable.

The application of the *principle of cooperation* enabled the Holy See to demonstrate that such a connection is indeed remote. Considering that the fetal cell lines used are no longer directly produced by actual direct abortions but are in fact only the descendants of the original fetal cells, a conscientious vaccine-user could at most participate in the past wrongdoing only in a very minimal way, that is, by way of *remote mediate passive material cooperation*.

Seen from the perspective of *appropriation*, the vaccine-user may appear to be more proximately connected to the illicit nature of the vaccine's origin as the vaccine-user would appear to ratify or validate the purpose of such origin. This connection would be mitigated, if not removed, were the vaccine-user to:

- a) openly protest against such origin, i.e., to reject morally illicit ways (i.e., abortion) of obtaining fetal cells used for vaccine production and testing;
- b) urge manufacturers and pharmaceutical companies to produce vaccines of licit origin and insist that government authorities make them available "for all";
- c) express preference for licit alternatives were this to be available.

All this combined with the first two conditions should render the evil incurred (connection to evil) not only as "*remote*", but also "*unavoidable*" if not "*inevitable*" and beyond one's intention (*praeter intentionem*) that may therefore admit of moral justification for a grave and proportionate reason.

Fourth, that vaccination is not a *moral obligation* but must rather be *voluntary* is justified with the application of the *Principle of Autonomy*. Vaccination involves moral decision-making which assumes that *rational agents are to make informed and voluntary decisions*. Respect for autonomy implies that an individual has the capacity to act intentionally, with knowledge and

understanding, and without influences that would restrict and mitigate against a free and voluntary act.

Autonomy must be respected especially because there are ethical grounds that continue to cast doubt on the licitness of vaccination, not to mention some safety concerns that continue to make people fearful of adverse effects of a vaccination. At present there is no vaccine available that is *absolutely* without any trace of any connection to fetal cells harvested from aborted fetuses in the past, whether this be in the production or testing phase. Such may be reason enough “*in conscience*” for refusing vaccination.²⁹

Refusing vaccination, however, carries with it a corresponding moral obligation. As CDF puts it, “Those who, however, for reasons of conscience, refuse vaccines produced with cell lines from aborted fetuses, must do their utmost to avoid, by other prophylactic means and appropriate behavior, becoming vehicles for the transmission of the infectious agent. In particular, they must avoid any risk to the health of those who cannot be vaccinated for medical or other reasons, and who are the most vulnerable.” (Note, n. 5) This may concretely mean following safety protocols imposed by public authorities and self-imposed measures like restricting unnecessary travel and social gatherings.

Life indeed has become so complex. While it is morally imperative that we avoid moral evil, we find ourselves entangled in conflict situations when and where good cannot be obtained without any connection to moral wrongdoing. In fact, it may be no exaggeration to say that there is hardly anything we do that does not connect us, one way or the other, wittingly or unwittingly, to evil in whatever form.³⁰ Having to use vaccines of dubious provenance in a time of pandemic is one such instance. Once more, we find ourselves in a situation when we want to bring about a good end of crucial and vital importance, while it is outright impossible to effect this good end without being able to avoid a concomitant connection with evil no matter how diligent our intent and effort at avoiding it.

✠ J. ROJAS
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January 4, 2020

²⁹ The *Catholic Bishops Conference of England and Wales* (CBCEW) issued a statement posted in its website on September 24, 2020, saying that the use of an abortion-derived COVID vaccine was a matter of the “*prudent judgment of conscience*”. See <https://www.cbcew.org.uk/home/our-work/health-social-care/coronavirus-guidelines/covid-19-and-vaccination/>. Cf. *Catechism of the Catholic Church* §1782.

³⁰ M. Schneider expresses the same lament, saying that avoiding even very remote material cooperation in evil in our lives is almost impossible, not even by becoming a hermit! See M. SCHNEIDER, L.C., *op. cit.*