

Solidarity And Justice in an Individualistic World ?

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ABSTRACT

Human vulnerability has come to light in recent years because today's individualistic and hedonistic society has not been able to ignore the fact that it is weak compared to nature and that science, although powerful, cannot completely avoid human suffering.

Martha Nussbaum provides us with an informative reflective basis from which we can see that individual and collective suffering should lead us, through solidarity and altruism, to attempts to subsidize the social effects of suffering. We should not only understand suffering, but also remedy it, and one way to do so is found in politics. Vulnerability and justice are necessary approaches in our society.

Key words: Vulnerability, justice, empathy, suffering, bioethics.

The current problem

As of March 2021, the SARS-CoV-2 pandemic resulted in more than 115 million positive cases and 2.5 million deaths worldwide. In the absence of a vaccine, building herd immunity against SARS-CoV-2 through natural infection was theoretically impossible.

The herd immunity threshold depends on the basic reproduction number (R_0) and is defined as $1 - 1/R_0$. The more contagious a pathogen is, the higher its R_0 and the greater the proportion of the population that must be immune in order to block transmission on a sustained basis. The herd immunity threshold may vary among populations given that R_0 depends on several factors, such as population density and structure.

In the case of SARS-CoV-2, several studies have estimated an R_0 between 2 and 6. Assuming an estimated R_0 of 3, the threshold for herd immunity is 67%. This means that the incidence of infection would begin to decline when the proportion of persons with acquired immunity to SARS-CoV-2 exceeds 0.67. This model is based on assumptions that are unlikely to be met in reality, such as homogeneous population mixing and uniform immunity in recovered persons across all demographic groups.

The most relevant measure for assessing the social consequences of achieving herd immunity is the overall SARS-CoV-2 case fatality rate (TLI) (the proportion of SARS-CoV-2 deaths among infected persons). By combining the TLI with an estimate of the number of persons needed to achieve herd immunity, the number of deaths expected as a result of reaching this threshold can be calculated. The TLI of COVID-19 remains uncertain given that all cases are not detected (especially asymptomatic and mild cases). The authors assumed a TLI of 0.6%, and, together with a herd immunity threshold of 67% ($R_0 = 3$), estimated that the absolute number of expected deaths worldwide would exceed 30 million people.

Given this estimate, and taking into account uncertainty around how long protective immunity lasts after an infection, it would be too risky to bet on achieving herd immunity. Such a bet would likely cause millions of deaths, making an effective vaccine the most logical option in the face of this pandemic.

Although the WHO mobilized a network of partners, through the R&D Blueprint for Epidemics, to identify, prioritize and accelerate the development of diagnostics, vaccines and treatments needed to fight the virus in the long term, one foreseen problem centers on subsidiary and solidarity-based access. This is because, while the coronavirus poses equal threat to all countries, more developed nations are better prepared to contain the virus where and when it appears. Poor or emerging countries, for their part, lack the most basic means for detecting and preventing new pathogens, including surveillance systems, diagnostic capabilities and infection prevention and control.

The fact is that this pandemic was caused by globalization and can only be contained by the same mechanism, namely the achievement of global immunity through vaccines.

Success fundamentally depends on global solidarity and a collaborative commitment to protect health across the board, as Lederer points out.

It is understandable that each country prioritizes the protection of its population, but vaccine hoarding has happened before. In the current situation and according to Reuters, rich countries have secured 1 billion more doses of the Covid-19 vaccine than they need, leaving poorer nations with little chance of obtaining it.

Tedros Ghebreyesus, Director General of the World Health Organization, already denounced this phenomenon, calling on the G7 countries to fulfill their commitments to Covax, the WHO-led global initiative to ensure equitable access to COVID-19 vaccines worldwide.

Ghebreyesus stated, "You should talk to your constituents saying: 'The best way to protect yourself is not only to vaccinate yourself, but to vaccinate the rest of the world, to share the vaccine with the rest of the world. If this virus is not defeated everywhere, we can't defeat it globally. It will have a safe haven somewhere and will be able to fight back.'"

Last week, UN Secretary General Antonio Guterres warned against global inequality related to vaccine distribution, noting that 10 high-income countries have cornered up to 75% of all vaccines, while more than 130 countries have not received a single dose.

Pope Francis echoed a call to heads of state, saying: "I ask everyone, heads of state, companies, international organizations, to promote cooperation and not competition, and to seek a solution for all: vaccines for all, especially for the most vulnerable and needy in all regions of the planet. First and foremost, the most vulnerable and needy."

The problem is clear, as is the solution: without solidarity, sustainable progress in the face of this pandemic will remain unattainable. Nationalism will only prolong the problem.

Can Altruism Be Expected in an Individualistic Society

The actions associated with solidarity and subsidiarity are based on altruism, which, in turn, is based on empathy. The latter relates to an individual's cognitive and emotional ability to put him or herself in the emotional situation of another and understand the other. From that understanding, the desire to help arises. On the other end of spectrum, we find individualism and selfishness. Unfortunately, our society encourages behaviors associated with the latter, but desires the former. Today, big cities separate community members, fragmenting them into close, but small, groups of family, friends, neighbors, activity partners, etc.; real coexistence with those outside of these groups is lacking and they are considered strangers with whom emotional ties are nonexistent. This is why it is important to point out that empathy is not just a form of sympathy. Recognizing in others a commitment to solidarity should not just be based on closeness and emotional ties, but should also include a ethical and social commitment to the idea that we as a group survive in true community (common-unity) where we feel co-responsible for the welfare of others, rather than in just any kind of organization.

In terms of bioethics, this approach is summarized in the principles of solidarity and subsidiarity. We can all give, but this does not exclude the fact that we are also needy. Ethical alienation is one of the main factors associated with dehumanization.

Donation contains a strong element of altruistic giving. The fostering of related empathy has several components: one-part stems from the personality of the donor-subject and his ethical experiences, another from social imitation, as well as from formal, moral or religious education. Empathy is evident through action, which is currently studied as pro-social behavior. Empathy, then, is a disposition and intention towards pro-social behavior that includes supportive action. Pro-social behavior is shaped by actions that seek to benefit others without the expectation of external reward. These actions involve cost, sacrifice, or risk to the individual, and are a response to rational motivations and positive emotional states that come from mature and healthy personalities. Given that these behaviors have an educational component, it is important to encourage pro-sociality and, in connection with this, empathy in children and adolescents, stimulating a progressive decentering of the ego. As Calvo points out, actions that encourage this include the following:

- Sensitization to other people's feelings
- Explanation of the consequences that one's own behavior may have for others and oneself.
- Observation of empathic models accompanied by moral reflection on them.
- Observation of successful role models that support the conviction that following such conduct will provide the individual and society with an ethical benefit.

Within the phenomenological perspective, ethics is given by the recognition of the "I" and of "another I, with whom I identify myself as a human being," which is the "you." By recognizing our similarities, we develop ethical bonds, i.e., a reciprocal recognition of obligations of beneficence.

Some currents that explain altruism do so on this basis of recognition between similarities, called unity. Feeling empathy for someone produces a union between the "self" and the "self of the other." When unity is achieved, helping the other person is equivalent to doing something positive for oneself. Promoting empathetic attitudes in a utilitarian and pragmatic society is a challenge, and a necessity, for a more humane coexistence.

How can altruism be encouraged?

This is undoubtedly one of the keys to the realization of free and adequate systems. The first point involves combating individualism with solid social education in the sense of promoting the values that the community shares at school, in the family and in the media. It also involves promoting free, individual decision-making that includes conviction of social duty and a recognition that forming part of a community confers responsibilities and rights.

Another very important aspect involves adequate communication and transparency on the part of the institutions involved since society, convinced that justice will be applied, will thus be willing to make certain sacrifices in favor of others in need.

When it comes to the achievement of expeditious worldwide vaccination coverage, political decisions prevail, and so it is essential that certain actions be aimed at raising public awareness of this need, explaining not only the moral value of associated acts, but also the pragmatic implications.

It should not be forgotten that ethical actions (ethics of maxims) arise from individuals' moral conviction; therefore, they enter the field of freedom and are not always the first choice of action. To promote this kind of action, institutions concerned with the common good through non-maleficence and justice are required.

If each population were to understand that, due to globalization's role in the transmission of germs, acceptable immunity in each country will only be achieved if social (herd) immunity is achieved for the whole world, there would not be as much social pressure on the State to accumulate vaccines. Thus, the subsidiary principle could be more easily exercised.

Therefore, regardless of the perspective, whether it be an ethics of maximums or of minimums, or a personalist or utilitarian approach, all agree on the need for high-income countries to show solidarity with those who do not have sufficient income to broadly access the vaccines needed.

Conclusion

Solidarity exercised by high-income countries with poor or developing countries is both a moral and an epidemiological necessity. Highly developed countries' decision to support underdeveloped ones can be based both on a personalist ethic that is respectful of human rights and the dignity of each person— and, therefore, holds an obligation of subsidiarity, -- and from a utilitarian stance since other countries require universal coverage in order to achieve lower rates of contagion in one's own community. Often, bioethical decision-making processes, which respect plurality, do not always agree on the philosophical bases of argumentation, but agreement can be reached regarding the recommended actions since, for one reason or another, the resulting decisions that positively impact individuals and societies.

Therefore, for altruistic reasons, based on solidarity, as well as for pragmatic or utilitarian ones, which prioritize action that conveniently achieves an end, the equitable distribution of vaccines is imperative. In practice, acts of solidarity should be based on ethical reasons as well as those based on social convenience in an effort to help people recognize that they contain both personal and social benefit.

We all live on the same planet, our home, and only together can we face the challenges that impact each and every one of us in this global world.

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