

المبادئ الأخلاقية في أثناء حدوث جائحة: بعض القضايا الأخلاقية وسط أزمة كوفيد - 19 في الفلبين حسب كتابات كانت

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ملخص:

هدف الدراسة: لا يمكن إنكار أن جائحة كوفيد-19 تمثل مشكلة صحية خطيرة، ناهيك عن القضايا الاقتصادية والاجتماعية والسياسية والقانونية والأخلاقية المصاحبة لها. تبحث هذه الدراسة في قضايا أخلاقية متعلقة بأزمة كوفيد- 19 في الفلبين، وهي تقدم طيفاً واسعاً، ولكن ليس شاملاً، من القضايا الأخلاقية بدءاً من انتهاك بروتوكولات الحجر الصحي، ورفض المستشفيات قبول المرضى، والتمييز ضد العاملين في مجال الرعاية الصحية ومرضى كوفيد- 19 ومضايقتهم، ونشر المعلومات الخاطئة، إلى بيع المنتجات والمعدات الطبية بأثمان باهظة. **المنهجية:** كبحث فلسفي، تتبنى هذه الدراسة نهجاً نوعياً يقدم الباحث فيه بشكل أساسي تحليلاً تفسيرياً لمجموعة مختارة من كتابات الفيلسوف كانت. **النتائج:** يرى الباحث أن بعض القضايا الأخلاقية التي نشأت في أثناء تفشي كوفيد- 19 في الفلبين تنتهك قانون كانت العالمي وقانون الإنسانية كغاية في حد ذاتها. كما يرى أن التجاهل الصارخ لبروتوكولات الحجر الصحي هو أمر يدل بوضوح على انتشار النخبوية في الفلبين؛ حيث الأثرياء وأصحاب النفوذ يتمتعون بصنف غريب وشاذ من الديمقراطية. **الخلاصة:** إنه واجب أخلاقي أن يتم منح اللقاحات ضد كوفيد- 19 بشكل مجاني لدول العالم الثالث التي تعاني بشدة من انتهاكات حقوق الإنسان.

الكلمات المفتاحية: المبادئ الأخلاقية، الجائحة، كوفيد 19-، القضايا الأخلاقية، كانت.

Ethics during a Pandemic: some Ethical Issues amidst the COVID-19 Crisis in the Philippines as Seen Through Kant's Writings

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Abstract

Objective: The COVID-19 pandemic is undeniably a serious health issue, not to mention the economic, social, political, legal, and ethical issues that accompany it. This paper explores the ethical issues related to the COVID-19 crisis in the Philippines. It presents a broad, but not exhaustive, spectrum of ethical issues that span from the violation of quarantine protocols, refusal of hospitals to admit patients, discrimination against and harassment of healthcare workers and COVID-19 patients, propagation of misinformation, to the selling of overpriced medical products and equipment. **Methodology:** As philosophical research, this study utilizes a qualitative approach and primarily employs an interpretative analysis of Kant's select writings. **Results:** The author argues that certain ethical issues which arose during the COVID-19 outbreak in the Philippines violate Kant's Universal Law and Law of Humanity as an End by Itself. He further argues that the stark disregard of quarantine protocols is an incident that attests to the pervasiveness of elitism in the Philippines whereby the rich and powerful people enjoy an unusual aberrant brand of democracy. **Summary:** It is morally imperative that vaccines against COVID-19 must be given for free to Third World countries which are highly vulnerable to human rights abuses.

Keywords: Ethics, Pandemic, COVID-19, Ethical issues, Kant

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1. Introduction

The Coronavirus Disease 2019 or COVID-19, caused by SARS-CoV-2, is yet the most horrible health ordeal this generation has witnessed. The World Health Organization declared the disease as a pandemic on March 11, 2020. It is so horrible that even rich countries with sophisticated healthcare systems and infrastructures have struggled to contain the spread of the virus. As of May 7, 2021, there have been 154,759,285 confirmed cases of COVID-19 worldwide; including 3,237,107 reported deaths (Johns Hopkins University). On the same date, the Philippines had 1,073,555 confirmed cases of the virus, including 17,800 deaths. These numbers, which increase exponentially daily, simply show how serious the problem is, making it imperative for governments and people to take the crisis seriously. Besides, these numbers are an underestimation as this data projects the 'laboratory-confirmed diagnosis only' (Sohrabi et al., 2020) based on limited test kits and lack of accredited laboratories to perform the tests, at least in the Philippines.

In response to the pandemic, governments around the world with confirmed cases of COVID-19 have implemented non-pharmacological preventive interventions that others would consider as draconian measures, such as lockdown, travel ban, cancellation of public events and religious gatherings, school closure, massive disinfection, stay-at-home, work-from-home, curfew, social distancing, and mandatory wearing of face mask, among others. Furthermore, the Philippines is not immune to these measures, especially that the country has the first COVID-19-related death (on February 1, 2020) outside of China, where the virus outbreak was first reported to have human-to-human transmission (WHO, 2020).

The COVID-19 pandemic is undeniably a serious health issue, not to mention the economic, social, political, legal, and ethical issues that accompany it. This paper explores the ethical issues related to the COVID-19 crisis in the Philippines. It presents a broad, but not exhaustive, spectrum of COVID-19-related ethical issues that span from the violation of quarantine protocols as in the case of Sen. Pimentel, refusal of hospitals to admit patients, discrimination and harassment against healthcare workers and COVID-19 suspected and positive patients, propagation of misinformation, to the selling of overpriced alcohol, personal protective equipment, and thermal scanners. These issues are analyzed using the Kantian ethical framework.

There is a plethora of literature examining the ethical issues and considerations during a pandemic. Among others, this literature includes ethical issues involving prisoners' interests and right to health care during a pandemic flu (van't Hoff, Fedosejeva & Mihailescu, 2009), ethical considerations in caring for the critically ill or injured during pandemics and disasters (Biddison et al., 2014), the role of an ethical issue in the prevention of H1N1 (Sasidharan et al., 2012), guide in identifying and responding to ethical issues related to pandemics encountered by cardiothoracic surgeons (Drake et al., 2020), the need to balance individual rights against the community's public health needs as an emerging ethical dilemma arising from coronavirus disease pandemic (Chia & Oyeniran, 2020), equitable distribution of scarce resources like personal protective equipment (PPE) to healthcare providers using the utilitarian ethical framework (Binkley & Kemp, 2020), and the duty to care in an influenza pandemic (Bensimon et al., 2012).

While Kramer, Brown, and Kopar (2020) analyzed the ethical issues within the hospital setting's bounds, this present study mostly analyses ethical issues that occur outside hospitals, ICUs, and isolation facilities. Unlike the study of Binkley and Kemp (2020), which used a utilitarian ethical framework in analyzing the equitable distribution of scarce resources to clinicians, this study uses a Kantian deontological ethical framework.

This paper aims to inform future pandemic planning by highlighting the ethical issues surrounding people's behaviors related to the country's COVID-19 crisis. What this paper adds to the growing literature regarding the ethical aspect of the COVID-19 pandemic is that the ethical issues revealed and analyzed in this study provide valuable insights for policymakers and healthcare professionals in future pandemic planning.

2. Methods

As philosophical research, this study utilizes a qualitative approach; the output is thus presented in a descriptive form, not statistical. The study primarily employs an interpretative analysis of Kant's Groundwork for the Metaphysics of Morals (1785), and to ensure greater objectivity in the interpretation, other views were consulted before proceeding to a purely theoretical investigation of Kant's moral philosophy as amplified in the Groundwork. Kant's moral perspective was used to analyze some ethical issues related to the Philippines' COVID-19 crisis; furthermore, Kant's

anthropological insights in *Anthropology from a Pragmatic Point of View* (1798) were also incorporated in this study to reinforce the presented arguments. The COVID-19-related issues analyzed in this study are based on online news published by major media networks in the country.

3. What is Kant's Moral Philosophy?

Kant's *Groundwork for the Metaphysics of Morals* is treated as a starting point for studying his moral theory. In this work, he established the supreme principle of morality (Kant, 1785, p.8) which could be sought nowhere else than in a pure philosophy or metaphysics, and "without it there can be no moral philosophy at all" (Ibid., p.6).

Kantian moral philosophy is anchored on the idea that a moral law holds absolute necessity with it as a ground of an obligation. Such ground of obligation is not based on any circumstances of the world, as in Bentham's and Mill's utilitarianism perspective, but solely a priori in the concepts of pure reason. More specifically, it is a duty that gives the "necessity of an action from respect of the law" (Kant, 1785, p.16). This idea was further amplified in Kant's later work entitled *Anthropology from a Pragmatic Point of View* where he argued that "no moral rule... can be learned from experience [a posteriori]: because the thought of duty must be the motive in moral action..." (Kant, 1798, p.xiii).

Concomitantly, the action's moral worth depends not on the results or consequences that it produces or will probably produce as in the case of consequentialist theories, but instead on the maxim or principle of the volition in which the action is done. "A maxim is the subjective principle of the volition; the objective principle (i.e., that which would serve all rational beings also subjectively as a practical principle if reason had full control over the faculty of desire) is the practical law" (Kant, 1785, p.16). "The representation of an objective principle, insofar as it is necessitating for a will, is called a 'command' (of reason), and the formula of the command is called an imperative" (Ibid., p.30).

Now, there are two kinds of imperatives, namely hypothetical and categorical. "If the action was good merely as a means of something else, then the imperative is hypothetical; if it is represented as good in itself, hence necessary, as the principle of the will, in a will that in itself accords with reason, then it is categorical" (Ibid., p.31). In short, an imperative that commands categorically is the law of morality.

In the Groundwork, Kant laid down the three formulations of the categorical imperative or of the moral law, namely: The Formula of Universal Law, The Formula of Humanity as End in Itself, and The Formula of Autonomy. The first two formulations (i.e., formula of universal law, and formula of humanity as an end in itself) are discussed briefly below.

3.1. The Formula of Universal Law

“Act only in accordance with that maxim through which you can at the same will that it becomes a universal law” (Kant, 1785, p.37). This means that one must be able to will only an act whose maxim can simultaneously become a universal law, valid for every rational being. This formula is also known as the principle of universality. In the Anthropology, Kant purported that “pragmatic anthropology would then regard man as a free being in the sense of a being who can set ends or act on maxims...” (Kant, 1798, p.xx).

In the Groundwork, Kant enumerated some examples of acts whose maxims could not at the same time become a universal law, namely: taking one’s own life or suicide, making false promises, neglecting one’s talents, and not contributing to other’s welfare. These acts cannot subsist as a universal law of nature without necessarily causing conflict, harm, danger, or chaos. In other words, the maxims or principles of these acts are so subjective that they can never become universal laws. Thus, Kant suggested that “we operate on the basis of principles all could adopt, and that we, and all others, could coherently represent as universal laws” (Nyholm, 2016, p.365).

3.2. The Formula of Humanity as End in Itself

“Act so that you use humanity, as much in your own person as in the person of every other, always at the same time as end and never merely as means” (Kant, 1785, p.46-47). This implies that one should not use a human being merely as a means because he is not a thing; a human being has an inherent value, inner worth and dignity. Hence he should be treated as an end in itself, “... every human being is an end in itself and has intrinsic value because every human being has a noumenally-good [see note] will and therefore the capacity to be moral” (Schonecker & Schmidt, 2018, p.86). This formula is also known as the principle of humanity. The idea on man as an end in himself is further reinforced in the Anthropology where Kant emphasized that we need to consider “man as a citizen of the

world, as interacting with other men and hence ‘using’ them in the way a rational being uses anything, that is, as means to the ends he has himself adopted” (Kant, 1798, p.xx).

A human being cannot be used merely as means to an end because he does not have a relative worth, but rather an inner worth. That which has a relative worth has a price, and that which has an inner worth has a dignity (Kant, 1785, p.53). Possession of dignity demands respect from others. Since all human beings have dignity, regardless of their status and condition in life, we, therefore, ought to respect one another and never use each one merely as means to an end.

While Kant’s Groundwork presents a rather abstract and metaphysical stance of moral framework, he, on the other hand, presents a more pragmatic and anthropological view in Anthropology where he stresses that it is essential to examine the “behavior of men in society” (Kant, 1798, p.xiv). It therefore proves meritorious, in our analysis of human behavior in society, to maintain a perfect balance between moral philosophy (what man ought to do) and anthropology (men as they are in which they tend to “use and misuse” their powers) (Ibid., p.xvii). This is exactly how this study intends to proceed.

4. Ethical Issues Related to COVID-19 Outbreak in the Philippines

4.1 Violation of quarantine protocols: the case of Sen. Pimentel

On March 11, 2020, after officials announced that a resource person who attended a March 5 hearing tested positive for COVID-19, Senate President Vicente Sotto III ordered a restricted entry into the Senate building (Sabillo, 2020). One of those senators present during the said hearing was Sen. Aquilino Pimentel III. As per the Department of Health (DoH) guidelines regarding quarantine protocols, a person is mandated to undergo strict home quarantine following exposure to or interaction with a person who tested positive for COVID-19. It goes without saying that Sen. Pimentel should undergo strict home quarantine for 14 days.

Sen. Pimentel admitted that “during his quarantine, he experienced high fever, slight sore throat, body pains, and diarrhea — all flu-like symptoms related to COVID-19 — prior to his test [on March 20]” (Gregorio, 2020). Though still under home quarantine and was not yet informed of his test result and “despite experiencing symptoms of the

disease” (ABS-CBN Newsa, 2020), on March 24, 2020, around 6:00 –7:00 in the evening (13 days only after March 11, 2020), Sen. Pimentel accompanied his wife to the Makati Medical Center for a cesarean delivery thereby violating quarantine protocols. While still inside the said facility in that same evening, around 9:00 p.m., “Sen. Pimentel receives confirmation from the Research Institute for Tropical Medicine (RITM) that he is a carrier of COVID-19” (ABS-CBN Newsa, 2020).

The senator’s act of accompanying his wife to Makati Medical Center (MMC) for a cesarean delivery despite having symptoms of COVID-19 and not having completed the 14-day home quarantine protocols yet violates Kant’s Formula of Universal Law. Specifically, the senator’s act of accompanying his wife to MMC for a cesarean delivery despite having symptoms of COVID-19 and not having completed the 14-day home quarantine protocols yet is something that cannot be universalized. It is not an act that can and should be followed by everyone who has symptoms of COVID-19 and has not yet completed the 14-day home quarantine protocols set by DoH. Doing so would practically put everyone (the doctors, nurses, other hospital staff, and even his wife with whom he had a direct contact) at high risk of contracting the virus since he was already positive of the virus during the time he went out of his house. Further, allowing this act (i.e., violating quarantine protocols despite having flu-like symptoms) would make it even more difficult for healthcare workers and the government to stop the spread of the virus.

No wonder such an act of Sen. Pimentel was strongly denounced and highly criticized by MMC management. Saturnino Javier, Medical Director of Makati Medical Center, considered the senator’s violation of home quarantine protocols as “reckless and unacceptable” (Gregorio, 2020) and “irresponsible and reckless” (ABS-CBN Newsb, 2020). Javier said that “Pimentel’s calls for the public to comply with home quarantine measures under the government-ordered lockdown of Luzon as a containment measure have now lost credence as he himself violated this” (ABS-CBN Newsb, 2020).

The Ethics Subcommittee of the Advisory Committee to the Director for Centers for Disease Control and Prevention recognizes the moral necessity “to suspend some ordinary moral rules... like individual freedom... to protect individuals as well as entire communities during

pandemic influenza” (Kinlaw & Levine, 2007, 4). There is therefore a necessity to restrict man’s freedom because man’s “natural desire for unrestricted freedom [can lead] into conflict with his [fellow men]” (Kant, 1798, p.xxii). In other words, man needs to develop his “tendency to become a well-bred member of society who can live peacefully with his fellow men” (Ibid.). The most ideal scenario then, as Kant stressed, is to exercise freedom compatibly with the exercise of freedom of other men (Ibid.).

As a legislator himself, Sen. Pimentel should be the first to obey laws and not the one to violate them. Though Pimentel was an expectant father during that time, his duty as a father cannot outweigh his duty to the country, the people, and humanity in general. It is his paramount duty not to expose anyone, especially the healthcare workers of MMC (or any healthcare facility for that matter), to possible infection of COVID-19 as we know that “disease prevention is necessary to preserve a functioning society” (Drake et al., 2020).

Ultimately, what Sen. Pimentel did is not something that he would want other people with flu-like symptoms to do. If Pimentel were in his best of health during that time, we would certainly not want to be exposed to people with symptoms of COVID-19. Hence, what Pimentel did is not something that can be universalized – something that all people with symptoms do.

Sen. Pimentel’s stark disregard of quarantine or stay-at-home protocols is a classic incident that attests to the pervasiveness of elitism in the Philippines whereby the rich and powerful enjoy an “unusual aberrant brand of democracy...” (Mateo, 2001, p.17), while the poor and ordinary who were caught violating the quarantine or stay-at-home protocols faced outright arrest and imprisonment. One fish vendor was even “beaten up by lockdown enforcers for not wearing a mask” (Ornedo, 2020).

4.2 Refusal of hospitals to admit patients

A 65-year-old father and resident of Nueva Ecija died after six hospitals refused to admit him when he was suffering from difficulty in breathing. According to his daughter, the hospitals claimed they no longer had a vacant intensive care unit (ICU) room for her father, who had asthma, and who was not even given first aid (Lagrimas, 2020). What made it worse was a nurse in one of those hospitals which refused admission

even claimed that “their father was positive for COVID-19” even without performing any test.

The hospitals’ refusal to admit patients violates Kant’s Formula of Universal Law. Anyone who is in a health emergency would not want hospitals to refuse their admission. If placed in patients’ shoes, when these doctors or nurses would be in a health emergency, they would certainly not want hospitals to refuse them being admitted for appropriate care and treatment, or at least first aid. Therefore, the hospitals’ refusal to admit patients is contradictory to Kant’s Formula of Universal Law. Such an act of refusal is not something that can be universalized, hence not moral.

People should not suffer from the hospitals’ inefficiency and lack of adequate hospital staff and facilities. Unjustified loss of lives could have been avoided with the proper exercise of appropriate actions. Republic Act (R.A.) No. 8344 penalizes hospitals and medical clinics’ refusal to administer appropriate initial medical treatment and support in emergency or serious cases. Section 1 of the said Act states that “in emergency or serious cases, it shall be unlawful... to refuse to administer medical treatment and support as dictated by good practice of medicine to prevent death or permanent disability: provided, that by reason of inadequacy of the medical capabilities of the hospital or medical clinic, the attending physician may transfer the patient to a facility where the appropriate care can be given, after the patient or his next of kin consents to said transfer and after the receiving hospital or medical clinic agrees to the transfer... provided, further, that such transfer shall be done only after necessary emergency treatment and support have been administered to stabilize the patient and after it has been established that such transfer entails less risks than the patient’s continued confinement: provided, furthermore, that no hospital or clinic, after being informed of the medical indications for such transfer, shall refuse to receive the patient nor demand from the patient or his next of kin any deposit or advance payment...”

Based on the preceding provision, it is clear that, first, it is the duty of the hospital or attending physician, and not of the patient or his significant others, to transfer the patient to a facility where appropriate care can be given because of the inadequacy of the medical capabilities of the hospital which the patient first visited. Therefore, it is unimaginable why the family of the patient had been to six hospitals when, as far as R.A. 8344 is concerned, it is the role of a hospital to look for another hospital

that agrees to receive the transfer of the patient. In other words, patients and the family attending to them do not necessarily have to physically go to different hospitals searching for the one that will accept to admit the patient. Secondly, while waiting for the patient's transfer arrangement, it is a moral obligation of a hospital or medical clinic to administer 'necessary emergency treatment and support to stabilize the patient.'

4.3 Discrimination against and harassment of healthcare workers and COVID-19 patients

Shot and wounded, splattered with bleach all over the face, kicked out from dormitories and boarding houses, barred entry to apartments, condominiums, establishments and villages, passengers refusing to ride jeepneys when nurses in uniform or scrub suits are on board, declined transport by tricycle, taxi and jeepney drivers, shunned by friends and neighbors, avoided in public places, being bullied and bashed in social media, lost their jobs, house pelted with stones by neighbors – these are some forms of discrimination, harassment, and disapproval experienced by healthcare workers and COVID-19 suspected and positive patients all over the Philippines.

Therefore, this paper does not support Kramer et al.'s (2020) claim that there is "no prejudicial stigma associated with positive COVID-19 test". Instead, this paper lends support to Mitchell et al.'s (2002, as cited in Corley, Hammond & Fraser, 2010) claim that hospital staff can be "stigmatized, alienated and isolated", and Bansal et al.'s (2020) affirmation that "stigma remains among clinicians".

Healthcare professionals, security guards in health facilities, and utility staff in hospitals risk and sacrifice their lives by battling against the highly dreaded and deadly virus and choosing to serve when some of them would have chosen otherwise. Thus, we should not let anyone threaten the life and security of these people as they fearlessly continue to save the lives of those infected and possibly infected with the virus. Indeed, healthcare professionals are practicing strict health protocols and following safety measures before, during and after duty not to infect other people in their communities, villages, and households or be infected with the virus.

The aforementioned forms of discrimination, harassment, and disapproval experienced by healthcare professionals, security guards in health facilities, utility staff in hospitals, and COVID-19 suspected

and positive patients in the country are obviously in violation of Kant's Formula of Universal Law. No one wants to be discriminated against and harassed by anyone. Those people who are discriminating and harassing healthcare workers, hospital staff, COVID-19 patients, and those exposed to them certainly do not want to be discriminated against and harassed by anyone. Therefore, discriminating and harassing are not things that all could adopt, hence not moral.

We ought to be appreciative and grateful for the work that healthcare professionals and other frontline personnel perform in fighting against the virus and risking their lives in the process. We should treat them with compassion and kindness, not with violence and humiliation. Instead of spreading hate and shame, we should show them our love and support.

Also, discriminating and harassing healthcare workers, hospital staff, COVID-19 positive patients, and those exposed to them is counter-productive. It may discourage people with mild and severe flu-like symptoms from disclosing their health conditions to health authorities, thereby defeating the country's active efforts to isolate and treat them.

To at least mitigate the moral, physical, and emotional damages associated with the discrimination and harassment against healthcare workers and COVID-19 suspected and positive patients, it is morally imperative that vaccines against COVID-19, once available, must be given for free to Third World countries, like the Philippines, which are highly vulnerable and susceptible to human rights abuses in times of pandemic. The United Nations "calls for richer states to help those most vulnerable to COVID-19" (Kretchmer, 2020).

4.4 Propagation of misinformation

According to the Philippine National Police, a resident of Barangay Banaynay in Cabuyao City province of Laguna claimed that a patient positive for COVID-19 was admitted and died at Global Medical Center Inc. of Cabuyao last February 2020. Other three suspects from Lapu-Lapu City in Cebu were responsible for spreading unverified and false information on the COVID-19 outbreak (Ferreras, 2020). Also, a barangay public safety officer was arrested in Palayan City in Nueva Ecija for posting false information in his social media account that there was a confirmed case of COVID-19 in the area (Bajo, 2020). Moreover, a female public-school teacher wrote on Facebook on March 27, 2020, that food supplies

in General Santos were running low. According to Philstar Global, she allegedly urged the public to seize the food stored in a gym (Coble, 2020). Still, another person posted a list of people he said had contracted COVID-19 on Facebook to help in contact tracing (Coble, 2020). These are a few of the many fake news related to COVID-19 in the country. The persons involved in the cases mentioned above are now facing charges for violation of Article 154 of the Revised Penal Code (Unlawful Use of Means of Publication and Unlawful Utterances), Republic Act 10175 or the Anti-Cybercrime Prevention Act, and even a provision of Republic Act 11469 or the Bayanihan to Heal as One Act.

When everyone's life is at risk during a crisis of global magnitude, right information is very vital. However, false information regarding COVID-19 spreads faster on social media platforms than in physical health. Thus, the Philippine government is not only fighting against the virus itself but also against misinformation about it. Therefore, misinformation makes it doubly difficult for the government to manage the crisis as it has adverse effects on people's attitudes and behavior.

The aforementioned fake news related to COVID-19 are obviously in violation of Kant's Formula of Universal Law. Purveyors of false information, usually on social media, certainly do not want to become victims of unreliable and unverified news or posts. It being so, posting and sharing false news is morally objectionable. Such an act is not universalizable; that is, no one can do it without harming or damaging even to the one doing it. Any unreliable and unverified information posted and shared on social media can only cause undue panic, confusion, fear, and even harm to the uncritical public. This observation is affirmed by Sohrabi et al. (2020), who argued that "public misinformation can result in racism, incorrect public precautions, and unprecedented fear surrounding COVID-19," and Vieira et al. (2020) who maintained that "misinformation can lead to uncertainty and this state of uncertainty increases the risk of feelings of insecurity, anxiety, and general emotional tension, all of which may impair the quality of life".

How society recognizes an epidemic and what their individual roles are for conquering the outbreak is essential (Sasidharan et al., 2012). While the government and health authorities are taking all possible actions to educate the public on the nature, causes, mode of transmission, and preventive

measures regarding the virus, fake news perpetrators are simultaneously spoiling the said actions. Ultimately, the danger that fake news brings is mainly dependent on vulnerable people who immediately believe in these things without scrutiny, verification, validation, confirmation, or critical thinking.

4.5 Selling of overpriced medical products and equipment

A store in Manila was raided by the Bureau of Customs (BoC) on March 26, 2020; the Bureau of Customs confiscated a total of 5 million pesos worth of personal protective equipment and alcohol allegedly sold for exorbitant prices. The store has charged customers about four times the supplies' suggested retail price. Face masks, gloves, goggles, alcohol, thermal scanners, test tubes, and syringes are among the overpriced items seized. If the owners of the store fail to comply with paperwork showing that the confiscated goods have been lawfully procured, they will face smuggling charges in breach of the Customs Modernization and Tariff Act (CMTA) (Limpot, 2020).

“Under the Consumer Act or Republic Act No. 7394, overpricing of face masks [alcohol, and PPEs] may be considered as an unfair and unconscionable sales act or practice since it involves taking advantage of consumers at this time of need. The Price Act (R.A. 7581) also considers this as an act of profiteering” (San Juan, 2020). R.A. 11469 or the Bayanihan to Heal as One Act also includes a provision that seeks to continue enforcing measures “to protect the people from hoarding, profiteering, injurious speculations, manipulation of prices ... of food, clothing, hygiene and sanitation products, medicine and medical supplies...”

This act of selling overpriced items violates Kant's Formula of Humanity as End in Itself. This law is stated as follows: “Act so that you use humanity, as much in your own person as in the person of every other, always at the same time as end and never merely as means” (Kant, 1785, p.46-47).

Selling overpriced items is an act tantamount to using people [who are the buyers] merely as a means to the sellers' selfish and opportunistic end. It, therefore, fails to respect the dignity and inner worth of human beings. This act [of overpricing] grossly undermines the right of customers to a fair and just price. Sellers are taking advantage of the high demand for medical supplies and equipment in times like this at the expense of

customers. More than ever, customers need to be given a fair and just price for every item they buy, especially during a crisis. The production and delivery expenses of medical items may have increased due to unexpected lockdowns, which consequently affected these items' prices, but selling these products three or four times higher than their usual price is too much and unfair.

Aside from violating Kant's Formula of Humanity as End in Itself, selling overpriced items is also considered a violation of the Formula of Universal Law. Surely, sellers of overpriced items would not want their suppliers to overprice them.

Overpricing is self-defeating. If sellers sell certain items significantly and inconsiderably higher than what the law sets, few people would be able to avail of them. For instance, if hospitals would be unable to purchase those overpriced medical supplies and equipment, it will render them defenseless and ill-equipped to fight against the virus for our own safety. If that would be so, and if our health facilities would be strained of healthcare professionals, no one would take care of us when we contract the virus.

5. Conclusions

During a time of national health emergency, more so a pandemic, some people would deliberately prefer to act outside the bounds of what is morally and ethically acceptable instead of cooperating and uniting with the government. Filipinos are no exception to this. News worldwide depicts certain acts that violate ethical standards, at least from the Kantian point of view. These acts include but are not limited to the violation of quarantine protocols, as in the case of Sen. Pimentel, refusal of hospitals to admit patients, discrimination against and harassment of healthcare workers and COVID-19 suspected and positive patients, propagation of misinformation, and selling of overpriced medical supplies and equipment. Specifically, these acts violate either Kant's Formula of Universal Law or his Formula of Humanity as End in Itself or both. Everyone could not adopt these acts; one act [overpricing] entails the use of human beings merely as means towards a selfish end, hence not moral.

Pure reason categorically commands that we ought to be always moral, whatever it takes and regardless of the circumstances that we are in. We have a moral obligation: (1) to strictly follow quarantine protocols,

especially when you occupy a key position in the government, (2) to admit patients to hospitals and medical clinics and provide them with appropriate initial medical treatment and support in emergency and serious cases, or transfer patients to a facility where appropriate care can be given to them, (3) to show affection, kindness, and compassion to healthcare workers and COVID-19 suspected and positive patients as it is never easy to be in their situation, (4) to post, share, and utter only accurate and verified information, and (5) to sell commodities at a reasonable and fair price and not take advantage of the situation. All these and more are necessary to pragmatically “cultivate one’s natural powers and tendencies to become a civilized member of civil society” (Kant, 1798, p.xxi) and exercise “discipline of one’s inclinations which is essential to refined social intercourse” (Ibid., p.xxiv), especially when the entire humanity is coming to grips with all the complex problems and challenges brought about by this COVID-19 pandemic.

Much moral re-awakening is still needed to remind each person that we can only be victorious in our fight against COVID-19 when we remain obedient to our duties and obligations towards humanity. Moreover, the only option we have is to be morally sensitive to what we do, such that we choose only to perform those acts which are worthy of emulation and acts that do not use others merely as means to certain ends.

Note

“The noumenally-good will is the autonomous will that as such wills the good. As a moral faculty, it gives the law (the CI) for imperfect beings and, by means of moral feelings, it is also a motivating force” (Schonecker & Schmidt, 2018, p.84).

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