TOWARDS AN ETHICAL RESPONSE TO COVID-19 IN MALAYSIA

We are a group of Malaysians involved in bioethics and medicine and have been following the progress of the COVID-19 pandemic globally and locally. Public health officers and healthcare providers are on the frontlines of this everchanging situation, where they have to adapt daily to allocate resources, mobilise the workforce, and coordinate services. Current public health measures, including the Movement Control Order, should be applauded but it is becoming increasingly clear that the system is going to be overwhelmed in the near future. It is inevitable that whilst traversing these unchartered territories, ethical issues will arise. These mainly arise in two specific contexts. Firstly, in managing the tensions between public health interests and individual interests; and secondly, in ensuring trust and trustworthiness. We believe that there is a need to address these and other critical ethical issues that will arise.

1. MANAGING TENSIONS BETWEEN PUBLIC HEALTH INTERESTS AND INDIVIDUAL INTERESTS

Situations such as the COVID-19 pandemic create considerable tensions between public health interests and individual interests. When designing policies and interventions that maximise common good (public health interests), it is vital to keep in mind the need for approaches and methods that minimise harm to individual interests, particularly the interests of vulnerable populations.

While restrictions on the rights and freedom of individuals are scientifically and ethically required to contain the spread of infectious diseases, measures must be put into place that ensure people are treated with dignity and that certain populations such as the elderly, the poor, the disabled, students and migrant workers do not bear a disproportionate burden of the risk. Hence, responses should be guided by the following ethical principles:

I. Justice

- Promoting equity fair distribution of benefits and risks, including limited clinical resources such as ICU beds and other medical equipment.
- Procedural justice there should be a fair and clear decision-making process and affected stakeholders should be provided with opportunities to be heard.

II. Respect for persons

- Treating individuals with dignity and more importantly in this context, providing safeguards for persons with particular vulnerabilities.
- Maintaining confidentiality of patients being treated by all parties, including civil society and individuals.

2. ENSURING TRUST AND TRUSTWORTHINESS

Ultimately, the success of any measure or intervention will depend on all stakeholders acting in concert with a sense of shared responsibility to coordinate responses. Decision makers must ensure that trust is not lost and that systems are trustworthy. This should include:

I. Transparency and accountability

- Open communication is key and effective alternative communication strategies should be explored to
 ensure that vulnerable populations such as the elderly, disabled, and migrant workers are able to
 access accurate and up to date information.
- o Lines of responsibility and accountability should be clear and transparent.
- Those seeking treatment for any kind of ailment should be upfront with healthcare workers about their history of contact with suspected or confirmed COVID-19 patients.

II. Good governance

- o Processes that promote efficiency, effectiveness and ethical decision making should be put into place.
- o All key stakeholders regardless of political, religious or community affiliations should be included.
- Adequate support for frontline workers by providing safe work environments, adequate accommodation arrangements for those who need to be mobilised and assistance for family members and moral support.

We hope that the points emphasised in this statement will enhance ethical thought processes, thus leading to thoughtful deliberation and decision-making during this difficult period of time. Each of us will continue to work with all stakeholders in ensuring that the Malaysian response to COVID-19 will be a success.

Dr. Aimi Nadia Mohd Yusof

A/Prof. Dr. Azanna Ahmad Kamar

A/Prof. Dr. Cheah Phaik Yeong

Dr. Chong Lee Ai

Ms. Kanny Ooi

Dr. Liew Houng Bang

Dr. Lydia Aiseah Ariffin

Dr. Mark Tan Kiak Min

Prof. Dr. Maude E Phipps

Datuk Dr. Mohamed Hatta bin Mohamed Tarmizi

Dr. Mohammad Firdaus bin Abdul Aziz

Dr. Muhamad Zaid bin Muuti

Prof. Dr. Ng Chirk Jenn

Dr. Nishakanthi Gopalan

Dr. Peter Gan Kim Soon

Dr. Sharon Kaur

Dr. Tan Ru Wei

20 March 2020 2200H