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Letter to the Editor

Mental health ethics in COVID-19 vaccination

One of the crucial lessons learned during the 2020 experience of the coronavirus disease (COVID-19) pandemic is to acknowledge the "virtues of an integrated global response" (Tandon, 2021). The broad conception of the virtues can be specified through the current vital procedures of vaccine rollouts and their possible effects on mental health. Several issues can be gleaned from the vaccinations conducted or to be facilitated by individual states, especially the difficulties encountered in its distribution for low and middle-income countries (LMICs) (Nature, 2020) and the movements that countermand state health protocols and programs (Ransing et al., 2021). The correlation points not only to an "increase in the burden of COVID-19 infection but also mental health issues in poorer and marginalized people" (Ransing et al., 2021). This correspondence article aims to shed light on the COVID-19 mental health issues to a framework of mental health ethics.

Following Amartya Sen's model of framing public health to public health ethics, mental health ethics in COVID-19 vaccination can be outlined on the basis of an 'open-minded epistemology' that carries out the evaluation of vaccine properties (e.g. effectivity, cost-efficiency) and experiences from those who have been inoculated – at the moment, with the priority of to the healthcare workers and elderly. Mental health ethics, in this sense, allows for a candid juxtaposition of statistics or global references and anthropological or local perspectives (Anand et al., 2004). This model can breed virtues that integrate global frames to individual decisions for vaccination. An ethics of vaccination alone distinguishes patterns of choice that may be adapted to the state, collective, and individual levels (Giubilini, 2020). With reports on vaccine side-effects outside the usual headache, fatigue, and dizziness, in the likes of clots and even deaths, there is a need to doubly examine clinical or experiential results or autopsy outcomes. Mental health ethics considers specific modes of thinking that allow vulnerable groups to crosscheck phenomenological or anthropological data with numerical probabilities of vaccine effectivity. An emphasis on vaccine independence has to be made but this must not be restrictive but fully aware of the options, resources, and effects.

Among the mental health ethical considerations in US Policy are 1) justice, access, and utilization of services and support, 2) preventing harm, and 3) privacy and relational autonomy. The focal point is "on balancing the benefits to the individual and society achieved by involuntary treatment and unwanted disclosure of information against the affront to individual liberty and privacy that they entail" (Bonnie and Zelle, 2019). In LMICs, particularly in Asia, additional ethical considerations can accommodate specific psychiatric help in extremely vulnerable cases (De Sousa et al., 2020), stigmatized (Ori et al., 2021; Kahambing and Edilo, 2020), and otherwise through public health interventions for example in prisons (Kahambing, 2021) or suicide cases (Egargo and Kahambing, 2020).

The need for mental health ethics for vaccination calls for a model that does not necessarily refer to consequentialist or utilitarian models (Liégeois and Van Audenhove, 2005), but on a consistent prudential intervention that weighs in data both as perceived scientific effectiveness and their actual import from vaccinated individuals. This is not to limit the model to a value-based approach, which can mutate in circumstances that warrant different prioritizations. Instead, mental health ethics must adopt a virtue-based method that allows transparency, urgency, and consistency that should be reflected in law, policy, and vaccine independence. Hesitancies and refusals come from different fronts, even from healthcare workers or medical professionals, but the element of time is crucial here in making known available data that prioritizes an integrated response – one that is conscious of its fidelity not just to scientific analysis but also to empirically-derived evaluations from individuals themselves.

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Declaration of Competing Interest

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