

The Quarantine Policy of the Philippines in Ross Upshur's Ethical Principles

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Abstract: The advent of COVID-19 specifically in the Philippines challenges the country's readiness in responding to a life-threatening pandemic. The scarcity of vaccines and the limited medical resources of the country directed the government to subject the COVID-19 patients to quarantine health facilities to mitigate the curve of infections. Although practical and efficient, this quarantine measure imposed by the government is not exempt from controversies and issues in terms of possible violation of one's freedom and liberty. In trying to address the issue, this paper aims to explore the quarantine policy of the country as stated in the Omnibus Guidelines on the Implementation of Community Quarantine (2020 & 2021). The set guidelines was used and re-examined in the light of the Four Ethical Principles of Quarantine by Ross Upshur (2003) such as the harm principle, proportionality, reciprocity, and transparency. In the final analysis, the paper aims justify whether or not the quarantine health measures of the Philippine government in mitigating the increasing number of COVID-19 infections in the country are reasonable and ethically sound and thus forbid any type of discrimination as well as violation to individual's liberty and freedom.

Keywords: Ethics, Philippines, COVID-19, Omnibus Guidelines on the Implementation of Community Quarantine, Bayanihan to Heal as One Act, Ross Upshur

1. Introduction

The year 2020 has been very challenging for humanity across the globe. The year is plagued with reported events such as the destructive massive wildfire in Australia which terminated a huge number of animals, the locusts' attacks in the agricultural field of Kenya which causes the shortage of foods, the conflict between America and Iran, the war between Afghanistan and the Taliban group and recently the worldwide health crisis of coronavirus or the COVID-19 pandemic [1]. As the infection increases every day and spreads like wildfire, many countries shut down their borders including the Philippines. In his address to the nation, President Rodrigo Roa Duterte announced the implementation of lockdown:

We are in a critical time... enhanced quarantine for Luzon because the magnitude of the threat that we are facing calls for it... severely restricts the freedom of movement of our countrymen and thus deprives many people of their ability to earn a living for the coming weeks... I don't think it is just a

quarantine. I think that we are already in the stage of a lockdown simply because the contagion continues to take its toll in the countryside... Better still, just keep your distance from strangers or friends. Just so na maputol 'yung contamination from A to B, B to C. Kay D putulin natin doon. 'Yun ang maganda (It is better to cease the contagion...) ... So, it's the social intercourse that is bad at this time. I hope you can understand us at maintindihan rin ninyo kung ano ang ginagawa namin (and understand what we are doing) [2].

The above pronouncement of lockdown in the Philippines was in response to the World Health Organization (WHO) protocol and safety measures to alleviate the virus infection in the country. Included in the protocol which was adopted by the Philippines is quarantine, from which according to the WHO, involves the restriction of movement, or separation from the rest of the population, of healthy persons who may have been exposed to the virus, to monitor their symptoms and ensure early detection of cases as well as safeguarding the rest of the not infected populace [3].

The quarantine protocol imposed by the government in times of outbreak has been an automatic health mechanism. For centuries, it has been a public health practice implemented by the government against communicable diseases such as the SARS epidemic, tuberculosis (TB), and recently the COVID-19 virus. The term is Italian in origin "*quaranta*" which was first introduced in 1377 in Venice during an epidemic outbreak where the suspected patient shall be confined to a government quarantine facility for 40 days [4].

According to Social Science in Humanitarian (SSH) as cited by Estadilla (2020), there are safety measures and protocols on how to prevent further transmission of the virus. This measure includes quarantine, isolation, and social distancing which can be implemented by the authorities. Although the safety measures are related, they are distinct by nature. Quarantine is the separation of the exposed person of the virus for a certain incubation period while isolation is the separation of the infected person from the rest of the populace as much as the person is still infectious and physical distancing is a restriction of people from any social gatherings [3].

These quarantine measures imposed by the government shall be understood not solely as a restriction of social mobility but rather designed by the government in promoting the overall well-being of the public which includes providing their necessities as well while in quarantine period [5]. When these things are met according to Coleman as cited by Spitale (2020), the quarantine protocol is not only logical and practical but humane [4]. Having posited that, Gostin *et al.* (2003), remarked that the reasonableness of the protocol is grounded also on "justice and fairness" [6]. Sharp (1898) during the Eyam outbreak in Europe makes use of the restriction by instructing the people to stay in the city to mitigate the infection of the disease while requesting the Earl of Devonshire to provide them with the necessities while on quarantine [7].

Although it is proven effective for managing communicable diseases, it raises the question of whether or not it limits one's freedom and liberty. In response to the ethical applicability of the quarantine protocol during the pandemic, Upshur (2003) offers four (4) ethical principles that need to be satisfied. Firstly, the harm principle which states that the human-to-human transmission of the disease shall be significantly measurable. Secondly, the proportionality principle from which the government shall enact the least or coercive means of safety health measures in managing the disease. Thirdly, the reciprocity principle in which the public must be adequately compensated especially in their basic needs while the quarantine period is observed, and finally, the transparency principle from which the government must see to it that this information must be clearly explained and disseminated with the assurance that in case of conflict and confusion, the public can freely and deliberately file an appeal [8]. Using the above framework, this paper aims to feedback on whether or not the quarantine protocol implemented by the government during the COVID-19 pandemic is ethical.

2. The Quarantine Policy in Ross Upshur's Ethical Principles

2.1. The Harm Principle

The identification of the COVID-19 delta variant posed great alarm in the country. Within the previous months of 2021, the cases of COVID-19 infections are increasingly significant. According to the report of Rappler from the Department of Health bulletin board, as of October 19, 2021, the Philippines recorded a total of 2, 731, 735 new cases of COVID-19 while 63, 637 active cases and a total of 40, 972 deaths [9]. In addition, the effects of COVID-19 in the country are extensive and threatening, thus paralyzing the different sectors of the society such as the healthcare system, economic, and social service sectors. The disruption of the health care system due to the increasing number of COVID-19 infections, for instance, challenges the quarantine and treatment of both the suspected and confirmed patients making almost all the hospitals and quarantine facilities of the country in critical condition. The reports of both Rappler and Reuters confirmed that the exponential curve of COVID-19 burdens not only the functioning of the existing medical system but also overloaded the task of medical health professionals [10] which eventually paralyzes the existing function of the hospitals and the overall health care system as well [11]. The report of Pazzibugan to the Philippine Daily Inquirer reiterated the instruction of the Department of Health (DOH) to the public to adhere to the minimum health standards as crucial support to vaccination efforts to prevent the further transmission of COVID-19 and its variants. She added that 95 percent of the country was placed under alert levels 4 and 3 because of the overwhelming surge of patients from which the majority of the hospitals are in maximum usage capacity [12].

In a press release by the DOH on July 22, 2021, the government further intensified the COVID-19 response with local transmission of the delta variant by continuously enforcing strict border control measures. This is the subject of the updated Omnibus Guidelines on the Implementation of Community Quarantine in the Philippines issued on August 19, 2021, by the Inter-Agency Task Force for the Management of Emerging Infectious Diseases (IAFT) which mandates the said agency to regulate and re-enforce a systematic implementation of effective quarantine and proper isolation procedures in managing the spread of emerging infectious diseases in the country [13]. In situations where there is a huge number of infections and death toll and the public health is at risk and the scarcity of medical resources, it is only logical and humane that quarantine policy be implemented.

2.2. The Proportionality Principle

In response to the increasing number of COVID-19 infections in the country, the Inter-Agency Task Force for the Management of Emerging Infectious Diseases (IATF-MEID) issued Omnibus Guidelines on the implementation of community quarantine in the Philippines on March 20, 2021.

The guidelines facilitated the health protocols implemented by the government in managing and controlling the spread of epidemics in the country. The categorization of the said guidelines to the different levels of quarantine protocol is proportional to the number of virus infections. These measures include the Enhanced Community Quarantine (ECQ), General Community Quarantine (GCQ), Modified Enhanced Community Quarantine (MECQ), and the Modified General Community Quarantine (MGCQ) [14]. For instance, on March 16, 2020, the government implemented the ECQ in Luzon to contain the rising COVID-19 infections. Under this protocol, the public is advised to remain at home while restricting and regulating the mobility of all transportation and business transactions [15]. On the other hand, a downgraded quarantine protocol is implemented when there is a decreasing number of cases. Under GCQ quarantine implementation for example on June 01, 2020, Metro Manila was put under relaxed health measures in which social mobility and business transactions were allowed in certain conditions [16]. Thus, according to Coleman, the different quarantine classifications imposed by the government in response to the COVID-19 cases may establish the said principle [17].

2.3. Reciprocity

The devastating effects of the COVID-19 across the globe including the Philippines created a much worrying situation not only endangering one's life because of the threat of COVID-19 infection but also the disruption of economic life and livelihood. In response to these long-term adverse effects, the government created Senate Bill No. 1418 on March 23, 2020, also known as the Bayanihan to Heal as One Act that declares a national emergency in the entire country thus, proposes a policy in response to the COVID-19 pandemic [18]. The crafted policy especially under section 3 aims to (a) alleviate or minimize the transmission of COVID-19 infections, (b) provide financial assistance in sustaining the necessities of affected families or individuals because of quarantine protocol, (c) support and provide adequate protection of all health workers of the country, (d) ensure that the foregoing assistance of all affected individuals shall be promptly and efficiently distributed to all concern citizens of the country [18]. The Senate Act according to Vallejo and Ong is stipulated as a Social Amelioration Initiatives which mandates the grants of special powers to the executive department to effectively and efficiently assist both the private and public hospitals in the procurement of medical resources and health professionals [19]. In return, the said Act also directs all hospitals to expand their facilities and cater as much as possible to every COVID-19 patient. In addition, the Act mandates due compensation for health professionals as well as to low-income households while observing the quarantine health measures [19].

2.4. Transparency

On January 30, 2020, the World Health Organization (WHO) through the Public Health Emergency of

International Concern alarmed all nations of the possible outbreak of coronavirus and instructed them to make a necessary precautionary measures to prevent and regulate more devastating effects of contamination [20]. In response to the call of global health emergency, the Philippines issued a series of Omnibus Guidelines in managing the COVID-19 disease situation from March 03, 2020 to October 18, 2021, from which the resolutions were just modified and intensified according to the surge of COVID-19 infections [21]. The imposition of the required quarantine protocol is discussed by the government from the consolidated feedback and recommendations of the local government. It is but legitimate to posit that the quarantine protocol of the country is a result of a series of consultations and deliberate discussions of people involved or represented. The information is disseminated from the social media to the local government to alert the members of the community in compliance with the said protocol. It is not also an assurance that every citizen will religiously follow the instructions, for a democratic country, noncompliance is always an issue [4].

In times of health crisis such as the COVID-19 pandemic, it is only desirable that an effective and efficient strategy be employed to refrain the public from the risk of virus exposure which subsequently results in morbidity and mortality. The quarantine protocol may be a blunt instrument in managing a pandemic, nonetheless, in situations where there is a scarcity of vaccines and medical resources, quarantine measures can be useful and practical. On the other hand, despite its usefulness, the effectiveness of quarantine is not exempt from issues and controversies [8].

3. Conclusion

The pandemic of the century forces the government to adopt safety health measures such as isolation and quarantine to stabilize the devastating effects of the virus while promoting the public good and considering individual liberties at the same time. However, despite the government efforts to contain the spread of the coronavirus, the casualties are still at a distressing percentage. According to the study of Pajaron and Vasquez (2021), the Philippines as reported has the highest number of COVID-19 cases and death rate among ASEAN countries. One contributing factor which affects the increase of COVID-19 cases is the unclear guidelines and insufficient information from the government in the implementation of quarantine protocol which resulted in confusion and misinformation of the public [22]. Transparency on the part of the government is necessary to get the confidence of the public while encouraging them in the deliberate participation of the containment measures [6]. Nevertheless, despite the controversies it carries, when imposed in orderly and non-discriminatory procedures in fighting a pandemic like the COVID-19, it can be reasonable and humane and it does not curtail one's freedom and liberty [23]. With the uncertainty of the times and the lack of a medical cure, it is only practical that the government with the

help of the health professionals secure a health strategy in controlling and flattening the curve of infection to safeguard the public. At times, the actions may not favor individuals especially when economic life is affected, but it is also unreasonable to make it as an excuse for deviating the control strategy [8].

4. Recommendations

A further study can be done using the ethical quarantine framework of Ross Upshur (2003), to evaluate the quarantine policy in prison during the COVID-19 pandemic.

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