

COVID-19 Vaccines Derived from Human Cell Lines of Illicit Origin: A Moral Assessment

Deacon David H. Delaney, PhD
Director & Senior Fellow
Mother of the Americas Institute
28 July 2020

The COVID-19 pandemic caused by the novel SARS-CoV-2 coronavirus has given rise to an unprecedented, global effort to develop, test, approve and deploy a vaccine to combat the diseases' severity and lethality. While most vaccines in development that are showing promise are not problematic, the Charlotte Lozier Institute identifies five promising candidates which are derived from two illicit cell lines derived from aborted babies.¹

The first illicit cell line is HEK293, which was derived from kidney cells of an aborted child around 1972. The second is the Per.C6 cell line, a Johnson & Johnson proprietary cell line taken from an 18 week old unborn baby in 1985.² Two of the five unethical vaccine programs have received US funding, including one cosponsored by the University of Oxford, UK and Astrazeneca in the US (using the HEK293 line) and the other by Janssen Research and Development, Inc. a subsidiary of Johnson and Johnson (using the Per.C6 line).³

The unprecedented global response to this pandemic, including world-wide stay-at-home orders earlier this year evidences a universal concern of governments for controlling the pandemic. A second surge that began in the US in June 2020 has led an increased sense of urgency for a vaccine, viewed by many as necessary for effectively controlling the pandemic.⁴ For vaccine efficacy in protecting immuno-compromised people, there will likely be a great amount of social pressure to try to obtain a 100% vaccination rate for those who can do so safely. In fact, it is likely that, at least in some places, there will be threats of punishment for those who refuse vaccination. These considerations suggest that several ethical questions concerning COVID-19 vaccines will soon need to be addressed:

- May individual Catholics make use of COVID-19 vaccines derived from aborted babies?
- May pastors advise Catholics that they may use COVID-19 vaccines derived from aborted babies?
- May pastors direct Catholics to cooperate with State mandated reception of COVID-19 vaccines regardless of the vaccine's origin?
- May individual Catholics object in conscience from State mandated reception of vaccines derived from aborted babies?

Let us first review the Magisterial documents relevant to these questions. Pope St. John Paul, in his encyclical *Evangelium vitae* (EV), made it clear the Church has always taught that abortion is an "unspeakable crime" (EV 58).⁵ The Congregation for the Doctrine of the Faith (CDF) also issued two relevant interventions relating directly to the problem of biomedical research and human fetuses. In 1987, Joseph Cardinal Ratzinger signed the CDF's Instruction *Donum vitae* (DV) on respect for human life in procreative biomedical research.⁶ In this document, the Church reminds us that the body is inseparable from the soul in God's design and so body and soul are also inseparable in terms of moral evaluation. Such moral analysis demands the human person be

viewed as a “unified totality” (DV 3). In other words, the body cannot justly be treated as an object for manipulation, rather what is done to the body is simultaneously done to the person himself. The respect due to the human person begins at the point of conception and never ends (DV 3, 4, 5). As such, respect is also due to the human remains of a deceased person, and this respect for the deceased person’s body also applies to that of human embryos and fetuses. Therefore, all commercial trafficking in embryonic and fetal remains is illicit and must be prohibited (DV 5.1.4). This last point is critical because it says that moral responsibility is not eliminated for those involved in vaccine research, testing, production and distribution of biological material obtained from aborted babies simply because they have separation from the actual abortion itself.

In 2008 the CDF again, this time headed by William Cardinal Levada, issued the Instruction *Dignitatis personae* (DP) concerning bioethical questions which had arisen in the twenty years since *Donum vitae*.⁷ DP reaffirms DV’s teaching on the demand for respect of the embryonic human body (DP 4). It also affirms that every human embryo has the inviolable dignity unique to the human person (DP 5). It directly addresses the use of embryonic cell lines obtained from abortion for the development of vaccines, explicitly citing DV’s principle of the respect demanded for the corpses of human embryos and fetuses, regardless of whether they were aborted or not (DP 35). In this regard, it warns that the “criterion of independence” whereby research is claimed to be licit when there is clear separation between those who commit the crimes directly against the embryonic person and those who do subsequent research, to be insufficient (DP 35). This separation is necessary, but it is insufficient to permit liceity.

The CDF teaches that one cannot simultaneously claim to reject the injustice of the sin against the embryonic person while at the same time accepting its results for his own research.⁸ Therefore, to avoid the scandal of approval or indifference, Catholics must distance themselves from this system. There are varying degrees of responsibility in this regard. Researchers have a *duty* to remove themselves from the use of unjustly acquired “biological material” (DP 35).⁹ Those responsible for the decisions to use objectionably acquired cell lines have a *grave* responsibility. Those involved in the healthcare industry also have an *obligation* to make their moral reservations known and to resist in the use of objectionable vaccines when possible. However, those who have no say in the matter, are most morally distant from cooperation in this evil and so when a greater evil must be avoided, might make use of objectionably obtained vaccines (DP 35). Here DP indicates that all material cooperation in research, development, production, distribution of products from illicit material is mediate and scandalous and prohibited. It also suggests that while medical professionals have the obligation to resist and publicly voice their opposition, they may use such products when absolutely necessary and there are no other options. Patients have the least responsibility and can receive such vaccines in the circumstances medical professionals may provide them (grave need and no other options).

Perhaps the most detailed and relevant Magisterial treatment of this question came in 2005 from the Pontifical Academy for Life (PAL), which was commissioned by the CDF.¹⁰ The PAL responded to a request for clarification on the problem of vaccines developed from aborted children, which was asked by the Executive Director of the US, pro-life apostolate Children of God for Life. The document provides a helpful primer on the various degrees of cooperation with evil. It explains that formal cooperation, which includes the consent of various actors in the evil act is always

illicit. It also explains material cooperation to be any activity that permits an evil act to be carried out, without the actor consenting to the evil intention. There are various levels of material cooperation: immediate or mediate, proximate or remote. Immediate material cooperation is aiding in the execution of the sinful act itself, mediate is somewhat removed as it only provides those conditions necessary for the act to be brought about. Proximate or remote describes the distance in time, space, or material connection between the sinful act and the activity that comprises the material cooperation. There is also the distinction between active and passive participation. “Active” refers to performing some act in the material cooperation, “passive” refers to omission from an act of denunciation or providing some other form of impediment to the act when there is a moral duty to do so. Only remote, mediate, material cooperation can ever be permitted. When it is licit, it falls under the analysis of double effect. That is, the evil to be avoided must be much greater than the evil permitted (but it cannot be intended, i.e. material cooperation).

The 2005 PAL document then assesses the specific question of the use of vaccines coming from embryos or fetuses which were aborted. It reminds us that there is the possibility of formal cooperation that is passive and remote, and this is always grave and illicit. We can never approve of (or fail to condemn) the act of abortion or the misuse of the corpse of the aborted child to obtain the desired cell lines, both of which are grave moral evils. However, when it turns to production of vaccines themselves, the PAL assessment focuses on the problem of scandal. It assesses the different levels of participation. The document suggests that material cooperation in the abortion after the fact is a problem of scandal. That is, to actively or passively cooperate in the use material from the corpse of aborted babies would be to help perpetuate an evil structure of sin that continues to abort babies (even somethings subjecting them pre-abortion to infection with specific pathogens of concern) by leading others to believe there is nothing wrong with it. It does not explicitly include the illicit cooperation in the abuse and trafficking of the embryonic person’s corpse through the research, development, production and distribution of derived products, which should have been included in the assessment.

The PAL assessment states that the preparation, distribution and marketing of vaccines from the biological material of aborted children is always morally illicit in principle because of its proximate, active material cooperation in the social structures of sin that kill the unborn and traffic in their corpses.¹¹ It is important to note here, that the material cooperation addressed here is not implying material cooperation in the acts that brought about the abortions for the cell lines the document is addressing. Rather, it asserts that one still cooperates in evil to some degree by actively or passively cooperating in the current social structures of sin that perpetuate such systems without regard to their moral objectionability. As we stated, the document explicitly refers to the problem of scandal. Later, I will discuss more explicitly the problem of active and passive material cooperation in the social structures of sin which abuse and traffic in the corpses of aborted babies.

The 2005 PAL document goes on to address subsequent manufacturers of vaccines (not necessarily involved in the original research, development and testing) who fail to publicly condemn the sources of the cell lines. They are passive, material cooperators because they have the obligation to intervene in the structures of sin that make such abortions and subsequent abuse and trafficking possible. Therefore, their passive material cooperation is also always illicit.

This again is an important point, each person involved in subsequent manufacturing and development of biomedical products (here vaccines) is guilty of illicit passive material cooperation by failure to intervene in the process of production and marketing/distribution of illicitly developed products.

The document finally addresses doctors and patients of vaccines (in the case of the 2005 PAL document, the assessment focuses on the question of children's vaccines, so the parents of the children are addressed). Assuming formal cooperation is ruled out, doctors and parents would fall into the category of remote, mediate, material cooperation. This is the only case in which double effect analysis would apply. It requires that there be no other options to avoid seriously harming oneself or the greater population. The cooperation is active because it is contributing to the revenue stream which perpetuates this social sinful structure.¹² The analysis reminds that passive cooperation must be avoided, so doctors and families have the obligation to condemn the morally illicit sources of the vaccines and demand morally licit vaccines be developed. Thus, only the personal prescribing by doctors and use by patients may under certain conditions (i.e. those that meet the criteria of double effect) be morally licit. The research, development, production, and marketing is proximate, immediate, material cooperation and is always illicit. The document affirms that putting families in the position of having to choose to cooperate with evil, even in the most remote sense, is an unjust coercion of conscience which must be immediately removed. Therefore, pressure must be brought to bear on the social structures that promote or permit the use of aborted babies for biomedical research.

Let me now return to the question of material participation in the social structures of sin that promote or permit the trafficking and abuse of the corpses of unborn children, especially those who suffered the grave crime of abortion. The Catechism of the Catholic Church indeed warns about the scandal which comes from social "structures of sin" (CCC 1869). It teaches that Catholics have a moral obligation not only to avoid participation in these structures of sin when possible, but to do all we can to change them (see CCC 1888). Therefore, there are two issues we must take into consideration. First is the material cooperation in the social structures of sin that permits the system of abortion for the sake of research and development to continue. Because this is an intrinsic evil, only remote, material cooperation can be permitted under the criteria of double effect. This point is important because one may not attempt to avoid scandal by condemning the practice while still cooperating in these sinful structures closer than that of doctors and patients (again only when permitted by meeting the criteria under the doctrine of double effect) because the structure is illicit in itself.

And there is also the problem of scandal by those who participate in this material cooperation itself, which teaches the world that there is nothing wrong with this sinful social structure. Scandal must not be misunderstood in its colloquial sense of shock, nor in its sense of opening the Church to criticism or condemnation. Rather, scandal means that an action can promote the sin by appearing to condone the sinful actions/structures by cooperating with them, or at least by not condemning them when one would be expected so to do. The gravity of the sin of scandal is proportional to the gravity of the sin abetted and the degree of moral obligation to avoid the scandal. One may not simply dismiss the problem of scandal by opining that "no one is going to think this" or "to act that way." This is because scandal exists in the objective state of contradiction between one's actions and a morally just way of acting. Scandal does not require

an actual subjective appropriation of the contradiction and subsequent sinful action to make it a sin. It only requires that the object state of contradiction exists so that it is possible that even one person could be led astray if he were to become aware of the actual state of contradiction.

We now are prepared to turn to the questions posed earlier, making use of the Magisterial assessments and my additional clarification, in order to address the questions in the order presented above:

1) *May individual Catholics make use of COVID-19 vaccines derived from aborted babies?*

In certain cases, it may be permissible under the principle of double effect. However, urgent and grave need while a necessary criterion for double effect, is not sufficient in itself to justify such use. Intrinsic evil may never be done that good may come from it. Nevertheless, let us first consider the urgency and gravity of the need. COVID-19 can be a dangerous disease because it is new and there is no natural immunity, we do not understand it well, there is not yet an effective vaccine, there is perhaps 15% of the population (especially those with certain underlying medical conditions) which make them susceptible to an overresponse of their immune system called a cytokine storm, and its ease of transmission is greater than the standard flu though less than the measles.¹³ These, and perhaps other factors, have resulted in a worldwide pandemic and an unprecedented effort to develop an effective vaccine. There are now many promising candidate vaccines in various stages of testing. The seriousness of COVID-19 makes an effective vaccine a grave need, which meets one of the criteria necessary to permit this under the principle of double effect.

If there are other morally licit, viable options then it would not meet the second criterion of double effect, and so doctors and patients both have the obligation to ensure they use the vaccine(s) derived from morally licit sources. Use of vaccines derived from aborted fetuses would be illicit in the case of morally licit, alternative vaccines. However, if there are no morally licit alternatives then the second criterion is satisfied under the principle of double effect. The third criterion which must be satisfied is that the proportion of good achieved or evil avoided by the cooperation must be much greater than the evil of cooperation.

Evaluating the proportion of good to evil may be complicated in a number of cases. For example, if there are both morally acceptable and morally illicit vaccines available, but the more efficacious vaccine(s) is(are) from morally illicit sources, the criteria that no morally licit alternative options becomes clouded. In this case, a professional advice may be required on a case by case basis to determine the proportion between the good in terms of risk and benefit versus the evil of cooperation. For example, it could be that the less effective but morally licit vaccine's effectiveness is adequate to contribute to herd immunity and the probability of effectiveness is adequate for those who are at lower risk of serious symptoms. In such a case, the patient would have the obligation to use the lower efficacy vaccine derived from morally licit sources. However, it is also possible that someone with underlying medical conditions, because he is at much greater risk of severe or deadly symptoms that the use of the more effective, morally problematic vaccine could be licit under the principle of double effect, if its effectiveness is significantly greater than the morally acceptable vaccine.

There also may be considerations in favor of the morally problematic but higher efficacy vaccine for those who work in hospitals, especially in COVID-19 units, those whose work brings them into regular contact with high risk patients, or those whose work brings them into contact with great numbers of people and make them potentially more potent vectors for transmitting the disease if they were to catch it. When the risk is to primarily to one's person, such patients could also refuse to cooperate with evil as a matter of conscience in order to witness to the gravity of the sinful social structures of abuse and trafficking in the bodies of aborted children. Yet, when the risk is primarily to others, then this could weigh in the direction of licit and perhaps even morally indicated use of the higher efficacy vaccine.

There may also be the consideration of cost. It is possible that circumstances conspire to make, for at least some Catholics, access to morally acceptable vaccines cost prohibitive while morally problematic vaccines are affordable or free. In such cases, the double effect analysis could consider that for those people for whom the morally acceptable options are cost prohibitive, there are effectively no morally licit options. In other words, if the morally acceptable vaccine is truly not affordable for someone then the affordable but morally problematic vaccine could be considered to be the only option available and so provide the necessary second criterion under the principle of double effect.

These are all future, hypothetical situations. Catholics must be made aware that it is not permissible for us to sit back and passively accept potentially being put in morally problematic situations due to the indifference or abetting of government and biomedical industry leaders. Even if double effect could permit the use of morally problematic vaccines, Catholics may not take a legalistic viewpoint and assume that if it is permitted there is no problem with it. Even under double effect, there is still cooperation with evil which we have a grave obligation to avoid if at all possible. To cooperate passively now by saying and doing nothing when we have the opportunity and obligation to do so, is itself morally problematic and so many Catholics may already be morally culpable through passive cooperation.

2) *May pastors advise Catholics that they may use COVID-19 vaccines derived from aborted babies?*

Pastors may advise the faithful that they may use morally problematic COVID-19 vaccines only by explaining to them when it is permissible, what are their obligations, and by taking all prudent actions to avoid scandal. They cannot mislead their flocks by implying a legalistic or morally problematic situation to be true. For example, they must not simply say go ahead and use a morally problematic vaccine because the pandemic is such a threat. While this may be an easy way, it is an error, it is a cause of scandal because it misleads them about their cooperation with the evil of trafficking and abuse of the corpse of an aborted child, it fosters the legalistic-dichotomist mindset of our society, and it fails in the moral obligation of pastors to help form the faithful to understand and carry out the moral obligations of Christ's disciples.

It is important to realize that we live in a society steeped in legalism and so many Catholics have been habituated to think in dichotomous terms. For example, if it is not prohibited then there is no problem with it. Moreover, there is a prevailing notion of legalism (or legal positivism) that results in the mistaken notion that if the individual does not immediately see for himself the rationale governing a law/rule (even without having to exercise the effort of research, of study,

of seeking the advice of knowledgeable experts, and exercising discernment) he is justified in ignoring it. We are not habituated to being careful about not trying to justify or rationalize our position simply because we disagree with a law/rule because it is inconvenient, difficult or seemingly unfair. Such legalism further inclines us to feel free to disregard laws/rules/policies as long as we can avoid negative consequences. This prevailing mindset needs to be addressed in developing strategies to guide the faithful effectively. In these circumstances, the faithful must be brought to understand that even under the principle of double effect, they are still cooperating with evil and so have the obligation to do everything they can to avoid having to make a choice based upon double effect. They also need to be shown why double effect is not relativism or the pernicious moral theory called proportionalism.

Pastors must themselves not presume upon the option of double effect in order to make things easier or less complicated. We have too long assumed the faithful cannot apprehend complex issues while at the same time abandoning to them the responsibility for making their own decisions about such complex issues. This has helped to foster the prevailing legalistic mindset of our society among the faithful because they have never learned the Church's precious wisdom of authentic moral discernment. Moreover, without this formation they have been influenced by the prevailing elitist mindset of our media which has trained us to have to be told what to think because the masses are not thought able to reason to the "correct" answer for themselves. The result is that too many Catholics look for quick answers, and find them by embracing the political, economic and ethical ideologies of the predominant political, economic and ethical theories present in society and promoted by the various media to which they are accustomed to consuming. Because of poor formation and the neglect of the pastoral responsibilities to form the faithful, pastors' voices even when formed by the wisdom of the Church are summarily dismissed as simply one political/economic/ethical opinion among all the other ideologically formed opinions promoted in the media.

Perhaps we might employ this as an opportunity to form Catholics in the moral sciences of the Church: both individual morality and social morality. Such an effort could contribute to promoting authentic moral discernment on other important moral matters in which today most Catholics simply align with the prevailing, problematic opinions given to them by media and other sources. Here I am thinking especially of laws, policies and programs affecting the dignity of the human person such as the right to life, religious freedom, the redefinition of marriage, the redefinition of sex difference, capital punishment, pornography, human sex trafficking, immigration, all forms of unjust discrimination, environmental stewardship, etc. Catholics will be better able to influence, formulate, promote and/or vote for candidates, laws, policies, programs, etc. that conform to the authentic human person and authentic common good. They will be equipped to take up their vocation and proper competence to promote the Kingdom of God in the temporal sphere. Without Catholics first understanding the wisdom of the Church about the human person and then promoting it in society, it seems we will be left perpetually having to choose between the lesser of two evils, each the product of partial truths and faulty ideologies while societal order continues its precipitous downward spiral.

Another reason that pastors may not provide a broad determination of "yes" is that they have a different problem than an individual Catholic in terms of assessing double effect. This is because pastors, at different levels, can increase the level of cooperation in the evil of trafficking and

abuse of the corpses of aborted children because of the number of people they can reach. For the principle of double effect to be used, any material cooperation must remain remote and mediate. However, the general affirmative determination by pastors to use a morally problematic vaccine could cause a sufficient number of people to make use of it (e.g. this could be the case with bishops of dioceses, or all levels of clergy who have wide followings in social media) so that the vaccine becomes economically viable when their warning against it could cause enough resistance to using the vaccine that the resistance makes it too financially risky or even unviable to produce. Here a positive determination then would become immediate cooperation in the evil because the evil of production and distribution could not be effected without it. For this reason, pastors may not licitly give a broad “yes” determination. Indeed, to avoid passive cooperation they must consistently, publicly explain the moral evil of these structures of sin and Catholics inability to cooperate with it. Again, this militates only toward giving positive advice on a case by case basis and/or to form Catholics to do the moral analysis themselves or with some assistance.

Another consideration limiting a general response to the faithful is that there are also many vaccines in many different phases of development. It is possible that early, widespread acquiescence to a morally problematic vaccine could prevent morally licit vaccines from reaching the market. This might happen when pastors’ affirmation that it can be used helped to put the morally problematic vaccine in a dominant position. If morally licit vaccines are too far behind without providing some other unmet benefit than the morally problematic vaccine that has already gained a foothold, the cost-risk analysis could cause the decision makers at the pharmaceutical company making morally licit vaccine to abandon further development and testing. This is another factor indicating that pastors should advise their flocks that moral assessment must be made based upon individual circumstances, based upon the state of affairs in place when the decision to vaccinate or not must be made. Thus, pastors cannot safely provide general, simple guidance to their flocks because the complex and changing situation make it highly unlikely that use of morally problematic vaccines would always be morally licit.

In order for pastors to be prepared to meet successfully the impending need to assist the faithful with the complex moral assessments that must be made, they should begin now to develop adequate resources to provide resources for formation and assistance in decision making. This means forming a sufficient number of people with competence to teach, advise, and to take individual questions. Pastors should also consult medical specialists who can advise them and others on the origins, probable efficacy, risks, and likelihood of helping to end the pandemic associated with the vaccines that are coming available. Other resources that might be developed by diocese in conjunction with other diocese and reliable institutions and apostolates with the competence and resources to assist, could include online tutorials and courses (live streamed, Zoom, prerecorded), seminars/webinars, possibly automated online moral assessments, chat lines, and call-in centers.

Pastors must also advise individual Catholics, Catholic doctors and must themselves use this time to demand funding and support for morally licit vaccine programs and warn of the illicitness of the morally problematic vaccines and the danger that Catholics may not be able to use them. Pastors should also encourage the laity to mobilize coordinated efforts to demand licit sources

of vaccines from those responsible for legislative and executive branches of government, in order to avoid culpable passive cooperation now, and likely moral quandaries in the future.

3) *May pastors direct Catholics to cooperate with State mandated reception of COVID-19 vaccines regardless of the vaccine's origin?*

No. No one's conscience may be permitted to be coerced to cooperate with evil in any manner. While it may be licit to cooperate materially in cases of remote and mediate cooperation when the evil of non-cooperation is likely greater than the evil of cooperation, this liceity in no way implies an obligation to make use of it. It is for pastors to help to form the consciences of the faithful so they are able to make the moral discernment between licit cooperation in evil and serving the common good, to appropriate for themselves the current medical theories about risks and benefits of the use of a morally objectionable vaccines, and to arrive at the moral judgements for themselves (or with some assistance).

4) *May individual Catholics object in conscience from State mandated reception of vaccines derived from aborted babies?*

For the reasons stated above, yes. However, he should be sufficiently well formed in order to be able to make an informed and authentic moral assessment about the possibility of a larger proportion of evil he could permit to occur in order to avoid a potentially lesser evil of remote and mediate cooperation in what itself is certainly a grave evil.

¹ See James L. Sherley, M.D., Ph.D., David Prentice, Ph.D., "An Ethics Assessment of COVID-19 Vaccine Programs," *On Point: Charlotte Lozier Institute* 46., May 2020; available at: <https://lozierinstitute.org/an-ethics-assessment-of-covid-19-vaccine-programs/>.

² Catholic News Service, "Ethical solutions to coronavirus vaccine endorsed by Vatican, bishops," *The Dialog*, 15 June 2020, available at: <http://thedialog.org/vatican-news/ethical-solutions-to-coronavirus-vaccine-endorsed-by-vatican-bishops/>.

³ See Sherley & Prentice, "Ethics Assessment."

⁴ See for example: <https://www.mayoclinic.org/diseases-conditions/coronavirus/in-depth/coronavirus-vaccine/art-20484859>.

⁵ St. John Paul II, "Evangelium vitae: Encyclical on the Value and Inviolability of Human Life," 25 March 1995; available at: http://www.vatican.va/content/john-paul-ii/en/encyclicals/documents/hf_jp-ii_enc_25031995_evangelium-vitae.html.

⁶ Joseph Cardinal Ratzinger, "Donum vitae: Instruction on Respect for Human Life in its Origin and on the Dignity of Procreation: Replies to Certain Questions of the Day," Congregation for the Doctrine of the Faith, February, 22, 1987; available at https://www.vatican.va/roman_curia/congregations/cfaith/documents/rc_con_cfaith_doc_19870222_respect-for-human-life_en.html.

⁷ William Cardinal Levada, "Dignitatis personae, Instruction on Certain Bioethical Questions," Congregation for the Doctrine of the Faith, September 8, 2008; available at: https://www.vatican.va/roman_curia/congregations/cfaith/documents/rc_con_cfaith_doc_20081208_dignitas-personae_en.html.

⁸ It is necessary to acknowledge the Pontifical Academy of Life's 2017 note it published in conjunction with the Italian Bishop's Conference's National Office for Health Pastoral Health Care (CEI) and the Association of Italian Catholic Doctors, "Note on Italian Vaccine Issue," Pontifical Academy for Life, 31 July 2017; available at: <http://www.academyforlife.va/content/pav/en/the-academy/activity-academy/note-vaccini.html>. In saying: "in consideration of the fact that the cell lines currently used are very distant from the original abortions and no

longer imply that bond of moral cooperation indispensable for an ethically negative evaluation of their use”, the note could appear to be making the error of an insufficient analysis to which the CDF refers by relying only on the “criterion of independence” for its moral analysis. It does not seem to consider the problems of scandal or the promotion of sinful social structures involved in the abuse and trafficking of the corpses of aborted babies. We may acknowledge that this multiparty note does not have the Magisterial authority of the CDF’s Instruction, *Dignitatis personae*. The Note affirms the obligation to ensure that all vaccines have no connection with material originating from abortions, while arguing that all clinically recommended vaccinations can be used with a clear conscience because they do not signify any sort of cooperation with voluntary abortion. This Note appears to recognize that it is in contradiction with a previous assessment issued by the Pontifical Academy for Life in 2005 (see note 10 below), and so it says that medical advances and conditions of vaccine preparation “could” require that the 2005 assessment to be revised and updated. It is unclear how medical advances or changes in conditions of vaccine preparation might change the moral analyses in *Dignitatis personae* and in the 2005 PAL document. Namely, the universal assessments of the Magisterium that use of vaccines made from aborted fetuses constitutes at the very least passive, mediate, material cooperation in evil regardless of separation in time. A new more thorough treatment must show how these previous assessments were mistaken and why, and it must be able to assert a higher level of Magisterial authority than a multiparty note implies. The subject Note alone does not provide a clear or compelling moral analysis demonstrating how it can be reconciled with (much less that it could replace) more authoritative teachings. Therefore, until the PAL revises the 2005 document providing such analysis, this 2017 note should be left in “parentheses.”

⁹ All italicized emphases are mine.

¹⁰ See E. Sgreccia, “Moral Reflections on Vaccines Prepared from Cells Derived from Aborted Human Foetuses,” Pontifical Academy for Life, June 9, 2005; available at <https://www.immunize.org/talking-about-vaccines/vaticandocument.htm>.

¹¹ The 2005 PAL document does not explicitly use the Catechism of the Catholic Church’s term “social structures of sin.” Nevertheless, my use of the term is what the document appears to intend by such ideas as “on a cultural level,” and the “generalized social consensus.” I will use this term for established cultural/social structures which promote or at least turn a blind eye to illicit use of aborted babies’ corpses for biomedical research and development, and the illicit production and distribution of biomedical products based upon this research and development.

¹² The 2005 PAL document makes reference to the use of vaccines as passive, mediate cooperation but it seems to fail to take into account the still very remote mediate, but active cooperation the revenue stream provides to the structures of sin that permit this trafficking in the fruits of the abuse the corpses of aborted babies.

¹³ See <https://www.ucihealth.org/blog/2020/04/why-is-covid19-so-dangerous> and <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html>.