



**WE ARE IN A RACE AGAINST TIME,
AND IT IS A RACE TO SAVE LIVES
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Echoes: [Link](#)**

Much attention has been given to recent statements made about the most recently FDA-approved COVID-19 vaccine from Johnson & Johnson by Archbishop Joseph Naumann, chair of the United States Conference of Catholic Bishops' Committee of Pro-Life Activities, and Bishop Kevin Rhoades, chair of the conference's Committee on Doctrine.

The Church has always and must always oppose abortion. The use of aborted cell tissue from an abortion performed in the latter half of the 20th century to develop this and other vaccines has raised many questions and concerns about the use of those vaccines.

The Holy See, through the Congregation of the Doctrine of the Faith and the Pontifical Academy for Life has addressed the question of using vaccines that have employed aborted tissue cells in their development or production in the light of the critical need to control and stop COVID-19, as it continues to ravage the global population.

The aborted cell tissue that was used in the development of the COVID vaccine approved last month comes from a morally illicit act. That act occurred in the second half of the 20th century, and the abortion was not done with the intention of using the tissue for research or drug development. The circumstances of that act, which we continue to decry as a violation of the sanctity of the gift of life, are significantly distant and remote from where we find ourselves today, in the battle to save the lives of billions of people around the globe, so as to not impute those who might receive the vaccine into the immoral action.

Rather, there is a positive duty to save lives whenever we are able and have the opportunity to do so. In the face of a disease that still threatens the lives and wellbeing of people around the globe, there is an urgent need to get as many people vaccinated as soon as possible. We have a moral obligation to save lives, to support public health and to contribute to the common good.

We look forward to the broad availability of advances in research and technology that now provides for the use of morally acceptably-sourced adult stem cells, and that converts them into pluripotent cells that could preclude the future use of or need for aborted stem cell tissue to develop diagnostics or therapies in the fight against disease.

The presence of new variants of the coronavirus from around the world in our Commonwealth and region has been reported, as has been the case across our country and others. These variants are being studied in "real time," but we are seeing a possible dramatic increase in the transmissibility and the acuity of the coronavirus attributed to them.

It would seem that the only way to stop this disease is to get people vaccinated so that they are immune to the illness before the variants possibly cause or result in a resistance to the vaccine's being effective in stopping the virus.

While the Commonwealth of Massachusetts has seen a general week-to-week and month-over-month trend in an encouraging direction of key indicators, the CDC is reporting a slight upward trend in those same key indicators. An alarming trend which needs to be halted, these reports have the new CDC director calling for even more vigilance in the safety precautions with which we are all familiar to continue to control the presence of COVID-19 in our communities.

In addition, between the increasingly possible and dangerous impact of these variants on the strides made to this point in the fight against COVID, as well as the possible short to midterm limited duration of naturally acquired immunity in those who have recovered from bouts of the illness early in the pandemic, the possibility of reinfection is an added threat that must be prevented.

It is clear that there is an urgent race against time, in the growing presence of these variants, to get as many people vaccinated as possible and to do that as soon as possible.

People of faith have raised concern about the development of the Johnson & Johnson vaccine, the newest weapon in the arsenal to fight this dangerous disease, related to the use of aborted stem cell tissue. They are right to raise the question, but it is extremely important to understand that the Church has addressed those concerns, not just with this SARS-2 virus that we call COVID-19, but earlier, at the time the world faced the SARS-1 virus.

The teaching related specifically to this issue of vaccines and their sources is not something that was hastily or thoughtlessly constructed in just the last few weeks; rather, it was thoughtfully and carefully analyzed, tested against centuries of moral reasoning, and has been applied for more than a decade.

In fact, the Johnson & Johnson vaccine -- because it can be transported and stored more easily, and because it requires just a single injection to provide immunity to the coronavirus -- will help to boost the efficient and equitable access to immunization in many places around the globe where the logistics of some of the other vaccines could serve as a deterrent to providing the protections that come from vaccination.

As most of the people who have already been vaccinated have discovered, the opportunity to request a specific vaccine is generally not offered to people as they work hard to find and book an appointment for vaccination. They learn what vaccine they're receiving as it is being administered. Whenever, if ever possible, of course, the expectation and hope is that people will request a vaccine that is not morally compromised in its development. We continue to urge the scientific and pharmaceutical research communities to forego the use of aborted tissue cells in research.

Given the challenges to rolling out a vaccination initiative for billions of people globally in the situation where producing and maintaining supplies of the approved vaccines are even more challenging, it is unlikely that the possibility of requesting a specific vaccine will become available to most, if any.

Church teaching about the duty to save lives where possible, which the broad distribution of whatever vaccines deemed safe and effective will help do, should reassure the faithful of the moral permissibility of accepting the available vaccine. We hope that they will ask questions, receive the relevant information about that teaching, and not delay in their acceptance of the vaccination -- whichever approved vaccine is offered -- when it becomes available to them.