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To: Professor Glenda Gray
President and CEO Medical Research Council

From: Professor Ames Dhai
Chair Bioethics Advisory Panel (Medical Research
Council)

ADVISORY: COVID-19 Vaccine Health Certificates and Passports (Passes)

PROBLEM STATEMENT: A substantial number of healthcare workers were vaccinated in the Sisonke Phase 3B study between 14 February and 16 May 2021. The South African government commenced its vaccine rollout program on May 17, 2021. Internationally, as countries introduce vaccine programs, and despite vaccines being in short supply, many high-income countries have proposed, and several have implemented, digital and / or physical health passes, which are also called “vaccine passports” or “vaccine certificates” (herein-after referred to as “passes”). These passes are potential tools for recording and sharing the immune status of individuals. With these passes, people are able to demonstrate that they have a much lower chance of acquiring and transmitting the virus and hence the documents may play an essential role in reopening societies, civil freedoms and in positively affecting livelihoods. Furthermore, such passes may function as “passports” internationally opening travel between countries. While COVID-19 passes may play a critical role towards establishing relative normality, and it is highly likely that South Africa may implement such passes in line with international trends, they raise several ethical concerns. It is therefore necessary to weigh both the benefits and challenges of the passes and to explore the ethical implications should South Africa move towards implementing COVID-19 passes. .

RATIONALE: The South African Medical Research Council (SAMRC), in its activities, responds to the needs of the country’s population and is appropriately positioned to explore the issues that arise should COVID-19 Vaccine passes be implemented in the country. At this point of the pandemic, it is unclear how or when life in South Africa will return to normal. While health certification for public health purposes is already in use concerning international travel, e.g, yellow fever vaccinations, no guidance exists for the ethical implementation of COVID-19 vaccine passes in the South African context. It is imperative that African indigenous values and Ubuntu philosophy are drawn on to inform deliberation and decisions on this subject. Moreover, the COVID-19 pandemic has demonstrated the interdependence of communities within countries and between countries globally. Hence the implementation of such passes in South Africa will require



cooperation between various sectors locally and consideration of a multi-lateral approach plus international cooperation globally.

Possible Benefits of Vaccine Passes:

- During lockdowns, it would be possible for immune individuals to follow less stringent requirements with regard to physical distancing and travel, including international travel (both business and leisure).
- Broader society could benefit if immune individuals are allowed to return to their work and care obligations, which include attending international meetings and conferences.
- There could be a safe return to normal life and a gradual re-opening of the economy in key sectors like food, retail, entertainment and travel, especially with regard to import and export.
- With time, the use of the passes for travel could assist with a return to normal in the context of education and research and in particular in international collaborative research.
- Countries may require such vaccine passes at entry points to assist with international travel.

Possible Challenges Associated with Vaccine Passes:

- There could be possible infringements of civil rights of those individuals who are not vaccinated based on medical, religious, personal and other reasons.
- Unjust forms of discrimination and exclusions with not having a pass resulting in stigmatization and societal divides could arise. This may include technological or algorithmic discrimination based on private information.
- Uncertainties remain with regard to the degree and duration of vaccine protection. The WHO recommends an efficacy value higher than 50% with a lower limit of 30%. As the protection rate is yet not similar between different COVID-19 vaccines, there may be unfair discrimination with limited country entry if that country does not recognize the specific vaccine as protective. This may result in deepening inequities in particular between high-income countries and low- and middle-income countries.
- The reality of the scarcity of supply means that the passes would automatically unfairly exclude anyone who does not have access to the vaccines while societies are being reopened, resulting in the privileged continuing to enjoy privileges while others are excluded.
- If a vaccination is premised on a system of prioritization, some will be able to receive their vaccine passes sooner than others, thereby limiting the passes for younger age groups who are arguably more active in the labour market with a greater need for international and national mobility.
- There could be possible infringements of privacy, especially where the passes are digital.
- The system may be vulnerable to fraud.
- Technical challenges could emerge with the use of digital passes including authentication of vaccine status. In South Africa, the Electronic Vaccine Delivery System (EVDS) is being used to register vaccinees.

Implementation of this system started with the commencement of the Sisonke Trial. Research participants, who have been involved in successful vaccine studies prior to the EVDS being used, are not registered on the system and may not be recognized as having received the vaccine, leaving them susceptible to exclusionary policies. This may amount to a social harm or negative social impact related to study participation.

RECOMMENDATIONS

The Bioethics Advisory Panel of the SA MRC recommends to the President and CEO of the SAMRC to:

- Support the development of ethical guidelines for the implementation of COVID-19 vaccine passes based on an adaptation of the principles derived from African indigenous values and Ubuntu philosophy for the Framework for the Fair, Equitable and Timely Allocation of COVID-19 Vaccines in Africa: affirming the humanity of others, survival of the community, social solidarity and meaningful community engagement. The guidelines should be presented to the COVID-19 Vaccine Ministerial Advisory Committee.
- Encourage an ethical response, which *inter alia* respects civil rights and freedoms in keeping with the Bill of Rights of the Constitution of South Africa; avoids discrimination and societal divides; takes into account scientific and technical uncertainties; considers international solidarity; and ensures no one is left behind.
- Encourage RECs that review vaccine studies to explore whether study participants will suffer a social harm by not being in the EVDS and to implement harm mitigation strategies.
- Develop a research program based on the many uncertainties of vaccine passes on their effects, limitations and effectiveness. The impact of the passes on society and the risks they bring need to be studied. In addition, the research should contribute to transparency and accountability of policy and decision-making in the context of the passes.

Thank you for considering the recommendations in this Advisory.

Sincerely



Professor A Dhai

Chairperson Bioethics Advisory Panel

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