COVID-19: ETHICAL CHALLENGES

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Abstract

COVID-19 has resulted in a global healthcare crisis. Besides, it has led to multiple crises—religious, pastoral, ethical, social, political, economic, etc. Research on Covid-19, especially research on vaccines, also has raised many ethical questions. This paper discusses various ethical challenges posed by Covid-19.

People belonging to all strata have been affected by Covid-19. However, the poor, the migrants and people working in the unorganised sectors have suffered the most. Covid-19 has its impact on the family as well. Many were happy to get the opportunity to spend more time together at home. At the same time, for many it has been a time of financial crisis. Covid-19 has also led to conflicts and quarrels among family members, depression, and in some cases even suicides. There have been also reports of increased domestic violence, and abuse of women and children. There are also indications of increased number of incest and sexual abuse of children, besides various forms of physical violence on them. Covid-19 has exposed lack of leadership in the world. As many experts have pointed out, one of the chief victims of COVID-19 may be democracy. Besides, community life has been severely affected by Covid-19. Covid-19 poses many challenges to

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theology: We need to develop a theology that makes lay people more mature and independent in their spiritual life. A Family-centred, People-centred theology and spirituality have to be developed. Theology of Suffering, Theology of Hope, etc. are to be given greater attention.

Keywords: Covid-19; Democracy; Family; Healthcare Crisis; Migrants; Online Classes; Poverty; Social Distancing; Theology of Suffering; Untouchability; Women

Introduction[1]

A pandemic affects various aspects of the society's life. This has been proven in the case of Covid-19 as well. Like any other pandemic in the past, besides being a healthcare crisis, Covid-19 has resulted in multiple crises—religious, pastoral, ethical, social, political, economic, etc. Millions and millions of people have been infected; millions have lost their lives to the pandemic; many who have recovered continue to face post-Covid-19 diseases. Thousands of healthcare workers also have lost their lives; even now experts do not know how to treat the infected, since no effective medicines have been invented for the cure from the virus. The cost of Covid-19 treatment is not affordable to the poor and the middle class. Millions and millions of people have become unemployed, and thus the pandemic has pushed them to utter poverty and financial crisis. Children and youth are deprived of the possibility to go to schools and universities, and to meet their friends. The elderly people suffer a lot, especially as they cannot meet their children and grandchildren, and friends; often they feel helpless. Many women and children also suffer due to increased domestic violence.

We can see heroic responses as well. Words will not be sufficient to praise the heroic dedicated services of doctors, nurses and other healthcare workers, of police and other public servants, and of voluntary organisations. This has been a time to witness the outpouring of good will and generosity of people. People are also learning to reduce tension through meditation, worship and other personal spiritual exercises and praying together in the family.

Covid-19 and the Healthcare Crisis

COVID-19 has resulted in a global health and healthcare crisis. Millions of people are infected, millions have lost their lives. In India

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[1]This paper was originally delivered as the Presidential Address at the Annual Conference of the Association of Moral Theologians of India (AMTI), held online on 15, 22 and 29 October 2020.

also the number of infected people is already counted in millions, and even the official number of deaths are many hundred thousand.[2] Hospitals were full and during certain months, many could not get hospital admission and care despite emergency. healthcare workers have been over-burdened and have been compelled to work in risky situations. Thousands of healthcare workers also have succumbed to death due to Covid-19. Healthcare workers and experts even in developed countries had to face dilemma over triage, especially with regard to ventilators and limited oxygen supplies.[3] Care for patients with other diseases has been another challenge, since many could not access hospitals and approach healthcare professionals due to Covid-19 restrictions.

Research on Covid-19, especially research on vaccines, also has raised many ethical questions.[4] There are concerns about human rights violations in the process of developing the vaccines, for example, with the excuse of the urgency of the situation, usual procedures of experimentation were ignored or evaded, sometimes raising serious ethical questions. "It becomes an ethical question, how far the standard procedures might be relaxed in view of an expedient remedy to the pandemic."[5] Unscientific and unethical, and politically motivated haste also was seen sometimes with regard to vaccine development. For example, the Director General of the Indian Council of Medical Research in a circular on 2 July 2020 wrote to 12

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[2]I would like to acknowledge that there is a huge difference in the number of Covid-19 infections both in India and in the world between the time this paper was originally presented, and prepared for publication, and between the time the final text was prepared, and then published. Moreover, we cannot ignore reports which say that there is a huge difference between the 'official' numbers and actual numbers. Some studies say that the actual number of deaths in India due to Covid-19 may be more than four million. See for example, "Covid-19: India Excess Deaths Cross Four Million, Says Study," *BBC News*, 20 July 2021, https://www.bbc.com/news/world-asia-india-57888460; "India's Excess Deaths during Covid-19 Pandemic up to 4.9 Million: Study," *Hindustan Times*, 20 July 2021, https://www.hindustantimes.com/india-news/indias-excess-deaths-during-covid-19-pandemic-up-to-4-9-million-study-101626785505459.html.

[3]See for example, Martin Lintner, "Covid-19 and Triage: A Medical Challenge, but not only That," https://catholicethics.com/forum/covid-19-and-triage/; Mathew Illathuparampil, "Covid-19: Variegated Route Map of Ethical Questions," *Asian Horizons* 14, 3 (September 2020) 736-746, at 740.

[4]For an overview of various healthcare issues and ethical issues related to research for Covid-19 vaccines, please see Rahul Sima, "Covid 19 and the Challenges to Medical Research," *Jeevadhara* 50, 300 (November 2020) 9-20. See also, Linda Hogan, "Covid-19 Law and Human Rights Observatory: Ethics and Vaccine Development," https://tcdlaw.blogspot.com/2020/08/ethics-and-vaccine-development.html

[5] Mathew Illathuparampil, "Covid-19: Variegated Route Map of Ethical Questions," *Asian Horizons* 14, 3 (September 2020) 741.

medical institutions, asking them to fast track the clinical trials on Covid-19 vaccines, so as to launch the vaccines for public use latest by 15 August 2020, warning them that non-compliance with the directive would be viewed very seriously.[6] Besides, lack of global solidarity was evident in the research for vaccines. Instead of collaborating for developing an effective vaccine, countries and institutions have been competing in developing the vaccine.[7]

Although in the management of Covid-19 the world has become more confident, especially with the development and availability of vaccines, we do not know yet how to cope up with this situation, we feel helpless, as we know that new variants of the virus are breaking out, and as there are no permanent solutions for the virus, and especially as in some countries or regions new infections and deaths are not yet under control.

To a great extent, people have positively responded to the Covid-19 health crisis—cooperating with norms, satisfying themselves with the limited resources. People are also learning more healthy and hygienic ways of living, developing more healthy food habits and so on. On the one hand, this health crisis has created a lot of fear and anxiety in the people. On the other hand, they are acknowledging the fragility of human condition, coming out of a false security provided by technological and scientific development. Though we need security, and advancements in medical science and technological developments have assured that to a great extent, forgetting or ignoring completely the fragility of human existence is not realistic and can be even disastrous.

Impact on the Poor and the Migrants

People belonging to all strata have been affected by Covid-19—men and women, young and old, rich and poor, educated and uneducated. However, its impact on certain groups has been more. The poor, the migrants and people working in the unorganised sectors have suffered the most, without work, without any resources for daily life. For example, a number of shops, and small business were compelled to close down. Nobody knows whether they will manage to reopen their business activity even when the pandemic

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[6]Director-General, Indian Council of Medical Research (ICMR), circular No. DO. no. ECD/COVID19/Misc., 2020, July 2, 2020. Cfr Anthony L. Fernandes, "Ethical Challenges in Healthcare Arising from the Covid-19 Pandemic," *Asian Horizons* 14, 3 (September 2020) 747-767, at 765-76.

[7] Fernandes, "Ethical Challenges in Healthcare Arising from the Covid-19 Pandemic," 765.

crisis is over. Covid-19 has led to loss of jobs, rise of unemployment, lack of availability of food, and so on. For example, "…COVID-19 Pandemic left 12 crores in India jobless. Amid suspended economic activity to counter the spread of the COVID-19 pandemic, India's unemployment rate surged to 27.11 per cent for the week ended on May 3 [2020] from the level of 6.74 per cent before the start of the pandemic in mid-March…"[8] That is, the plight of the poor in India has already aggravated with the pandemic, and these effects may continue for a long time.[9] The plight of millions of migrants in India who returned to their home villages on foot, walking even hundreds of kilometres, in some cases even more than thousand kilometres, was widely reported. It was also reported that many of them died due to exhaustion, starvation and accidents on their way back. For example, "(Jamlo) a 12-year-old Adivasi girl, working in the chilli fields of Telangana, set out on foot to reach her home in Chhattisgarh after the lockdown halted work and income. This child walked 140 km in three days, then fell dead of exhaustion, dehydration and muscle fatigue—60 km from her home. How many more Jamlos will such curfew orders create?"[10] However, the number of people died during their travel back home is not yet clearly known.[11] "Perhaps, their life and existence do not matter."[12] "It has been repeatedly said that there is no comprehensive database available on the Indian migrants' actual numbers. "No data, no problem" seems to be the mantra of the government to shirk responsibility."[13] In fact, those millions of migrants who had to undergo enormous suffering to go back home are the victims of an unscientific and inhuman lockdown

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[8]John Chathanatt, "Covid-19 Pandemic and the Plight of the Poor in India," *Jeevadhara* 50, 300 (November 2020) 35.

[9]Cfr Chathanatt, "Covid-19 Pandemic and the Plight of the Poor in India," 33-44.

[10]P. Sainath, "The Migrant and the Moral Economy of the Elite," 22, *India Today,* June 8, 2020, 22, quoting India Today dated May 17th 2020; as cited in Sahayaraj Stanley, "Responding to the Wounded Samaritan: Covid-19 and the Migrants' Maladies," *Jeevadhara* 50, 300 (November 2020) 24.

[11]For example, see "Over 1 Crore Migrant Labourers Return to Home States on Foot during Mar-Jun: Govt," *The Hindu,* 23 September 2020, https://www.thehindu.com/news/national/over-1-crore-migrant-labourers-return-to-home-states-on-foot-during-mar-jun-govt/article32674884.ece; "Govt Says 10 Million Migrants Returned Home from March to June, Including those who Walked," *The Wire,*14 May 2020, https://thewire.in/labour/govt-says-10-million-migrants-returned-home-from-march-to-june-including-those-who-walked; "Coronavirus: India's Pandemic Lockdown Turns into a Human Tragedy," *BBC News*, 30 March 2020, https://www.bbc.com/news/world-asia-india-52086274

[12]Chathanatt, "Covid-19 Pandemic and the Plight of the Poor in India," 34.

[13]Stanley, "Responding to the Wounded Samaritan: Covid-19 and the Migrants' Maladies," 24-25.

which was declared just a couple of hours before its strict implementation. Though it was defended and praised as a bold, effective and successful measure in controlling the spread of Covid-19, the subsequent developments and spread of Covid-19 proved that the measures taken by the government were completely unscientific and utter failure. Perhaps its only benefit was to multiply human suffering, especially of the poor, which was unfortunately completely ignored by the governments and officials.

Evidently, the poverty and suffering of the migrants are not the creation of Covid-19, but the pandemic has aggravated them, and brought to light their sufferings more clearly. Sahayaraj Stanley groups the distress factors of migrants into three, namely, poverty, invisibility, and social composition.[14] He also enlists measures to be taken for changing this situation, for example, equipping the poor with rural employment, more openness and compassion from the part of the host states, respect for their human dignity, more support from the central government and effective leadership, change of mindset, etc.[15]

The ugly face of inequality has become more visible with COVID-19 pandemic. "For many poor people in the world and many others who are vulnerable like the elderly and those who are afflicted with other underlining health conditions, Covid-19 is another layer of agony built on a life already bruised and broken by suffering, pain, sickness and being surrounded by death." [16] Clearly, as already mentioned, the rich and the poor can be equally infected, but the effect is not equal. For example, an *India Today* report says, "The second wave of Covid-19 pandemic has revealed a stark gap in wealth inequality between India's rich and poor. While the deadly coronavirus has spared none, its impact on the poorer population has been way more devastating."[17] The rich can stay at home, they can

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[14]Stanley, "Responding to the Wounded Samaritan: Covid-19 and the Migrants' Maladies," 23-25. Invisibility, referring to their anonymity; often data on them are not available, not even their names sometimes. As the third factor, he points out that most of them belong to Dalit or backward castes.

[15]Stanley, "Responding to the Wounded Samaritan: Covid-19 and the Migrants' Maladies," 26-31.

[16]Stan Chu Ilo, "Pandemic, Poverty, and Power: Thoughts on a Biosocial Ethics of Global Solidarity for Health," https://catholicethics.com/forum/pandemic-poverty-and-power/

[17]See for example, "Explained: How Covid-19 Crisis has Exposed India's Growing Wealth Gap," *India Today*, 28/29 April 2021, https://www.indiatoday.in/business/story/explained-how-covid-19-crisis-has-exposed-india-s-growing-wealth-gap-1795932-2021-04-28. See also, "The Impact of Covid-19 on Global Extreme Poverty,"

survive even if they do not go out for work every day. The poor cannot survive without working every day. So, they have to go out walking, or taking public transportation (if available), or sharing vehicles with other workers. Thus, they are more vulnerable to infection.

> While in some affluent societies the lockdown measures have been interpreted as restrictions on the civil and political liberties such as freedom of movement and the right to assemble, in other less affluent countries the lockdown has meant choosing between life and death. The dilemma expressed itself in terms of breaking the law so as to earn one's livelihood and keep the family alive rather than adhere to the law and starve to death.[18]

The same has been the case with regard to healthcare facilities. Even some of the rich countries were struggling to provide healthcare facilities to the infected and dying people. In many poor countries, many infected people had no healthcare facilities available. This inequality is seen in the case of the vaccines as well. A good number of people in poor countries are yet to get even the vaccine, whereas the rich countries are planning to give a third dose as booster.

In India, a number of schemes have been announced by the central and state governments to help people suffering in many ways due to the Covid-19 crisis. However, how many people have actually benefited from them is unclear. Besides, there are also criticisms that mostly the super-rich benefit from various schemes declared by the governments, and the poor continue to remain marginalised. "Hunger, poverty, loss of job, fear, facing an uncertain future, social discrimination, and above all a deep feeling of unwantedness and rejection—these are the challenges and feelings facing our country with respect to the India's poor" in the crisis caused by Covid-19.[19] Moreover, if the poor are infected, they are unable to meet the high expenses of medical care, especially in private hospitals. Though we have to appreciate the committed service of thousands of healthcare workers, even risking their own lives, we cannot ignore that some

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Brookings, 21 October 2020, https://www.brookings.edu/blog/future-development/2020/10/21/the-impact-of-covid-19-on-global-extreme-poverty/; "Mega-Rich Recoup COVID-Losses in Record-Time yet Billions will Live in Poverty for at Least a Decade," Oxfam International, 25 January 2021, https://www.oxfam.org/en/press-releases/mega-rich-recoup-covid-losses-record-time-yet-billions-will-live-poverty-least.

[18]Deogratias Rwezaura, "Expressions of Faith in the Face of COVID-19," *Hekima Review: Journal of Theology, Governance and Peace Studies* 62 (December 2020) 68-80, at 75.

[19]Chathanatt, "Covid-19 Pandemic and the Plight of the Poor in India," 34.

hospitals found the Covid-19 crisis as a 'golden opportunity' to amass wealth, by charging enormous amounts for hospital beds, oxygen beds, ICU, etc. [20] The government support is often only promises, or they do not reach many. Moreover, there is also a lot of corruption involved.[21]

Impact on Family, Women and Children

Covid-19 has its impact on the family as well. On the one hand, many were happy that they got the opportunity to spend more time together at home, to pray together, to attend the holy mass and other spiritual activities together on the television, and so on, eventually strengthening family relationships. At the same time, especially for poor and middle-class families, it has been a time of crisis, especially as the financial income of the family has been lost or curtailed due to the lockdown, loss of job or business activity and so on. Many families have been struggling to find resources even for necessary expenses. Covid-19 has also led to conflicts and quarrels among family members, depression, and in some cases even suicides. Work from home had its advantages, but longer hours of work demanded by employers and increased stress have been some of its side-effects.

There have been also reports of increased domestic violence, abuse of women and children. For example, UN Women in early April 2020 said, "With 90 countries in lockdown, four billion people are now sheltering at home from the global contagion of COVID-19. It's a protective measure, but it brings another deadly danger. We see a shadow pandemic growing, of violence against women."[22] Normally, works outside home provides some relief to women suffering from domestic violence. They get the possibility to communicate with others and to get some support and help. But, during the lockdown this was practically denied, except by contacting helplines.[23] Besides, "in normal times when a man would become violent, women could

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[20]See for example, "At the Mercy of Pvt Hospitals, Bengaluru's COVID-19 Patients are being Overcharged," *The News Minute*, 14 October 2020, https://www.thenewsminute.com/article/mercy-pvt-hospitals-bengaluru-s-covid-19-patients-are-being-overcharged-135315.

[21]See for example, "Covid: BBMP Officials Found Taking Bribes to Allot Reserved Hospital Beds in Bengaluru," *India Today*, 4 May 2021, https://www.indiatoday.in/coronavirus-outbreak/story/bbmp-taking-bribes-allot-reserved-hospital-beds-bengaluru-1798882-2021-05-04.

[22]Statement by Phumzile Mlambo-Ngcuka, Executive Director of UN Women on 6April 2020, https://www.unwomen.org/en/news/stories/2020/4/statement-ed-phumzile-violence-against-women-during-pandemic.

[23] Virginia Saldanha, "Domestic Violence: A Shadow Pandemic within a Pandemic," *Jeevadhara* 50, 300 (November 2020) 45.

take their children and leave the home using public transport. This strategy prevented violence. But this was not possible during the lockdown."[24]

Though compared to adults only a smaller number of children have been infected with Covid-19, it has been a difficult time for children—being closed inside the house due to lockdown; lack of possibility of meeting friends and interaction with the peer group; no or lesser possibility of sports and games in the open. Online classes substituted the classes in physical presence, and thus the loss of academic year/s has been overcome. However, sitting long hours before the computer or mobile had its effects on the mental and physical health of children. Besides, the quality of education has been doubtful. Millions of poor children suffered due to lack of computers and mobile phones, and internet connection and other facilities for online classes. Reports of depression and even suicides due to such difficulties have not been rare. Also, poor internet connections in rural and remote areas became another face of inequality. There are also indications of increased number of incest and sexual abuse of children, besides various forms of physical violence on them, though to get a real picture of these we will have to wait further. There are also reports of sharp rise of child marriages.[25]

Challenges to Democracy

Covid-19 has exposed lack of leadership in the world.[26] There is no world leader or leaders to bring together others to think together and plan how to overcome this crisis. Even the role of the international organisations like UN and WHO haven't been effective in bringing together the world leaders to fight the pandemic. Moreover, the responses of many world leaders were considered irresponsible, aggravating the pandemic situation especially in those countries.

As many experts have pointed out, one of the chief victims of COVID-19 may be democracy. As Stanislaus Alla asks, "Did COVID-19 give opportunities for leaders to turn more autocratic and authoritarian—discarding democratic principles and practices, values embedded in their Constitutions?"[27] Lockdown has been made use by many governments as a golden opportunity to take undemocratic

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[24]Saldanha, "Domestic Violence: A Shadow Pandemic within a Pandemic," 47.

[25]Saldanha, "Domestic Violence: A Shadow Pandemic within a Pandemic," 48-50.

[26]James F. Keenan, "Rethinking Humanity's Progress in Light of Covid-19," *Asian Horizons* 14, 3 (September 2020) 713-735, at 717.

[27]Stanislaus Alla, "Let Democracy Breathe Easy in India," *Jeevadhara* 50, 300 (November 2020) 55.

decisions, to implement their agenda without due processes, to ban public protests, etc. Arguing that democracy has declined in India during Covid-19, Stanislaus Alla points out that During COVID-19 "times several Bills were passed without sufficient consultation and discussion. Bills related to Education, Agriculture, Labour, Foreign Contributions, etc., that have enormous and far-reaching implications, have been quickly processed." Besides, in the parliament sessions, Question Hour was cancelled or shortened in the name of safety due to Covid-19, but all other business that the government wanted were conducted without any interruption. [28] Protests are banned pointing out the reason of safety, but election rallies led by ministers were conducted without any restrictions. Alla concludes that, "Though democracy was on the decline for a while, arguably, political leaders in India utilized the COVID-19 period to choke and paralyze democratic processes and institutions… Theoretically, minus COVID-19, people would have joined in protests, in solidarity, when anti-people policies are introduced."[29] At the same time, Alla calls for strengthening democracy, for example, through discussions and debates on the Constitution, participation in public discourses and people's movements, and making use of the alternative media.[30]

Challenges to Church and Theology

Community life has been severely affected by Covid-19. Due to the nature of the pandemic and the way it spreads, direct physical contact and social gatherings have been restricted; recreational activities, sports involving groups, conferences, seminars, etc. were suspended for a long time, and ban on such activities continue to a large extent in most countries. [31] Take for example, death and mourning at the time of Covid-19. Death and mourning express the value of life, and the values and beliefs regarding life. Mourning rituals express beliefs about life, death and afterlife, and convey to the living the beliefs and values regarding these. Besides, mourning rituals give the bereaved the message and consolation of belonging to a culture/society/religion. Thus, mourning rituals have a therapeutic function as well. Sickness and death have been special moments of experiencing human solidarity for the sick the dying and his/family, and the family of the dead. Often, in many cultures and societies,

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[28]Alla, "Let Democracy Breathe Easy in India," 60.
[29]Alla, "Let Democracy Breathe Easy in India," 65.
[30]Alla, "Let Democracy Breathe Easy in India," 65-66.
[31]Victor Paul, "Covid-19: Social Distancing and Lessons for Community Building," *Jeevadhara* 50, 300 (November 2020) 71.

death has been lived as a social event. Covid-19 has drastically changed this. Not only norms of social distancing, but fear has been playing an important role in this. False news, misunderstanding, etc. also might have been responsible for this. People affected have been experiencing isolation and feeling being abandoned instead of solidarity. The same can be true of any pandemic. The presence of a priest at the deathbed and reception of sacraments have been practices that strengthened the dying as well as the relatives. Covid-19 has made it almost impossible, at least for many months. Funeral services/mourning rituals has been a source of consolation, and a means of regaining hope for the family and friends of the dead person, as well as a process helping the dear ones accept the reality of death. Besides, a funeral service would give the near ones the conviction that the dead, the religious rites would accompany him/her to the eternal life. Such beliefs and practices have been severely affected during Covid-19. The family of many of the dead have the added pain and suffering that even an 'honourable' and religious funeral could not be granted to their dear ones.

> The spatial restriction due to the pandemic has led to a significant reduction of community gathering or any form of physical interaction in the community, harbouring a feeling of isolation and loneliness among community members especially in the elderly population, migrant population in urban locales, etc.[32]

'Social distancing' has become the norm, and a pre-requisite for limiting the spread of the virus. Though 'social distancing' has been the term used to denote this, some have preferred the term 'physical distancing', pointing out that 'social distancing' has many negative implications, for example, ignoring the social dimension of the human person, which is not healthy for the human community. We cannot also ignore the negative connotations of 'social distancing,' especially in societies like that of India. For example, though rare, making use of Covid-19 as an occasion, there were arguments defending the caste system and untouchability in India, pointing out that such traditions had prophylactic reasons, and hence were good for the hygiene, health and safety of the society.[33]

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[32]Paul, "Covid-19: Social Distancing and Lessons for Community Building," 71.

[33] See for example, Sanket Khati, "Did Social Distancing Legitimise Untouchability?" 19 February 2021, https://www.outlookindia.com/website/story/opinion-did-social-distancing-legitimise-untouchability/374732.
Note especially, what the author says: "Given 'social distancing' already had a cultural and social meaning in the context of India, combined with the emphasis on cleanliness and hygiene mandated against Covid-19, it all too conveniently evoked the image of the 'dirty outcast.' Savarnas have historically associated Dalits with

Religions which are basically communitarian and conduct worship in the community have struggled to keep alive its communitarian dimension and community worship. This is particularly true in the case of the Church which is communitarian by nature. However, the Church adapted to the changed context by organising Eucharistic celebration and other prayers online in the virtual community wherever possible, and by organising virtual communities, and offering online support to the members of the community and others.

The Church has been realistic in its response to Covid-19, asking the faithful to cooperate with the government norms and to follow the guidelines given by experts. The Church invited the faithful to find courage with firm trust in God, and to help others expressing Christian solidarity. Many parishes and organisations have been distributing free food kits and free food for the needy; offering free counselling services; funeral services; etc. even for people belonging to other religions. There are also opinions that the Church (in India) should have taken more proactive role: For example, coming forward more courageously to defend the migrants and the poor. Many think that the Church's involvement has not become so public, and hence did not influence the public opinion. Besides, the Catholic hospitals should have offered more support to healthcare workers, and free medical care to the needy. Though it is not an easy task financially, the community's contributions could have been invited for this. There is also criticism that many priests and religious were more concerned about their own safety, even forgetting their commitment to serve others. Besides, some feel that many priests were more interested in continuing liturgical celebrations—either online, or in the Church sometimes even ignoring safety norms.

Covid-19 and the ensuing lockdown has been an occasion to strengthen the spiritual life of the faithful. Besides participating together in the online worship and prayers, Covid-19 has been an opportunity for many families to pray together—reciting rosary and other prayers, reading and reflecting on the Word of God, and so on. As Precious Nihorowa points out, "the experience of being at

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impurity, pollution, and contamination, in that light, containing the contagion was on a turf eerily similar to caste-based exclusion. This led to apprehensions that 'social/ physical distancing' would be weaponized for bigotry by proponents of caste, giving them a new ground to defend untouchability on." See also, H. Harikrishnan, "Coronavirus, Social Distancing, and the Return to Caste-Apologists," *The News Minute*, 30 March, 2020, https://www.thenewsminute.com/article/coronavirus-social-distancing-and-return-caste-apologists-121471; Aviral Anand, "Social Distancing and the Pandemic of Caste," *Wire*, 24 March 2020, https://thewire.in/caste/social-distancing-coronavirus-caste-ambedkar

home during the lockdowns brought by the pandemic has also rekindled the idea of the domestic Church…"[34] Though for a long time many could not directly access the pastoral services offered by the priests and other ministers, Catholics have continued to live their faith, proving their spiritual maturity. I am not arguing that priestly ministry is not needed; instead, I would like to point out the need of treating the faithful as spiritually mature people, and to deal with them as active agents of faith and rather than passive recipients.

Covid-19 poses many challenges to theology: We need to develop a theology and spirituality that makes lay people more mature and independent in their spiritual life. A Family-centred, People-centred theology and spirituality have to be developed. We need to strengthen our social commitment and engage the public square more effectively. Similarly, bioethics needs a lot of attention. In the pandemic, until now, the only spokespersons are scientists and politicians, and WHO, etc. This demands greater expertise from us in the field of medical ethics and healthcare systems. Not that the Church should become a parallel institution, but a pandemic (or any disease), is not merely a healthcare issue alone, but an issue that involves profound ethical, social and spiritual questions.

Theology of Suffering, Theology of Hope, etc. are to be given greater attention. Sickness, suffering, death of near ones, and death in millions, have raised profound questions about the meaning of human life, of suffering, of death, of faith, of hope, etc. Although these are perennial themes in theology, sometimes, these become side-lined due to other urgent concerns. Covid-19 also shows the importance of the media in the ministry of the Church. The Church has been giving great importance to the media, and the pandemic has shown their vital importance, and this may shape the ministry of the Church in future in new ways and forms. It is also pointed out that Covid-19 also calls for a reconsideration of our relationship with the environment.[35]

Concluding Remarks

Covid-19 has resulted in an unprecedented global crisis, inviting us for theological responses at various levels. Stan Chu Ilo calls it 'a

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[34]Precious Nihorowa, "Ecclesiology in Times of Crisis: Rethinking the Church amid the Covid-19 Pandemic," *Hekima Review: Journal of Theology, Governance and Peace Studies* 62 (December 2020) 56-67, at 65.

[35]See for example, Jojo M. Fung, "Emptying Everywhere; Outflowing Within," *Asian Horizons* 14, 2 (2020) 525-538.

biosocial ethics of global solidarity for health,' which is grounded on social justice:

> None of us is safe until all of us are safe. Something dies in each of us when anyone dies. We are all sick when any one of us is sick. We all share a common origin and a common future… We must come together as one family to fight this pandemic, and fight against injustice, poverty, violence, ecological threats to our world so that we can be heirs to a new world and a new creation where all God's people and God's planet are flourishing.[36]

The challenges posed by Covid-19 shall continue for a long time, and new challenges may come up. Human suffering is one of the most important and necessary sources of theological reflection and learning. Moral theologians of India are individually and collectively called to reflect on the challenged raised by Covid-19, especially in the Indian context marked by socio-cultural-religious plurality, poverty and inequality, and lack of an ethical leadership, and respond proactively.

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[36]Stan Chu Ilo, "Pandemic, Poverty, and Power: Thoughts on a Biosocial Ethics of Global Solidarity for Health," https://catholicethics.com/forum/pandemic-poverty-and-power/