

Are we up to the ethical challenges of Covid 19?

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I watched football last night. That's rare for me. But I thought I needed to unwind. Whilst watching I was, however, thinking about the challenges that I think Covid 19 now presents us with. If I am honest, most of the tweets I have put out this morning were written against a background of Manchester United v Southampton, which was a game worth watching. The abnormality of an empty stadium, and yet the continued ability of the players to deliver with passion may have made me reflect. I made three assumptions.

The first is that we will not be going back to wherever we were in February. What was normal is no more. Much will now change for good, like it or not.

Second, there will be plus sides for many in this. The way we lived was unsustainable. We do, therefore, need to change and having to do so when that will in many cases be for the better should not be a cause for concern.

But, and third, in that process of change we are going to face the most massive ethical questions if, as now seems likely, the Covid 19 epidemic is not likely to go away but is instead something we have to live with. I am presuming it is endemic now, and not just a pandemic.

I notice a report this morning that experts think we could face a second wave Covid 19 outbreak in the coming winter with a risk of 120,000 deaths. This is not a prediction. It's a possibility. But those deaths, on top of the numbers who have already died, would mean at least 0.3 per cent of the people in the UK would, by then, have died earlier than they might have done of Covid 19. And that would not deliver herd immunity in the remaining population. There would be hundreds of thousands, at least, still vulnerable, and by no means all of them would be easy to identify.

This, in my opinion, changes the way we need to think about this crisis. We are not facing the quick medical and economic hit the government has, almost certainly wrongly, assumed. Nor will there be a V shaped economic and medical recovery and a return to 'normal'. Instead there will be a fundamentally different world that comes out

of this crisis, with a whole new set of questions asked about how we live.

Most especially, we will need to think all over again about how we protect the vulnerable in our society. Some of those people will, of course, be those with chronic health care conditions. Others will be elderly, whether in communities, or care homes or hospitals. But vulnerability clearly extends beyond physical health. Mental health issues have been exposed, and exacerbated by Covid 19. And there is no doubt that poverty is a dimension in vulnerability. We know that this is a BAME issue too. Saying all that, I have only scratched the surface of vulnerability, and I am well aware of that.

But this then demands that we reconsider what our priorities are. Is maximum consumption for some our priority when it is very apparent now that many in our society are literally living in peril to their wellbeing? Is that dichotomy now possible? And if not, what are the ethical guidelines that must inform the new decision making?

I'm not saying I am discovering anything fresh in asking these questions. Nor am I breaking philosophical ground. All I am saying is that such questions exist. Of course, they always have. But we have suppressed them: for too long the mantra of more, with a belief that some of that increase will trickle down so that all at least get a little, has let those with power and influence ignore many of the choices that we could and should have made.

For example, the convenient logic that the NHS was not possible without 'taxpayer's money', which required that tax abusing accountants be allowed to continue in their ways so long as at least some of them paid tax to help 'fund' the NHS was a profoundly useful myth that let such activity continue when not a single justification for it could actually be supplied.

But now we know we do not need tax from ethically bankrupt economic activity to fund public services. As modern monetary theory points out, we can fund public services by deciding to have them: literally putting people to work on tasks that are necessary creates value and in, in turn, the tax revenues that permit the activity to continue without inflation arising - which is the only economic concern such a decision might create.

For those who say modern monetary theory does not change anything in economics this is why they are wrong. Nothing else says as MMT does that deciding what is of value that has to be done is the priority in society, and obsessing about how to pay for it when we know it is possible to deliver it is not. That is what is transformational about MMT.

And that is why it is so timely: what we need now is a tax system that says we can do the right thing and are not dependent on doing the wrong things to permit that right thing to happen. That is because as MMT points out, there is no shortage of money to pay for the right thing just because we stop doing the wrong thing: the two are not

related as just about every other school of economic thinking suggests that they are.

So we can in that case decide to provide the care that we need if the resources to provide that care exist.

And we can shelter and support those who must be protected from Covid 19.

We can adapt to a world where coronavirus shapes how, with who, and where we work.

We can rebuild.

Another world is possible in which we can flourish.

But we can only make those ethical choices if we believe that money is not a constraint on us doing so, because it isn't. We can have all the money that we need to deliver all the activities that are of value in our society. All we have to do is calibrate taxes correctly to remove the risk of inflation.

We can, in other words, afford to be ethical in a way that's always been denied.

In which case the obvious question is, are we ethical enough to do this?