

On 18 February 2021, the Greek Ministry of Health made public an approved Vaccination Priority Group Plan for Covid-19 vaccines. The Plan identified a series of priority groups for three different phases of vaccine supply:

Vaccination prioritization plan for population groups

Phase 1:

Health and social services staff

Residents and staff of nursing homes

Residents, staff and patients in chronic care facilities and rehabilitation centers

Priority staff for critical functions of the Government

Phase 2:

People 70 years and older (regardless of medical history). Further prioritization:

- People aged 85 and over

- People aged 80 and over

- People aged 75 and over

- People aged 70 and over

Patients with diseases that pose a very high risk of COVID-19 disease regardless of age

Priority staff for critical functions of the State

People 60 to 69 years old (regardless of medical history)

Patients aged 18 to 59 years with diseases that pose a high risk for disease with COVID-19

Phase 3:

People 18 years and older without underlying diseases

Discussion questions:

1. Were there any groups included in Phase 1 or Phase 2 that you think should have been in a different group? Are there justice-based reasons, or other ethical reasons, why you think this/these group(s) should have been in a different Phase?
2. Are there any groups not enumerated in the plan that, as a matter of justice or other ethical considerations, you think should have been included in either Phase 1 or Phase 2? Consider some of the following:

Incarcerated people (inmates in prisons and jails)

Prison staff

Displaced persons/migrants

- Food systems workers (retail food, food supply and agriculture)

3. It seems that mass vaccination in Greek prisons started July 1. One reason for the delay may have been programmatic challenges in delivery related to limited health care personnel and cold chain capacity. Another may have been delays in the delivery of the Janssen/J&J vaccine, which does not have special storage requirements and at the time entailed administration of one dose only.

What are the ethics implications of these challenges? Prior to the pandemic, was health care worker staffing in prisons adequate? Were there similar challenges to vaccinating other groups living in congregate settings? If these groups were treated differently and received vaccine earlier in the year, was this different treatment ethically appropriate? Why, why not?