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The evaluation of public health ethics, individual, collective and state with institutional, responsibilities and obligation during COVID-19 pandemics through online media reports in Turkey

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Abstract

Aim: The aim of this study is to reveal the convergence of public health ethics, institutional, collective and individual ethics obligation during the COVID-19 pandemic and give some explanations with online media reports.

Method: The study method is qualitative content analysis; this method was chosen as it would suit best the purpose of the study. The Turkish Medical Association, Turkish Public Health Association, and online newspaper articles and videos have been scanned using keywords. After that, related online reports and interviews have been classified and analyzed according to the context in between May 22, 2020 and November 16, 2020. No official ethical permission was obtained as the study was conducted through open access internet news sites.

Results: The COVID-19 scientific committee and the Ministry of Health have suggested a new way of normal life called controlled social life for all places in Turkey. In the frame of these recommendations, with the Google research engine many articles of online media including some announcements of medical and legal associations, interviews, and calls made by the authorities were selected and analyzed. These articles and interviews

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containing each problem and pieces of information provided for the common understandings of the society were selected and evaluated at three topics individual, collective and state and institutional responsibility and obligations.

Conclusion: Although the warnings of associations, health authorities, and scientists are mostly about personal-civil responsibility, some occurring practices have caused violations. In addition, the level of education, perception capacity, and habits that include existing social-cultural and religious rituals have prevented people from adapting to this new style of life, in other words, controlled social life. Therefore, besides the original national culture and customs, universal ethical responsibilities and obligations should teach starting from primary school and should consist of whole life understanding as a higher perspective.

Key words: Public health, public health ethics, ethical responsibility, COVID-19, Turkey

Introduction

Coronavirus 2 disease (COVID-19) was first seen in Wuhan, and China reported a cluster of cases in Wuhan, Hubei Province on 31 Dec 2019. In China, extraordinary measures were taken, masks and gloves were put on, and quarantine started step by step. However, COVID-19 has spread to all continents in a short time and became the most dangerous pandemic of the 21st century.

The nature of the pandemic emerges the importance of both public health (PH) and clinical healthcare services in terms of the health problems it causes. In addition, it has drawn attention to the ethical aspects of both health services. Although the development of public health ethics dates back to the 19th century, recently,

healthcare professionals and philosophers have focused on clinical care ethics instead of public health ethics (PHE); this pandemic has led to the draw of health professionals and philosophers' dictation to public health ethics. Correspondingly, this pandemic has brought the importance of PH and PHE practices which include public health law and human rights back to the agenda.

Public health aim is all scientific, social and legal practices as collective made for the health of people and the whole society in 21th century (Institute of Medicine Committee on Assuring the Health of the Public in the 21st, 2002).

PH has been characterized as multidisciplinary, interdisciplinary, and trans-disciplinary approaches and

correspondingly PHE included multi-ethics approaches such as utilitarian, deontology or duty ethics, social contracts, and also virtue ethics.

The basic understanding of PH and PHE became clearer in the 19th century. **First, ethical approach of "utilitarianism and consequentialism"**, which started to be clearly expressed in the 19th century, seriously affected public health. The classical utilitarian's, Jeremy Bentham (1748- 1832), and John Stuart Mill's (1806-1873) views were adopted as a public health approach as "the greatest good for the greatest number and the least harm for the least number" (Darryl Macer, 2015). Darryl Macer (2015) stated that this philosophy is internally coherent, simple, and comprehensive and can be effective to resolve dilemmas (Darryl Macer, 2015). In this utilitarian context, PHE constraints are considered acceptable in two aspects. These should be for the benefit of the individual and/or the benefit of the community. In this perspective quarantine and isolation practices are provided to protect the greatest people.

Second ethical approach is deontology or duty ethics. This perspective indicated that ethics on duty who is one of the Immanuel Kant (1724-18049). This theory includes

ethical rights and duties, both actions and the intentions of those who practice the actions. These are beneficence, non-maleficence, fidelity, reparation, gratitude, self-improvement, and justice (Etkin, 2016; Naomi Zack, 2009) . This approach has played an important role in the preparation of the Universal Declaration of Human Rights, and responsibilities and duties have been made within 30 articles more understandable and clear (Etkin, 2016). Two articles of The Universal Declaration of Human Rights are "Everyone has the right to life, liberty, and security of person" and "Everyone has the right to a standard of living adequate for the health and well-being of himself and of his family... and the right to security in the event of... circumstances beyond his control." (The Universal Declaration of Human Rights (UDHR), 1948; UNESCO, 2005). Although the deontological approach is criticized because it is not a gray area, it is important in terms of evaluating the four basic measures created during the pandemic period within the scope of responsibilities and obligations towards individuals own themselves and society.

Third, virtue ethics basic on the Greek philosophers Plato and Aristotle and is concerned with living

well and faring well (Etkin, 2016; Naomi Zack, 2009) . The person is pleased to behave virtuously, s/he does not do the virtuous behavior to get praise from others, and that is, person only chooses to be virtuous. It considers each person should have moral/ethical values to act and to attitude. This approach leads to moral autonomy as a person's self-determination, however at the same time; it brings also an individual's individual ethical responsibilities and obligations. Actually, virtue ethics becomes clearer with duty ethics and explains that rights and responsibilities should be evaluated together.

Fourth, an ethical approach is social contract theory and social justice. According to this theory, there is a contract between the public and the government. This contract has involved legal rules, social-ethical responsibilities, and obligations towards the public (Naomi Zack, 2009). Namely, the public is as part of the social contract, the public can give up some freedoms in return for the health benefits. Therefore the government's duty is to prepare programs, plan, and facilities for all health issues, and so it can mitigate, respond, and recovery. In this context, it takes measures to prevent people from harming

themselves and others by adopting a paternalistic attitude if necessary. Correspondingly the concept of responsibility and obligation has also determined in "The Universal Declaration on Bioethics and Human Rights" in Article 14 "Social responsibility and health": The promotion of health and social development for their people is a central purpose of governments that all sectors of society share" (UNESCO, 2005).

In the social contract, the theory has been described as people give up certain rights to the government in exchange for security, common benefits, and distributive social justice. This is necessary to save public health. In this context, the social justice theory of John Rawls (1921-2002) described that social justice's main aim is fairness and egalitarian principle and prevent "the veil of ignorance"(all human persons are equal in fundamental worth or moral status) and convenient for democracy which based on human rights. In other words, to remove "veil of ignorance" is to protect human dignity, equal right for human beings, and societal peace. Correspondingly, PHE prioritizes the health problems of society as the salience of population health, safety, and welfare; fairness and equity in the distribution of services;

and also respect for the human rights of individuals and public, (Daniels N, Kennedy B, & I., 2000; Gostin, 2001)”; and some prominent ethicists have also stressed that “**Justice is Good for Our Health**” (Daniels N et al., 2000) like John Rawls.

Therefore the main jobs of states and institutions is to have a two-kind of plan as **a preparation plan and response plan**. These plans may help produce peaceful and effective solutions to panic, fear, preventing disinformation with violation of human rights and conflicts. Firstly, the preparation plan aims to save the greatest number and restructure the conditions of response, so that, adequate responses do without or mitigate ethical violations. And the second plan should be prepared as a response plan to save all people. Because pandemic usually created some societal justice problems because of limited resources in terms of numbers of hospital beds, tests, ventilators, antiviral medications, and the number of healthcare personals. These ethical approaches are important for public health because the actions of collective ethical responsibilities and obligations may occur in a society consisting of both external experiences and individuals performing internal evaluations. Preliminary preparations,

plans, and practices made by taking into account science, legal and ethical theories also contribute to the awareness of the society about responsibilities and obligations of the individual, collective, and the state.

The COVID-19 pandemic has entailed responsibilities and obligations at a global level. Some measures include institutional, collective and individual responsibilities. These responsibilities and obligations have required some common restrictiveness in both individual and societal level in every nation. As a matter of fact, in the first months of the pandemic, countries around the world implemented not only quarantine/isolation but also lockdown and restricted travel (human mobility from in city to the whole country or beyond the country). However, as the economic problems deepened, these measures were loosened, and the new return to normal movement was initiated within the framework of the determined rules; **(1) using of face masks; (2) using hand sanitizers to be clean; (3) observing social distance (protection distance) between people; and (4) staying home as much as possible**. However, the effectiveness of these border measures can only be possible with the participation of the individual, collective and state

institutions. In short, these three responsibilities mentioned above have involved the eclectic combination of the four ethical approaches.

1. Individual ethics responsibility and obligations: Ethical responsibility is an indicator that the individual's ability to recognize, understand, interpret, and act autonomously on multiple principles and values, according to standards within a given field and/or context (Cemal, August 1 2016; Neves, 2005). Medical ethics includes the individual's fair use of medical services within the framework of their autonomy and their acceptance or refusal of treatment. However, since PHE aims to protect and maintain the health of society, it requires certain measures that restrict the autonomy of the individual (Giubilini, 2019). Therefore, PHE includes collective responsibilities and obligations.

2. Collective ethical responsibility and obligations: This ethical responsibility and obligations have included some restrictiveness of individual autonomy partially or completely (Giubilini, 2019). This situation occurs especially in extraordinary situations such as pandemics and disasters. When there are serious health problems such as a pandemic, PHE may require restrictive

measures such as quarantine, isolation, and vaccination, as well as less restrictive measures such as protective equipment, social distancing (contagious protection distance), which include collective responsibility. However, these obligations do not mean that total removal of ethical values. Therefore these obligations should involve some ethical principles, called the principle of less restrictive alternative (PLRA) measures become more vital (Giubilini, 2019).

3. State and institutional ethical responsibilities and obligations: The implementation of public health policies and ethical values is only possible if the state, relevant institutions, public health workers and society fulfill their legal and ethical responsibilities. In this process, the state is obliged to protect and improve human rights, which are at the main core of public health ethics. In addition, it includes the provision of necessary assistance and proper management of institutions and services, according to clear and transparent eligibility criteria and rights. Relevant state institutions are obliged to take measures to protect the health of individuals, namely society. In addition, these measures should also include ethical justifications. PHE does not ignore the ethical principles of

medicine, but in extraordinary situations such as a pandemic, it may include some individual right (autonomy) limitations such as quarantine/isolation, or lockdown and PLRA such as vaccine or using mask and so on. Because the purpose of these obligations of public health science and related institutions has protected public health and has also maintained state public policy. Therefore public health policy should involve public health measures but also be careful with these restriction measures; while these restriction measures include principles such as non-harm, utility, and justice, they should not completely eliminate the principle of autonomy. The majority of restrictive measures taken within the framework of public health policies followed during the COVID-19 pandemic are in line with individual ethical responsibilities. Of these, only quarantine, isolation, and lockdown have put a serious restriction on individual autonomy. However, using protective items of clothing (mask, social distance, and hand washing, and stay at home as possible as etc.) is convenient with the principle of less restrictive alternative (PLRA) (Giubilini, 2019).

Briefly, PHE is an important multidiscipline that takes into

consideration the goals and methods of preventive medicine practices within the framework of protecting and promoting the health of populations, as well as evaluate collective interventions of political and socio-economic conditions within bioethical values. For this reason, there is a needed implementation of **two kinds of plans as short and long term** (whose main purpose of them is described above); these may be detailed as: **first** adapted to the conditions involving various parameters and prepared clear intuitional policies; **second**, the maintenance obligation of healthcare professionals serving; **third**, resource allocation and priority setting during emergencies; **fourth** imposing restrictive measures; quarantine, lockdown/curfew, and up to PLRA (Giubilini, 2019) such as social distance, using protective equipment, hand washing and vaccine; **fifth**, consider international public health obligations; **sixth** calculate risk perception for each level and **seventh** is to inform the public to adapt to the existing conditions and ensuring good communication, and public health research.

In this study, we will discuss with examples the underestimation and even total lack of attention of PHE

measures that less constrain people's democratic-social and economic life in Turkey. Turkey's government had loosened COVID-19's type of isolation measures to stimulate the economy, adversely affected by the first wave of the pandemic like other sovereign governments. However, while economic activities returned to normal with social and political meetings (e.g., weddings, engagements, condolences, funerals, political meetings, the opening of mosques and shopping centers, private Quran courses, restaurants, and education) the number of cases increased sharply in the whole country as a result of people not paying attention to specific pandemic measures. For these reasons and the aim of the study, the researcher collected some online reports and videos to evaluate in terms of PHE specific restrictive and less restrictive measures. And all reports were evaluated to explain why some measures are not followed by some people.

Research Questions

Why do people not pay enough attention to less restrictive measures that will protect and sustain their lives health-socially and economically? What are the factors of the non-fulfillment of personal, social, and corporate responsibilities here?

Method

This study was conducted as a qualitative research on online media reports and interviews to explain public health ethics individual, collective responsibilities between 30th of June – 16th of November 2020. For this purpose, we collected some related events from online reports and YouTube interview videos. The review reports and videos were assessed according to the pandemic, PHE and individual-collective, and institutional responsibilities and obligations. We then determined keywords and searched on internet web sites and YouTube's into consideration. After that, pieces of reports were collected, associated, and separated according to their subjects. And, all results were collated and evaluated as public health ethics values and their individual, collective and institutional, responsibilities, and obligation.

Results and Discussion

The COVID-19 pandemic differs from other diseases in terms of the risks they pose for others, as well as its emergence processes due to the social determinants included in the concept of health. An effective response against the pandemic requires measures to be taken at the individual, collective and institutional levels. This study is

important because it is a study that includes cases, legal regulations, and emerging problems at the national level. Each country should put its issues to determine a common path around the world. In addition, it seems, organizations such as the World Health Organization, Control Disease Center, and Public health organizations and government are needed to study more to prepare more functional programs about the situation. And it is also so important because the pandemic cannot be prevented only by healthcare professionals and healthcare facilities; in order to control and eliminate the pandemic problem, each individual should fulfill their ethical responsibilities and obligations; and therefore, collective participation and institutional support are required.

However, there is no specific case-based qualitative or quantitative study on this subject in Pub Med, Google, Google Scholar, and Science Direct studies, however, only a few studies were related to individual, social and institutional responsibility. For this reason, this study data were evaluated and discussed within these studies.

1. Individual ethical responsibilities and obligations: It includes steps of protection of each individual (protective equipment, social distance, hygiene and

stay home as much as possible), individuals applying these behaviors with the same meticulousness, that is, accepting them as a collective ethical responsibility. In this context, when we examine the news and interviews in the media, it is seen that there are serious problems regarding individual responsibility and obligations. Evaluating the reasons of those who do not want to fulfill individual responsibilities and obligations will make a significant contribution to the solution of the problem in question. For this reason, news and interviews including the reasons of those who do not comply with the existing measures were selected.

The online media reports collected as an example under 4 subheadings regarding these responsibilities and liabilities have not clearly understood the pandemic problem at the individual level (Appendix A). I will not dwell on the number of cases here, because what matters is the frequency and nature of these cases. These are; **1.** Some Turkish customs such as hugs, condolences (take days), wedding ceremony, home visits (e.g., guests came to the house, we couldn't say no) hand or face kissing tradition and practices of religious holidays contributed significantly to the

increase of the pandemic. **2.** Some of the Covid-19 patients have tried to escape from the hospital or quarantine. **3.** The spoiled selfishness of famous people not to take precautions. **4.** Some people refuse to use masks and social distance for personal reasons (e.g., “I should attend political or social meeting”, “I am not affected by the pandemic”, “my working conditions, eating together in the job, and my transportation problems force me”, or I have more serious problems than pandemics (e.g., hunger, bills to be paid, rent, children's needs and so on). **5.** Those who strongly respond to the doctor's mask warning.

In addition, some YouTube Street Interview videos were analyzed (İlave TV, 2020; Media, 2020; Sarı mikrofon, 2020; Sor kaç, 2020; Street interviews, 2020; Tolga Taştemel, 2020). **According to these interviews were;** **1.** Some people do not believe in the presence of COVID-19, **2.** Some people put faith over the pandemic situation in thinking this sent by God/Allah, **3.** Some think that COVID-19 will not seriously affect them, **4.** Some indicated that the data show that the mortality rate is low; so, if they get infected they will be treated in the hospital, **5.** Some indicated that in any case, we will be infected by COVID-19,

maybe it is a destiny, and there is no need for panic. However, all of these negative attitude **6.** Some of them think that pandemic is not only a governmental issue but also on individual, collective and state-institutional responsibility.

When we consider these events, it is seen that there is a serious problem regarding individual ethical responsibility and obligations; it is seen that people escape from quarantine, celebrities see themselves as special, strongly disagrees to doctors and people who warn of wearing masks, and not obeying the social distance rule, they do not hesitate to ignore both themselves and other people, and even endanger their health. However, health authorities have stated that protection from the short and long-term consequences of the Covid-19 pandemic is only possible if every individual in the society acts with a sense of responsibility towards others. In addition, they stated that despite their explanation that protection from the short and long-term consequences of the epidemic is possible only if every individual in society acts with a sense of responsibility towards others, and the messages emphasizing the understanding of total solidarity in the

process, unfortunately, it has not been understood enough yet by people.

While evaluating these cases, we can of course accept that the state of fear and anxiety caused by being under threat of possible death is normal to a certain extent. And we know that people know only as much of knowledge as they can understand, and make sense of it and apply it. However, we can only allow the uncertainty, confusion and despair brought about by the pandemic to dominate human life to a certain time. This period should be short; people must take into account the direction and management of institutions as a social entity and understand the importance of solidarity in order to protect their own existence. Otherwise, we cannot control and mitigate the harm of the pandemic, individual ethical responsibilities, and obligations really play an important role. However, in this process, the feeling that security and health institutions can protect people from everything started to disappear, "With the COVID-19 pandemic, people have difficulties in being tested for COVID-19, the right to be diagnosed and treated from the state, and they have been disappointed on their thought and expectation that they cannot receive sufficient health, security and economic

support (Üstün & Özçiftçi, 2020). Therefore, people also developed some feelings such as anger, anxiety and fear (Bozkurt, Zeybek, & Aşkın, 2020; Yıldırım, 2020). In addition to all of this, another important reason is that health literacy, health news and health warnings are ignored. Sensational, tabloid-type news is in focus, while life issues are not. These show why a serious study is needed on health literacy and watching-listening to health news. Perhaps it would be beneficial for the media to present health news in a more striking way, to take part in this context, and to include in discussion programs. In addition, the inclusion of all institutions providing secular and religious education from kindergarten to health education programs (such as children's games, social activity planning games, and cartoons) and continuity in these programs can make this issue more effectively.

2. Collective ethical responsibilities and obligations: The organization and realization of collective movements are difficult, because people should share common aim and approaches. Therefore, for economic purposes, it is easy for people to come together and embrace joint action; we can easily see this in companies (Lewis, 1948). Business organizations do not ignore

their ethical responsibilities in order to maintain their own existence and increase the rate of profit, and develop different standards by which members of the organization can be judged for personal faults. Ethical and legal responsibilities and obligations are clearly stated in these organizations (Smiley, 2005). Members are limited in their powers or judged due to their unethical and illegal behavior, and therefore they face serious material and moral damage (Smiley, 2005).

However, that situation is different in public health. Especially during a pandemic, the way to break the chain of contamination is to block the contact chain. For that reason, collective understanding-attitude is important to break the chain of contamination. The spread of the virus will be prevented by finding and isolating the contact. People should follow voluntary or compulsory determined pandemic restrictions for two reasons both for the benefit of the individual and the benefit of the community. This study evidence stated that the common consciousness in the continuation of the spread of the pandemic; the effect of PH and PHE awareness is not sufficiently developed in society (**Appendix B**). These collected within five titles; **1.**People's

failure to comply with COVID-19 new normalization rules with hugs and hand kissing where at funerals, weddings, engagement ceremonies, continuing home visits between friends/relatives, frequent home visits, religious holidays and soldiers' farewell ceremonies; **2.** Companies do not report cases due to economic concerns; **3.**Koran courses (private religious education courses ignored the pandemic); **4.** Official education institutions to start education (despite the measures taken, COVID-19 positive cases emerged); **5.** Unfortunately, the society does not take into account the new normal living conditions in the natural disasters and important opening or meeting (Hagia Sophia opening, political meetings, flood disasters in Giresun, and an earthquake in İzmir and its districts etc.).

In the light of the data in **Appendix B**, we can clearly say that public health required, each individual to be self-conscious about health and public health, and their actions should be in line with the existing measures and associate this with their individual ethics. For that reason, the public health ethics organization and realization of collective movements are not easy, because people should share common aims and approaches.

Therefore, for economic purposes, it is easy for people to come together and embrace joint action; we see this in companies. Business organizations do not ignore their ethical responsibilities in order to maintain their own existence and increase the rate of profit and develop different standards by which members of the organization can be judged for personal faults (Lewis, 1948). Ethical and legal responsibilities and obligations are clearly stated in these organizations. Members are limited in their powers or judged due to their unethical and illegal behavior, and therefore they face serious material and moral damage. For that reason, if people don't tangible benefit is demonstrated, people don't care to act together and follow rules.

In this context, each individual is important, especially employees who are in contact with too many people for their job can spread COVID-19 without symptoms, children and teens should also be evaluated as a super-spreader group by authorities. Therefore, the authorities need to plan a serious child-adult education in order to increase public awareness and public consciousness about the knowledge and results that will enable joint action. In the program, individuals should be self-conscious about health and public

health, and their actions should be in line with existing measures and associate this with their individuals' ethical responsibilities and obligations. Thus, it can be ensured that they stop the behaviors that are a part of society's traditions and customs and have now become a habit during a pandemic.

In this context, it is stated that in the study conducted with 533 villagers in China, the villagers collectively followed pandemic measures with inform, control, public health leaders, and its committee and legal reasons (with penalty fear). However, the study in question is about villagers and it is undoubtedly much easier to control the limited population and area (Yang & Ren, 2020). However, population and area size constitute two serious barriers in cities. Therefore, reports in the media about the village and the villagers in Turkey is quite limited and seems to be focused on the city of these problems.

As a conclusion, the shortcoming in this context became very evident in the COVID-19 pandemic, and some of the people ignored the new normalization rules and returned to their pre-pandemic behaviors and meetings. This attitude prevented the pandemic from being brought under control, causing serious damage to the whole country. Taking

action to create collective awareness among people in the pandemic requires a special effort to ensure health literacy or media and health authorities should put extra effort to develop at least providing good listening and understanding of health-related information.

3. State and institutional ethical responsibilities and obligations: The responsibilities of the state and related institutions can be addressed from both an ethical and legal perspective. Because, taking into account the values of PE and PHE are possible by establishing strong, understandable, and traceable policies and clarifying the ethical and legal dimensions of these policies. The duty of the state is to improve the lives of people in every condition, and so, the ethical approaches, social contract, and social justice theory in the introduction part of the article, pandemic preparedness plan, and response plans are of vital importance. In this framework and specific to the pandemic necessary legal-ethical-social measures are; active case-finding studies by the application of screening tests of the relevant institutions of the state, definitive diagnosis, and treatment of suspicious cases, quarantine/lockdown practices, tracing of the contacts, and practices the

less restrictive four measures; **1.** Legal precautions and its penalties, **2.** Conflicting statements by government officials, **3.** Lack of multi-sectoral organizations. **4.** Seasons in pandemic planning, and finally **5.** Preparation for natural disasters every time (before-during-after) to prevent pandemic disseminate.

1. Legal precautions; penalties and incentives (Violating the measures regarding infectious diseases): According to the justification of the crime of violating the measures regarding infectious diseases, the protected legal value is "protection of public health". The relevant sanctions are determined as "crimes against the public health"(Bayzit, 2020; Yenerer Çakmut, 2014).

In the event of entering or escaping a place under quarantine despite being unauthorized, or in case of other actions that may be contrary to the measures taken by the competent authority, the following penalties are given to persons (Appendix C) within the framework of the laws in detail. The fine to be applied according to the 282th article of the General Hygiene Law (789-3180 TL), the penalty to be applied according to the 32nd article of the Misdemeanor Law (100-392 TL) and the 195th article of the Turkish

Penal Code. According to the opinion, imprisonment from two months to one year may be imposed (Bayzit, 2020). However, these legal rules do not involve or mention "using a mask", therefore, in the case titled "**The court canceled the mask penalty! Striking 'social state' emphasis**" in Appendix C, it was revealed that this issue could not be evaluated legally. This is undoubtedly due to the fact that this pandemic has different characteristics than other pandemics. Therefore, legal regulation needs to be reevaluated.

Besides that, in accordance with these legal regulations, **The Ministry of Interior issued various circulars to ensure controls during the pandemic process**; on September 11, 2020 a circular regarding the Imposition of a Dormitory Charter to Avoid Isolation was issued and the relevant practices were provided by the security forces; on September 12, 2020, "Circular on HES Code Obligation in Intercity Buses with 81", on August 15, 2020 "Circular on Public Rest and Entertainment Places Sent to 81 Provincial Governorships; On September 24, 2020, a Circular on Correctly Informing the 81 Provincial Governorships was sent and; on the date September 30, 2020 "Turkey Coronavirus General of the Comprehensive Audit to perform", and

the 81 Provincial Governors (Life is often home) HPP Code Theme 2 Circular (Türkiye Cumhuriyeti İç İşleri bakanlığı, 2020).

Although with these legal regulations and penalties some people still haven't followed the new normalization rules. The very high risk of transmission of COVID-19, people are still continuing to act within normal living customs and rules, and the lack of incentives as well as prohibitions have led to the pace of the pandemic.

Would incentives be more effective? Identifying low and high-risk professions in the pandemic and implementing financial incentives accordingly will make a serious contribution to the control of the pandemic. For example, the bus driver who is not allowed to take standing passengers will abide by this rule, because the government has prepared an incentive package to support his earnings. Hazard pay during a pandemic and providing incentives within new laws for essential workers such as significant financial incentives should be given to freelancers, tradesmen, unemployed people (including those who work in daily work) and those who disclose their duties such as collective flooding; rewarding the businesses-shop

owners that obey the rules (A. Parkhurst & Faulkner., 2020; Hecker, 2020).

1. COVID-19 Turkey government aid; the government decided to provide social assistance for unemployed people or limited work allowance for those who are at risk of being unemployed or losing their jobs. In accordance with the Additional Article 2 of the Unemployment Insurance Law No.4447, it has been decided to pay premiums to those who meet their working periods and premium payment conditions at the start of the short-term employment of the workers.

2. On the other hand, financial support should be provided for all healthcare workers due to the high-risk group and recognizing COVID-19 as an occupational disease and providing continuous financial support to the healthcare professionals and other hospital staffs, children and spouses of those who died from COVID-19. And healthcare workers all over the country took action with the cry "**We are running out, we are dying**" (ref). Because the disease and death caused by the COVID-19 make working conditions more oppressive and harder. Indeed, HCW felt this pressure the most. In addition, Turkish Medical Association and Turkish Mental Trauma and Disaster Psychiatry

Working Unit had an explanation. "Coordinator Dr. K. Laçiner pointed out that the burden of healthcare professionals is increasing day by day: "Healthcare professionals are caught with Covid-19 disease 14 times more often than society" (Birgün/Ankara, 2020).

In summary, the importance of financial incentives for better execution of the pandemic process should not be overlooked by the authorities and incentives should also be evaluated more among the measures.

2. Conflicting statements by government officials, World Health Organization (WHO) and scientists:

1.This conflict is seen in both explanations and some applications. In this regard, the limitations made in the data announced daily by the Ministry of Health or not disclosing those diagnosed with Covid-19 positive, but disclosing those diagnosed with Covid-19 and having severe symptoms played an important role in not knowing the total number of COVID-19 positive cases. Scientists make different explanations. Conflicting statements of the WHO about masks and medicines used for treatment (Ashley Yeager, Feb 28, 2020; Bayram Altug, 2020; Editorials, 2020; Mark Sableman, 2020). 2. Lack of consensus on all

meetings: While the meetings regarding weddings, condolences, engagements or national holidays were limited, political meetings such as party congresses or mosque openings seriously affected people's decisions regarding COVID-19.

Pneumonia rate of patients: 4.20%

Number of severe patients (red line):
3.439

Total number of healed patients (blue line): 414.278

Total death number: 11,507

(Türkiye Bilimsel ve Teknolojik Araştırma kurumu (TÜBİTAK), November 15, 2020.)

3. Lack thereof multi-institutional organizations: Turkey's health system, hospital and medical staff at the beginning of the pandemic quite successful because of employment. Besides it, the first important organization is the Coronavirus Scientific Advisory Board which is a group of medical scientists set up on 10 January 2020 by the Ministry of Health. And, a Covid-19 guide was prepared to collect information about the disease from a single source on January 14. However, as known that an open dialogue includes basic elements such as the right of all decision-makers to

access information (transparency), enabling all scientists to take a more active role, and so on. This also plays an important role in the trust, love, compassion, understanding, solidarity, cooperation, and sharing of difficulties between the society and the institutions and therefore the state. In a pandemic situation, continuous decisions are made at international-national, organizational/ institutional and individual levels. The sum of all these decisions constitutes the response to the epidemic. These decisions are based on scientific and correct information. Therefore to this important and necessary board, the establishment of a committee consisting of professional organizations, ethicists, and social scientists, along with this council, could be a significant contribution to the development of social common understanding against the pandemic. Considering the country in general, it is seen that “a common understanding and common attitude” against the pandemic has not been realized yet. Unfortunately, there is a deficiency in this regard. Because creating public awareness of Turkey in taking these measures can provide the continuation of social and economic life. For this reason, with the participation of every professional, social, and art

organizations, wider cooperation will make a very important difference. This team can evaluate risks from different angles and reach society by using many different resources such as pictures, movies, verbal narratives, drama, or understandable /simple scientific information of different people.

4. Seasons in pandemic planning: It is also important to evaluate seasonal factors in measures against pandemics (The Academy of Medical Sciences, 2020). What kind of measures should be taken for this issue, especially the special conditions brought by the winter season, and winter pandemic measures are still not determined. Healthcare professionals expect Covid-19 infections to increase this winter, as the virus that causes corona comes from the coronavirus family and other types of coronaviruses spread more during the winter months. In winter, virus-carrying particles can stay in the air longer, even in less humid air due to cold weather. In this context, besides the flu vaccine, it is important to provide basic winter requirements (clothes, warm house-office, food and flu medicines etc.) ventilation, and economic support.

5. Preparation for natural disasters: Indeed, natural-man-made disasters and pandemic processes have similar and different aspects. The sudden severity

of natural disasters (e.g., earthquakes, tsunami, storms and floods etc.) caused people to forget about the pandemic. Therefore, in any case, it is important to bring these extraordinary conditions under control and to find solutions to these problems. Otherwise, societal anxiety increases, insensitivity in society also appears as a problem, the struggle capacity of health workers decreases, problems in the use of resources increases and routine health services disrupted. Consideration of democracy and human rights has become one of the basic requirements while taking sharp measures to protect public health. According to the data of the US Geological Research Center (USGS), a total of 105 earthquakes of 6 or higher magnitude occurred in the world in 2020.

Furthermore, in the earthquakes that occurred in the world in 2020, a total of 198 people died and it is seen that 160 are Turkish. Turkey has experienced three natural disasters which were occurring in different parts of the city (e.g., 24 January 2020 6.8Mw Elazığ earthquake 41 people died and 1466 mild to moderate injuries, a flood occurred in Giresun on 22 August 2020 11 people died and 12 were injured and a 7.0 Mw earthquake and Tsunami occurred in Izmir on 2

November 2020, 114 people lost their lives, 1036 people were injured). However, the main harm was not derived from earthquakes, tsunami and flood, that is, the main harm was derived from weak buildings or city ground control error or creeping and sand withdrawal from streams brought disaster'. It is because of the fact that the opening of these areas to construction has caused the current damage to be greatly increased. Due to the rescue efforts in these serious natural disasters and the panic in society, people have significantly ignored the pandemic protocols. In this case, the number of COVID-19 positives has increased significantly. These painful situations revealed that the prepared plan should not only be for pandemic but also for natural or human-social justice theory.

Many pandemics have occurred throughout world history; these past experiences have pointed out that the pandemic can be controlled or eliminated with measures to be taken in all areas affected. For that reason having the pandemic under control is needed on individual, collective, and states, and related institutions and they should act in a framework of common understanding, common effort (i.e., policy and institutional plan and

induced disasters, taking into account all natural, social, and economic and number of population characteristics of the cities.

Conclusion

The pandemic is a global problem and requires some restrictive measures on a global level to protect and maintain health. A code of PHE which are evaluated very wide and high perspective in a multi-discipline area, for in a pandemic is necessary because ethics generally considers human life, human dignity, and well-being, whereas a pandemic threatens life and these values. Therefore PHE has involved in all ethical approaches such as utilitarianism, duty ethics or deontological perspective, virtue ethics, social contract, and

program on health, trade-economy, transportation, and education, etc.). All measures should also involve natural-man-made disasters, seasonal conditions, or some private conditions such as other socio-economic and health issues (e.g., chronic diseases, disabilities, refugees as special conditions as well as poverty, the unemployed, and those who have lost their job).

Providing PH and PHE needs some restrictive measures' under four basic ethical approaches whose main aim is providing healthcare professionals with more effective healthcare, preventing the spread of the pandemic at the community, and maintain health at both national and international levels. The basic principle of healthcare ethics is to determine the ethical responsibility and obligations aspects of decisions involving the whole society while improving, protecting, saving, and providing herd immunity for the health of the society, thereby protecting and maintaining human dignity, human rights, integrity, and legal-ethical rights of society. Correspondingly, public health precautions lead to a decrease or increase in the pandemic, namely the adequacy or insufficiency of the measures taken at the individual, collective, or state and institutional levels of people play an important role in controlling the pandemic. As known, in the pandemic, there are no good days for any of us unless each person takes their own responsibility as much as everyone else.

As seen in this study, Turkey has taken into account pandemic measures to protect public health convenient international rules. These

measures are seen as quarantine/isolation/lockdown which is more restrictive measures and on the other side the less restrictive measures, tailored to the state of the pandemic. However, at the same time, violations of these rules have occurred in many countries like Turkey. This situation reveals that not only legal measures are sufficient regarding the pandemic, but also that efforts should be made to achieve a common understanding, common behavior, and therefore a common attitude within the framework of common values and including human rights. However, in this case, there may be a struggle in accordance with the framework of public health ethical values.

In short, the real struggle against the pandemic can be realized in a short time with the public health ethics values such as the importance and integrity of human dignity, human rights, responsibility, solidarity, herd immunity, and common rights. International ethics code and declarations should a part of education for all countries to develop a higher and holistic understanding, conscience, and attitude against a pandemic.

Limitation

This study is limited to the events and interviews that took place

during the pandemic between May 22, 2020 and November 16, 2020 and featured in newspapers and YouTube videos. In addition, the mentioned news is limited due to a large amount of news, and each bit of news is included in Appendix (A-B-C) in detail. However, the news in question is a summary of the many events that

happened. Also, there was a possibility of some unreachable incidents or resources. Another important circumstance is that only a few articles explaining the behavior of people during the pandemic could not be reached, causing the discussion section to be in itself.

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Appendix A. PHE, Quarantine practices and Individual responsibilities and obligations

1. Some of the Covid-19 patients have tried to escape from the hospital or quarantine.

a. The person who tried to go to his wife in the hospital by violating the quarantine rules in Gümüşhane was caught at the police application point. Y.Ç, who was taken into custody at the application point and imposed an administrative fine of 3 thousand 150 TL, was taken to Ahmet Ziyaüddin Gümüşhanevi Dormitory, which was prepared for those in quarantine under the supervision of the 112 Emergency Service team. It was learned that Y.Ç. left his residence in Bayburt to go to his wife who was being treated at Trabzon Karadeniz Technical University (October 9, 2020).

<https://www.trthaber.com/haber/turkiye/karantinadan-kacti-polise-yakalandi-522015.html>

b. He escaped quarantine, went to have an eye examination. When the coronavirus test was positive in Beyoğlu, M.Ö., who decided to be quarantined at his home, went to the hospital because of the redness in his eyes. M.Ö. began to argue with the doctor who did not treat him because he saw that he was carrying the virus in the system. Thereupon, the police were informed. BC disappeared until the teams arrived. He was later caught at home and placed in a quarantine dormitory (October 06 2020).

<https://www.milliyet.com.tr/gundem/karantinadan-kacti-goz-muayenesi-olmaya-gitti-6323079>

c. The patient, who was infected with the virus in Zonguldak and should be in quarantine at home, was caught betting at the game of chance dealer (İHA September 06, 2020)

https://www.ntv.com.tr/turkiye/bahis-oynamak-icin-karantinadan-kacti,VzLDBkBEBEuISQMURBM_6Q

d. A Covid-19 patient with corona virus contact in Denizli escaped in violation of the quarantine rule. The person who went to the bus station to change the province was caught by the police teams (DHA August 30, 2020).

<https://www.ntv.com.tr/turkiye/corona-hastasi-karantinadan-kacti-otogarda-yakalandi,jvP7MKfFIUSYgy3d18bLyQ>

e. M.F. whose test was positive and yesterday's test turned negative in the recovery process. named party tickets to go to his city with the idea that the cut will be discharged escaped from quarantine grounds (September 12, 2020).

<http://www.yeniduzen.com/karantinadan-kacti-yakalandi-131417h.htm>

f. It was determined that Osman S., who had a positive coronavirus test in Suhut district of Afyonkarahisar, violated the quarantine and went to the market. Police resettled Osman S. in

the dormitory after criminal action (September 29,2020).

<https://www.olay.com.tr/karantinadan-kacti-markette-yakalandi-628014>

g. The person who got on the bus from Aksaray while he was supposed to be in quarantine and who was found to have pierced the quarantine in the inspections carried out by the teams in Sakarya became the first quarantine penalty in the city. The person who is placed in the KYK dormitory and will stay in the dormitory for 9 days will meet all his expenses(September 17,2020).

<https://www.bizimsakarya.com.tr/guncel/karantinadan-kacti-sakarya-da-yakalandi-h124560.html>

h. According to the information received, S.G. in Seyitgazi district was quarantined on the grounds that it was corona virus contact. Not waiting for the end of the quarantine period, S.G., who went out, was caught by the police teams. Legal action was taken against the citizen on the grounds that he did not comply with the ban (November 11,2020).

<http://www.anadolugazetesi.com/eskisehir-de-karantinadan-kacti--139631.html>

i. U.G. (37), who was taken to home quarantine by the filming teams for visiting her mother-in-law with coronavirus, left her home and went to Didim by failing to comply with the measures. U.G. caught by the police teams (September 15, 2020).

<https://www.aydinkulis.com/genel/karantinadan-kacti-didim-de-yakalandi-h20900.html>

j. Ş.Y. had a positive record from the Covid-19 test and should be under home isolation. However, he did not, the police teams found him at the street, contacted with 112 teams. Taken to the ambulance by health teams, Ş.Y. He was later taken to Malatya Training and Research Hospital (August 30, 2020).

<https://www.haberler.com/karantinadan-kacti-denetimlerde-yakalandi-13554886-haberi/>

k. Bursa Provincial Health Director Dr. Halim Ömer Kaşıkçı stated that they encountered striking examples in the radiation studies during the pandemic process and said, "When we called a case whose coronavirus test was positive, we learned that he had his hair done at the hairdresser as part of the wedding preparations. Our teams immediately went to the hairdresser and we took the patient into isolation" (October 9, 2020).

<https://www.mygazete.com/gundem/karantinadan-kacti-oyle-bir-yerde-yakalandi-ki-h49490.html>

l. The woman should be under quarantine at Taksim First Aid Hospital , escaped from the hospital. The woman was caught by police teams in Taksim/İstanbul (March 23, 2020).

<https://www.veryansintv.com/taksim-ilkyardim-hastanesinde-karantinadan-kacan-kadin->

[yakalandi](#)

m. The person who should have been in quarantine at home due to the corona virus (Covid-19) in the Sandıklı district of Afyonkarahisar was caught by the gendarmerie teams while traveling with a tractor. He was placed in the KYK dormitory, where he was quarantined after he applied a fine of 3 thousand 180 TL (September 26,2020).

<https://www.cnnturk.com/turkiye/karantinadan-kacti-traktorle-seyahat-ederken-yakalandi>

2. The spoiled selfishness of famous people not to take precautions.

a. Korona EB. escaped from quarantine! He was closed to the quarantine dormitory with his lover (September 18, 2020). <https://www.youtube.com/watch?v=6N5rIF8be5E>

b It was noteworthy that actress M. Boluğur did not persistently wear a mask wherever she was seen. Upon this, Boluğur said, “I am a person who prefer distance. I am born as a socially distant person, therefore I shouldn't use a mask 29.9.2020.

<https://www.internetgundem.com/merve-bolugur-ben-zaten-dogustan-sosyal-mesafeliyim-dedi-3557h.htm>

3. Those who refuse to use masks and social distance

a.Salih Ergün, who runs a clothing store in Gölcük, warned Yunus E., who came to the store with his family for Eid shopping, about wearing a mask. However, Yunus E., who rejected this proposal, attacked the business owner Salih E., who warned him to wear a mask. Salih Ergün, who was hit on the head with a hanger iron, remained on the ground in blood (28.07.2020).

<https://www.haberturk.com/son-dakika-haberler-maske-takmayi-reddedip-is-yeri-sahibini-darp-etti-2757499>

b. A woman warned at the market for not wearing a Mask. She threatened market employees (August 5,2020). <https://onedio.com/haber/maske-takmadigi-icin-gittigi-markette-uyarilan-kadin-bana-bak-lan-dort-goz-benim-canimi-sikma-kafani-gozunu-patlatirim-913314>

4. Those who strongly respond to the doctor's mask warning

a. A doctor working at the Family Health Center in Karabağlar district of Izmir was battered in an argument after he asked people who came for examination to wear a mask. Another doctor who was trying to break the fight by intervening was injured as a result of being hit on the head with a hard object 30.6.2020.

<https://www.sabah.com.tr/yasam/2020/06/30/maske-takin-diyen-doktoru-darp-ettiler>

b. After the treatment of G.B, who came to the emergency room of Bornova Türkan Özilhan State Hospital due to heart disease, doctor M.B warned of a mask. Two people, one of whom was a woman, beat the doctor who gave the warning and threatened with a knife on October 11, 2020.

<https://www.medimagazin.com.tr/ozel-saglik//tr-maske-uyarisi-yapan-doktoru-once-bicakla-tehdit-etti-sonra-darp-etti-9-681-91731.html>

c. At the Istanbul Çapa Medical Faculty Hospital, a person battered a health worker who told him to wear his mask correctly. It was stated that the health worker who was injured in his eye was operated (25.09.2020). <https://www.birgun.net/haber/maske-uyarisinda-bulunan-saglik-calisanina-saldiri-ameliyata-alindi-316914>

e. Violence to mask warning: A 10-year-old girl who played hide-and-seek with her friends in the gaming room of the site yesterday evening in Esenyurt, Istanbul. She first warned them for not wearing a mask, and then took videos on her mobile phone to inform the authorities about the Hayat Eve Sığar (HES). Therefore she was battered by foreign national women (30.09.2020). <https://onedio.com/haber/istanbul-da-maske-uyarisi-yapan-10-yasindaki-cocugu-darp-ettiler-924679>

Appendix B. Super-spreader events and collective responsibilities and obligations

1. People's failure to comply with COVID-19 new normalization rules at funerals, weddings, engagement ceremonies, and soldiers' farewell ceremonies.

Failure to comply with the bans imposed on weddings, engagement ceremonies, and condolence tents within the scope of the Coronavirus epidemic in many cities such as Diyarbakır, Gaziantep, Şanlıurfa, Adıyaman, Mardin, Şırnak, Batman, Elazığ caused an increase in the number of cases. Finally, in Diyarbakır, a coronavirus patient who attended a Mevlit dinner infected 37 people with the virus. In the normalization process that started on June 1, it is worried that such gatherings may increase the number of cases. Dicle University Infectious Diseases and Clinical Microbiology Department Lecturer and

Covid-19 Intensive Care Coordinator Prof. Dr. Recep Tekin pointed out that the new normalization is mixed with the old normalization. Prof. Dr. Tekin said the following:

Our people perceive this process as the old normalization process. It was perceived that we would not use masks, we would make contact at close range, we would go to mass meals. Since we did not pay attention to these, our number of cases increased. We definitely need to know that what we mean by normalization must be the new normalization. The new normalization also has certain standards, masks, social distancing, and cleanliness. (03 June 2020).

<https://www.milliyet.com.tr/gundem/son-dakika-i-dugun-ve-taziyeler-corona-virus-vakalarini-artirdi-6225932>

2. Companies do not report cases due to economic concerns

a. Governor of Kırklareli, Osman Bilgin, announced the big mistake made in the corona Kırklareli Governor Osman Bilgin invited all institutions and citizens to comply with the measures taken against the corona virus and announced that they detected 30 new cases due to the hiding of the case (October 14, 2020).

Kaynak Yeniçağ: Governor of Kırklareli, Osman Bilgin, announced the big mistake made in the corona.

b. Living in the district of Emet, İ.E. Covid-19 test was applied to Ç.E. The pair, whose test results were positive, were taken to home treatment. The radiation teams of the District Health Directorate also identified the people with whom 2 patients were in contact. However, İ.E. and Ç.E. did not report the names of some of their contacts to the filming team. Emet District Governorship also filed a criminal complaint to the prosecutor's office. The Prosecutor's Office launched an investigation against the couple for "making false statements to a public official who has the authority to issue an official document" (October 16, 2020).

3. Private Quran courses

a. Cases are increasing in children attending Quran boarding courses. When the capacities were increased in the Koran courses, where education has been allowed since June, coronavirus cases started to be seen. Dr. M. Yıldırım, from the mobile medical team, stated that although the children should spend the quarantine in the dormitory, positive cases were sent to homes by public transport with the decision of the mufti and the provincial health director (by A. Özbek, September 29, 2020)

<https://bianet.org/bianet/toplum/231763-yatili-kuran-kurslarindaki-cocuklarda-vakalar-artiyor>.

b. It was learned that the coronavirus test of a mosque imam who worked as a temporary instructor in the Central Male Quran Course affiliated to the district mufti in Camikebir District of Mentеше District was positive. While the imam, whose coronavirus test was positive, was hospitalized, the Quran course was quarantined (September 15, 2020).

<http://www.mugladevrin.com.tr/haberler/mugla-haberleri/mentese-de-kuran-kursunda-koronavirus-soku>

c. The corona virus test of the female teacher and two students in the Kaynarca Central Girls' Quran Course was positive. While the teacher and the students were quarantined at home, the course suspended education until a second order (September 28, 2020).

<https://t54.com.tr/haber/5517023/kuran-kursunda-korona-panigi>

d. Scandal in the Koran course: 40 children who continued to stay in bed were caught with coronavirus. In the Koran Course, where they continued to study despite the coronavirus epidemic, coronavirus were detected in 9 children. After the children were quarantined in the course, the number of cases increased to 40 (October14,2020).

<https://www.birgun.net/haber/kuran-kursunda-skandal-yatili-kalmaya-devam-eden-40-cocuk-koronaviruse-yakalandi-319187>

4.Official Education

Samsun Governorship announced that the test results of 2 teachers and 3 students in Baruthane Secondary School located in first step district were positive. The Governorship stated that it was decided to quarantine students and teachers who may be in contact and that distance education was started (October 18, 2020).

<https://www.cumhuriyet.com.tr/haber/2-ogretmen-ve-3-ogrenci-pozitif-cikti-1774231>

5. COVID-19 is forgotten in special openings and natural disaster

a. Hagia Sophia has been a museum for 86 years; it will be converted into a mosque in 24.07. 2020. 350 thousand people attended the prayers in Hagia Sophia. Unfortunately, the crowd in question did not pay attention to the pandemic rules with the excitement of praying (July 25, 2020).

<https://tr.euronews.com/2020/07/24/ayasofya-n-n-ibadete-ac-lmas-n-dunya-medyas-nas-l-gordu>.

b. Flood disaster in Giresun: Loss of life increased to 8. Floods occurred in Giresun, Samsun, Rize and Trabzon. Vehicles drifted along the roads, retaining walls collapsed. The number of people who lost their lives in the flood rose to 8. Secretary of State for Home Affairs Minister Soylyu stated that the search for 8 people continues. According to the statement made by AFAD, 157 citizens were rescued in the ongoing intervention works with a team of 988 people and 288 vehicles after the flood in Giresun (August 24, 2020).

https://www.ntv.com.tr/galeri/turkiye/giresunda-sel-felaketi-7-kisi-hayatini-kaybetti,7WvIFT_7p0u63Oc

c. As seen in the video, attention was not paid to covid-19 measures at the political meeting held later (August 31,2020).

<https://www.msn.com/tr-tr/video/unluler/erdo%C4%9Fan-corona-salg%C4%B1n%C4%B1na-ra%C4%9Fmen-giresunda-miting-yapt%C4%B1-%C3%A7ay-da%C4%9F%C4%B1tt%C4%B1/vp-BB18yKvC>

Appendix C. State and institutional ethical responsibilities and obligations

1. Legal sanctions: Regulations on communicable diseases are generally included in the Public Health Law [7] and TCK numbered 5237, article 195.

a. Article 195 of the TCK: the purpose of the Criminal Code

ARTICLE 1- (1) Purpose of the Criminal Code is to protect the rights and freedoms of individuals, public order and security, the rule of law, public health and the environment, public peace, and to prevent crime. The law regulates the basic principles of criminal responsibility, crimes, punishments, and types of security measures in order to achieve this goal. Within the framework of this legal regulation, those who do not comply with the quarantine measure are punished (October 20, 2020).

<https://www.mevzuat.gov.tr/MevzuatMetin/1.5.5237.pdf>

b. Public Health Law (UMUMI HIFZISSIHA LAW)

Law Number: 1593; Acceptance Date: 24/4/1930; Published in Official Gazette: 6/5/1930
Issue: 1489; Code of Publication: Series: 3 Volume: 11 Page: 143

Aim: Improving the sanitary conditions of the country and struggle against all diseases or other harmful agents that harm the health of the nation, ensuring the healthy upbringing of the future generation, and making the people receive medical and social assistance are among the general government services.

<https://www.mevzuat.gov.tr/MevzuatMetin/1.3.1593.pdf>

c. Law on Misdemeanors:

Law Number: 5326; Acceptance Date: 30/3/2005; Published in the Official Gazette: Date: 31/3/2005 Number: 25772 (Duplicate): Code of Publication: Series: 5 Volume: 44

Purpose Article 1- (1) In this Law; to protect the social order, general morality, general health, environment, and economic order.

<https://www.mevzuat.gov.tr/MevzuatMetin/1.5.5326.pdf>

d. Turkish Criminal Law

Article 138 related that intentional manslaughter and so, people who don't follow the pandemic rules can be trial with this article.

e. The court canceled the mask penalty! Striking 'social state' emphasis

The administrative fine of 392 TL imposed on E.N. İ for traveling without a mask in Bolu was canceled by the court. The reason for the decision was that "both the principle of being a social state and the imposed obligation bring financial burden, the state is obliged to provide 3 masks per person every day (13.07.2020).

* **Article 19 of Turkey Constitution** - it is regulated that nobody's freedom and security can be restricted without a court decision, and that they should be submitted to the approval of a judge within 24 hours, even if restricted in case of necessity.

* **Article 23 of our Constitution** stipulates that the freedom of residence and travel can only be restricted by law.

The 64th article of the General Hygiene Law regulates the measures regarding epidemic diseases. There is no obligation to wear a mask in any of these measures.

* Moreover, even while we agree that such a requirement, **Turkey Constitution Article 2 of the Republic of Turkey** is envisaged that the social state of law, when you bring economic as a liability if the principle of the social state, it was clear that should be borne

by the state's obligations.

* It has been decided to abolish the administrative fines, which do not comply with the law, because of the principle of being a social state and the necessity of being a financial burden, that the state is obliged to provide 3 masks per person every day, as required by the above-mentioned Constitution and laws. DHA

<https://www.sozcu.com.tr/2020/gundem/mahkeme-maske-cezasini-iptal-etti-dikkat-ceken-sosyal-devlet-vurgusu-5928646/>

2.Conflicting statements by government officials

a. Turkish Medical Association “If we do not show the picture clearly, we cannot run the process well. Due to the epidemic, our 26 physician friends lost their lives by paying serious costs. We are concerned that these efforts will go to waste. Why is there a difference between the figures announced by the governors and the figures of the Ministry of Health, the Minister of Health should explain this? (August 7,2020)

<https://www.enpolitik.com/guncel/turk-tabipleri-birligin-den-bakan-koca-ya-cagri-celiskinin-nedenini-aciklayin-h323185.html>

Health Minister Fahrettin Koca made a statement after the Coronavirus Scientific Committee meeting held today. Stating that the number of healthcare workers who tested positive for Kovid-19 has exceeded 40 thousand, Koca explained that the number of healthcare professionals who died due to coronavirus reached 107. Explaining that there was a 50 percent increase in coronavirus cases in the last month in Istanbul. However, Minister Koca said that they did not think of restrictions in the city (October 14,2020).
<https://www.evrensel.net/haber/416516/fahrettin-koca-testi-pozitif-olan-saglik-calisanisayisi-40-bini-gecti>

Among the number of coronavirus cases, the data announced by the ministry and by independent health professional organizations are generally inconsistent. In the press release made on September 30, Health Minister Fahrettin Koca said that not all cases are considered patients and that only people with Covid-19 symptoms are included in the coronavirus data announced daily. While Koca's statement caused reactions, the former president of the Turkish Medical Association, Prof. Dr. S. Adıyaman said, "Every case is a Covid-19 patient (October 10 2020 by E.Akgül). <https://www.sozcu.com.tr/2020/saglik/prof-dr-adiyaman-her-vaka-bir-covid-19-hastasidir-6062416/>

b.Health Minister Dr. Fahrettin Koca's announcement that the patient-case distinction has been made to the public since July 29 2020, people who do not show symptoms even

though the COVID-19 tests are positive, are not included in the tables, and only those who show symptoms are explained under the title of 'patients', which created a new situation. This situation has increased the anxiety in the society because not all figures are disclosed.

<https://www.enpolitik.com/guncel/turk-tabipleri-birligin-den-bakan-koca-ya-cagri-celiskinin-nedenini-aciklayin-h323185.html>

c. Prof. Dr. A.Saltık stated that approximately 40 thousand beds allocated for the pandemic in Istanbul are full, intensive care units are even more full. How is our hospital beds filled with so few daily new diagnoses? (November 16, 2020)

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