

February 2022

# Mandatory Vaccination

SPECIALISTS FROM THE FIELDS OF MEDICINE, ETHICS,  
THEOLOGY, AND LAW OFFER CONSIDERATIONS AND  
PRACTICAL SUGGESTIONS FOR THE CHURCH

## Status Quo

### Authority of the State & Personal Rights:

- Protecting public health is not the only task of a government
- There must be a balance between protection of public health and protection of personal freedom and rights
- In times of crisis, personal freedoms can be restricted to protect public health

### The Importance of Health Services:

- A functioning health service is crucial to the wider functioning of society

### Truth, Lies, and Social Media:

- There is a significant presence of information and misinformation online
- Trust in public bodies has diminished overall
- A common understanding of 'truth' is crucial

## What can be recommended?

REPORT BY JASPER KNECHT  
POSTER BY STEFANIA KNECHT

## Conclusions & Practical Suggestions

Currently, the emergency has not yet reached the threshold for limiting personal liberties. So, the Church should walk a middle line:

- **encourage voluntary vaccinations** on the basis of loving one's neighbour, contributing to the proper functioning of society, and supporting the state in caring for those in need
- **oppose the mandatory vaccination** based on the lacking protection of civil liberties and the impact of fines on families with limited resources

To conscientious vaccine objectors the question is asked: "**How are you self-sacrificially serving your community?**"

## Contributors

Prof Dr J. Wyatt, Medical Ethics & Medicine (Neonatology) (UK)  
Dr A. Turkanik, Biblical Studies & Public Theology (AT)  
Dr D. Miner, Medicine (Pulmonology) (AT)  
Dr M. Wieser, Medicine (Dermatology) (AT)  
Dr J. Chaplin, Public Theology & Political Theory (UK)  
Dr D. McIlroy, Law & Theology (UK)  
Dr M. Magelssen, Medicine & Medical (Clinical) Ethics (NO)  
Dr J. Knecht, Church History & Theology (NL/UK)

# Mandatory Vaccination

SPECIALISTS FROM THE FIELDS OF MEDICINE, ETHICS, THEOLOGY, AND LAW OFFER CONSIDERATIONS AND PRACTICAL SUGGESTIONS FOR THE CHURCH

## Full Report

On Monday 10th January 2022, the *Quo Vadis Institute* organised and hosted a Focus Group, aiming to reflect more deeply on the (medical) ethical, legal, and theological questions associated with the proposed mandatory vaccination in some European countries.

### STATUS QUO

In November 2021, the Austrian government announced that from the 1<sup>st</sup> of February 2022, a general vaccine mandate would come into force—which it now indeed has. The mandate applies to all citizens over the age of 18, with exceptions for pregnant women and those medically exempt.<sup>1</sup> For non-compliance, fines can be given every three months and are maximally 3600 EUR. Besides the fine, the proposed legislation might also include the possibility of wider prosecution, and thus have ramifications for one's housing- and job security, and restrict general access to the public sphere. In light of this legal change—and similar ones currently proposed or investigated in Germany—a plethora of different but related questions arise. Many of these relate to the proper understanding of the authority of the state and obedience to the state, the nature of the common good, the call to love one's neighbour, the possibility and need for personal and critical reflection—allowing space for one's conscience and faith, the balance between personal and societal responsibility, and the crucial need to protect the weak in our societies. This report contains a brief distillation of some of the main points considered, starting with some fundamental considerations and parameters, followed with some practical suggestions of how the Church can have a constructive stance in this time.

### AUTHORITY OF THE STATE & PERSONAL RIGHTS

Protecting public health is one of the main tasks of any government. However, public health—important though it is—is not the only central task. The government is called to protect its population's liberties and right to bodily integrity, maintain security and order, create an environment in which commerce can flow and businesses can thrive, provide public services like transport, water, electricity, and

---

<sup>1</sup> Ricarda Opic, "Was der Gesetzesentwurf zur Impfpflicht vorsieht", published in *Der Standard* [5.12.2021]: <https://www.derstandard.at/story/2000131683084/gesetzesentwurf-zur-impfpflicht-strafen-bis-600-euro-alle-drei-monate>; Zia Weise, "Austria's vaccine mandate to apply from February 1", published in *Politico* [16.1.2022]: <https://www.politico.eu/article/austrias-vaccination-mandate-to-apply-from-february-1/>.

international communication. As such, the state is constantly required to adjudicate and balance the implications of their actions with regards to all these aspects.

Therefore, this task of the protection of public health stands in constant dialogue with personal freedoms and rights: freedom of movement, right of assembly, right to bodily integrity, the right to refuse medical treatment, etc. If these rights did not counter balance the task of the state to protect, one can easily imagine a situation in which the state becomes increasingly dictatorial in its mandates and diktats. As both the need for the protection of public health and civil rights stand in conversation, in times of crisis, one of two scenarios would be possible: either the state no longer works to effectively promote and strive for public health—in favour of maintaining individual rights, or personal rights are, to some extent, suspended or restricted. As the first of these is not a desirable, we must acknowledge that civil liberties are not absolute: if the health crisis is serious enough, there are situations imaginable in which the government, in a far-reaching manner, restricts public movement, requires invasive medical care (like a vaccine), and restricts the right of assembly. However, such a decision must not be taken lightly and ought to have a clear and identifiable outcome, which indeed averts a catastrophic mass-casualty event or significantly erodes the proper functioning of public life. An absolute threshold cannot be given, but in balancing the basic tasks of the government (including both civil liberties and public health) and the severity of the health crisis, such a decision can be made.

#### THE IMPORTANCE OF HEALTH SERVICES

The discussions currently mainly centre around infections rates and hospitalisations. An important aspect of the whole situation that ought to be properly acknowledged, is the central place our health services have in the proper functioning of our societies. Health services keep people in their jobs, keep people living longer, and are as such one of the foundational prerequisites of our current societies. A failing health service would quickly lead to many more services failing (transport, water, electricity, bureaucracy, schools, entertainment, etc.) since the people working in those industries cannot be helped and thus cannot work. This is a difficult concept to practically acknowledge, but maintaining a functioning health service truly is fundamental—so governments trying to protect the health services is a hugely important task.

#### TRUTH, LIES, AND SOCIAL MEDIA

One last consideration is the presence of huge amounts of misinformation online and in various media-outlets. It is a statement of fact that trust in public bodies—e.g. government, media, scientists—has drastically diminished over time. Because of this

combination of distrust and misinformation, citizens are finding it increasingly difficult to differentiate between what is 'true' and what is 'false'. The absence of this basic requirement for public debate makes the balance the governments are trying to strike between their need to protect the health services and the possible restriction of civil liberties challenging. In this, the role of social media cannot be underestimated.

## Practical Suggestions

- MANDATORY VACCINATION

So where does this leave us? In our considered opinion, in light of the decreased efficacy of the vaccines to prevent infection with the Omicron variant, the decreased severity of the disease, and the state of our health services, the threshold to restrict or diminish the right of bodily integrity and remove the voluntary nature of health care has not been reached. Hence, it seems to us, that any government that requires a blanket vaccination mandate in the current situation is overreaching. In balancing the related considerations, the government would be neglecting its task to protect civil freedoms in favour of a misplaced conclusion drawn from the current medical and societal challenges and pressures.

So, at this point in time, the Church could object against mandatory vaccination on the grounds mentioned above and object to the astronomical height of the fines, possibly drawing families with tighter budgets to the brink of poverty. However, this is not an absolute conclusion. If a virus variant were to emerge, much more virulent this time, there could be a situation in which the balance of concerns would sway in favour of a vaccination mandate.

This conclusion with regards to the mandatory vaccination should not be interpreted to say that the Church should not be advocating for the trustworthiness of the scientific community, should not be guiding its members in understanding what is true and what is false, and should not be encouraging people to get vaccinated. Vaccines do contribute to the general well-being of our neighbour, do contribute to the proper functioning of society, and thus do support the state in caring for those in need, our neighbours in our countries.

At this moment, Christian organisations, churches, and people should thus straddle the middle line: objecting to the mandatory vaccination but encouraging voluntary vaccination and compliance with smaller measures like mask-wearing and social distancing, if required.

- NEIGHBOURLY LOVE

Supporting the call for vaccination, what is needed is a concerted attempt to show that 'our neighbour' is not only that person whom we know and can see, but that also in society at large we recognise our neighbour. The Enlightenment has drawn us to think that civil liberties are the highest good, that the right of the individual trumps all. A Christian ethic acknowledges the importance of this, but also includes self-sacrificial love, altruism, laying down our life for a friend, and protecting those in need. Grounded in the life and work of Christ, these virtues include the possibility of personal harm. A reorientation both with regards to who our neighbour is and the reintroduction of those crucial Christian virtues could give a coherent ground to argue for vaccination.

- CONTRIBUTION TO THE COMMON GOOD

If, on whatever ground, one remains conscientiously objecting to the vaccination, we could ask the question of whether there are other ways in which the individual could contribute to the common good, could give shape to those Christian virtues of care and self-sacrificial love. If not through vaccination, what does the care for the neighbour look like for the conscientious objector? Could they self-sacrificially contribute to the health service, to their community, or their Church community?

## In attendance were:<sup>2</sup>

Prof Dr J. Wyatt, Medical Ethics & Medicine (Neonatology) (UK)

Dr A. Turkanik, Biblical Studies & Public Theology (AT)

Dr D. Miner, Medicine (Pulmonology) (AT)

Dr M. Wieser, Medicine (Dermatology) (AT)

Dr J. Chaplin, Public Theology & Political Theory (UK)

Dr D. McIlroy, Law & Theology (UK)

Dr M. Magelssen, Medicine & Medical (Clinical) Ethics (NO)

Dr J. Knecht, Church History & Theology (NL/UK) | Report

---

<sup>2</sup> We acknowledge the underrepresentation of female voices in this panel. We will work to balance this in future gatherings.