Would it be Right to Make Vaccination Mandatory?

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Sources of Information about Vaccination

Vaccination Knowledge Project (University of Oxford)

https://vk.ovg.ox.ac.uk/vk/

Public Health England vaccination data

https://www.gov.uk/health-and-social-care/health-protection-immunisation

Public Health FOI requests

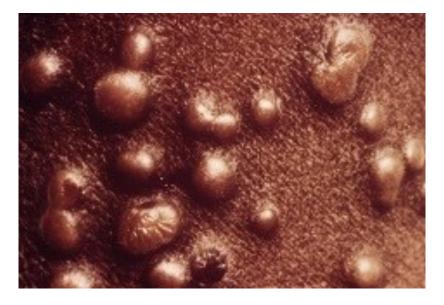
https://www.ons.gov.uk/aboutus/transparencyandgovernance/freedomofinformation foi



Benefits of Vaccination



Smallpox

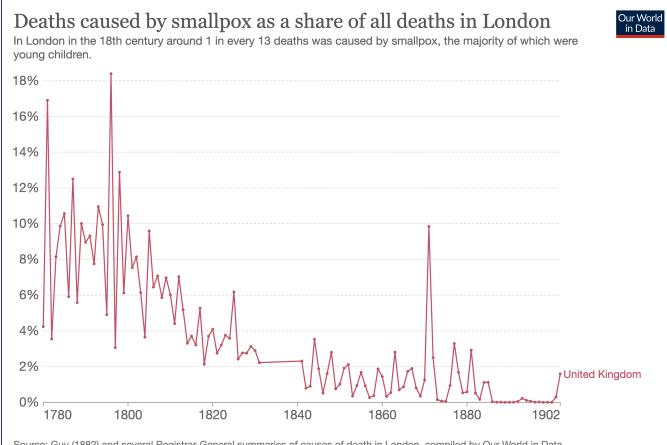


Smallpox lesions

- Spread person-to-person (saliva and droplets in breath)
- Incurable
- Fatality: 30%
- Survivors could be left with severe scarring



Smallpox

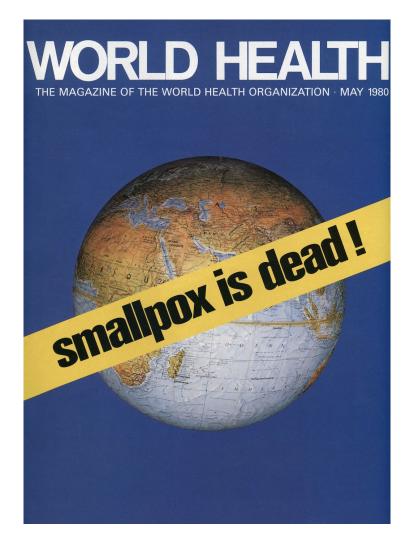


Source: Guy (1882) and several Registrar-General summaries of causes of death in London, compiled by Our World in Data. OurWorldInData.org/smallpox • CC BY This shows the impact of Jenner's vaccine on smallpox cases in London 1800 – 1900.

 Vaccination Act 1853 (England and Wales)



Smallpox



- Estimated deaths during 20th century: 300-500 million
- Smallpox Eradication Programme 1959-1980
 - Widespread vaccination programme
- Declared eradicated: 1980



Polio

- Spread via only via person-to-person contact (unclean hands, faecal matter, sneeze, cough)
- Incurable (ventilators, physical therapy, antibiotics)
- Causes: meningitis (1-5%), paralytic disease (0.1-0.5%)
- Fatality: 2-10% death rate for paralysed
- Survivors could be left muscle pain, weakness



A boy in an Emerson Respirator, which enabled him to breathe after losing his muscle control due to polio infection (USA, 1975)



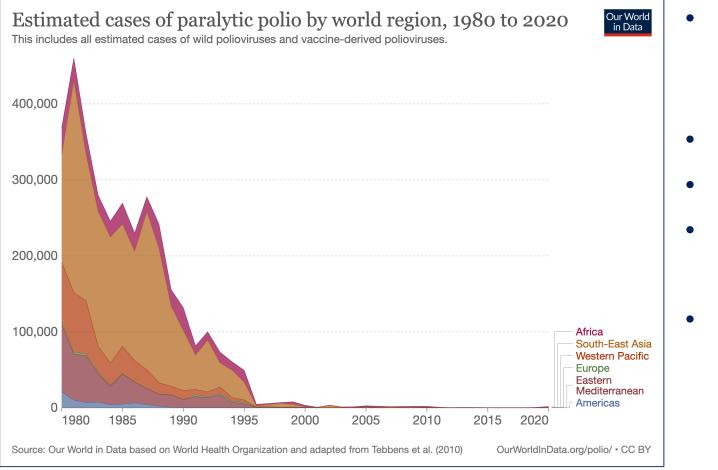
Polio

Our World in Data Reported paralytic polio cases and deaths, United States, 1910 to 2019 The reported figures include both wild- and vaccine-derived type polio infections that occurred indigenously and as imported cases. 50,000 40,000 30,000 20,000 10,000 **Polio Cases Polio Deaths** 1910 1940 1960 1980 2000 2019 Source: Our World In Data based on US Public Health Service; US Center for Disease Control; and WHO OurWorldInData.org/polio/ • CC BY

- Vaccinations developed in the 1950s
- Europe declared polio-free: 2002



Polio



- Global Polio Eradication
 Initiative: 1988-present
 - 1988: 350,000 cases/year
 - 2000s: 1000-2000 cases/year
 - 2021: less than 700 cases/year
 - Estimated to have prevented at least 2.2 million cases



Current Vaccination Schedule

what, when, how and why?



Vaccination schedule

Vaccines we give and the diseases against which they protect (at 8, 12 and 16 weeks)

6-in-1 vaccine (3 doses)

- Diphtheria
- Hepatitis B
- Hib (Haemophilus influenzae type b)
- Polio
- Tetanus
- Whooping cough (pertussis)

MenB (2 doses)

- Meningococcal group B bacteria
- Rotavirus
- Pneumococcal infections

Rotavirus (2 doses)

Rotavirus

Pneumococcal vaccine (PCV)

Pneumococcal infections



Vaccination schedule

Vaccines we give and the diseases against which they protect (between 2 and 16 years)

Hib/MenC

- Haemophilus influenzae type b (Hib)
- Meningitis C

MMR (2 doses)

- Measles
- Mumps
- Rubella

Flu vaccine (yearly)

Further doses of MenB and pneumococcal vaccine

Covid vaccine

4-in-1 preschool booster

- Diphtheria
- Polio
- Tetanus
- Whooping cough (pertussis)

HPV

human papillomavirus

MenACWY

Four strains of the meningococcal bacteria that cause meningitis and blood poisoning (septicaemia)

3-in-1 teenage boosterPneumococcal infections



Vaccination schedule

Vaccines we give and the diseases against which they protect (adults)

Covid vaccine

Pneumoccocal vaccine

Tetanus booster

Shingles vaccine (older adults)

Whooping cough vaccine (pregnant people and family)

Flu vaccine (yearly)



Why these diseases?



1. Protect the vaccinated individual from non-communicable diseases



Tetanus

- Does not pass between persons
- Caused by bacteria in wounds
- Painful muscle spasms
- High temperature
- Can be treated but can take a long time to recover



2. Protect the vaccinated individual from communicable diseases



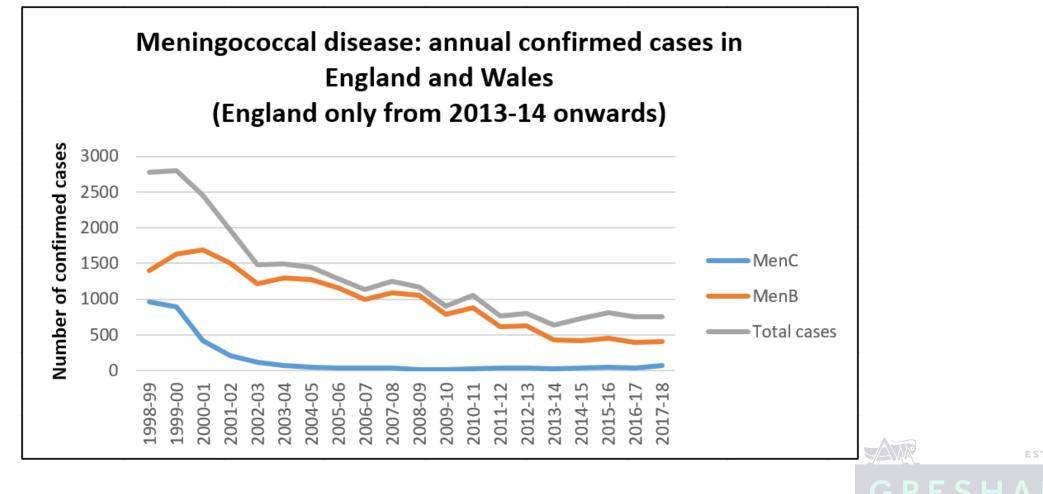
Charlotte Cleverley-Bisman, who had all four limbs amputated following meningococcal septicaemia.

Meningococcal infections

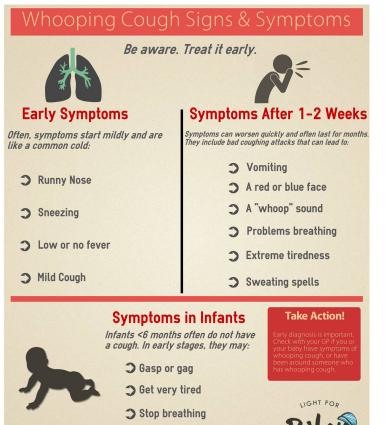
- Rare but can be very severe
- Can cause meningitis and septicaemia
- Complications include:
 - Deafness
 - Nervous system problems
 - Amputation of limbs
 - Brain damage
- 10-15% of people with meningococcal disease will die



Impact of Vaccination on Meningococcal Disease in England and Wales



3. Protect others from contracting communicable diseases



) Have seizures

Whooping cough

- Drop from around 2000 annual deaths (1950s) to average of 4 deaths annually (2002 – 2011)
- Babies are too young to have vaccinations
- Protective effective of vaccination wanes
- NHS vaccinates pregnant women
- The 2012 programme works: 91% reduction in risk for babies born to women who were vaccinated



4. Protect others from the impact of communicable diseases

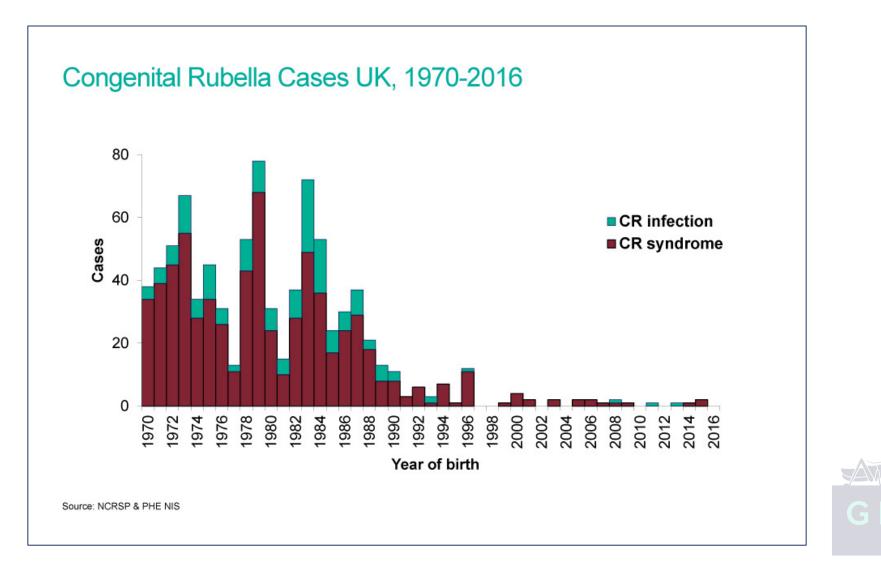
Rubella and Congenital Rubella Syndrome

- **Rubella** causes mild symptoms such as rash, joint pain and headache
- In rare cases, leads to encephalitis, pneumonia and bronchitis
- If experienced in pregnancy, can cause congenital rubella syndrome in foetus
 - Hearing problems
 - Eye problems
 - Heart problems
 - stillbirth





Impact of Vaccination on CRS in UK



R E S H A M

Why Do People Refuse Vaccinations?





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1. Vaccines can be harmful

Minor risks

- a sore arm from the injection
- feeling tired
- a headache
- feeling achy
- feeling or being sick
- vomiting

Major risks

- Blood clotting (Covid vaccine)
- Anaphylaxis (6-in-1)
- Fits and seizures (6-in-1, MMR)
- Encephalitis (DTP)
- Chronic arthritis (MMR)
- Paralytic polio (OPV)
- Guillain Barre syndrome (Flu)
- → Conclude that risks of vaccination are greater than the benefits to themselves or their children

Vaccine Damage Payment Scheme

"If you're severely disabled as a result of a vaccination against certain diseases, you could get a one-off tax-free payment of £120,000. This is called a Vaccine Damage Payment.

You can also apply for this payment on behalf of someone who has died after becoming severely disabled because of certain vaccinations. You need to be managing their estate to apply."

https://www.gov.uk/vaccine-damage-payment



Vaccine Damage Payment Scheme

Between scheme's inception in 1979 and January 2022 (43 years)

- a) 7212 claims registered
- b) 946 awards made
- c) 5,524 claims rejected
- d) 742 claims pending
- d) The total paid out in claims is £75,230,000.00.



2. Diseases are not that severe

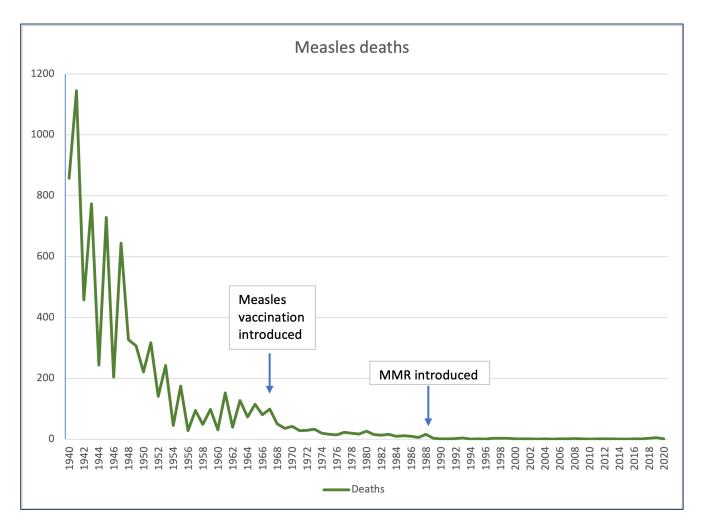


Wolf_Death_Breath · 4 yr. ago

She's right. Measles isn't dangerous. Measles is an integral part of childhood development. How do you think people back in the 1700s survived!!!!! ^{/s} because I can't be too careful nowadays



3. We don't need vaccines to prevent disease

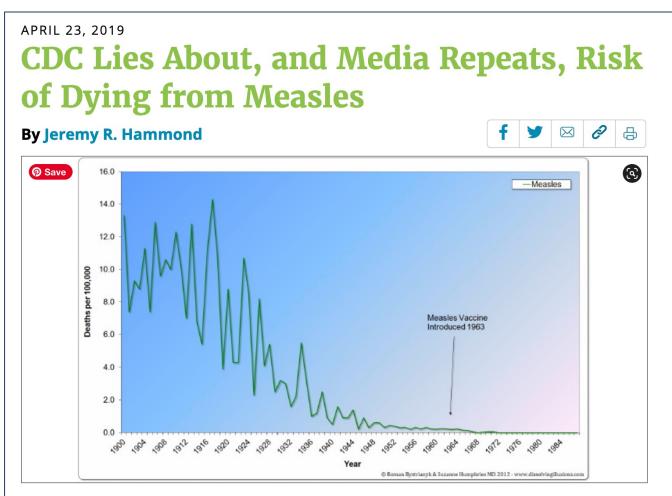


Measles

Public Health England estimates that vaccination has prevented 4,500 deaths and 20 million cases since 1968.



3. We don't need vaccines to prevent disease

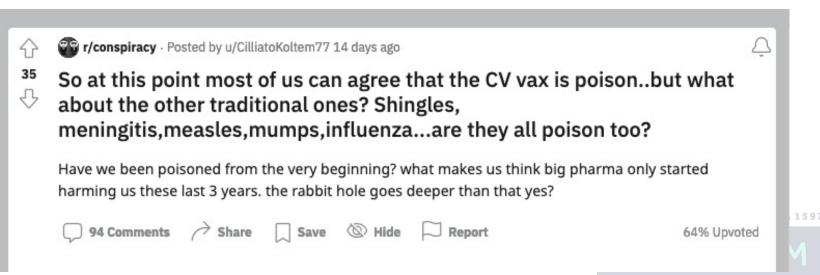


Government health officials and the mainstream media claim that for every thousand children infected with measles, one will die. But that is a blatant and deliberate lie.



4. Mistrust

- Information is misleading or false
- Information is part of a conspiracy
- Governments or institutions have agendas
- Governments may be influenced by pharmaceutical companies
- General mistrust
- Specific mistrust



5. Moral objections to how vaccines are made

Vaccines are created using:

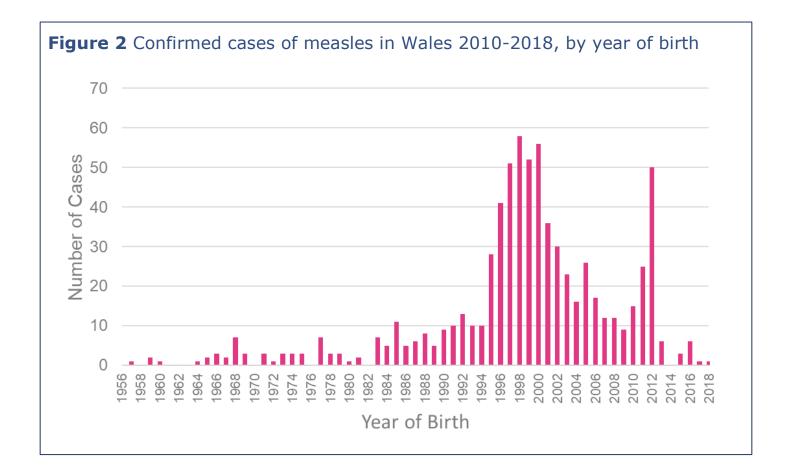
- Human cell lines
 - MMR
 - Shingles
- Cell lines derived from aborted foetuses
 - HEK-293 used to manufacture Oxford-AstraZeneca Covid vaccine
- Animal products (cell lines and animal products)
 - Polio
 - 6-in-1
- Genetically Modified Organisms
 - Nasal flu vaccine



Why do we need to do anything?



Decreases in vaccination, increases in disease



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What should we do?



Starting with Autonomy





G R E S H A M

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Strategies that can be used to increase vaccination uptake

- Public health campaigns
- Education campaigns
- Objective information provision
- Nudges
- Incentives
- Condition of access to services
- Compulsory education
- Fines
- Incarceration



Least Restrictive Alternative principle

- Public health principle
- Presumes importance of protecting autonomy

Principle

When choosing between policies that are equal in all other respects (including public health outcomes), the option that *least restricts liberty* should be adopted.



Pros and Cons of Mandatory Vaccination

Pros

Promotes the interests of vaccinated people Protects vulnerable third parties Fulfils obligation to protect children Prevents free-riding Shares burden of risk fairly

Cons

Infringement of liberty Contributes to social and political polarization

Discourages participation in healthcare systems

Reduces trust

Harmful impacts

Fails to respect value pluralism



Mandatory Vaccination Models

- Forcible vaccination
- Incarceration
- Community service
- Fines and financial penalties
- Withholding of benefits
- Exclusion from services
 - Educational settings



Starting with Fairness





Exemptions and Conscientious Objection



Conclusions



Thank you!

