

## **Is compulsory vaccination of care workers really ethical?**

Daniel Sokol

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According to a leaked paper submitted to the Covid-19 Operations Cabinet sub-committee, the Prime Minister and Health Secretary are planning to make vaccinations compulsory for care home workers.

This would be a historic change, reminiscent of the Vaccination Act of 1853 which made smallpox vaccinations compulsory for all children. This triggered considerable resistance at the time and so too would compulsory vaccination in 2021.

Human rights lawyers have already expressed concerns about the legality of the proposal. No doubt the lawyers will argue that it is an impermissible violation of care workers' right to individual autonomy, which includes their right not to have the state jab needles into them without consent, and that it discriminates against black, Asian and minority ethnic workers who make up a high proportion of care home workers.

What about the ethics of compulsory vaccination? It is trite to say that 'good ethics starts with good facts' and part of the difficulty here is predicting what will happen if vaccination is made compulsory for care home workers. If it will lead to hordes of workers leaving the profession and low morale, it may undermine the very purpose of compulsory vaccination, which is to protect the health of those who are being cared for by these workers. Before implementing this policy, it is vital to predict as accurately as possible what will flow from it.

The same exercise should be conducted for *not* enforcing vaccination. What would happen to care home residents if a significant proportion of carers are not

vaccinated? If the answer is bleak, with death and ill health in abundance, then that is a reason to consider compulsory vaccination.

A common ethical argument against compulsory vaccination is that it represents a violation of personal liberty: "it's my body and I can choose whether or not I get vaccinated!". In the UK, this principle is so potent that a competent adult can refuse life-saving medical treatment. A Jehovah's Witness can decline a blood transfusion even if that will lead to certain death.

In this case, however, the response is that vaccination will prevent harm to others and that this justifies a relatively minor restriction on liberty. I say 'relatively minor' because for most care workers vaccination is low risk, low cost, low burden and highly effective. It is also not coerced because the worker can always choose to leave the profession. No one will be pinned down and forcibly vaccinated against their will. Nonetheless, it is plain that compulsory vaccination would likely cause distress to some care workers and disproportionately affect BAME workers.

Another important consideration is whether there is a less restrictive alternative to compulsion. Might educational initiatives and incentives, like extra pay or other benefits, do the trick? If so, that would resolve the fundamental tension between personal autonomy and the public good.

If no less restrictive option exists and harm to others would be averted, if care workers at higher risk of the vaccine are excepted and the workforce will not be badly depleted, I believe compulsory vaccination would be ethically justified to prevent serious harm to a vulnerable population.

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