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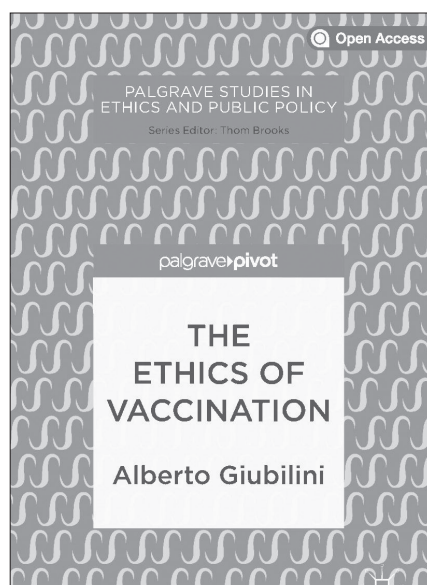
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Alberto Giubilini: The ethics of vaccination

Reviewed by Marius Kunte

Little did Alberto Giubilini know that one year after his book *The Ethics of Vaccination* was published, Western societies would start engaging in debates about vaccination policies. However, the senior research fellow at the University of Oxford offers an alternative to the path that most governments have chosen to fight the pandemic. Instead of trying to increase vaccination rates through symbolic public appeals, Giubilini advocates for compulsory vaccination against relevant diseases. His bioethical perspective can be classified as a contribution to the ‘demandingness debate’ in moral philosophy (van den Hoven 2007). Giubilini argues that compulsory vaccination is an acceptable, reasonable demand which we can put to individuals without over-burdening them. He wants to offer a reasonable claim for why states have an obligation to require all those without medical contra-indications to get vaccinated against common transmissible diseases. Unwarranted refusal to vaccinate oneself or one’s children should be illegal and punished by a significant fine. Because many scientific aspects in this complex debate are morally relevant, the need for an empirically informed, interdisciplinary ‘ethics of vaccination’ is apparent from the outset. Giubilini follows this trajectory in four interconnected chapters. Although reading the first two chapters separately offers interesting insights, the book is best understood when viewed as a coherent whole. While Giubilini appeals to informed academic peers and the general public alike, familiarity with basic ethical concepts and philosophical parlance will enhance the reader’s understanding of the book’s nuanced yet assertive argument.

The first chapter serves as an introduction into key concepts and explains their moral relevance. Giubilini lays out the fundamental assumption that vaccinating oneself or one’s children is an ethical choice: It goes beyond self-interest as it contributes to protecting others from harm. This leads to a key pillar in Giubilini’s framework, which is to treat herd immunity, i.e. the indirect protection from infections that requires a certain level of common immunity to stop transmission, as an important public good. Herd immunity does not hold mechanisms of exclusion, does not diminish when individuals benefit from it, and can only be attained through cooperation. Under this premise, getting vaccinated is a contribution to the public good. By definition, it requires collective action and creates the adjacent collective action problem (‘free-riding’; a premise that is disputed by Bradley/Navin 2021). Ultimately, this makes herd immunity a matter of collective responsibility. But as some evidence



suggests, not enough people feel individually obliged to get vaccinated. For Giubilini, this observation calls for state regulation and an ethical debate about compulsion.

Having established the basic assumptions of herd immunity as a public good and vaccinations as a moral problem, Giubilini delves into a detailed philosophical discussion of responsibilities and objections to his argument in the second chapter. Linking an ethical review of the harm principle, claim rights or best interest with an examination of vaccine science, he elaborates why individuals are unconditionally the bearers of a moral obligation to accomplish herd immunity. In essence, the individual contribution to this shared collective responsibility should be a moral duty when

undertaking it is sufficiently easy. Subsequently, because a single vaccination is insufficient in realising herd immunity, an obligation that applies individually to each member of a collective has to be justified. As the missing piece of the puzzle and his original contribution to the debate, Giubilini argues for a basic principle of fairness: Since realising a shared collective responsibility comes with burdens, they should be distributed fairly.

Fairness as the bridging factor between collective responsibility and individual obligations requires what Giubilini labels a *political* understanding of moral responsibility. Besides getting vaccinated, supporting or at least not hindering state policies that aim for herd immunity becomes part of the individual moral obligation. From this ethical interplay of collective and individual responsibilities, Giubilini derives an institutional obligation for the state to implement such vaccination policies and to ensure the realisation of herd immunity. Although Giubilini makes sure to highlight that democratic states are in a strong moral position to enact such policies (but not any policy imaginable), this part of his argument seems to be prone to substantial criticism. It would have been necessary to thoroughly discuss the possible implications of his proposed individual obligations under non-democratic circumstances (e.g. to not even protest coercive vaccination policies).

The third chapter elaborates on the idea of an institutional obligation. It provides a careful and context-sensitive analysis of its implications for vaccination policies. Assuming herd immunity as the only aim, Giubilini discusses policies with varying intrusive character against the backdrop of the principle of least restrictive alternative (PLRA). This widely accepted public health principle states

that authorities should choose those available, effective policies that are the least infringing upon individuals' rights. The alternatives are presented in the form of an intervention ladder that includes – from zero restrictiveness to coercion – persuasion, nudging, financial incentives, disincentives (i.e. penalising a legal choice; like mandatory vaccination as a prerequisite for school or day care enrolment), and, not only as a measure of last resort, compulsion (making non-vaccination illegal). Giubilini deals with the sometimes open question of each method's effectiveness by referencing scientific literature and discussing their ethical indications in light of various social circumstances and other relevant variables. Following our intuition, those interventions seem ethically preferable that are least restrictive for those who are most heavily burdened by them (so Giubilini invokes a version of Rawls' *maximin* rule). Meanwhile, coercion is understood as the psychological influence of a certain vaccination policy; people feel coerced when they see no acceptable or reasonable alternative. Since this violation of free will is *prima facie* morally wrong, coercion is in need of a moral justification. Thus, the realisation of a public good like herd immunity would have to outweigh the violation of autonomous decision-making. On the PLRA's terms, moving towards the coercive end of the spectrum would presuppose proof that those policy options further down the intervention ladder are ineffective in attaining herd immunity.

Contrary to this position, Giubilini makes an ethical case for compulsory vaccination that does not rely on the ineffectiveness of less restrictive policies in the final chapter. In short, his provocative and certainly debatable argument depends on slightly leaving behind the first major pillar of his book – herd immunity (which, for no clear reason, reappears at the end of the chapter) – to advocate for more recognition of his own addition to the ethical debate about vaccination policies: Giubilini suggests fairness as an ethical value that should not be outweighed by the PLRA or compromised by liberty and expected utility. In his view, in a 'proper' understanding of those concepts, there is no conflict to be balanced. What is more, fairness is not only an ethical value informing policymaking (and instrumental in ensuring cooperation) but also one of the goals of policies that aim at providing public goods. Broadening the scope of vaccination policies' objectives allows him to question the ethical assumptions that seem to rule out compulsory programs (as discussed in the previous chapter). As for Giubilini fairness trumps the restrictions on liberty and autonomy, he also rejects granting non-medical exemptions to those who oppose vaccinations ('conscientious objection').

When there is an individual obligation, the state is morally justified in implementing unqualified compulsory vaccination. Thus, when the aim is not simply herd immunity but universal vaccination coverage and a fair (equitable) distribution of hardship, Giubilini presents compulsory vaccination as the most successful policy. In his understanding, compulsory vaccination does align with the maximisation of expected utility, with a fair distribution of burdens of reaching a collective, public good, and with the requirement not to infringe on any relevant liberal right. However, outright *forced* vaccination is not defended by Giubilini's logic because he is concerned with ethical in-principle examinations.

All things considered, *The Ethics of Vaccination* is a carefully researched and convincing project. It is validated by scientific literature from various relevant disciplines (medical science, psychology

or economics) but not blind towards the inherent uncertainty of scientific insight. Giubilini is generally successful in providing an accessible knowledge base. He is aware of the book's limited perspective, proactively highlighting a Western bias for most of its content ("a book about an ethics for the privileged", 10) and points to global injustices. Especially because there is a global dimension to the problem of infectious diseases, this frame seems debatable. A similar challenge concerns the incorporation of relevant scientific details, e.g. how much specific vaccines prevent transmission or how much of an influence different levels of infectiousness should have on our assessment of a compulsory policy's restrictiveness. Giubilini does cover these questions and calls them relevant. He pre-emptively meets the underlying objections by saying that he is making a non-pragmatic case. However, they seem to (significantly) weaken the power of his position when it comes to policy implementation (Navin/Attwell 2019). Despite those challenges, Giubilini lives up to his stated aim: He presents a reasonable argument for why there is an ethical obligation for the collective to realise herd immunity and for the individual to get vaccinated against certain infectious diseases.

However, we should move beyond Giubilini's perspective on time: Not only are parts of current populations potentially harmed by those who do not contribute to herd immunity, but also all members of future generations. Diseases are also a risk for those who cannot protect themselves because they just have been or are not yet born, so they deserve to be considered in public health ethics. They should be seen just as worthy of protection as those present members of society who cannot (sufficiently) protect themselves against infections and their side effects. In Giubilini's framework, this would call for a philosophical examination of whether yet unborn people have the same claim right to be protected from preventable harm as present individuals do. Such a position could also reference Rawls' veil of ignorance to justify compulsory vaccination: Why should we accept the possibility of being born into a world full of harmful, easily preventable diseases as fair?

Treating systematic vaccination as a tool for transgenerational prevention of disease outbreaks and their socio-economic side effect (which tend to disproportionately affect young generations) has been stipulated by Atzinger and Henn (2020). It appears to be in line with Giubilini's thinking, who calls attention to the apparent legitimacy of mandatory child vaccinations. Demanding that adults get vaccinated in order to avert harm from unborn children could just as well be justified by a principle of fairness. If children are obliged to do their share in providing herd immunity even without consenting, it is especially hard to justify vaccine refusal for adults when the objective is to provide for transgenerational justice. This broadened perspective would reinforce Giubilini's narrative: His empirically backed appraisal of the freedom and safety that the elimination of some diseases has afforded to present generations (Chapter 1) and his extensive effort to derive forward-looking moral responsibilities (Chapter 2) logically make herd immunity a crucial condition for the wellbeing of future generations. But then, we again have to rethink Giubilini's focus on the privileged nations. As the pandemic has shown, no one is safe (from infectious diseases) until everyone is safe. So although compulsory vaccination regimes do not have to be global, treating vaccines as a global public good seems imperative.

Under these premises, the policy implications Giubilini presents appear to be even understated. A fortified collective and institutional responsibility for promoting herd immunity provides a strong moral mandate for expanding state aid in the development, production, and distribution of safe and effective vaccines. The state community is primarily capable of incentivizing and funding preventive research that might not generate profit even if it succeeds (Ritvo et al. 2005). As Atzinger and Henn (2020) have argued, aiming for transgenerational justice will imply the global eradication of transmissible diseases and hence much more action and cooperation from the wealthy states. And it is not far-fetched to demand state action that makes vaccines free of charge and as easily accessible as possible. Once states have laid this foundation, individuals should indeed feel morally obliged to protect themselves, others and those who will be born from most infectious diseases as an expression of basic solidarity. By way of such an extension, Giubilini's thought-provoking plea for collective, institutional, and individual obligations to reach high vaccination rates serves as a powerful and timely voice of support for intergenerational justice.

Giubilini, Alberto (2019): The Ethics of Vaccination. Cham, Switzerland: Palgrave Macmillan. XV, 126 pages. ISBN 978-3-030-02067-5 (hardback). Price €29,12. (Free e-book available through open access at <https://doi.org/10.1007/978-3-030-02068-2>).

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