Vaccine Refusal and its Legal and Ethical Consequences

M. Costello (Michael Costello)¹, J. Drgova (Jaroslava Drgova)², J. Bozik (Jozef Bozik)³, A. Murgova (Anna Murgova)², A. Gallova (Andrea Gallova)², N. Bujdova (Natasa Bujdova)², P. Tomanek (Pavol Tomanek)²,³, M. Olah (Michal Olah)²,⁴,⁵, C. Muss (Claus Muss)²,³

¹ Panuska College of Professional Studies University of Scranton, Scranton, PA, USA.
² St. Elizabeth University and F.P. Freybergh Institute (GAP), SEUC Vienna, AU.
³ Dept. of Social Medicine School of Medicine, Comenius Univ. Bratislava. SK.
⁴ I-GAP Vienna, branch Zurich Switzerland, CH.
⁵ The PRIGO University, Havirov, CZ.
⁶ St. Elizabeth University of Health and Social Work, Dr. P. Blaha Institute, Skalica, SK.

E-mail address:
michael.costello@scranton.edu

Reprint address:
Michael Costello
University of Scranton School of Education
USA

Source: Clinical Social Work and Health Intervention Volume: 11 Issue: 2 Pages: 9 – 11 Cited references: 8

Keywords:
Vaccination. Anti-science.

Publisher:
International Society of Applied Preventive Medicine i-gap

CSWHI 2020; 11(2): 9 – 11; DOI: 10.22359/cswhi_11_2_02 © Clinical Social Work and Health Intervention

Abstract:
Vaccine refusal as a part of anti-vaccination campaign is of great concern. This note highlights the praxis of the EU/US governments to use legal and economic influence to stop the decrease of the percentage of vaccination coverage as a threat to the global health in development countries of EU/US.
Introduction

Vaccination coverage presents since 2000 a surprising paradox - in developing (low economic insecure) countries the coverage is increasing also due to free support financed by the World Bank (WB) and the Global Fund (GF). However, in developed - high income countries the coverage with basic vaccines has been a decreasing trend due to irresponsible journalism and anti-science groups dominance in some media and social nets. Some large European cities report less than 85% coverage for basic vaccines (tetanus, diphtheria, pertussis, hemophilia B, hepatitis B, polio, pneumococcus) at birth, & in 1 and 8 - 12 years of life (vaccines against measles, rubella, mumps). This phenomenon cause - in the era open visa free policy of the EU to Ukraine and other non-Schengen states an unprecedented threat. (1-2)

Action from EU/US

How EU Member States and US react.

At least three independent reactions are needed to stop this negative phenomenon:

1 Financial - Fines for basic vaccine refusal e.g. in Italy may reach 10,000 Euros, other member states expect penalties between 500 to 5,000 Euros.

2 Ban of access to school - Slovakia passed a bill proposal (2019) to not allow unvaccinated children into pre-school education. Some Scandinavian states do not allow those children to attend kindergarten and some US states (New York, California) exclude unvaccinated even from primary school. In 2015-2020 in communities of Pennsylvania (Amish, Mormons, Orthodox Jewish) quarantine measures were introduced.

3 Refusal of Entry and Asylum process. Turkey does not allow to enter TK for migrants without vaccine record and apply MMR and Polio - DTP directly on the border. UK denies asylum process for vaccine refusals.

4 Failure to break quarantine is subject to high penalties in Czech Republic, PR China during the COVID-19 epidemics in 2020.

Conclusion

The vaccination coverage decreased from 2010-2020. Vaccine refusal as a part of an anti-vaccination campaign is of great concern. This note highlights for EU/US governments use legal and economic influences to stop the decreasing percentage of vaccination coverage as a threat to global health.

References:

2. UNHCR ANNUAL REPORT. NEW YORK UN. 2019, 132 pp.