



A discussion
paper for
Australian
Salvationists:

Vaccinations



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Produced by The Salvation Army Australia Moral and Social Issues Council



Introduction

What is the purpose of a vaccine? A vaccine is given to strengthen the body's immune system. They may be given orally or by injection. Our body is continually exposed to harmful bacteria and viruses. Our immune system identifies these 'unhealthy' intrusions and develops antibodies that can lock onto and destroy the virus. Vaccines strengthen our immune system by training it to recognise and fight specific germs which it may not have encountered before.

For over 200 years medical science has been applying this knowledge by exposing our bodies to dead or weakened viruses. When someone receives a vaccine, their immune system creates antibodies that are then 'remembered' for action against future exposure to those germs or viruses. This process literally saves lives. Vaccines for rubella, hepatitis A, chicken pox, polio, influenza and more are regularly used in Australia.

Even though vaccines have been used for more than two hundred years, there are a number of questions that keep being asked. Should vaccinations be mandatory? Is it ethical to refuse a vaccine? Who should have access to a vaccine and how can they be distributed fairly? Can we be sure that a vaccine will not harm us? Is it ethical to receive certain vaccines? These questions have a renewed relevance as we respond to the COVID-19 pandemic. This paper will explore just some of the issues and the examples will provide insight into what is a rapidly evolving topic.

For the latest on COVID-19 vaccines, visit <https://www.health.gov.au/initiatives-and-programs/covid-19-vaccines>



In contrast, in a population where the vaccination rate is low, if one or two cases are introduced into a community, outbreaks will occur.

1. Individual rights v collective rights

WHAT IS THE ISSUE?

When it comes to vaccinations, how can we balance individual rights and collective rights?

DESCRIPTION

The fact that nearly every state in the world has accepted the Universal Declaration of Human Rights is testament to the high value placed on individual human rights.ⁱ However, while most of the articles focus on individual rights, this is balanced by Article 29, which states that:

Everyone has duties to the community in which alone the free and full development of his personality is possible.

In the exercise of his rights and freedoms, everyone shall be subject only to such limitations as are determined by law solely for the purpose of securing due recognition and respect for the rights and freedoms of others and of meeting the just requirements of morality, public order and the general welfare in a democratic society.

Article 29 makes the case that with individual rights comes a duty to protect the rights and freedoms of others in the community. Some people oppose vaccinations as an imposition on their rights as an individual. In contrast, a public health perspective focuses on the benefits of vaccination to the community

as a whole. Individuals may have many reasons for opposing vaccines, including concerns over possible adverse reactions to the vaccine. Others believe that vaccines are not necessary because herd immunity will eventually protect us all. But the human cost of achieving herd immunity can be devastating. An individual's decision to not take a vaccine may adversely affect others in their community.

Many preventable diseases are transmitted from person to person. If one person receives an infectious disease in a population, that individual can spread it to those who are not immune. Some people cannot receive a vaccine because they are too young, too old, too ill or allergic. But if most people receive the vaccine there is less chance that it will spread to those vulnerable people who cannot tolerate the vaccine.

In contrast, in a population where the vaccination rate is low, if one or two cases are introduced into a community, outbreaks will occur. For example, in 2013 there were significant epidemics in New York City and Texas, mostly among low-vaccination communities.ⁱⁱ A parent's decision not to vaccinate their child affects not only the child but also other children. Moreover, since the child cannot make a decision, the parent's autonomy may be at odds with the child's welfare.

BIBLICAL PERSPECTIVE

Scripture exhorts believers to balance their freedom with their duty to care for others. Galatians 5:13 says, “You, my brothers and sisters, were called to be free, but do not use your freedom to indulge the flesh, rather, serve one another humbly in love.”

The Bible gives examples of both individualism and collectivism. Individualism puts the focus on what is good for the individual regardless of what that means for the group, and collectivism puts the focus on what is good for the group rather than what is good for the individual. Neither of these two options is preferable if taken to the extreme, and the Bible gives examples of both.

In Acts 2, we learn that individuals in the early Jerusalem church pooled their resources and gave to any who were in need so that everyone had enough. But nobody was forced to give resources for the benefit of the group. They did it willingly because of their love for God (Acts 5:4).

In Luke 15 Jesus tells the story of a shepherd who left his flock to seek one lost lamb and the story of a woman who searched her whole house to find a single coin. Both of these stories illustrate the high value that God places on the individual over the group. But everyone rejoiced when something that was lost was found.

Example:

ANTI-VACCINATION PROTESTS DURING THE COVID-19 PANDEMIC

As the COVID-19 vaccination programme was launched in Australia in 2021 thousands of people protested across many cities, including Melbourne, Sydney and Brisbane. The group, *Australians v The Agenda*, claimed that they represented “everyday Aussies who [had] been oppressed, arrested and charged by a tyrannical Australian Government.”ⁱⁱⁱ Many protesters carried placards that read “my body, my choice.” At that time, the vaccines were not mandatory and they had been granted provisional approval from the Therapeutic Goods Administration after extensive testing.^{iv}



Reflection

1. What kinds of people will be the most adversely affected by low vaccination rates?
2. What factors might a Christian consider when deciding whether to receive a vaccine?
3. Can you think of any stories from the Bible where someone relinquished their rights for the sake of someone else?

2. Mandatory vaccinations and informed consent

WHAT IS THE ISSUE?

Under what circumstances might a government choose to mandate a vaccine and is it ethical? Do restrictions on freedoms make vaccination functionally mandatory, and is that ok?

DESCRIPTION

The mandating of vaccines is a sensitive issue. In 2019 the Australian Vaccination-Risks Network made a submission to the Australian Human Rights Commission stating that mandatory vaccinations are an 'unjustified assault on our human rights and freedoms.'^v Medical practitioners also place a great deal of emphasis placed on the dignity of the individual. Under the Australian Medical Association's Code of Ethics, the principle of 'autonomy' is expressed as the requirement to provide appropriate information and then obtain a patient's consent before undertaking any tests, treatments or procedures, respecting the patient's right to make their own health care decisions.^{vi}

However, sometimes the government will determine that the public good overrides the rights of the individual. In such circumstances, the Australian Government can choose to make a vaccine mandatory under the Commonwealth Biosecurity Act 2015, which gives the government broad powers in a public

health emergency.^{vii} However, this power can only be exercised if the vaccine is safe and approved, and where exceptions for those who are allergic to the vaccine are upheld.^{viii}

When a vaccine is not mandatory, the government may introduce punitive measures and incentives to encourage high uptake. For example, No Jab No Play legislation was introduced in 2015.^{ix} The result was that by July 2016, 148,000 children who were previously not up-to-date with their vaccinations became fully immunized. However, parents who did not vaccinate their children lost up to \$15,000 per child per year in government support.^x New South Wales, Victoria and Western Australia have No Jab No Play laws. That means that children can only be enrolled in childcare and kindergarten if they received all their vaccinations according to the mandated schedule.^{xi}

If there is no specific law requiring that a person be vaccinated, employers need to be cautious about imposing a mandatory COVID-19 vaccine policy, considering the nature of the workplace and the individual circumstances of each employee. A mandatory vaccine policy that does not take into account certain disabilities, medical conditions or those who are pregnant, may breach 'indirect



Example:

COVID-19 VACCINE MAY BE FUNCTIONALLY MANDATORY IN SOME SECTORS

In 2021 the Australian Government's stance was that COVID-19 vaccines would be voluntary for most Australians. On 28 June 2021, however, the government announced that COVID-19 vaccinations would be mandatory for residential aged care workers. All workers in aged care would be required to receive their first dose of the vaccine by September that year.

Some states and territories also issued public health orders mandating vaccination for certain industries. For example, Queensland introduced a public health order mandating vaccination for health service employees likely to encounter and

treat people with COVID-19,^{xii} and after a significant number of cases on building sites, the Victorian Government made vaccines mandatory for those working in the building industry in September 2021. This led to violent protests in the streets of Melbourne.

In August 2021, some businesses stated that they planned to make COVID-19 vaccinations compulsory for their employees, independent of government orders. However, there was no legal framework to enforce this. At the same time there were indications that the government would require proof of vaccination for admission to sporting events, concerts and worship services.

In summary, when there is a public health emergency, the government can choose to make a vaccine mandatory, either for everyone or for individuals in certain industries.

discrimination' legislation.^{xiii}

In summary, when there is a public health emergency, the government can choose to make a vaccine mandatory, either for everyone or for individuals in certain industries. When the government chooses not to invoke that power, the individual has the right to refuse vaccination. In that case, the government can invoke other measures such as denying the right of entry into venues or prohibiting employment in certain industries for the unvaccinated individual, in order to protect others. This can be achieved under the provisions of the Biosecurity Act 2015. It is arguable that such measures are in line with Article 29 of the Universal Declaration of Human Rights, that states that the rights of the individual must be balanced with a duty to the whole community.

BIBLICAL PERSPECTIVE

In 1 Peter 2:13-17, Peter writes: Submit yourselves for the Lord's sake to every human institution, whether to a king as the one in authority, or

to governors as sent by him for the punishment of evildoers and the praise of those who do right. For such is the will of God that by doing right you may silence the ignorance of foolish men. Act as free men, and do not use your freedom as a covering for evil, but use it as bondslaves of God. Honor all people, love the brotherhood, fear God, honour the king.

There are three general positions on the issue of civil disobedience. The anarchist believes that an individual can disobey the government whenever they feel they are personally justified in doing so. There is no biblical support for this view. In fact, in Romans 13, Paul states that everyone is to be subject to the governing authorities.

The opposite view is that of the extremist patriot. They believe that there is never any justification for civil disobedience and that the government should always be obeyed. However, this view is not supported by world history. During the Nuremberg trials, when Nazi war criminals claimed that they could not be held

responsible for their actions because they were only following the orders of the government, their argument was dismissed by a simple question raised by one of the judges: "Is there not a law above our laws?"

Scripture provides a third position, that of biblical submission. In this stance, a Christian can act in civil disobedience to the government if it commands evil, requiring a Christian to act in a manner that is clearly contrary to the requirements of God's Word.^{xiv} It is arguable, that in the case of mandatory vaccinations, however, the government is requiring people to act for the good of others and society as a whole. If the government's ambitions are good, it is good and wise for the Christian to cooperate with authorities.

In Philippians, Paul urges Christians to have the mind of Christ, that will always move them towards the interests of others and the business of building community. In Philippians 4:8, he wrote:

Finally, brothers and sisters, whatever is true, whatever is noble, whatever is right, whatever is pure, whatever is lovely, whatever is admirable—if anything is excellent or praiseworthy—think about such things.

When governments do good for the sake of the people, it is good for us to support them.

Reflection

- 1. Do you think that certain vaccines should be mandatory or should the decision be left to individual conscience? Why?**
- 2. Can you think of any people who would be disproportionately disadvantaged by penalties for failing to vaccinate?**
- 3. What non-punitive measures could encourage uptake of vaccines? Are these measures fair?**
- 4. In what circumstances do you think civil disobedience is justified for the Christian?**

3. Equitable access to vaccines

WHAT IS THE ISSUE?

What measures need to be taken to ensure that vaccines are distributed fairly?

DESCRIPTION

A focus on culture is important for effective disease prevention. Effective

culturally sensitive messaging about vaccination and prevention can boost community engagement. The ethical argument for recognising the economically disadvantaged and ethnic minorities is centred on epidemiological, economic and social justice concerns.^{xv}



Example:

INDIGENOUS COMMUNITY IN WILCANNIA

As COVID-19 vaccination rates rose in Australia, some communities were left behind. At the height of the 2021 COVID-19 outbreak in New South Wales, nearly one in 10 residents in Wilcannia had tested positive. Three-quarters of the town's residents were Aboriginal. The government was criticised for its patchy vaccine rollout in vulnerable communities. The region's Indigenous vaccination rates had fallen far behind the rest of the state. Less than 7 percent of the Indigenous population in western NSW were fully vaccinated, while the vaccination

rate for the non-Indigenous population sat at 26 percent. Many of the town's Aboriginal residents had chronic diseases that made them more vulnerable to COVID-19, but six months into the vaccine rollout, there was still hesitancy among the community.^{xvi}

In an interview on the ABC, Ken Wyatt, Federal Minister for Indigenous Australians said that the way to address hesitancy was for 'trusted people to come and administer the vaccines and talk to them about what the virus does, how the vaccine helps.' He claimed that this approach had seen a greater uptake of the vaccine in other indigenous communities.^{xvii}

Effective culturally sensitive messaging about vaccination and prevention can boost community engagement.

Example:

AROUND THE WORLD

The idea of “zero grazing” was implemented in Uganda as a preventative message for multi-partner marriages as part of the HIV communication strategy. This strategy encouraged people to limit sexual activities to inside the marriage circle. This message was a collective community reaction to the conventional individualistic message of one-to-one sex relations.

Some communities have introduced collaborative mitigation communication for COVID-19 so that communications have cultural meanings for those with whom similar cultural values are shared. Indigenous communities in the United States have initiated strategies to counter this pandemic that take advantage of traditional knowledge and language, encouraging individual voluntary isolation and the closure of their territories at the community level.



Epidemiologically, worse-off groups live in close quarters with more people under one roof. Economically, people in poor neighbourhoods are disproportionately disadvantaged by a pandemic; they have fewer savings, less secure employment and are less able to work remotely. If someone is under financial pressure, they are more likely to work when unwell or work in dangerous environments, and are therefore at greater risk of contracting and spreading disease.

Diverse cultural perspectives and opinions on vaccination, including libertarian and religious objections call for continued communication and collaboration between medical officials and communities on acceptable and effective immunisation policies. According to the Australian 2011 census, 26 per cent of the population were born overseas and 2.5 per cent are indigenous Australians. The majority of these populations have a collectivist world view. Therefore, it is essential for

the government and other authorities to take this in to account when developing communication strategies for these communities.^{xviii}

BIBLICAL PERSPECTIVE

Where there is systemic injustice, oppression often takes the form of generational poverty, chronic medical conditions within cultural groups and unequal access to healthcare. From a biblical perspective, these inequalities must be addressed by governments and communities as an outworking of God’s kingdom values. Isaiah 1:17a says, “Learn to do good; seek justice, correct oppression.” Individual Christ followers are also called to act where they see inequality. 1 John 3:17-18 says, “If anyone has material possessions and sees a brother or sister in need but has no pity on them, how can the love of God be in that person? Dear children, let us not love with words or speech but with actions and in truth.”

Reflection

1. What is your understanding of individualistic and collectivist cultures?
2. What communication strategies are needed for the equitable access of a vaccine among various communities?
3. In what ways could we include diverse communities in the successful roll out of a vaccine?
4. Does a country like Australia have a responsibility to help other countries to achieve high levels of vaccination?
5. Can you think of any stories from the bible on caring for communities beyond your own?



4. Fast-tracking vaccine approval and risk-benefit analysis

WHAT IS THE ISSUE?

What are the ethical responsibilities for governments when fast-tracking vaccine approval?

DESCRIPTION

In Australia, vaccines go through a rigorous approval process. The Therapeutic Goods Administration is in charge of authorising vaccines for use. In doing this the TGA adopts a 'risk-based approach.' That is, they must be convinced that the benefits of the vaccine outweigh any risks. It would be impossible to avoid all risk, but they attempt to ensure that any risk is acceptable.

For example, it is common for people who receive the flu vaccine to experience muscle aches, but this is acceptable because it is a minor side effect. In the same way, a severe side effect may be acceptable if it is rare. For example, very rarely, the flu shot causes a severe allergic reaction. This is considered an acceptable risk because it does not happen often and the benefit of the vaccine is significant.^{xix}

VACCINE APPROVAL UNDER 'NORMAL' CIRCUMSTANCES

The TGA requires vaccine manufacturers

to demonstrate that their vaccine is both safe and effective by submitting the results of clinical trials which are then reviewed by the TGA. During the third phase of clinical trials the vaccine is tested on very large groups of people, numbering in the tens of thousands. The TGA review can take up to eleven months.^{xx}

SPECIAL PROVISIONS FOR EMERGENCY

But in an emergency situation there are special provisions to fast-track TGA reviews. Instead of reviewing all the data before registration, the TGA can conduct a preliminary assessment and give provisional registration of a vaccine. The TGA will look at the data on an ongoing basis. These emergency provisions apply in the case of a life-threatening disease. Under these arrangements vaccinations can start, and the results are carefully monitored until full registration is achieved.^{xxi}

The special emergency provisions are applied using a risks-benefits analysis. The TGA has stated that it will only give provisional registrations when it is clear that the benefit of making the vaccination available early outweighs the inherent risk.^{xxii}

BIBLICAL PERSPECTIVE

Psalm 72 makes it clear that governments have a great responsibility to care for their people and that the lives of their subjects are precious:

1 Give the king your justice, O God...

12 For he delivers the needy when they call, the poor and those who have no helper.

13 He has pity on the weak and the

needy, and saves the lives of the needy.

14 From oppression and violence he redeems their life; and precious is their blood in his sight.

This Psalm was a prayer asking that God would give King Solomon wisdom to rule his people with righteousness and justice. From a biblical perspective, leaders must consider the welfare of the people in every decision that they make.

The TGA has stated that it will only give provisional registrations when it is clear that the benefit of making the vaccination available early outweighs the inherent risk.

Example:

FAST-TRACKING COVID-19 VACCINES

In January 2021, less than one year after the World Health Organisation declared the COVID-19 outbreak to be a Public Health Emergency of International Concern, the Australian Therapeutic Goods Administration (TGA) granted provisional approval to Pfizer Australia Pty Ltd for its COVID-19 vaccine. In February 2021, the TGA also granted provisional approval to AstraZeneca Pty Ltd for its COVID-19 vaccine.

As 2021 progressed the public was informed of serious side effects; most notably, rare blood clots that presented in some AstraZeneca vaccine recipients.

Throughout 2021 the risk-benefit analysis of the AstraZeneca vaccine changed with the pandemic. When cases of COVID-19 were low, younger people were advised not to have the AstraZeneca vaccine, but as cases rose, the advice changed and younger people were advised to get the vaccine. At that point the risk of COVID-19 outweighed the risk of blood clots.



Reflection

1. What responsibilities do governments have for the health of the people they govern?
2. What factors should be taken into account in weighing the risks and benefits of fast-tracking a vaccine?
3. How can governments assure their people that a vaccine is safe and effective?

There is a strong argument that accepting such vaccines does not offer tacit support for abortions, and that, instead, where many lives are at stake, it is an acknowledgement of the sanctity of human life. As such, it is possible to participate in such vaccinations with a “clear conscience”.

5. Vaccines derived from human biological material

WHAT IS THE ISSUE?

Is it ethically acceptable for an individual to receive a vaccine that was developed using cell lines from an aborted foetus?

DESCRIPTION

Since the 1960s diseases such as rubella, polio, hepatitis A, chickenpox, shingles and rabies have all been treated using vaccines derived from cell lines from two legally aborted fetuses. The Catholic Church’s strong stance against abortion has guided their response to questions about the use of foetal tissue in medical interventions and research. In 2008 the Catholic Church stated that researchers have an ethical duty not to use ‘biological material’ obtained from morally illicit procedures, especially abortion. However, there was a qualifier: there may be ‘grave reasons’ that justify the use of such biological material.^{xxiii}

In 2020, John Di Camillo, an ethicist with the National Catholic Bioethics Centre stated:^{xxiv} One is allowed to make use of [a vaccine derived from foetal tissue] where there’s a serious threat to the health or life of the individual, or of the greater population. This does not amount to a strict obligation to use it, but it certainly can be a legitimate choice





in conscience if there's that serious reason, and there's no other reasonable alternative.

The Salvation Army's Positional Statement on Abortion affirms that human life starts at the moment of fertilisation. We state our firm belief "that life is a gift from God and we are answerable to God for the taking of life." This includes unborn children.^{xxv} The position to protect the unborn is reinforced in MASIC's Discussion Paper on Abortion. Psalm 139 implies that the foetus is not "merely a potential human being. Rather the foetus is a human life which can develop the personhood that he or she already possesses."

MASIC's Guidelines for Salvationists on Assisted Reproductive Technologies (2002), makes the following declaration about embryonic research: "Such re-

search should be limited to that having a direct therapeutic benefit to . . . embryos, but research . . . for the benefit of medicine in general should not be permitted."

Neither scripture nor our positional statements give a definitive answer to the question of whether it is ethically acceptable for an individual to receive a vaccine that was developed using cell lines from an aborted foetus. A decision on whether or not to be vaccinated is a personal one, but our Christian commitment to love our neighbour demands that we consider the implications of our individual decision on others. There is a strong argument that accepting such vaccines does not offer tacit support for abortions, and that, instead, where many lives are at stake, it is an acknowledgement of the sanctity of human life. As such, it is possible to participate in such vaccinations with a "clear conscience".

Example:

ASTRAZENECA COVID-19 VACCINE

In 2020 the whole world was waiting for the development of safe and effective vaccines to treat COVID-19. One of the vaccines was developed by Oxford University with AstraZeneca. This vaccine uses HEK (human embryonic kidney) 293 cell lines, initially obtained from a legally aborted foetus in 1973. The original foetal cells were genetically modified so that they could divide infinitely. This means that the cells used to produce the vaccine were not the original foetal cells and the vaccine does not contain any foetal material.^{xxvi}

Before vaccines became available more than two million people had died from COVID-19. A number of vaccines were rolled out about the same time, but the vaccine from AstraZeneca was a cheap and practical alternative. It did not need to be kept at the extreme low temperatures of some of the other vaccines. This meant that it was the best option for developing nations and had the potential to play a major part in fighting COVID-19 around the world.

Reflection

1. What do you think the world would be like without some of the common vaccines discussed here?
2. The Catholic Church has said that there may be 'grave reasons' to justify the use of biological material from an aborted foetus in medical research and development. What do you think those reasons might be?
3. How might a Christian justify accepting the AstraZeneca vaccine? Alternatively, why might a Christian refuse it?

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