Redefining our Liberties: A Communal Approach to Vaccine Mandates

Without connection and inclusiveness, it is impossible to sustain a free society. The rapid spread of the COVID-19 virus has especially demonstrated how the future of our safety, health, and liberties are directly related to the actions of others. However, when private interests collide and threaten a society’s well-being, governments must face the problem of how to appropriately balance costs, benefits, and autonomy to benefit society the greatest. Efforts such as vaccine mandates that infringe individual liberty, challenge our understanding of autonomy under collective emergencies. I will argue that only under pressing and urgent circumstances, a government must pursue their duty to curtail individual liberties if the infringement is minimal and the benefits to collective well-being are significant. Therefore, I will address the drawbacks of a state without justified coercion, and balance between costs and benefits of vaccine mandates using the harm and precautionary principle.

Living in a free society requires us to feel comfortable to direct our own lives, or to be autonomous. For a society to flourish and recognize the importance of all its members, respect for autonomy must be established. However, if we always treat autonomy as an unencumbered force, and consider them “inviolable” according to Kant (Kant 193-4), we fail to see the consequences of allowing absolute autonomy. By permitting every varying will to coexist, individuals are free to act on any of their private interests. Susceptible to greed and motivated by a lack of punishment, individuals may cause unnecessary harm to another being. Therefore, when discussing pressing issues that involve significant trade-offs to our rights, autonomy ought to be treated as an inseparable entity from our relationships with others in society. A perception of autonomy that pictures people as mere individual agents is far from the reality of societies. As social creatures, our goals and decisions are shaped by the connections to the people around us.
Vaccine mandates aim to achieve herd immunity, or when enough individuals are resistant to a disease and causes it to lose the ability to spread. Herd immunity is a collective good, in the sense that it can only be produced through the contribution of a sufficiently large amount of people. Furthermore, herd immunity is also a public good that benefits society the same, whether one participated in its upbringing or not (Dawson 167-168). Since no singular individual can realise herd immunity alone, the duty of reaching herd immunity must be shared evenly among society’s individual members. Even if a society agrees to arrange their actions to abide this duty, the success of the effort is ultimately derived from ideal circumstances. As seen with the case of absolute autonomy, goodwill is not always going to be naturally available without incentivising forces like government mandates.

Especially during an emergency, we expect government bodies, often without prolonged deliberation, to act in a way that will restore well-being (Flood) when the tensions of private wills prevent a society from doing so independently. However, if a government follows this expectation and decides to limit our liberties, it must remain cautious of the nature of autonomy: delicate and readily thwarted (Vaughn 9). Autonomy involves the ability to make personal choices, but these decisions are never considered autonomous if they pressure a particular course of action. Vaccine mandates are an evident example of government coercion. The measure provides a perceived choice between the expression of liberty relative to significant goods such as employment and travel, and often ultimately coerces individuals into vaccinating themselves. If governments turn to coercive measures to achieve a goal, it can certainly be suggested that the measure forces individuals to betray their conscience and lose, not only their liberty, but trust in authority. Yet, labelling a measure as coercive does not immediately delegitimise the infringement; varying forms of coercion are not made equal. A spectrum of coercion exists that
extends from minimal infringement, to paternalism, and to tyrannical uses of threats and terror. To determine if vaccine mandates’ level of coercion is justified, we must analyse if they maximize well-being by protecting individuals from harm, advances our liberties, and is minimally impairing.

Even in pre-pandemic conditions, all choices have their array of consequences. When a consequence risks harm to others, it is ethical to impose limits on personal choices. For example, while mandatory seatbelt policies infringe autonomy, they have been proven successful in reducing injuries from accidents and are now a necessary safety measure. It is no surprise then that governments tend to control similar life-threatening emergencies under Mill’s harm-principle that presumes “the only purpose power can be exercised against one’s will is to prevent harm to others” (Mill, *On Liberty* 13). Foremost, it must be acknowledged that extensive use of the harm-principles can risk creating dangerous social sorting. However, vaccine mandates are not reflective of this although they can appear to discriminate people as safe versus unsafe. If a restriction is justified on independent ethical grounds, such as protecting health, the limitation is generally not thought to be discriminatory. Likewise, a hunting license intended to minimise the risks to public safety, does not discriminate against those without a license.

Applying Mill’s harm-principle requires us to determine what constitutes of harm in this context. First, not every unwelcome consequence counts as harm. Harm is rather defined as setbacks to interests in which people have rights (Brink). Since the effects of someone spreading a virus can lead to infringements against our right to life, it is justified to limit the action. Specific groups including the elderly or those with weakened immune systems are especially at risk. To structure a society that appropriately considers these different levels of risk, we can take inspiration from Rawls’ veil of ignorance. Rawls wants us to imagine how we might organise
society if we temporarily abstract our own personal circumstances, be it class, age, or health conditions from decision-making. Likely in this state of ignorance, individuals would favour laws that offer the greatest benefit to the least advantaged (Wenar). Their decision was not altruistic, however, but rather derived from a private interest to avoid the consequences that being revealed to be part of the group would have on them.

Though Mill narrows his harm-principle to focus on the notion that harm “is not unjust which is done with the consent of the person who is supposed to be hurt by it,” (Mill, *Utilitarianism* 29) the argument is narrowly individualistic and overlooks the collective dependency built during a pandemic. Under Mill’s logic, we may assume that the solution to distributing vaccines rests in providing only individuals a vaccination if they consent. He may add that anyone who refuses to vaccinate themselves consents to its consequences and thus cannot fairly complain about any harm made to themselves or others. However, this argument is only applicable in situations without many interconnected independent parties. In a pandemic, a virus is capable to expand rapidly to more situations than expected. For example, the threat of overwhelming institutions that greatly benefit the public, such as healthcare facilities, has detrimental consequences that affects all individuals in a society without bias of their vaccination status.

Compared to other alternatives, vaccine mandates advance our individual liberties and progress society. Vaccine mandates eliminate limitations imposed on a society to control the virus that entail large individual costs, such as quarantine and lockdown measures, and thus helps us restore the liberties we had before the pandemic. But in restoring liberties efficiently, governments tend to lean towards policies that may ultimately prove to be an unnecessary interference with rights (Flood). Doing so has justifiably alarmed individuals that their rights are
being infringed arbitrarily, without evidence, or done without using the minimally-impairing option. However, we must acknowledge that a highly-transmissible and novel virus adds an extra layer to consider: its array of uncertainties. Therefore, decision-making regarding public health must be guided by the precautionary principle, which advises that when there is serious risk to collective rights, governments should sometimes act without full evidence, to prevent a foreseeably worse outcome (Pinto-Bazurco). Some may suggest that we should implement less restrictive alternatives such as immunity passes or increase vaccine education. However, without immediate vaccination we always risk the chance of falling below the herd immunity threshold overtime. Mandates are thus the minimally-infringing option as they return liberties quickest, rather than prolong smaller amounts of infringement to freedoms for a longer period. Otherwise, consequences can mutate rapidly and produce more harm than without the initial limitation.

The pandemic has revealed how thoroughly we depend on each other for our liberties and the preservation of our lives. If we expect to create lasting solutions to reduce the virus’ spread, our private interests cannot suffice. To preserve autonomy as absolute, leaving individuals completely free to pursue their own ends, marginalises the importance of communal efforts where communal well-being is at risk. When costs are small, and rewards are great, we must challenge our notion of autonomy and consider adding beneficence into the larger picture.


