

Is It Ethical to Accept the COVID-19 Booster Shot? Some Halakhic Considerations

The Freehof Institute of Progressive Halakhah, 2021 / תשפ"א

As of this writing (August, 2021), some governments ([Israel](#), the [United States](#)) are actively planning or administering a regimen of booster doses - essentially, a third dose - of mRNA vaccines (Pfizer and Moderna) for COVID-19. These plans are controversial. The [director general of the World Health Organization](#) has criticized them on grounds of equity: “We should not accept countries that have already used most of the global supply of vaccines, using even more of it, while the world's most vulnerable people remain unprotected.” In this view, the more ethical procedure would be to declare a moratorium on third doses until more people in more countries can receive a first dose.

Is it ethical for a citizen of a highly-vaccinated country to receive a booster or third dose of COVID-19 vaccine before the vaccine has been widely distributed throughout the world? What might *halakhah* have to say about this?

Since the beginning of this pandemic, rabbis and other students of Jewish law have been exploring halakhic responses to the ethical challenges posed by the virus. We at the Freehof Institute have discussed these questions, as we'll see below. To what we imagine is the dismay of readers seeking clear-cut, definitive answers, we have suggested that the stance of *halakhah* on these issues is complex. This doesn't mean that *halakhah* offers no substantive teaching concerning vaccine priorities; it most certainly does, as our essays show. It does mean, though, that when responding to nuanced and messy questions of ethical behavior in the real world, *halakhah* itself is sufficiently nuanced (messy?) to yield practical guidance that may differ from situation to situation. In this particular case, we'll see that *halakhah* provides a *general* teaching - a moral standard that fits the abstract question - *and* some *specific* guidance that diverges from the general standard.

The “general” teaching, as we argue in our discussions concerning [priorities in the saving of life](#) and [priorities in vaccine distribution](#), is that when there is not enough life-saving medical treatment available for all who need it, that treatment should be distributed as far as possible on the basis of purely medical criteria. Simply put, vaccines should be administered so as to save the greatest number of lives possible. This raises the question of “[jumping the vaccine line](#),” that is, of receiving the vaccine before one's turn according to the system of priorities established by the authorities in charge. We try to distinguish there between individual and communal responsibility. While the individual is not necessarily wrong to take advantage of a sooner-than-expected opportunity of being vaccinated, our commitment to social justice demands that the community make sure its allocation guidelines are just *and* to enforce them.

The logical outcome of the above is fairly clear. The governments of the United States, Israel, and other countries with highly vaccinated populations should distribute their stocks of the COVID vaccine to poorer, under-vaccinated countries rather than use those supplies to offer third or booster doses to their own people. We ought to advocate for that course of action,

perhaps going so far as to refuse a third dose for ourselves - it would be unethical, after all - until a more equitable worldwide distribution is achieved.

Yet this is not the only message that emerges from our halakhic texts. Consider the following:

שולחן ערוך יורה דעה הלכות צדקה סימן רנא, ג

הגה: פרנסת עצמו קודמת לכל אדם, ואינו חייב לתת צדקה עד שיהיה לו פרנסתו ואח"כ יקדים פרנסת אביו ואמו, אם הם עניים, והם קודמים לפרנסת בניו. ואחר כך בניו, והם קודמים לאחיו, והם קודמים לשאר קרובים, והקרובים קודמים לשכניו, ושכניו לאנשי עירו, ואנשי עירו לעיר אחרת. והוא הדין אם היו שבוים וצריך לפדותן.

R. Moshe Isserles, *Shulhan Arukh Yoreh De`ah* 251:3

One's own livelihood takes precedence over anyone else's. Thus, one is not obligated to give *tz'dakah* until one's own livelihood is secured.

After that, the support of one's father and mother, if they are poor, takes precedence over support of one's children.

One's children take precedence over one's siblings, who take precedence over other relatives.

One's relatives take precedence over one's neighbors, who take precedence over the other residents of the town, who take precedence over the residents of other towns.

The same system of priorities applies to the ransom of those in captivity.

In other words, when resources are insufficient to provide at once for all who are in need, we prioritize our own welfare and that of those who are closest to us, in a series of concentric circles. We do not ask whether others - members of other families, residents of other towns - have someone to provide for them. We owe direct responsibility first to ourselves and then to those to whom we are bound by ties of kinship and community.¹

The principle that underlies this *halakhah* arguably applies by way of *kal vahomer* to the case of vaccinations (if I may prioritize my livelihood to that of others, I am certainly entitled to prioritize my health and life over theirs). We say "arguably" because one could respond that *pikuah nefesh* is an exception to the normal rules of reasoning. The point is that the *halakhah* knows of a principle that entitles one to say "I and my family come first," even though many other people may be in greater need of assistance. True, this principle cannot serve as *the* exclusive basis on which to make allocation decisions. If personal and local needs always take precedence over the needs of those far away, it might follow that we owe *no* special duty to think and care about the poor, the sick, and the hungry in other cities and countries. We would not want to live in such a narrow-minded and selfish ethical world. Still, the principle exists. And it

¹ The Gaon of Vilna (note #6) locates the source of this *halakhah* in the famous text "two persons are traveling in the desert and one of them is holding a container of water... R. Akiva rules that the traveler may drink the water and not share it with his companion, because "your life takes precedence over that of your fellow" (*B. Bava Metzi`a* 62a). He also cites *M. Bava Metzi`a* 2:11 (*B. Bava Metzi`a* 33a): if one has two lost objects to recover, one belonging to oneself and the other belonging to one's father, one's own loss takes precedence.

offers us a way to justify accepting booster shots (“I and my family come first”) even before millions of people living in other countries have had their first dose.

Is that justification a successful one? *Should* we accept that third dose? Haven’t we already said that the best principle for allocation is to do so in a way that saves the most lives? If so, it’s clear that distributing our reserve stock of the vaccine to poor countries will have a greater life-saving impact than administering a third dose to the already vaccinated.

But that is *not* the choice we face. In the real world, governments will always prioritize the health and well-being of their own populations (“the poor of our town take precedence over the poor of other towns”). Can we say that they are wrong to do so? More importantly, can we expect them to act differently? If not, then let us recognize that our refusal to accept a booster shot (“it’s unethical to prioritize prosperous nations over poor ones!”), while well-meaning, will do nothing to ensure that those poor countries receive adequate shipments of vaccines any sooner than they otherwise will. Our real choice, on this planet, is whether or not we will take the next dose of the vaccine when medical experts tell us that we should.

None of this means that we should relax our advocacy that the wealthy nations of the world do everything they can to speed production and distribution of the COVID-19 vaccines to other countries. There may at present be a shortage of vaccines, but it’s a shortage that can be remedied. We should do all we can to make that so...

... *and* to accept the third or booster dose when it becomes available to us.