

## COVID-19 Immunization: Should It Be Mandatory? A Conversation

The Freehof Institute of Progressive Halakhah, 2020 / תשפ"א

At this writing (Hanukkah, 2020), the world is rejoicing as the first shipments of the vaccines against COVID-19 reach their destinations. We are witnessing (we dearly hope) the beginning of the end of the pandemic that has caused so much death, suffering, and economic disruption around the world. All that is to the good, of course. But like many advances in medical science and technology, the arrival of the vaccines raises some important and perhaps difficult ethical questions. One concerns priority: given that the initial supply of the vaccines will be limited, to whom and in what order should they be administered? Another is the thorny issue of communal need versus personal choice: should the law mandate that all individuals be inoculated, save for those with valid medical reasons for exception?

We deal elsewhere on this site with the problem of [allocation](#) of limited medical resources. In this post, we want to take up the question of mandatory vaccination. To be sure, we've dealt with this one, too, in [a prior post](#), but there we were addressing specifically the immunization of children against diseases such as measles. The world-wide scale of the COVID-19 immunization effort, along with the fact that a significant proportion of our population is expressing resistance to the thought of taking the vaccine, prompts us to take another look.

As with all others, we focus upon this question from the standpoint of *halakhah* as understood from our progressive point of view. What guidance does the Jewish legal tradition offer us as we think about and argue it? Our format will be that of a conversation, beginning with members of the Freehof Institute's board of directors. We hope that the discussion will expand to include other writers, including those of our readers who want to submit comments, responses, and questions. You can do this either through our Facebook page (<https://www.facebook.com/freehofinstitute>) or via email ([freehofinfo@gmail.com](mailto:freehofinfo@gmail.com)).

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Rabbi Daniel Schiff

December 10, 2020

[Rabbi David Golinkin](#) has done a fabulous job providing a halakhic overview of this subject. It seems to me that it would be difficult to improve on his statement. He is unequivocal that vaccination should be mandatory apart from the few exceptional cases where it might pose a particular health risk to small sub-groups. He is also declarative that public institutions may absolutely refuse entry to those who decide not to be vaccinated:

Therefore, there is a halakhic obligation for Jews to vaccinate themselves and their children, unless their doctors determine that it's dangerous for that specific person to be vaccinated due to a pre-existing condition. Similarly, it's halakhically permissible for a school or a synagogue or the State of Israel to enact a *takkanah* or regulation that one must receive a vaccination and to prevent an unvaccinated person from entering a synagogue, a school, or a shopping mall.

I wholeheartedly endorse Rabbi Golinkin's position as the correct reading of Judaism. I urge that we adopt it as our own.

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Rabbi Amy Scheinerman

December 10, 2020

The purpose of vaccination is, as I understand, twofold: (1) to protect individuals; (2) to achieve "herd immunity" that protects the community. Herd immunity does not require that everyone be vaccinated. This, I believe, is the thinking behind allowing some

unvaccinated children to attend public schools. To the extent that being vaccinated entails some risk, we who are vaccinated assume that risk to gain the protect afforded by the vaccination, certainly, but also to protect our community.

I suspect that there will be people for whom the vaccine presents greater risk than it presents for many of us, especially for people with severe allergies. Pfizer and Moderna have both confirmed that their vaccine will cause some semblance of the viral illness. (Curiously and worryingly, the [CDC FAQ page](#) doesn't mention side effects at all.) Clearly, we need to know more, including: Are people with pre-existing conditions, such as lung and breathing conditions, at a greater risk in taking the vaccine? If it is determined that the vaccine is too risky for some people, would we ban them from entering our institutions? I think not.

Let's keep our eye on the science and not allow our sense of morality to eclipse the purpose of vaccination and what it takes to achieve herd immunity.

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Rabbi Mark Washofsky\

December 15, 2020

I want to look a bit more closely at a fundamental premise of halakhic thought on medicine, one that is discussed by Rabbi Golinkin (cited above by Rabbi Schiff) and in [numerous Reform responsa](#): namely, that the practice of medicine is a *mitzvah* and, more than that, a *hovah*, a religious obligation. The classic expression of this doctrine is that of the *Tur, Yoreh De`ah* 336 (R. Yaakov b. Asher, 14<sup>th</sup>-centiry Spain), who draws upon the *Torat Ha`adam* of R. Moshe b. Nahman (Ramban, 12<sup>th</sup>-century Spain).

תנא דבי ר' ישמעאל ורפא ירפא מכאן שנתנה רשות לרופא לרפאות ... ומצוה היא  
ובכלל פיקוח נפש הוא והזריז ה"ז משובח ואם מונע עצמו ה"ז שופך דמים.

A *baraita* in the Talmud (*Bava Kama* 85b) learns from Exodus 21:19 that we are permitted to practice medicine... This “permission” is in fact a *mitzvah*, a commanded act, partaking of the duty to save life (*pikuah nefesh*). One who is zealous in its performance is praiseworthy. One who delays or refuses is akin to a shedder of blood.

The sources tell us that *permission* to practice medicine is required because, without such permission, humans might think that to heal disease through natural means is to violate God’s will. After all, we might naturally assume that disease comes upon us as a punishment for sin, so that the proper response is repentance (*t’shuvah*) rather than medicine. The *midrash* on Exodus 21:19 comes to reject that assumption. But Ramban and the *Tur* are not content with leaving the practice of medicine in the category of “permitted actions.” They insist that medicine is a *mitzvah*, an aspect of the duty to save life, which our tradition teaches us is the highest obligation that the Torah demands of us. It follows that the *obligatory* response - not merely a permitted response - to disease is to consult the physician, the expert practitioner of this commanded action.

It also follows that one is obligated to accept the physician’s advice, to the extent that the physician is confident in the diagnosis and treatment. Thus we read in *Shulḥan Arukh Oraḥ Ḥayyim* 328:10:

ואם רופא אחד אומר : צריך, ורופא אחד אומר : אינו צריך, מחללין.

If one physician declares that we must take a certain action on behalf of a patient while another physician declares that action to be unnecessary, we take the action, even though it involves a transgression against Shabbat.

To which the authoritative commentary *Magen Avraham* adds:

רופא אחד אומר צריך. אם לא רצה החולה לקבל התרופה כופין אותו.

*If one physician declares, etc.* If the patient does not want to accept the remedy, he is compelled to take it.

*Magen Avraham* derives this conclusion for R. David ibn Zimra (16<sup>th</sup>-century Eretz Yisrael), who writes in a responsum (4:67) that a patient who, out of piety, refuses a treatment that would violate Shabbat is deemed a pious fool (חסיד שוטה, *ḥasid shoteh*) and is coerced (בעל כרחו, “against his will”) to accept the treatment. The point is obvious and, based upon the premises set by the *halakhah*, unassailable: if one has a duty to save life, including one’s own, then one is not entitled to say “no” to that which will save life. We are not permitted to reject medical treatment, and others with the power to do so may compel or coerce us to accept it.

But this may not be true in all cases. Rabbi Yaakov Emden (18<sup>th</sup>-century Germany) introduces an important distinction into halakhic discussions of medical issues. We read the following in his *Mor U’kt’zi`a* commentary to the *Tur* and the *Shulḥan Arukh Oraḥ Ḥayyim*, chapter 328, referring to the words of the *Magen Avraham*:

נ"ל דווקא כשרוצה למנוע מהשתמש ברפואה הודאית (אף הסתמית ע"י רופא מומחה, כודאית חשיבא) ...  
אבל אם נמנע מפני שאינו מחזיקה לרפואה בדוקה, אפי' מדעת עצמו בלבד, כ"ש אם מסייעו רופא אחד (המתנגד לרופא שאומר צריך) אין כופין, וכ"ש אם חושש הוא שמזקת לו אותה תרופה שסדר לו הרופא האומר צריך.  
רק בחולי ומכה שבגלוי שיש לרופא ידיעה ודאית והכרה ברורה בהם, ועוסק בתרופה בדוקה וגמורה, ודאי לעולם כופין לחולה המסרב במקום סכנה, בכל ענין ואופן שנתנה תורה רשות לרופא לרפאותו.

It seems to me [that we may compel the patient to accept medical treatment] only if the patient is refusing a treatment of proven [*b'dukah*] effectiveness. (Any treatment prescribed by an expert physician [*rofe mumḥeh*] is presumed to be of definitive [*vada'it*] effectiveness) ...

However, if the patient refuses the treatment because he does not regard it as “proven,” even if he bases this decision on his own knowledge, let alone if another physician supports him, we do not compel him to accept it. This is especially true if the patient fears that the treatment prescribed by the first physician will be harmful to him.

However, in a case of illness or a visible injury, where the physician possesses definitive [*vada 'it*] knowledge, can make a clear diagnosis, and is dealing with a proven and tested treatment, should the patient whose condition is serious refuse to accept that treatment he may be compelled to do so. This applies in every aspect of medical practice authorized by the Torah.

Rabbi Yaakov repeats the long-accepted halakhic rule that medicine is a *mitzvah* and, in certain circumstances, mandatory. But in order that a particular therapy qualify as “mandatory,” he requires that it qualify beyond all doubt as *medicine*. To this end, the treatment must meet the standard of demonstrated effectiveness: it must be a “definitive,” “certain” (*vada 'it*) or “proven” (*b' dukah*) therapy for the disease or injury. The patient is obligated to accept such therapy. But she is under no obligation to accept medical treatment that is untested, unproven, or experimental in nature.

Thus far, Emden makes perfect sense. Why should an untested and unproven drug, surgical procedure, or other treatment be mandatory? We would not wish to force a treatment on anybody unless it has been demonstrated as effective, proper medicine. But Emden is not so clear on another question: *who* determines whether the treatment has been so demonstrated? In the first paragraph, he writes that the decision of a *rofe mumḥeh*, a physician whose expertise is based upon his certified medical learning and experience, is sufficient to establish that a therapy is “proven.” In the second paragraph, however, he seems to empower the patient to make that determination, so that if the patient doubts the efficacy of the treatment or for some reason regards it as potentially dangerous, she cannot be compelled to accept it.

Emden's equivocation is understandable in light of the status of medical practice in his day. Considering the low level of public confidence in physicians' knowledge and in the effectiveness of their prescriptions, it was quite reasonable to grant the patient a wide authority to choose what counted as "medicine" in her particular case. Much, obviously, has changed. Over the past several centuries, medicine has been transformed into a scientific discipline in the modern sense of that term. Its findings are based upon data that are collected, tested, duplicated, challenged, modified, and improved upon through the process that we call the scientific method. Scientific criteria now determine for the members of the medical profession whether a therapy, drug, or surgical procedure meets the standard of "proven" or "tested." It is the physician, therefore, and *not* the patient, who possesses the expertise necessary to make informed medical decisions. We trust the physicians to make these determinations because we trust science. Our level of confidence in what our physicians tell us is the direct result of our acceptance of science as the best available means of learning about the physical – and biological – universe.

Were he writing today, Rabbi Yaakov Emden would undoubtedly have a higher and less equivocal estimation of the reliability of "medicine." Given his respect for medical expertise, I suggest he would not have written that second paragraph. He would instead conclude that today, it is the *physician* – by which I mean the consensus opinion of the medical profession, based upon the data and the findings of scientific inquiry – who is to decide whether a particular treatment meets the standard of "proven" or "tested" as opposed to controversial or experimental. By contrast, the patient's resistance to the doctor's orders, whatever its real source, would carry little or no medical weight.

All of this suggests that Rabbi Yaakov Emden, and the entire tradition upon which his words are based, would regard the COVID-19 vaccines as *mandatory* medical treatment. This is because immunization, unknown in Emden's time, is now accepted as proper medical therapy and because the COVID vaccines have been established as effective – "definitive" and "proven" therapies – by the consensus opinion among epidemiologists. On the strength of this scientific opinion, the *halakhic* opinion is clear: these vaccines

should be mandatory for all, excepting those for whom the vaccines could pose serious and unacceptable health risks.

And yet...

We should not be too quick to dismiss the relevance of Emden's second paragraph. His words, after all, are quite consistent with the doctrines of patient autonomy and informed consent that form the foundation of [contemporary liberal bioethics](#). And in fact, [many people](#) are choosing to exercise that autonomy, [resisting](#) the vaccines and denouncing them as ineffective or dangerous. Much of this resistance, the latest manifestation of the anti-immunization [propaganda](#) that has gained much notoriety in recent decades, can be blamed upon the growing distrust in [institutional expertise](#) encouraged by, among others, [the outgoing U.S. administration](#). But sometimes, the resisters have a point, especially if their reluctance to accept the immunization stems from a particular community's [bitter historical experience](#) with the medical establishment. This doesn't mean that they are right to reject the vaccines; of course they aren't, and their resistance is quite likely to impede the progress in fighting COVID-19 and lead to many more deaths. It does mean that the institutions of science and medicine – and, for that matter, all of us who care about science and medicine – must recognize the reality of that loss of trust, a loss that may cause incalculable damage to us all. We have so much work to do in order to regain the trust of so many.

Should the COVID-19 immunization be mandatory? Yes, it should; no other response is halakhically correct or morally appropriate. But let the words of Rabbi Yaakov Emden remind us that in practice it is *people* – millions upon millions of individual people – who hold the power to decide whether to do the right thing. Our job is to persuade them to do so. We can do that, in part, by insisting that governments and institutions enforce vaccine requirements. We can do it as well through the personal example that we set through our own behavior. But we must also take the time to listen, with empathy and real concern, to those who resist that obligation. Unless we actually *listen* to them and try as hard as we can to engage them in productive conversation, we will never begin to rebuild their trust



in science and in the expertise of physicians, the ones qualified to tell us just what counts as proven and tested medicine.

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Rabbi Richard Rheins

February 21, 2021

At the upcoming Virtual CCAR conference, in light of the COVID-19 pandemic, the Freehof Institute will convene a panel discussion on the question of requiring vaccinations and immunization for those wishing to enter a synagogue or other Jewish institutions. In order to “prime the pump” for our discussion and encourage all to participate, I’ve been asked to share a few words on behalf of those who are hesitant to issue a ban.

Let me make it perfectly clear that I am in favor of vaccinations and immunizations. I am one of the fortunate few to have received my first shot and anxiously await the second. I strongly urge everyone to take advantage of the various life-saving immunizations that protect us against COVID-19, measles, polio and other diseases. Scientific data confirms the vital importance of vaccinations and the overwhelming *halakhic* consensus supports efforts to protect life through immunizations.

Still, it is a significant leap from advocating vaccinations to physically banning those who are not immunized from entering a synagogue or Jewish institution. That leap is so substantial that it should give us pause before taking it.

Let’s move beyond the theoretical to the reality of our current situation. For the past twelve months we have been battling COVID-19. The first COVID-19 vaccinations took place mid-December 2020. As of today (February 21), fewer than 18-million Americans have been fully vaccinated. Dr. Anthony Fauci recently estimated that it will take until May or early June to get the “priority groups” vaccinated. President Biden maintains that we may have enough doses for all Americans by the end of July. God-willing, their

estimates are accurate. Nevertheless, having the doses available is one thing, distribution is another. There also is a three-four week wait between the shots and another three weeks after the second shot before the vaccination is fully effective. Therefore, synagogues and Jewish institutions will have to wait until sometime in August or September before there could be a reasonable expectation that worshippers, members and guests are vaccinated.

Let us also consider that many synagogues have been admitting small groups in for services and life-cycle events throughout the pandemic. Though the exact numbers vary from state to state, a typical restriction (as of February 2021) is 50 people in a sanctuary or 25% of capacity, whichever is less. It goes without saying that since the rollout of COVID-19 vaccinations only significantly began in early 2021, the vast majority of those who have been and are attending services are not vaccinated.

It is in this context that a *takkanah* prohibiting those who are not vaccinated from entering a synagogue must be considered. We are already permitting unvaccinated people in our synagogue and have been doing so forever. What synagogue or Jewish institution has required proof of vaccination (e.g. measles, polio, etc)?

Who are these unvaccinated people coming into our synagogues for services that some now want to ban? Ah, they are *amcha*! They are the families and individuals, the men, women and children of our people. They don't call on us too often. God knows it would be wonderful to see all of them every week for Shabbat services and not just on the Holy Days. But when they need us it is for a sacred purpose. They need their synagogue during times of spiritual seeking; they need their synagogue when their babies are born; they need their synagogue when their children become *B'nei Mitzvah*; they need their synagogue when a loved one dies; and they need their synagogue sometimes just to sit quietly with their Rabbi in the Chapel to ponder the complexing challenges of life. Yes, there are some Rabbis who think that many of these activities can be accomplished virtually. I'm not one of them. Over the past 12 months I've been available to my congregants knowing that they are not vaccinated. We wear protective masks, we maintain the recommended distances, and we limit the number who gather. But we do gather.

The exclusivity club of vaccination echoes the initial inclination of Rabbi Judah ha-Nasi who refused to provide for *ammei ha-aretz* (*Baba Metziah* 33b). In time, the attitude to *ammei ha-aretz* softened. I hope that those who are eager to close the door to our people who are not vaccinated will slow down, if not soften.

Yes, we should continue to push for every person to become fully vaccinated. But that takes time. In the meantime, we have to continue to serve the needs of our community.

And what about those who refuse to become vaccinated? Is it reasonable or even doable for a synagogue or Jewish institution to check everyone before they enter? No doubt it was to put the brakes on well-intentioned but overly aggressive *takkanot* that our sages cautioned against rulings that would impose unrealistic standards on the community (*Mishneh Torah, Hilkhos Mamrim* 2.5).

I look forward to a spirited and respectful discussion at the Freehof Institute's session at the CCAR convention.

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## Summary

June 29, 2021

Our conversation on mandatory immunization against COVID-19 has revealed some differences of opinion. Three of us say “yes,” vaccination ought to be mandatory, while one of us thinks that we should not bar participation in synagogue services and community programs to those who refuse the shot. What unites the two sides is that each one has come to a decision, and this decision has logical and obvious consequences. If your progressive reading of *halakhah* leads you to conclude that vaccination is a *hovah*, an obligation, then it follows that synagogues, schools, and other Jewish institutions have every reason to make it a requirement for all who enter or participate, excepting of course those individuals for whom the vaccines would pose a significant medical risk.<sup>1</sup> After all, if [universities](#), [schools](#), [healthcare systems](#), [concerts](#), and [cruise-ship lines](#) require

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<sup>1</sup> One could also allow the unvaccinated in the building under certain appropriate conditions - masking, social distancing, etc. Again, the language of “mandatory” implies that one would impose appropriate *requirements* upon the behavior of individuals.

vaccinations for those who enter or attend, why not Jewish communities? If, on the other hand, you do *not* hold immunization to be mandatory, then you might strongly urge people to get the vaccine yet believe that their failure to do so should not deny them access to our institutions. Either way, you've made a decision that is clear and that follows from your reading of the sources. We hope we've done that here.

While we've expressed our opinions and argued for them, we do not claim to have issued *p'sak*, definitive rulings. Our function was one of *limud* (theoretical learning) and not *ma'aseh* (practical, determinative instruction). That's because nobody has turned to us with a *she'elah*, a halakhic inquiry requesting a decision. In non-Orthodox Jewish communities, the task of issuing *p'sak* falls to committees of rabbis established for that purpose: the [Committee on Jewish Law and Standards](#) (CJLS) of the (Conservative) Rabbinical Assembly,<sup>2</sup> and the [Responsa Committee](#) of the (Reform) Central Conference of American Rabbis (CCAR). Each committee issues *t'shuvot* (responsa) that, based upon the interpretation of *halakhah* and the traditions of its movement, decide questions of Jewish practice. It's true, of course, that neither committee claims absolute obligatory authority for its decisions. The Conservative movement recognizes the local rabbi as *mara d'atra*, the ultimate halakhic authority in his or her community. And Reform responsa, while reflecting the considered opinion of their authors, are famously advisory and non-binding in nature. Still, it's the essence of *p'sak*, even if non-binding, to be *decisive*, to offer what its authors think is the best available interpretation of how Torah and tradition would have us answer this particular question. A non-Orthodox *sho'el/et* (one who submits a question) may or may not accept that answer, but s/he expects that the *poskim* will take a stand and issue a clear and coherent ruling.

Both these *halakhah* committees have dealt with the very question that we've been considering here. Each has produced a thoughtful responsum (*t'shuvah*), well-grounded in the halakhic sources. But we have to confess to just a bit of disappointment at their answers. Each responsum is plagued by a certain lack of decisiveness - a failure to take a

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<sup>2</sup> In Israel, the [Va`ad Hahalakhah](#) of the Masorti movement exercises this function for the Conservative community in Israel.

clear and coherent stand - that we think reduces its effectiveness as *p'sak*. And that, in turn, raises a larger question about progressive *halakhah*: do we have the courage of our convictions? Are we willing to stand behind our conclusions and to *decide*? And if not, what's standing in our way?

Let's begin with the detailed and comprehensive CJLS *t'shuvah*, [authored](#) by Rabbi David Golinkin, the Conservative movement's leading Israeli halakhist. The responsum, adopted unanimously by the Committee on January 5, 2021, concludes that vaccines in general and the COVID vaccines in particular are unquestionably to be defined as life-saving medical treatment. And given that our tradition classifies *r'fu'ah*, medicine, under the category of *pikuah nefesh*, the saving of human life, it follows that "there is a halakhic obligation for Jews to vaccinate themselves and their children, unless their doctors determine that it's dangerous for that specific person to be vaccinated due to a pre-existing condition." The finding that vaccination is *obligatory* is eminently reasonable, on all fours with the *t'shuvah*'s textual premises and argument. But consider its very next sentence:

Similarly, it's halakhically permissible for a school or a synagogue anywhere in the world or the government of the State of Israel to enact a *takkanah* or regulation that one must receive a vaccination and to prevent an unvaccinated person from entering a synagogue, a school, or a shopping mall.

"Halakhically permissible?" Rabbi Golinkin has just pulled the teeth of his *p'sak*. If vaccination is obligatory, the language of "permissibility" is out of place. If we're talking about *pikuah nefesh*, then there's no wiggle room; the *halakhah* does not allow us to say no. One would think it's the duty of a *posek* who reasons in this manner to rule unambiguously that the community ought to mandate vaccination. What other conclusion logically follows from his argument? Yet Rabbi Golinkin steps back, leaving that choice to the community leaders and politicians.

A similar problem besets the [t'shuvah](#) of the CCAR Responsa Committee, “Guidelines for Reopening After the Pandemic.” This responsum comes to the same conclusion as Rabbi Golinkin (whose *t'shuvah* it cites approvingly) regarding immunization in general and the COVID immunization in particular: “the vaccines are *r'fuah b'dukah*, ‘proven medicine,’ as our tradition understands the concept.” This is a fateful choice of language: “our tradition,” as we’ve noted above in our conversation, understands *r'fu'ah b'dukah* to be mandatory. If a particular medical therapy is “proven,” then on grounds of *pikuah nefesh* an individual may be compelled to accept it and, at the very least, has no good reason under *halakhah* to refuse it. But the responsum quickly backs away from the logic of its textual argument, concluding that while “every community must adhere to public health guidelines as a baseline... We do not want to turn any Jew away from a synagogue; generosity, consideration, and flexibility will be necessary as congregational leadership thinks these questions through beforehand.” Again, no mandate; like Rabbi Golinkin’s ruling, the CCAR responsum leaves the decision to the congregation.

This refusal is nothing new in progressive *halakhah*. In 1999, the CCAR Responsa Committee was asked to rule on a congregation’s policy to mandate the “standard” immunizations for children entering its religious school. The [responsum](#) endorsed the policy on similar grounds cited in the responsa which we discuss here, finding that “there are no valid Jewish religious grounds to support the refusal to immunize as a general principle.” In its conclusion, it declares that immunization “is part and parcel of the traditional *obligation* [our emphasis - Freehof Institute] to practice and to avail ourselves of medical treatment.” Yet at the very end it tells us: “A congregation is entitled, should it so choose, to adopt a rule that requires immunization of students before their admission to religious school.” Well, which is it to be? If vaccinations are “obligatory,” the congregation *ought* to require them; why doesn’t the responsum say *that* rather than suggest that the matter is optional?

In each of these three cases, the progressive *poskim* follow the logic of their argument until the very last moment. They find that immunizations are obligatory, but they leave to synagogues, schools, and community institutions the option of deciding whether or not to

enforce the obligation. Again, which is it to be? If something is an obligation, then by definition it's not optional. That's the contradiction that affects each of these responsa.

One could defend this lack of decisiveness on the grounds that, ultimately, the decision about mandates will be made by individuals, communities, and congregations rather than by *halakhah* committees, which have no power to impose (let alone enforce) vaccine mandates upon anyone. That's true, and obviously so; we progressives are after all committed to the principles of individual choice and local autonomy. But "autonomy" in Jewish religious life simply means that *tradition*, in the form of legal discipline, lacks the political authority to compel obedience. The individual and the community therefore enjoy the power of choice, but that doesn't mean that *any* choice they make is equally good or bad. And it certainly doesn't exempt responsa writers from their duty to teach Torah and to issue *p'sak*. The task of *poskim*, including progressive *poskim*, responding to *she'elot* regarding Jewish religious practice, is to tell us what in their considered opinion we *ought* to choose and why. Those of us who work in the field of progressive *halakhah* are well aware that our communities will not always agree with us. But we still have to do the work, to engage them in argument, so that the decisions they will make in the end will be informed by Torah, *halakhah*, and Jewish tradition.

That's why the most coherent response, if one holds (as these responsa hold) that the vaccines are obligatory, would be to say that Jewish communities *ought* to mandate vaccination unless they determine that logistical, bureaucratic, and political roadblocks render that course of action impractical. Such a *p'sak* would be realistic. It would acknowledge that the real impediment to vaccine mandates does not lie in our uncertainty over what our tradition teaches - there *is* no uncertainty - but in our lack of the political will and moral backbone to put those teachings into practice. It would be a *p'sak* that is *decisive*... which, in the end, is what our people expect and deserve from us.