

## Is a vaccination passport the way to go?

Report 8 from the 'Psychology and Corona' expert group

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The idea of a vaccination passport is being discussed at the national and even more so at the EU level. The declared goal is the implementation of some form of a passport at the European level by the end of March. The 'Psychology and corona' expert group examined this issue from the perspective of psychological and, more generally, behavioral sciences.

### ***What is a vaccination passport? What are the medical issues?***

- A vaccination passport is a (physical or digital) document that provides a means to certify that a given individual has been vaccinated. Such a document is highly reminiscent of what various authors in the literature call an immunity certificate or an immunity passport (Brown et al., 2020a, 2020b; Greely, 2020; Phelan, 2020; Voo et al., 2021).
- Whereas the criterion for the **vaccination passport** is **actual vaccination**, the **immunity certificate** requires some test certifying that the person has been infected and is **purportedly immune to SARS-Cov-2**. Therefore, the scientific, ethical and legal challenges are different in the context of a vaccination passport and in that of an immunity passport.
- A key issue is whether the vaccination passport concerns the **individual protection** or the **community protection**.
  - In the case of individual protection, one would want to require or even demand a vaccination passport in order to minimize the risks for a person who visits a region or country where the infection is highly prevalent. This specific usage of a vaccination passport would seem to present a very limited number of problems. It is very similar to current regulations for travelers who want to visit certain parts of the world where specific infectious diseases are highly prevalent (e.g., yellow fever in Congo).
  - In the case of community protection, the key issue concerns the degree to which a vaccinated person still carries a relatively unchanged or insufficiently mitigated potential for transmission. The **vaccine-induced immunity remains largely unknown** at this stage (although the latest incoming data would seem to be encouraging as

they indicate that vaccinated people would be 4 times less contagious than non-vaccinated people, Petter et al., 2021). Admittedly, this aspect constitutes a major challenge for the use of a vaccination passport in the context of community protection.

- If the passport aims to protect the community, a useful addition could be to use this passport for the documentation of test results and even previous positive tests, indicating potential immunity. This would significantly broaden the scope of the passport but only mitigate some of the risks that we outline below.
- This also raises the question of the impact of vaccination in general, and of the vaccination passport in particular, on protective measures (hand disinfection, physical distance, wearing of a mask, reduction of contacts, etc.). If the vaccination passport means individual and community protection, then the other measures should no longer be necessary or could be reduced significantly.

### **The vaccine passport takes the vaccine from a medical condition to a social condition...**

#### ***Liability: Interpersonal and intergroup discrimination***

- For those citizens who want the vaccine, the current speed of the **vaccination campaign is very slow** (only 5% have the first dose 2 months after the start of the campaign). Clearly, we must avoid granting special rights to vaccinated people when only few have had access to vaccination! If decided, implementing a vaccination passport would only be possible if all members of the population have had a chance to secure vaccination.
- Some groups in the population have sacrificed substantially in terms of social contacts. As a case in point, **the young adults (18-25)** are currently presenting a high level of mental problems (see 'Psychology & Corona's [report](#) on mental health of youngsters). Under the present vaccination schema, they would be the ones who have to wait the longest to regain access to activities and events that require a vaccination passport, as they are at the bottom of the vaccination list. The prospect of having to wait for a passport that would be associated with certain advantages (travelling, etc.) may significantly decrease motivation to stick to the recommended sanitary measures and give rise to tension between vaccinated and non-vaccinated groups..
- A limited number of people have **no access to vaccination for medical reasons** (specific inflammatory diseases). Others are very hesitant for the moment because insufficient time has elapsed since the launch of the vaccination campaigns and they consider that some critical information is still lacking (most notably about side effects and the risks for some specific target groups). It is unclear what could be done in such cases, but one would necessarily have to ensure the confidentiality of the medical condition. How this could be realized, especially for non-health professionals, remains unclear.

#### ***Liability: reactance and decrease of voluntary motivation***

- A major issue with vaccination passport is the fact that the authorities have been claiming all along that vaccination should rest on a **voluntary decision**. This strategy has been welcomed

by many as an ideal way to circumvent resistance in the population, decrease vaccination hesitancy, and capitalize on positive social norms to encourage people to get vaccinated (**bandwagoning**; see the opinion piece of 'Psychology and Corona' on vaccinating the motivated people in l'Echo of Dec 12, 2020). Many could interpret the vaccine passport, which would limit the rights of those who do not have it, as meaning that the government indirectly makes the vaccine mandatory. Although it has always been clear that not wanting to be vaccinated comes with the cost of being at risk for the disease, this specific move brings in very different considerations and may greatly jeopardize the official position of the authorities.

- In addition to a strengthening of the position of "anti-vaccines" (roughly 10 % of the population) who would thereby find an additional argument to fuel to their opposition, one potential consequence of the implementation of a vaccination passport is the emergence of **psychological reactance** even among the sizeable number of people who are currently still hesitant with respect to vaccination. Indeed, individuals who feel pressured to be vaccinated report lower vaccination intentions (see [report](#) 20 from the Motivation Barometer). As a result, to the extent that a passport may come across as seductive or even manipulative, this may jeopardize the currently positive normative attitude that has hesitant people lean towards vaccination.

#### ***Liability: Organizational challenges and costs***

- The implementation of the vaccination passport may, in and of itself, constitute an **organizational challenge**. In light of the recent difficulties attached to the delivery of masks and the organization of the vaccination campaign, it is doubtful that the implementation of a vaccination passport will pose absolutely no problem.
- One of the current arguments in favor of the vaccine passport is **to relaunch the tourism sector** as quickly as possible and in a safe manner. The European Union itself mentioned the fact that the establishment of this passport would take time, and that the ideal would be for the European countries to adopt a common position. The vaccination passport therefore does not seem to be a quick solution.
- There will undoubtedly be **costs** associated with the implementation of a vaccination passport (or any other form of immunity certificate) that would require official documents. This may constitute an additional obstacle for some portions of the population.

With the present note, we wish to draw the government's attention to the fact that the decision to implement a vaccination passport will have to take into account these different medical, individual, societal, and practical factors. Essential issues such as the quick accessibility of vaccine and the duration of the immunity that it affords, its potentially socially discriminating effect and the restrictions of experience autonomy and free choice with resulting risks of psychological reactance critically add to the inevitable organizational challenges.

One apparent solution would be to change the passport to a COVID passport including either proof of vaccination, recent negative test results or even information on previous infections (immunity certificate). This could help in bringing some of the benefits (possibility to travel, to join larger gatherings, etc.) while mitigating the liabilities with regard to accessibility, discrimination, sense of

autonomy, and reactance. Unfortunately, this option of negative test results or history of previous infections also comes with a number of problems, not the least being the possibility for false declaration if not corruption and, in some extreme cases, risky behaviors such as voluntary exposure to the virus. As for the vaccination passport, the duration of immunity is also a non-trivial difficulty associated with the immunity certificate.

At a more general level, the notion that citizens would need to present documents in order to travel (especially in Schengen countries) or to attend a number of events (ranging from large-scale such as festivals or similar cultural events to more limited settings such as restaurants) runs against the general ideal of free movement that governs our current EU policies. In this general context, **large-scale vaccination remains the key strategy of choice** to re-open society to levels close if not equal to what we used to know before the pandemic. By limiting the time window between the first and last vaccinated individuals, it will be easier to argue that we are striving for collective freedom achieved only with a sufficiently high level of group immunity. The preferred line of action should therefore be to maximize the vaccination coverage and to back this with efficient testing, tracing and quarantine policies. If one neglects the latter aspects, one will inevitably incentivize fraud and free-ridership.

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