The Military's Cold Imposition of COVID Vaccine Mandates Is Wrong



In the past, the widespread <u>introduction of vaccines</u> has reduced the mortality and morbidity of millions and served as a model for preventative medicine and public health.

However, conditions change when for many a particular vaccine's risks outweigh the benefits, the primacy of protective natural immunity is disregarded, the legality of the mandates and the accuracy of the evidence supporting them are credibly disputed and the recipients' basic human rights are ignored.

Under such conditions, compulsory administration programs are radical and unacceptable.

Military leaders are required to obey the law and should not require vaccinations when their legality and safety, and the accuracy of the data on which the mandates are based are in doubt. The current military COVID mandates are radical because they violate the following fundamental principles:

- First Amendment allowance for religious exemptions
- Fourth Amendment "right of the people to be secure in their persons"
- Fifth Amendment due process and equal protection of the laws
- Nuremberg Code of 1947 against medical experimentation without <u>informed consent</u>, recognized as US law by the Supreme Court
- Hippocratic Oath, which compels physicians to at first do no harm, which involves considering the risks and benefits to the patient prior to any medical intervention
- The primacy of natural immunity for force protection and mission readiness

The purging of healthy and otherwise qualified military members solely because they refuse to take the COVID vaccine impairs military readiness and security and undermines morale. The most recent <u>VAERS summary report</u>, for all its uncertainties concerning accuracy, still lists more COVID vaccine adverse reactions, hospitalizations and deaths than all other vaccines combined from 1990 until the present.

From the outset of the pandemic, the risk of serious consequences spared those patient populations constituting the armed forces and overwhelmingly affected the <u>obese</u>, the <u>elderly and those with comorbidities</u>. Mandatory COVID vaccinations, especially for those with natural immunity, cause the cure to be worse than the disease.

The military has made no accommodation for the benefits of natural immunity despite over <u>150 studies</u> showing its superiority to vaccine immunity. This year alone the <u>Lancet</u>, the <u>Centers for Disease Control and Prevention</u>, and <u>Johns Hopkins University</u> all published articles acknowledging the benefits of natural immunity, including its long-lasting

protection.

Notwithstanding the <u>Omicron</u> variant causing mild illness among the vast majority of young, healthy adults serving in the military, the DOD disregards vaccine side effects and the increased rate of hospitalizations and death rates in <u>vaccinated patients</u>.

The only **FDA-approved** Pfizer vaccine is Comirnaty. The BioNTech formulation, which is authorized under the Emergency Use Authorization (EUA), is the only product being of the administered to members armed not available since Comirnaty is in the United States. According to the FDA, under the <u>rules specific for the</u> EUA, it is the patient's choice to receive or not receive the vaccine and that choice will not affect the patient's medical care. The licensed vaccine and the EUA vaccine are legally distinct, and the FDA document states that the risks and benefits are unknown.

The DOD incorrectly defines the problem as one of vaccinated vs. not vaccinated. The real issue is immunity vs. nonimmunity. To expel service members who are not vaccinated but have natural immunity comes at the loss of billions of dollars in training costs and the vilification of patriotic Americans serving their country.

The DOD employs vaccination as "a one-size-fits-all" approach to mitigating the effects of SARS-CoV-2. This policy does not consider age or comorbidities and deemphasizes the importance of prophylaxis and therapeutics. Addressing simple, safe, effective measures like <u>vitamin D</u> supplementation, which has been demonstrated to prevent severe disease, have not been prioritized.

There has been a disregard for the First Amendment rights of those claiming religious exemptions. Federal courts have ruled there is no COVID exception to the Constitution and there is no military exclusion from our Constitution. Despite thousands of applications, <u>very few cases</u> have been approved. Appeals based on religious beliefs are adjudicated by the Surgeon General rather than the Chief of Chaplains, and confirmations of religious sincerity by military chaplains are ignored.

On 1/3/22 a federal court <u>enjoined</u> the Navy from mandating Covid vaccinations for the Navy SEALs who objected for religious reasons. Many of them had documented natural immunity from previous COVID infections. On 2/2/22 a federal judge <u>ruled</u> that the government failed to show a compelling interest in denying religious exemptions in the case of two officers who faced discharge. Despite mounting evidence challenging the wisdom of wholesale, mandatory COVID vaccination of military personnel, the Biden Administration is petitioning the Supreme Court to <u>block</u> the lower court order that granted the SEALs relief.

Sworn accusations of <u>fraud</u> regarding manipulation of the <u>Defense Medical Epidemiology Database</u> (DMED) database came to public attention when evidence was presented at Senator Ron Johnson's <u>inquiry</u> on January 24, 2022. The DOD validated the accuracy of the 2021 data, which indicated large increases in <u>diagnoses</u> in relation to the 2016-2020 baseline. The data demonstrated that military personnel were afflicted with a wide range of serious medical conditions, in many cases at a much higher rate than the general population. The DOD quickly readjusted the five-year baseline to fall more in line with 2021, but serious questions remain about its accuracy and the speed at which the corrections were made.

Natural immunity is the gold standard of immunology and the military's <u>best option</u> to manage COVID. Commanders should not force those under their command to receive a vaccine that provides little benefit and exposes subordinates to unacceptable risk.

Military leaders must insist upon the truth, abide by principles guaranteeing human rights, and ask appropriate questions regarding the welfare of members of the armed forces. How could any commander not do so? To state "I am just following DOD or CDC guidance," is no excuse. This behavior is not the mark of leaders of character, who are entrusted to lead the men and women of the armed services.

(Also contributing to this article are Rod Bishop, Lt. Gen. USAF (Ret), USAFA Class of 1974, President of <u>Stand Together Against Racism and Radicalism in the Services</u>, Inc. (STARRS), as well as Senator (Ret) Mike Rose, JD/MBA, USAFA Class of 1969, Executive Vice President and General Counsel, STARRS.)