usofa university of saskatchewan faculty association

VOX

January 28, 2022

Pandemic Response Team (PRT) Must Cite the Science Relied on to Justify Their Vaccine Policies

Dionne Pohler
Associate Professor, Edwards School of Business

Many Canadian post-secondary institutions, including the University of Saskatchewan (USask), have implemented vaccine mandates that require anyone who accesses their campuses to have been "fully" vaccinated. On January 25, USask's Pandemic Response and Recovery Team (PRT) sent out a communication on boosters, stating that anyone in the campus community who is eligible to receive a COVID-19 booster is expected to do so and upload their status by February 7. While in early Fall 2021 USask provided a rapid testing option for the unvaccinated, by the end of October the PRT had moved to a more coercive, mandatory vaccination policy. This policy led to unvaccinated students who have not received a human rights exemption being removed from classes and threatened faculty and staff with unpaid leave (and possibly future dismissal) for non-compliance. More faculty, staff and students may find themselves in this situation if COVID-19 boosters eventually become mandatory for on-campus access.

I appreciate the important work the PRT has undertaken to date. Their job is not an easy one and its members probably receive far more criticism than accolades for this difficult service. However, the PRT has yet to offer links to the data or scientific studies on which they base the creation of their vaccine policies. This is concerning because they make unusually strong appeals to the science in their communications. For instance, PRT's January 25 statement on boosters reads:

"As we learn more about this latest wave of the pandemic and the Omicron variant it's becoming abundantly clear that boosters are a highly effective way to enhance the COVID-19 vaccine's effectiveness against infection, serious illness, and hospitalization. As has always been the case, the science is clear: vaccination is the surest way to end the pandemic."

In reality, the evidence for PRT's vaccine policies is growing weaker by the day. While early randomized controlled trials (RCTs) led to a worldwide vaccination effort based on two months of data, with reported (by the pharmaceutical companies) efficacy rates of 95%, subsequent observational data showed that vaccine immunity waned relatively quickly against earlier variants, the current vaccines have even lower efficacy at stopping infection from Omicron, and the vaccinated who get COVID-19 have similar peak viral loads as the unvaccinated.

The vaccine is best viewed as one type of preventative medical treatment that protects a person from severe outcomes from infection. And based on current levels of vaccine efficacy, a recent modeling study estimated that at least 1,000 unvaccinated people likely need to be excluded from a setting to prevent one COVID-19 transmission event. These points undermine the rationale for a policy that segregates the unvaccinated from the vaccinated, especially given the real harms of exclusion-

Letters to the Editor — To be considered, letters should not exceed 200 words. While letters on any subject of relevance to faculty will be considered, priority will be given to those commenting on previous issues of ***VOX***. The editor reserves the right to edit letters or decline to publish them. Send your letters to the editor: j.waldram@usask.ca.

ary policies for some of the most marginalized members of our community. And, even now with so many more people (both vaccinated and unvaccinated) having been infected with COVID-19 in Saskatchewan and across the country, the scientific evidence on natural immunity and the interaction of prior COVID-19 infection and vaccines does not appear to have been considered in the development of the PRT's policies.

The PRT's statement that vaccination is the surest way to end the pandemic does not stand up to even the mildest critical scrutiny when Israel's Omicron cases have skyrocketed alongside most other countries. Israel has among the most highly boosted populations in the world, yet they are now rolling out their fourth COVID-19 vaccine dose to people over 60 and considering expanding eligibility.

Moreover, there are still major disputes among experts about whether the risks of vaccines for children or repeated mRNA shots outweigh the benefits, especially for young males who face much higher rates of vaccine-associated myocarditis than other groups, and who make up a large proportion of USask's community.

I do not claim to have the content expertise to adjudicate these debates that epidemiologists, immunologists, virologists, and medical researchers will have. But I do have extensive academic expertise in evaluating the quality and credibility of quantitative data and research designs, as well as relevant expertise on the harmful effects of COVID-19 public health and employer policies on communities, organizations, and workers.

I acknowledge that the science is still evolving on the efficacy and harms of the vaccines (a few of the studies I have cited are not yet peer-reviewed), and my positions may eventually prove more wrong than right. No scientific debate is ever completely settled, no one study is perfect, and there are different studies people can cite and summarize to support their policy preferences. But I have provided several links to recent scientific evidence supporting my own opposition to vaccine mandates and what I believe reflects the current state of the science, while the PRT has not provided any evidence to support their position.

My major concerns are that the PRT and university leadership are ignoring evidence and logical arguments that do not align with their chosen COVID-19 policies, and that it will become increasingly difficult for the university to get off this path of requiring never-ending vaccine doses for people to access education and employment. To alleviate this concern, which I know other faculty (and staff and students) also share, the PRT must release the evidence they have relied on to make such strong claims about the vaccines and boosters, and be open to debate about the evolving science on these matters. A core mission of universities is the pursuit of truth through critical inquiry. Asking the university community, and especially university researchers, to place blind faith in PRT's marketing communications is at fundamental odds with our roles as independent arbiters of the science.

I join growing calls from scientists around the world for governments and universities to uphold the communal norms of the scientific method. This requires ensuring researchers have full access to the studies and data on which any claims about the benefits and harms of vaccines are made by university leaders, pharmaceutical companies and state regulators. If the collective good is going to trump basic individual rights around free and informed consent to medical treatment, this should at minimum require open access to the data that informs the PRT's COVID-19 vaccine policies so it can be subjected to the necessary scientific scrutiny. The university is one of the few remaining places in society where we can, and should, be able to have a nuanced and science-informed debate.

VOX is a forum for the expression of opinions of members of the USFA on topics of general interest to the membership. Submissions to be considered for publication may be sent to the USFA office or usfa@usaskfaculty.ca to the attention of ***VOX***, or the Editor Jim Waldram at j.waldram@usask.ca.