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## Reply to: Comment on “Parents’ and healthcare professionals’ views and attitudes toward anti-vaccination”

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### Dear Editor,

We would like to thank the author for his comments on our article “Parents’ and healthcare professionals’ views and attitudes towards anti-vaccination” (1).

As the author has mentioned, we have emphasized the importance of childhood vaccination in order to protect the best interests of children based on scientific knowledge. The group we have focused on was children younger than 18 years of age and therefore considered vulnerable. The responsibility of this vulnerable group rests with the parents. The point that parents should consider is parents have the responsibility and authority to make medical decisions on behalf of their children. They are, however, not as free in making the decision about their child as they would be about themselves and are responsible for caring for their children from the scientific perspective when it comes to life and health. Giving parents’ beliefs and cultural values a priority and acquiescing in their decision not to vaccinate their children results in too much focus on their wishes rather than their children’s benefits (2).

It is, an important ethical value that we should respect the right of people to make choices of their own free will. However, what is generally overlooked is that limiting one’s actions that harm other individuals is not the same as curtailing one’s freedom (2). This issue should be approached from John Stuart Mill’s Harm Principle, which holds that one should be free to act however one wishes unless one’s actions cause harm to somebody else (3). Mill also argues that not only one’s actions but also one’s failure to act may cause harm, for which one is therefore held responsible. From that perspective, vaccine hesitancy is about failure to act. It should always be kept in mind that a person who causes harm, whether by acting or failing to act, is held responsible for that harm either for acting or for failing to act (3).

However, the sentence “in urgent events such as the unexpected pandemic we faced recently, strict global measures may have to be taken for the good of the people” that the author has suggested (4) needs to be thought through and carefully evaluated. This discourse emphasizes the concept of “compulsory vaccination”.

It would not be the right action for us to use the concept of “compulsory vaccination” so clearly when we evaluate this case, especially for autonomous people over the age of 18, whose benefit-risk assessment results are unclear yet. Because in ethics, “slippery slope” arguments lead us to think. The following is what is intended to be explained with this argument; an innocent step to be taken in the direction of situations that are likely to lead to unacceptable consequences for ethical values may cause undesirable situations. Starting to slide on the slope is used in the sense that the values drift to an uncontrollable and unstoppable point. If we formulate it, if the first step, step A, is taken, step B, which

defines an undesirable situation for which we have no reason to refuse it, will follow, followed by step C and will result in an unstoppable course from C to N. Unfortunately, step N is an ethically unacceptable step. If an action of type A is accepted, many actions of type B, type C, and from C to N actions will become accepted. For this reason, it is necessary not to take the first step, that is, step A, or to draw justified boundaries before reaching that area by noticing in advance the gray area where the loss of control begins. However, it is important that this limit is meaningful and drawn in order to protect ethical values (5-7). Based on this argument, it would be appropriate for the expression "strict global measures" to be evaluated by a scientific commission, including ethical experts in particular, and even if it is, its boundaries should be very clearly defined.

We would like to thank the author again for his interest and valuable contributions to our study.

#### **Ethics**

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