



Written by [James Heiser](#) on August 27, 2009

Chinese Healthcare Workers May Refuse “Swine Flu” Vaccine

In the wake of dire warnings from the White House concerning the dangers of the H1N1 virus (the “Swine Flu”), concerns regarding the vaccine are leading thousands of Chinese healthcare workers to consider refusing the vaccine when it is available.

[According to The Atlanta Journal-Constitution](#), “Despite fears of an impending swine flu pandemic this fall and winter, more than half of all health-care workers surveyed in Hong Kong said they will not get vaccinated. Their reason: fear of possible side effects and doubts about the vaccine’s efficacy, according to Chinese research reported online Aug. 26 by the journal BMJ.”



The White House has claimed that as many half of the public may contract the “Swine Flu” and that 30,000 to 90,000 Americans may die from the illness. But in Hong Kong, the place hit most heavily by the SARS outbreak in 2003, roughly half of the healthcare workers are prepared to take their chances with “Swine Flu.” According to *The Atlanta Journal-Constitution*, “More than 8,500 healthcare workers, including doctors and nurses, were surveyed twice this year — once when the World Health Organization (WHO) pandemic alert was at phase 3 and again when WHO raised the alert to 5. Even at phase 5 — the highest alert — less than half (47.9 percent) said they would be vaccinated for the H1N1 swine flu virus.”

According to the study led by the Chinese University of Hong Kong, “To our knowledge, this is the largest study conducted to assess the willingness of health-care workers to accept pre-pandemic influenza vaccination, and it provides important information on barriers to vaccination.... Campaigns to promote vaccination should consider addressing the knowledge gap of staff and the specific target groups for intervention.”

As concerns regarding potential outbreaks of H1N1 are considered in the United States, the Chinese study highlights the importance of clear, rational thought in the very personal process of health care decisions — what is not helpful are pressure tactics. But as we move into the Fall flu season, one may expect to hear invocations of “herd immunity” — the notion that the entire population may largely be spared from contracting a disease if a large enough portion of the population is immune — and calls for yet another mandatory inoculation for students.

What is forgotten in such moments of panic is that “emergency” actions taken during a crisis have a way of becoming the regular order of events. School enrollment already requires submitting to a wide variety of inoculations which, although arguably wise to procure, have nothing to do with education. Publicly-imposed preventative care raises serious questions of what the government may require for our “good” in the future, especially as the federal government is preparing to collectivize the health care



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industry. Is it too far fetched to wonder how long it will be before doctors in the employ of the government will be telling patients what they may eat or drink, lest they suffer being denied medical care? What about federal regulations linking one's body mass index to punitive health tax rates? If such possibilities seem too extreme even to consider, ask yourself: how else is a nationalized healthcare system which is supposed to pay for itself with "wellness care" supposed to make up for the gross financial inefficiencies inherent in any government run system? In such circumstances, government pressure almost always assume a single form: "Do what we tell you, or we'll make you pay."

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