- 1 HJR166
- 2 210616-1
- 3 By Representatives Hanes, Whorton, Sorrell, Fincher, Holmes,
- 4 Mooney, Simpson, Stadthagen and Stringer
- 5 RFD: Rules
- 6 First Read: 01-APR-21

210616-1:n:02/25/2021:AHP*/cr LSA2021-600 1 2 3 4 5 6 7 MEMORIALIZING THE ALABAMA COVID-19 VACCINE BILL OF 8 9 RIGHTS. 10 11 WHEREAS, the Founding Fathers designated that a Bill of Rights was necessary to guard individual liberty against 12 13 encroachments from state and federal actors, public and 14 private; and 15 WHEREAS, the 14th Amendment to the United States 16 Constitution explicitly directs states not to "deprive any person of life, liberty, or property, without due process of 17 18 law; nor deny to any person within its jurisdiction the equal protection of the laws"; and 19 WHEREAS, no COVID-19 vaccine is FDA-approved, but 20 21 some are authorized under a temporary Emergency Use 22 Authorization (EUA) as experimental (investigational) agents 23 only; and 24 WHEREAS, emergency use products are specifically 25 prohibited by 21 U.S.C. § 360bbb-3 from being mandated: 26 "Authorization for medical products for use in emergencies

1 require the option to accept or refuse administration of the 2 product"; and

3 WHEREAS, the CDC Advisory Committee on Immunization 4 Practices (ACIP) affirmed in August 2020 that under an EUA, 5 experimental vaccines are not allowed to be mandatory; and

6 WHEREAS, decades-old universally accepted Codes of 7 Medical Ethics, including the Nuremberg Code and the 8 Declaration of Helsinki, absolutely prohibit any form of 9 coercion whatsoever to individuals to participate in a medical 10 experiment; and

WHEREAS, 40 percent of respondents in at least one U.S. poll reported that they would opt out of taking experimental COVID-19 vaccines; and

14 WHEREAS, it is neither feasible nor safe to mandate 15 experimental vaccination given the large number of COVID-19 16 recovered patients in the general population and the protocols 17 that excluded COVID-19 recovered patients; and

WHEREAS, it is neither feasible nor safe to administer experimental vaccines to many groups of patients, such as individuals with post-natural infections, waning titers, and allergic reactions, as well as childbearing women; and

23 WHEREAS, public and private measures are nonetheless 24 being considered to mandate experimental vaccinations in order 25 to participate in certain public activities and functions of 26 daily American life, including, but not limited to:

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Employment, in-person school attendance, public
 transportation, and concert performances; and

3 WHEREAS, "vaccine passports," "digital health IDs," 4 and other required documentation pose substantial risks to 5 personal privacy and equal treatment before the law for all 6 citizens of this state, as well as the United States 7 generally; and

8 WHEREAS, administration of the experimental COVID-19 9 vaccines, according to guidelines established by the CDC's 10 Advisory Committee on Immunization Practices, does not provide 11 adequate protections for average Americans concerned about 12 potential health hazards associated with the inoculations; and

WHEREAS, the public is entitled to receive unbiased, transparent, and easily accessible medical information related to all vaccines from public health officials; and

16 WHEREAS, the emergency powers assumed by the chief 17 executives of certain states, as well as municipal leaders, 18 violate certain unalienable rights guaranteed under the U.S. 19 Constitution and its Bill of Rights and therefore deserve 20 redress; and

21 WHEREAS, while these legitimate grievances are 22 pursued by the courts of various states, state lawmakers 23 should enshrine certain rights against encroachment by decrees 24 that are not medically or scientifically indicated, such as 25 vaccine mandates, in order to ensure the continuity of these 26 rights; and WHEREAS, that a COVID-19 Vaccine Bill of Rights memorialized by this resolution against COVID-19 vaccine mandates provides an example of adoption for other legislative bodies across the United States to be recognized and upheld by the attorneys general of those states; and

6 WHEREAS, technical guidance for employers released 7 by the U.S. Equal Employment Opportunity Commission (EEOC) in 8 December 2020 should not be understood to undermine employee 9 constitutional rights laid out herein; and

10 WHEREAS, state legislative bodies should practice 11 oversight of such federal assistance consistent with their 12 enumerated powers; and

WHEREAS, out-of-state commercial ticket vendors should not require venue operators and organizers to mandate proof of vaccination from concertgoers and other paying customers before freely entering a venue on private or public property; and

18 WHEREAS, interstate carriers such as airlines and 19 all forms of public transit calling for so-called "vaccine 20 passports" as a condition of entry should not be allowed to 21 operate with state licensure and waivers, and furthermore this 22 resolution would call on federal entities such as the FAA to 23 issue new rules prohibiting COVID-19 vaccine mandates for all 24 carrier crews and customers; now therefore,

BE IT RESOLVED BY THE LEGISLATURE OF ALABAMA, BOTH
 HOUSES THEREOF CONCURRING, That the Legislature memorializes a
 COVID-19 Vaccine Bill of Rights is hereby memorialized for the

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purposes of defending the constitutional liberties of its citizens, promoting sound science, and outlining a framework of best practices for state authorities and federal regulators to develop in this evolving phase of experimental vaccine administration and implementation, and that this COVID-19 Vaccine Bill of Rights consists of the following provisions:

7 (1) No individual should be mandated, coerced,
8 forced or pressured to take an experimental or
9 "investigational" medication.

10 (2) No physician or nurse should be asked by an
11 employer to promote a COVID-19 vaccine.

(3) All individuals reserve the right, at all times,
to determine what is in their own best medical interest
without threat to their livelihood or freedom of movement.

15 (4) All individuals should be given access to independent information to help them determine what is in 16 their own best medical interest, including the risk of death 17 18 based upon age or condition, or both, from contracting COVID-19 naturally. This should include information from 19 sources that are independent of a conflict of interest. For 20 21 example, pharmaceutical companies have an inherent conflict of 22 interest, as do government or quasi-government institutions. Such information can be included, but should not be the sole 23 24 source of information.

(5) The frail and elderly are additionally entitled
to a knowledgeable, independent advocate with medical training
to help them determine their own medical interest.

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(6) Private businesses operating within the
 jurisdiction should have no legal authority to require,
 mandate, or coerce medication or experimental medication for
 any individuals.