

Frequently Asked Questions - Covid Vaccination and the Christian Response

Ngā Pātai Auau – Rongoā Āraimate Kowheori me te Urupare Karaitiana

• Is Covid19 really that bad?

He pērā rawa te kino o te Kowheori19?

In the past year worldwide, there have been over 114 million people infected and over 2.5 million deaths from Covid; 22 million people are currently infected, with 90,000 of these in serious or critical condition in hospitals.

I te tau kua hipa huri noa i te ao, neke atu i te 114 miriona ngā tāngata i te pāngia me te neke atu i te 2.5 miriona ngā mate mai i Kowheori; he 22 miriona tāngata kei te pāngia i tēnei wā, he 90, 000 o ēnei he taumaha, he tino kino rānei te mate ki rō hōhipera.

While Covid statistics are worse for those aged over 65, 5% of Covid deaths (125,000 people) have been aged under 45. Aotearoa New Zealand, while not experiencing the large waves of infection seen in other countries, is actively fighting Covid19 - the best protection for our communities in the future, even as people of faith and especially as people of faith, is to be vaccinated so we have immunity against any Covid infection we encounter. **Covid19 is a virus that kills – our decision about vaccination can mean life or death for ourselves and others.**

Ahakoa he kino ake ngā tatauranga Kowheori mō te hunga pakeke ake i te 65 ngā tau, 5% o ngā matenga Kowheori (125,000 ngā tāngata) kei raro i te 45 ngā tau te pakeke. Ahakoa kāore ia e raru ana i ngā ngaru nui o te pokenga e kitea ana i ētahi atu whenua, kei te kaha whawhai a Aotearoa ki a Kowheori19 — ko te whakahaumaru pai rawa mō ō tātou hapori ahakoa tonu he tāngata whakapono, otirā he hunga whakapono, me okaoka ki te rongoā āraimate kia whai ārai mate ki te pokenga Kowheori e pā nei ki a tātou. He huaketo whakamate a Kowheori19 — ko tā tātou whakatau mō te okaoka, he ora rānei, he mate rānei mā tātou, mā ētahi atu anō hoki.

• What are the four Covid19 Vaccines on order for New Zealand?

He aha ngā Rongoā Āraimate Kowheori19 e whā e tonoa ana mō Aotearoa?

The NZ Government has ordered four different Covid19 vaccines, produced using 3 different scientific technologies. This is enough for New Zealand and our Pacific neighbours, and has given us flexibility depending on the vaccines' performances in other countries that use them before we do, and their future availabilities. Specifically, these vaccines are: 1) Pfizer-BioNTech (EU) as of March 8, NZ has ordered enough for 5 million people. Approved by NZ Medsafe, vaccinations of MIQ and border staff are underway. Requires -80°C storage, 2 doses several weeks apart. 2) Oxford-AstraZeneca (UK) for 3.8 million people, approval pending, 4°C storage, 2 doses several weeks apart.

Kua tonoa e te Kāwanatanga o Aotearoa kia whā ngā momo rongoā āraimate Kowheori19, i hangaia mā te whakamahi i ngā hangarau pūtaiao rerekē e toru. Kua rahi tēnei mā Aotearoa nei me ō tātou kiritata o Te Moana-nui-a-Kiwa, nā korā kua tāwariwari tā tātou ahunga i runga i te ekenga o ngā rongoā āraimate i ētahi atu whenua e whakamahi ana i mua i a tātou, me te wāteatanga mai ā muri ake nei. Ina koa, ko ēnei rongoā āraimate ko:

- 1. **Pfizer-BioNTech** (EU) mai i te 8 o Poutū-te-rangi, kua tonoa e Aotearoa kia rawaka mō 5 miriona tāngata. I whakaaetia e NZ Medsafe, ā, kua tīmata kē te tuku āraimate ki ngā kaimahi a MIQ, a ngā ripa whenua hoki. Tōna tikanga, -80°C kia penapena, e 2 tukunga, ko ētahi wiki i waenga i ia tukunga.
- 2. **Oxford-AstraZeneca** (UK) mō te 3.8 miriona tāngata, kei te tatari te whakaaetanga, 4°C kia penapena, e 2 tukunga, ko ētahi wiki i waenga i ia tukunga.
- 3) **Janssen** (Johnson and Johnson, US) for 5 million people, approval pending, 4°C storage, just 1 dose.
- 3) **Janssen** (Johnson and Johnson, US) mõ te 5 miriona tängata, kei te tatari te whakaaetanga, 4°C kia penapena, 1 noa te tukunga.
- 4) **Novavax** (US) for 5.36 million people, approval pending, 4°C storage and 2 doses several weeks apart.
- 4) **Novavax** (US) mō te 5.36 miriona tāngata, kei te tatari te whakaaetanga, 4°C kia penapena, 2 ngā tukunga, ko ētahi wiki i waenga i ia tukunga.

How do these different vaccines work?

He pēwhea te mahi a ēnei rongoā āraimate rerekē?

All four vaccines use only the spike protein of the Covid19 virus to prompt an immune response in a vaccinated person. This spike protein is a characteristic feature of the outer coating of the Covid19 virus, and on its own is key to initiating an effective immune response after a vaccination.

Ko ngā rongoā āraimate e whā ka whakamahi i te pūmua koikoi o te huaketo Kowheori19 kia tere ake te urupare āraimate a te tangata kua okaokaina. Ko te pūmua koikoi nei, he āhuatanga motuhake o te kiritai o te huaketo Kowheori19, ki tōna kotahi koia anō te take e tīmata wawe ai te urupare āraimate whai muri i te okaoka.

A vaccinated person's immune response involves immediate attack on the 'invading' spike protein by antibodies and immune cells, and creates an immune memory of the Covid19 spike protein for protection against future infections.

Ko te urupare a te tangata i okaokaina ko te whakaeke wawe i te pūmua koikoi 'urutomo' e ngā paturopi me ngā pūtau āraimate, ka hanga i te mahara āraimate o te pūmua koikoi Kowheori19 hei ārai i ngā pokenga ā muri ake nei.

The differences between the vaccines are whether it is the DNA or RNA information for the spike protein or the actual pre-made spike protein being used as the active ingredient of the vaccine.

Ko te rerekētanga kei waenga i ngā rongoā āraimate mēnā rānei kei te whakamahia hei matū hohe ko te mōhiohio pītau ira (DNA), RNA rānei, tērā rānei ko te pūmua koikoi, kua hangaia i mua noa atu.

1) The **Pfizer-BioNTech vaccine** is made with a **newer mRNA technology**, where the active part of the vaccine is the Covid19 spike mRNA. When used in a vaccine, this mRNA is able to enter our cells local to the injection site, and prompt these cells to produce spike protein which then starts an immune response against the virus.

Ko te **rongoā āraimate Pfizer-BioNTech** kua hangaia me **te hangarau mRNA hou ake**, ko te wāhanga kaha o te rongoā āraimate ko te mRNA koikoi Kowheori19. Ina whakamahia ana i te rongoā āraimate, ka taea e tēnei mRNA te uru atu ki ō tātou pūtau tata ki te wāhi werohanga, me te whakahau i ēnei pūtau ki te whakaputa i te pūmua koikoi ka tīmata te whakautu ārai mate ki te huaketo.

Importantly, after the spike protein is produced according to the vaccine mRNA information, the mRNA is quickly destroyed by our cell enzymes.

Ko te mea nui, i muri i te whakaputanga o te pūmua koikoi e ai ki ngā mōhiohio mRNA a te rongoā āraimate, ka whakangaro wawe te mRNA e ō tātou pūmua whākōkī pūtau.

2) and 3) Both the **Oxford- AstraZeneca vaccine and Janssen vaccine** are produced using **viral vectors**, where DNA for the Covid19 spike protein is exchanged with DNA inside a harmless virus such as the common cold adenovirus. The altered adenovirus containing the Covid spike DNA is injected as the active part of the vaccine and used by the vaccinated person's cells to produce spike proteins to alert their immune system.

2)me te 3) Ko te **rongoā āraimate Oxford-AstraZeneca me te rongoā āraimate Janssen** e whakaputaina ana mā te whakamahi i **ngā kaituku huaketo**, mā konei e whakawhitingia ana te pītau ira mō te pūmua koikoi Kowheori19 ki te pītau ira i roto i te huaketo ngū pēnei i te adenovirus maremare noa. Ko te adenovirus kua whakarerekētia kei roto te pītau ira koikoi Kowheori ka werohia hei wāhanga hohe o te rongoā āraimate, ā, ka whakamahia e ngā pūtau o te tangata kua okaokaina hei whakaputa i ngā pūmua koikoi hei whakatūpato i tōna pūnaha ārai mate.

4) The **Novavax** vaccine is made using traditional **protein-adjuvant technology** where the spike protein is first made in the lab, and bonded to a large plant molecule (adjuvant) that is known to further boost the immune response of the vaccinated person. This Spike protein-adjuvant molecule then is the active ingredient of the Novavax vaccine.

Ka hangaia te rongoā araimate Novavax mā te whakamahi i te **hangarau pūmua-adjuvant,** mā konā ka hanga tuatahitia ai te pūmua koikoi ki te taiwhanga, ā, ka hono atu ki te rāpoi ngota tipu nui (adjuvant) e mōhiotia ana hei whakanui ake i te urupare a te tangata i okaokaina. Nō reira ko tēnei pūmua Koikoi-rāpoi ngota adjuvant te matū hohe o te rongoā āraimate Novavax.

Are any of these vaccines live or infectious?

Kei te ora rānei ētahi o ēnei rongoā āraimate, he mea hopuhopu rānei?

Each vaccine contains either the information (as mRNA or DNA) or pre-made protein for just the Covid19 spike protein, and because there is no intact or live Covid19 virus present in the vaccine, the vaccine cannot give you Covid. None of the vaccines contain any human or other cellular material from their production. New Zealand InterChurch Bioethics Council http://www.interchurchbioethics.org.nz/ Anglican, Methodist and Presbyterian Churches of Aotearoa New Zealand.

Kei ia rongoā āraimate te mōhiohio (hei mRNA, hei ira pītau rānei) me te pūmua i hangaia i mua noa atu mō te pūmua koikoi Kowheori19 anake, ā, nā te mea kāore he huaketo Kowheori19 ora, tōtika rānei kei roto i te rongoā āraimate, kāore e taea e te rongoā āraimate te whakamate i a koe ki te Kowheori. Kāore he matū pūtau tangata, ētahi atu matū pūtau rānei i tētahi o ngā rongoā āraimate mai i tā rātou whakaputanga. New Zealand InterChurch Bioethics Council http://www.interchurchbioethics.org.nz/ Anglican, Methodist and Presbyterian Churches of Aotearoa New Zealand.

Have these vaccines been developed too quickly to be safe?

Kua tere rawa te whanake i ēnei rongoā āraimate kia haumaru ai?

Several countries have urgently worked together, sharing information and building on years of past research, to manufacture Covid19 vaccines in historically record time. This **global sharing of technologies has allowed speed in vaccine production, while still ensuring full and carefully testing**.

Kua whitawhita te mahi ngātahi a ētahi whenua, ki te whakahui mōhiohio me te whakapakari i ngā hua o ngā rangahau o ngā tau ki mua, ki te waihanga tino wawe mai i ngā rongoā āraimate Kowheori19. Nā tēnei whakahui hangarau huri noa i te ao, i āhei ai te whakaputa wawe i te rongoā āraimate, waihoki me te tiaki tonu ka āta whakamātautia katoatia anō hoki.

In New Zealand, Medsafe is responsible for checking safety and effectiveness of medicines from all available global information, before allowing their use in this country. Worldwide, there is a rapidly increasing amount of data being generated from the millions of people now vaccinated, as well as from the rigorous phase 3 human clinical trials required for each vaccine before commercial manufacture is permitted. Since NZ is in the fortunate position of having contained Covid19 infection, we have been able to observe how other countries go with their vaccinations before beginning our vaccination, allowing Medsafe to fully assess vaccine applications informed by a very large body of evidence.

I Aotearoa nei, nō Medsafe te kawenga hei tirotiro i te haumaru me te whaihua o ngā rongoā mai i ngā mōhiohio katoa e wātea ana i te ao, i mua i te whakaaetanga kia whakamahia i tēnei whenua. Huri noa i te ao, kei te tere piki haere ngā raraunga e ahu mai ana i ngā miriona tāngata kua okaokaina ināianei, tae atu ki ngā whakamātau haumanu ā-tāngata 3 houhare e hiahiatia ana mō ia rongoā āraimate i mua i te whakaaetanga o te hanga arumoni. I runga i te waimarie a Aotearoa i te pupuri i te mate Kowheori19, i taea ai e tātou te tirotiro me pēwhea te haere a ētahi atu whenua ki ā

rātou okaoka i mua i tā tātou tīmatanga i te okaoka, e tuku ana i a Medsafe ki te arotake katoa i ngā tono rongoā āraimate i runga i te whakaaturanga a ngā taunakitanga nui.

Can DNA or RNA vaccines change our own human DNA when injected as a vaccine?

Ka taea e ngā rongoā āraimate pītau ira, RNA rānei te whakarerekē i ō tātou ake pītau ira tāngata ina werohia hei rongoā āraimate?

Vaccines cannot affect or interact with our DNA when we are vaccinated, nor become part of our own DNA. After vaccination, Covid spike proteins are made inside the cells local to the injection site, and the RNA or DNA from the vaccine is then destroyed by our own cell enzymes, as would happen with any other viral DNA or RNA.

Kāore e taea e ngā werohanga te whakaaweawe, te pāhekoheko rānei ki ō tātou pītau ira ina okaokaina tātou, kāore hoki e taea te uru ki ō tātou ake pītau ira. Whai muri i te tukunga rongoā āraimate, ka whakamahia ngā pūmua koikoi Kowheori ki roto i ngā pūtau tata ki te wāhi i werohia, ā, ka whakangaromia te RNA, te pītau ira rānei mai i te rongoā āraimate e ō tātou ake pūmua whākōkī pūtau, pērā anō i te pānga ki ngā pītau ira, RNA rānei a ērā atu huaketo.

• What is the ethical implication of a vaccine made using cells associated with a historical abortion?

He aha te tikanga matatika o te rongoā āraimate i whakamahia ki ngā pūtau e hāngai ana ki te materoto o mua?

Both the Oxford-AstraZeneca and Janssen vaccines are produced using human embryonic cell-lines (HEK293 and Per.C6) that act as laboratory cell factories. Human embryonic cell-lines are the best cells to produce human vaccines, while embryonic cells are valuable as they can divide without limit. HEK293 cells were first used in 1973 in the Netherlands from the kidney cells of a legally aborted human foetus, and this cell-line has proved to be an essential tool worldwide for vaccine production such as rubella, chickenpox, shingles and cystic fibrosis. Likewise, the Per.C6 cell-line originated using retinal cells from a human foetus in 1985.

Ko ngā rongoā āraimate Oxford-AstraZeneca me te Janssen e mahia ana mā te whakamahi i ngā rārangi-pūtau kukune tāngata (HEK293 me te Per.C6) e mahi ana hei wheketere pūtau taiwhanga. Ko ngā rārangi-pūtau kukune tāngata ngā pūtau pai rawa hei whakaputa i ngā rongoā āraimate tāngata, ā, he mea nui ngā pūtau kukune i runga i te āhei ki te wehewehe mutunga kore. I whakamahia tuatahitia ngā pūtau HEK293 i te tau 1973 i Hōrana mai i ngā pūtau whatukuhu o te kukune tāngata i whakatahea ā-turetia, ā, kua tū tēnei rārangi-pūtau hei taputapu waiwai puta noa i te ao mō te whakaputa rongoā āraimate mō te karawaka Tiamana, te koroputa hei, te huaketo hei ka ara ake anō, me te cystic fibrosis. Waihoki ko te rārangi-pūtau Per.C6 i ahu mai i ngā pūtau āhuahua o te kukune tāngata i te tau 1985.

It is useful to ethically weigh the lifesaving and ongoing value to human health of these vaccines produced or tested with a small number of available human embryonic cell-lines, with the compromise that the original source of each cell-line was a single aborted foetus.

He mea whaihua ki te āta whakataurite i te uara whakaora me te uara haere ake nei ki te hauora tāngata o ēnei rongoā āraimate i hangaia, i whakamātauria rānei me te iti o ngā rārangi-pūtau kukune tāngata e wātea ana, ki te tukunga ko te pūtake o ia rārangi-pūtau ko te kukune kotahi kua whakatahea.

To be considered in this balance:

Kia whaiwhakaarotia ake tēnei whakatauritenga:

- i) laboratory use was not the reason for either of these two abortions kāore te whakamahi ki te taiwhanga te take mō ēnei materoto e rua
- ii) after production of viral vector spike protein, no human foetal cells or cell parts remain in the final vaccine.

 whai muri i te whakaputanga o te pūmau koikoi huaketo, kāore he pūtau kukune tāngata, wāhanga pūtau rānei e noho tonu ana ki te rongoā āraimate whakamutunga.
- while only Oxford-AstraZeneca and Janssen vaccines are produced using human embryonic cell-lines, PfizerBioNTech and Novavax have been tested at some stage using human embryonic cell-lines.

 ahakoa ko ngā rongoā āraimate Oxford-AstraZeneca me te Janssen anake e whakaputaina ana mā te whakamahi i ngā rārangi-pūtau kukune tāngata, kua whakamātauria a PfizerBioNTech me te Novavax i tētahi wā mā te whakamahi i ngā rārangi-pūtau kukune tāngata.
- iv) the Vatican has advised the Catholic church that a greater good comes from using a vaccine if there is not an alternative, even if the vaccine has ethically compromised origins. (For more info see: www.interchurchbioethicscouncil.org.nz Covid19 vaccines and their link with abortions)
 - kua tohutohu te Vatican ki te hāhi Katorika he nui ake te painga ka puta mai i te whakamahi i te rongoā āraimate mehemea kāore he kōwhiringa anō, ahakoa he tukunga matatika i te ahunga mai o te rongoā āraimate. (Mō ētahi atu mōhiohio tiro atu ki: www.interchurchbioethicscouncil.org.nz Covid19 vaccines and their link with abortions)
- What is the urgency to be vaccinated if I am young and healthy?

He aha te nonoi kia okaokaina ahau mehemea e rangatahi tonu ana, e hauora ana hoki?

In order to provide protective herd immunity (where the virus cannot infect enough people to keep replicating itself),70-90% of people in a population need to be vaccinated. A recent poll showed that currently 70-75% of New Zealanders would be willing to be vaccinated, while 20% were undecided. Older people and immunocompromised people are more susceptible to dying from Covid19, but younger and healthy people are still vulnerable to being infected, transmitting Covid19 to others and suffering from debilitating long-term Covid19 effects. Our individual vaccination decision very much affects others as well as ourselves.

Kia pai ai te whakarite i te āraimate o te kāhui hei tiaki (arā, kāore e taea e te huaketo te whakamate i te nui o ngā tāngata ki te tukurua i a ia anō) me okaoka te 70%-90% o ngā tāngata ki tētahi taupori. I kī tētahi pōti tata nei i tēnei wā e 70%-75% o ngā tāngata o Aotearoa e whakaae ana kia okaokaina, engari e 20% kāore anō kia whakatau. Ko ngā kaumātua me te hunga pūnaha ārai mate ngoikore, ka nui ake te tūpono ka hemo i te Kowheori19, engari ko ngā tāngata iti iho ngā tau me ngā tāngata hauora e whakaraerae tonu ana ki te pāngia, te tuku hoki i te Kowheori19 ki ētahi atu me te raru i ngā pānga whakangoikore a Kowheori19 mō te wā roa. Ko ā tātou whakataunga okaoka takitahi e tino pā ana ki ētahi atu me tātou anō.

What is our role and response as Christians and church communities?

He aha tā tātou mahi me tā tātou urupare hei Karaitiana me ngā hapori hāhi?

- be informed and proactive about sharing factual, evidence-based information with others
- sharing truth rather than misinformation so that Covid vaccination is fully understood by everyone.
- consider the importance of the life-saving benefit to all by being vaccinated against Covid.
- use our unique influence for many parts of our New Zealand society, reaching corners of our communities where other communications may not reach, **promoting vaccine equity and access for everyone**.
- be **witnesses of care in our communities** by using effective church communication based on factual information about Covid vaccination, openly discussing any ethical questions being asked, and assisting health officials in any way when it's our turn to be vaccinated.
- kia whai mōhio, kia kaha hoki ki te tohatoha i ngā kōrero tūturu, kōrero pūtake-taunaki ki ētahi atu
- te tohatoha i ngā kōrero pono kaua i ngā kōrero pōhēhē kia mārama ai te katoa ki te rongoā āraimate Kowheori.
- whakaarotia te hiranga o te **painga whakarauora tangata ki te katoa mā te okaoka ki a Kowheori**. -whakamahi i tō tātou whakaaweawe ahurei ki ngā tini wāhanga o tō tātou pāpori o Aotearoa, tae
- atu ki ngā pito o ō tātou hapori kāore pea e tae atu ētahi atu kōrero, **me te whakatairanga i te mana** taurite o te rongoā āraimate me te urunga ki te katoa.
- tū hei **kaiwhakaatu i te manaaki i tō tātou hapori** mā te whakamahi i ngā whakawhitinga kōrero pai a te hāhi ki runga i ngā kōrero pono mō te rongoā āraimate Kowheori, mā te matapaki tūwhera i ngā pātai matatika e pātaihia ana, mā te āwhina hoki i ngā āpiha hauora ahakoa te aha ka tae ki te wā kia okaokaina tātou.