

Good morning, I am Dr. Leonard Banco, a pediatrician and a long time member of the Board of Directors of the Connecticut Chapter of the American Academy of Pediatrics. We are the membership organization representing over 1000 pediatricians in the state. We are here today to comment on HB 6949 AN ACT CONCERNING CHILDHOOD VACCINATIONS.

Routine childhood immunization is one of the crown achievements in public health over the past century. A 2013 New England Journal of Medicine study estimated that childhood vaccination programs have prevented 103.1 million cases of diphtheria, hepatitis A, measles, mumps, pertussis, polio and rubella since 1924. A 2005 Archives of Pediatric and Adolescent Medicine study estimated that for every dollar spent in the US, vaccination programs saved more than \$5 in direct costs and approximately \$11 in additional costs to society.

However, challenges remain. Outbreaks of pertussis, measles, Hib, and other vaccine preventable diseases are returning. Numerous factors—including the cost of acquiring and administering vaccines, an increasingly complex delivery system, as well as a small but growing number of parents who are forgoing vaccination for their children—put success in jeopardy.

The AAP has long supported preventive care, including immunizations, in the medical home setting as a major component of pediatric health care and disease prevention and believes economic barriers should not restrict access to immunizations or other forms of preventive care for children. The AAP works to educate the public and key decision makers about the importance of routine child immunization and actively counters misinformation about vaccine safety and efficacy.

The AAP advocates for school entry immunization policies that ensure full immunization in the school setting according to current recommendations and discourage casual parental opt-out of school immunization requirements.

HB 6949 gives the opportunity to revisit school immunization compliance knowing the effect that casual exemptions have on public health. Our goal would be to only allow medical exemptions. Currently, Mississippi and West Virginia only allow medical exemptions, and those states have had the laws without religious exemptions upheld in the courts.

We are attaching an article by Dr. Paul Offit, a world-renown expert on childhood vaccines. Additionally, we are attaching the statutes in Mississippi and West Virginia for your convenience. We would be very happy to work with you to strengthen the requirements in Connecticut, and make every child in our state healthy.

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The Opinion Pages | OP-ED CONTRIBUTOR

What Would Jesus Do About Measles?

By PAUL A. OFFIT FEB. 10, 2015

PHILADELPHIA — MEASLES is back. Last year, about 650 cases were reported in the United States — the largest outbreak in almost 20 years. This year, more than a hundred have already been reported.

Parents have chosen not to vaccinate their children because they can; 19 states have philosophical exemptions to vaccination, and 47 have religious exemptions. The other reason is that parents are not scared of the disease. But I'm scared. I lived through the 1991 Philadelphia measles epidemic.

Between October 1990 and June 1991, more than 1,400 people living in Philadelphia were infected with measles, and nine children died. The epidemic started when, after returning from a trip to Spain, a teenager with a blotchy rash attended a rock concert at the Spectrum. By Nov. 29, 96 schoolchildren had been stricken with the illness; a week later, it was 124; by the end of December, the number had risen to 258, and the first child had died. The Centers for Disease Control and Prevention sent a team to determine whether the strain of measles was particularly virulent. It wasn't. Investigators found that the deaths had nothing to do with the strain that was circulating and everything to do with the parents.

Two fundamentalist Christian churches — Faith Tabernacle Congregation and First Century Gospel Church — were at the heart of the outbreak. Children had not been vaccinated, and when they became ill, their parents prayed instead of taking them to the hospital to receive the intravenous fluids or oxygen that could have saved the lives of those with the worst cases. "If I go to God and ask him to heal my body," said a church member, Gordon Korn, "I

can't go to a doctor for medicine. You either trust God or you trust man."

Public health officials turned to the courts to intervene. First, they got a court order to examine the churches' children in their homes, then to admit children to the hospital for medical care. Finally, they did something that had never been done before or since: They got a court order to vaccinate children against their parents' will. Children were briefly made wards of the state, vaccinated and returned to their parents. At the time, a religious exemption to vaccination had been on the books in Pennsylvania for about a decade.

To prevent doctors from violating his church's beliefs against vaccination, the pastor of the Faith Tabernacle Church asked the American Civil Liberties Union to represent him. It refused. "There is certainly a free exercise of religion claim by the parents," said Deborah Leavy, the executive director of the A.C.L.U. of Pennsylvania, "but there is also a competing claim that parents don't have the right to martyr their children."

When spring came and the epidemic faded, C.D.C. officials published the results of their investigation. Over a third of those infected — 486 of 1,424 — belonged to one of those two churches, as did six of the nine dead children.

At the Children's Hospital of Philadelphia, we saw more than 200 children in our emergency department and admitted about 40. Children would come in, covered in rashes, squinting in the bright light (a side effect caused by eye irritation), struggling to breathe and often extremely dehydrated. It was like being in a war zone. When I asked their parents why they had done what they had done, they all had the same answer: "Jesus was my doctor."

It seems to me that if religion teaches us anything, it's to care about our children, to keep them safe. Independent of whether one believes in Jesus, or that the four Gospels are an accurate account of what he said and did, you have to be impressed by the figure described. At the time of Jesus, around 4 B.C. to 30 A.D., child abuse was the "crying vice" of the Roman Empire. Infanticide and abandonment were common. Children were property, no different from slaves. But Jesus stood up for children. In Matthew 25:40, he said, "Verily, I say unto you, Inasmuch as ye have done it unto one of the least of my brethren ye have done it unto me" — a quote that could be emblazoned

onto the entranceway of every children's hospital in the world.

Constantine, the first Christian emperor of Rome, passed laws protecting children from abuse and poverty. Christian monasteries became prototypes for modern-day hospitals. And missionaries brought medicine to the four corners of the earth in Jesus' name.

So why didn't representatives from other churches or other religions stand up for the children suffering from measles in Philadelphia? The reason is obvious. No one likes to tell someone else how to practice their faith. It's an understandable instinct — to a point. And that point was reached in Philadelphia in 1991.

In the wake of the current epidemic, several states have proposed legislation modifying or eliminating philosophical exemptions to vaccination. No lawmaker, however, dares to touch religious exemptions. It's political dynamite. But with an estimated 30,000 children in the United States unvaccinated for religious reasons, that is a dangerous mistake.

Parents shouldn't be allowed to martyr their children — or in this case, those with whom their children have come in contact. Religious exemptions to vaccination are a contradiction in terms. In the good name of all religions, they should be eliminated.

Correction: February 20, 2015

An Op-Ed article on Feb. 10 about a 1990s measles outbreak in Philadelphia misspelled the surname of a woman quoted on free expression of religion. She is Deborah Leavy, not Levy. The article also misidentified her title; she was executive director of the A.C.L.U. of Pennsylvania, not the Philadelphia chapter. Paul A. Offit, a pediatrician specializing in infectious diseases at the Children's Hospital of Philadelphia, is the author of "Bad Faith: When Religious Belief Undermines Modern Medicine."

A version of this op-ed appears in print on February 10, 2015, on page A21 of the New York edition with the headline: What Would Jesus Do About Measles?.

2010 Mississippi Code

TITLE 41 - PUBLIC HEALTH

Chapter 23 - Contagious and Infectious Diseases; Quarantine.

41-23-37 - Immunization practices for control of vaccine preventable diseases; school attendance by unvaccinated children.

§ 41-23-37. Immunization practices for control of vaccine preventable diseases; school attendance by unvaccinated children.

Whenever indicated, the state health officer shall specify such immunization practices as may be considered best for the control of vaccine preventable diseases. A listing shall be promulgated annually or more often, if necessary.

Except as provided hereinafter, it shall be unlawful for any child to attend any school, kindergarten or similar type facility intended for the instruction of children (hereinafter called "schools"), either public or private, with the exception of any legitimate home instruction program as defined in Section 37-13-91, Mississippi Code of 1972, for ten (10) or less children who are related within the third degree computed according to the civil law to the operator, unless they shall first have been vaccinated against those diseases specified by the state health officer.

A certificate of exemption from vaccination for medical reasons may be offered on behalf of a child by a duly licensed physician and may be accepted by the local health officer when, in his opinion, such exemption will not cause undue risk to the community.

Certificates of vaccination shall be issued by local health officers or physicians on forms specified by the Mississippi State Board of Health. These forms shall be the only acceptable means for showing compliance with these immunization requirements, and the responsible school officials shall file the form with the child's record.

If a child shall offer to enroll at a school without having completed the required vaccinations, the local health officer may grant a period of time up to ninety (90) days for such completion when, in the opinion of the health officer, such delay will not cause undue risk to the child, the school or the community. No child shall

be enrolled without having had at least one (1) dose of each specified vaccine.

Within thirty (30) days after the opening of the fall term of school (on or before October 1 of each year) the person in charge of each school shall report to the county or local health officer, on forms provided by the Mississippi State Board of Health, the number of children enrolled by age or grade or both, the number fully vaccinated, the number in process of completing vaccination requirements, and the number exempt from vaccination by reason for such exemption.

Within one hundred twenty (120) days after the opening of the fall term (on or before December 31), the person in charge of each school shall certify to the local or county health officer that all children enrolled are in compliance with immunization requirements.

For the purpose of assisting in supervising the immunization status of the children the local health officer, or his designee, may inspect the children's records or be furnished certificates of immunization compliance by the school.

It shall be the responsibility of the person in charge of each school to enforce the requirements for immunization. Any child not in compliance at the end of ninety (90) days from the opening of the fall term must be suspended until in compliance, unless the health officer shall attribute the delay to lack of supply of vaccine or some other such factor clearly making compliance impossible.

Failure to enforce provisions of this section shall constitute a misdemeanor and upon conviction be punishable by fine or imprisonment or both.

Sources: Laws, 1978, ch. 530, 1; Laws, 1983, ch. 522, § 9, eff from and after July 1, 1983.

West Virginia Statutes

§16-3-4. Compulsory immunization of school children; information disseminated; offenses; penalties.

Whenever a resident birth occurs, the state director of health shall promptly provide parents of the newborn child with information on immunizations mandated by this state or required for admission to a public school in this state.

All children entering school for the first time in this state shall have been immunized against diphtheria, polio, rubeola, rubella, tetanus and whooping cough. Any person who cannot give satisfactory proof of having been immunized previously or a certificate from a reputable physician showing that an immunization for any or all diphtheria, polio, rubeola, rubella, tetanus and whooping cough is impossible or improper or sufficient reason why any or all immunizations should not be done, shall be immunized for diphtheria, polio, rubeola, rubella, tetanus and whooping cough prior to being admitted in any of the schools in the state. No child or person shall be admitted or received in any of the schools of the state until he or she has been immunized as hereinafter provided or produces a certificate from a reputable physician showing that an immunization for diphtheria, polio, rubeola, rubella, tetanus and whooping cough has been done or is impossible or improper or other sufficient reason why such immunizations have not been done. Any teacher having information concerning any person who attempts to enter school for the first time without having been immunized against diphtheria, polio, rubeola, rubella, tetanus and whooping cough shall report the names of all such persons to the county health officer. It shall be the duty of the health officer in counties having a full-time health officer to see that such persons are immunized before entering school: **Provided**, That persons enrolling from schools outside of the state may be provisionally enrolled under minimum criteria established by the director of the department of health so that the person's immunization may be completed while missing a minimum amount of school: **Provided, however**, That no person shall be allowed to enter school without at least one dose of each required vaccine.

In counties where there is no full-time health officer or district health officer, the county commission or municipal council shall appoint competent physicians to do the immunizations and fix their compensation. County health departments shall furnish the biologicals for this immunization free of charge.

Health officers and physicians who shall do this immunization work shall give to all persons and children a certificate free of charge showing that they have been immunized against diphtheria, polio, rubeola, rubella, tetanus and whooping cough, or he or she may give the certificate to any person or child whom he or she knows to have been immunized against diphtheria, polio, rubeola, rubella, tetanus and whooping cough. If any physician shall give any person a false certificate of immunization against diphtheria, polio, rubeola, rubella, tetanus and whooping cough, he or she shall be guilty of a misdemeanor, and, upon conviction, shall be fined not less than twenty-five nor more than one hundred dollars.

Any parent or guardian who refuses to permit his or her child to be immunized against diphtheria, polio, rubeola, rubella, tetanus and whooping cough, who cannot give satisfactory proof that the child or person has been immunized against diphtheria, polio, rubeola, rubella, tetanus and whooping cough previously, or a certificate from a reputable physician showing that immunization for any or all is impossible or improper, or sufficient reason why any or all immunizations should not be done, shall be guilty of a misdemeanor, and except as herein otherwise provided, shall, upon conviction, be punished by a fine of not less than ten nor more than fifty dollars for each offense.