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June 17, 2019

Maxine Grad
Chairwoman of the Judiciary Committee,

301 Paddy Hill Road
Moretown, VT 05660

RE: GHLF Patient Group Supports House Bill 0238

Dear Chairwoman Grad,

The Global Healthy Living Foundation (GHLF) writes in support of House Bill 0238 and hopes it is reintroduced and supported in the following session by the Judiciary Committee of the House. The legislation would shift current vaccination policy for Vermont public school children by repealing the religious belief exemption from the state vaccination policies, and thereby, only allowing an exemption for medical reasons.

By way of background, GHLF is a 20-year-old non-profit patient organization reaching millions of chronically ill patients and their caregivers across the country through social media, community events and online support and education. GHLF works to improve the quality of life for patients living with chronic disease by making sure their voices are heard and advocating for improved access to care at the local level. Our patients suffer from chronic conditions including arthritis, psoriasis, gastrointestinal disease, cardiovascular disease and migraines. As a result, these patients are exceptionally vulnerable to disease and infection due to their immunocompromised state, and some cannot be vaccinated. Therefore, these patients rely on strict vaccination policy, and subsequent high vaccination rates, to prevent the spread of crippling, and often fatal, diseases. It is on behalf of the patients that we write to express our ongoing support for HB 0238.

Five states - Mississippi, West Virginia, California, and most recently, Maine and New York – provide medical exemptions as the only legally viable reason for nonvaccination. All other states allow religious exemptions, philosophical exemptions, or both. Several studies have shown a clear link between the ease of obtaining vaccine exemptions under a state's law, the number of exemptions claimed in the state, and, in turn, the risk of outbreak of vaccine-preventable diseases. Maine found itself at the crux of these policies, as it faced exponential rates of pertussis (whooping cough). Understanding and experiencing the vulnerability and risk these lax vaccination policies posed, Maine recently banned all nonmedical exemptions in hope of regaining control of their population immunity. While the state of Vermont has yet to experience a case of a vaccine-preventable disease, due to the inadequate vaccination rate, the state remains vulnerable to outbreak as many of their neighboring states separately face unyielding vaccine-preventable disease epidemics. In spite of New York's problem with one of the worst measles outbreaks in over two decades with the epicenters focused around religious communities with low vaccination rates, no major religious demonstration has documented anti-vaccination laws; thus, making the religious argument against vaccination obsolete. In February 2019, the Vermont Department of Health released a health advisory report acknowledging the measles outbreak and warning healthcare providers about the risk of transmission to children within the Vermont area.

States such as Mississippi and West Virginia, who have remained diligent in their strict vaccination regulations despite some controversy, continue to see the highest rates of vaccinations in the country. As a consequence, their states' borders function as a protective wall, just as the scientific evidence surrounding population immunity suggests. Since 2008, states surrounding West Virginia, including Pennsylvania, Maryland, Kentucky, Virginia, and North Carolina have experienced outbreaks and attacks of various vaccine-preventable diseases, including whooping cough, measles, and mumps. West Virginia has experienced no

outbreaks or transmission across state borders. This underlines how their vaccination policies have contributed to the effectiveness and success of population immunity and kept their population safe from these diseases. Vermont can experience a similar protection if bill HB 0238 is moved forward.

As an organization that communicates and works closely with patients, we understand the vulnerability some have because of their pre-existing conditions. For a patient with an autoimmune disease, the lack of vaccination rates not only leads to their potential disability and reduced quality of life, but also has the potential to unnecessarily burden the healthcare system with secondary and tertiary care needs when cheap preventive care is available. Furthermore, while vaccinations are not 100 percent effective, research suggests the protection of population immunity significantly increases the effectiveness of vaccinations for everyone. This means any undue use of the healthcare system extends beyond individuals who are immunocompromised to include the general public as a whole.

Vermont is known for its inclusive nature; therefore, we understand any hesitancy tackling religion-oriented policies. However, research has not only identified the importance of vaccinations and their ability to protect those who are immunocompromised when participation rates are adequate, it has also shown how expansive exemptions result in outbreaks. Also, as we noted above, virtually all religions support vaccination. For these reasons alone, we believe the benefits of repealing the religious exemption rule in Vermont far outweighs the costs. Religious exemptions gained traction in the mid-1980s after people became concerned about the pertussis vaccine and, again, in 1998 after a now-discredited study linked vaccinations and Autism. Science has reaffirmed many times the safety of vaccines and discredited all studies that say otherwise, including the study linking vaccinations to Autism. Furthermore, the U.S. Supreme Court, *Prince v. Massachusetts* case, ruled that parents' rights to practice religion freely do not include the liberty to expose the community or a child to disease or ill health. Mississippi additionally reasoned against religious exemption in 1979 when its own state Supreme Court ruled that any use of nonmedical exemption would result in the violation of other citizens' Fourteenth Amendment rights to equal protection under the law- as children exempt from the law leave the rest vulnerable to the "hazard of associating in school".

GHLF stands behind the policies enforced by Mississippi, California, West Virginia, Maine, and New York. Vaccination rates need to improve and we are committed to expanding policies that achieve this goal. We support HB 0238's effort to repeal the religious exemption to vaccinations. For the reasons listed above, we respectfully ask that you reintroduce and support HB 0238 in the following session. We appreciate your thoughtful consideration of this legislation. Feel free to reach out to me at cgreenblatt@ghlf.org if you would like to discuss this further.

Respectfully submitted,



Corey Greenblatt
Manager of Policy and Advocacy
Global Healthy Living Foundation

