



Global Healthy Living Foundation
515 North Midland Avenue
Upper Nyack, New York 10960 USA
+1 845 348 0400
+1 845 340 0210 fax
www.ghlf.org

June 17, 2019

Joel Fry
Chairman of the Education Committee,
1473 195th Avenue
Osceola, Iowa 50213

RE: GHLF Patient Group Opposes House Bill 0448

Dear Chairman Fry,

The Global Healthy Living Foundation (GHLF) writes in opposition to House Bill 0448 and hopes it is struck down by the Education Committee of the House. The legislation would expand current vaccination policy for Iowa public school children by adding a philosophical belief exemption to the state vaccination policies.

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 opposition to HB 0448.

Four 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. 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 denomination has documented anti-vaccination laws; thus, making the religious argument against vaccination obsolete. As of last week, New York has banned religious exemption in hope of reversing their current measles epidemic and improving the health and welfare of the public.

Iowa's disease-spreading catalyst is not religious but philosophical. We encourage Iowa to move toward bills similar to those introduced in New York and passed in Maine restricting exemptions, not loosen vaccination policy by adding a philosophical exemption.

According to the CDC and the Department of Public Health, Iowa is in the midst of rising measles and pertussis cases. By supporting HB 0448 and loosening exemption policy, epidemiology statistics show Iowa will continue to see increases in the number of vaccine-preventable disease cases because the resulting vaccination rate will not provide protection to the general public. Moreover, many of Iowa's neighboring states separately face unyielding vaccine-preventable disease epidemics because this bill will increase transmission across state borders.

In contrast, states such as Mississippi and West Virginia, which 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 any of these diseases. Iowa can experience a similar protection, but is threatening vulnerability to the general public welfare by introducing HB 0448.

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.

We understand the desire to remain accepting of individual beliefs, both religious and philosophical. 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 adding the philosophical exemption to the state vaccination policy is too great a threat to the general public welfare to justify its acceptance. Nonmedical 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, ruled in *Prince v. Massachusetts* case, 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 their 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".

A final note, GHLF questions the bill's additional provision of informed consent. There is little research to suggest that presenting science and providing education about the effects of non-vaccination has any effect on anti-vaccination sentiment or vaccination choice. Some research suggests it may even strengthen anti-vaccination beliefs.

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 that goal. We oppose HB 0448's effort to expand nonmedical exemption vaccination policy. For the reasons listed above, we respectfully ask that you oppose HB 0448. 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

