

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

Senator Joseph F. Vitale Health Human Services and Senior Citizens Committee New Jersey Senate 569 Rahway Avenue Woodbridge, NJ 07095

RE: GHLF Patient Group Opposes Senate Bill 1236

Dear Senator Vitale,

The Global Healthy Living Foundation (GHLF) writes in opposition of Senate Bill 1236 and hopes it is struck down by the Health, Human Services and Senior Citizens Committee. The legislation would expand current vaccination policy for New Jersey 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 vaccinatedf. 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 we represent that we write to express our opposition to SB 1236.

Mississippi and West Virginia are the original role models for providing medical exemptions as the only legally viable reason for nonvaccination. California, and very recently, Maine and New York, have followed suit and repealed both religious and philosophical exemption from their state vaccination policy in response to the expansive vaccine-preventable disease outbreaks occurring both within their own state and across the United States. SB 1236 is the opposite response of what is appropriate in the midst of these growing outbreak epidemics.

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. New York also found itself at the forefront of this epidemic, as it faces one of the worst measles outbreaks in over two decades with the epicenters focused around religious communities with low vaccination rates. New York, as of last week, passed legislation that would repeal the religious exemption, understanding that virtually every religion supports vaccination and their current policy was failing the state of public health. As a neighboring state, New Jersey is highly vulnerable to continued measles outbreaks. To control this, we recommend introducing bills similar to those passed in Maine and New York, not loosening vaccination policy by adding a philosophical exemption.

Mississippi and West Virginia, role models for its positive effects, have remained diligent in their strict vaccination regulations, amidst some controversy, and 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. New Jersey can experience a similar protection, but is threatening vulnerability to the general public welfare by introducing SB 1236.

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 vaccination 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 of a threat to the general public welfare to dignify 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, 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, and Maine. Vaccination rates need to improve and we are committed to expanding policies that achieve that goal. We oppose SB 1236's effort to add the philopshical exemption to vaccination policy. For the reasons listed above, we respectfully ask that you oppose SB 1236. 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

