



April 9, 2012

Dear Honorable Members of the California Assembly Health Committee:

The non-profit National Vaccine Information Center,¹ a consumer advocacy organization founded in 1982 to prevent vaccine injuries and deaths through public education and protect the informed consent ethic, opposes AB 2109 on behalf of our California donor supporters.

AB 2109 proposes to make the use of a personal belief exemption to mandatory vaccination dependent on a very limited set of medical care providers providing the parent with "vaccine education" and their signature attesting to this fact on an exemption form.

This bill, if passed, would effectively make the personal belief exemption in California another type of medical exemption. Because there is no religious exemption in California, this would make the only exemption option in California one in which a parent has to go through a state approved medical provider that they may not normally use for their child. Many families in California embrace complementary and alternative medicine for their family health care needs and AB2109 clearly discriminates against these families by defining such a limited subset of medical providers.

We continue to receive reports of traditional medical providers who bully, harass, and even fire their patients for even questioning a vaccine, never mind making an informed and educated decision to delay or decline one.² We have serious concerns about what will happen to the practical accessibility of the vaccine exemption in California if AB 2109 becomes law. We will be providing the committee with a full report of real testimonials from California families documenting this problem.

AB 2109, introduced by Assembly Member Richard Pan, who himself is a pediatrician and could financially profit from this measure passing, would impose these additional costly and time consuming burdens on parents wanting to use a personal belief exemption to:

- 1) pay for an expensive appointment at a medical doctor's office to be given vaccine risk and benefit information that is already available online for free; and
- 2) jump through the bureaucratic hoops of obtaining yet additional new forms provided by the Department of Public Health which state that the health care practitioner has provided risk and benefit information to the parent; and
- 3) find a health care provider actually willing to take the appointment and then sign the new forms within 6th months of starting school for the exemption to be valid.

This raises many questions legislators need to answer including:

- How will the state pay for all these extra required office visits for families on public assistance and for the kids of state employees who have their health coverage provided by the state?
- What happens to a parent who can't find or afford a provider willing to make these types of appointments and then sign the form?
- What will stop doctors from using this law to deny access to philosophical exemptions? It is already hard enough for families to find providers who are willing to just treat children in their practice at all when they deviate from the required vaccination schedule.

California is one of 18 states in the U.S. that allows a philosophical, personal or conscientious belief exemption to vaccination. States that currently have a philosophical/conscientious belief exemption are: AR, AZ, CA, CO, ID, LA, ME, MI, MN, ND, NM, OH, OK, TX, UT, WA, WI, and VT. These states comprise almost half of our country's population, and there is no health crisis in California or any state to necessitate this bill.

It appears that one of the primary motivations of this bill is to force families who rely on complementary and alternative medicine to have to pay and engage with medical providers that are philosophically opposed to their vaccination beliefs and that they would not otherwise pay to provide health care to their families. With the already jam packed vaccine schedule of 49 doses of 14 vaccines before the age of 6³, and dozens of new vaccines aimed at children in vaccine trials, parents want and need options and shouldn't be forced to have to go to a medical provider who bases their practice on the reliance of pharmaceutical products to exercise these options.

What legislators may also want to consider is the strength of the convictions of the families currently utilizing this exemption. Making the exemption almost impossible to obtain for some families won't change the vaccination status of the child, but it could hurt schools. Parents making these decisions feel strongly about them and often assert they would just pull their children out of school and home school or move rather than get vaccinated with the vaccines they are declining or delaying. If that occurs, California schools would be losing some of its healthiest and brightest students and suffer significant funding shortages caused by their absence.

Schools already got a glimpse into this last year with the additional pertussis vaccine mandate for 7th grade students. Capitol Weekly reported in an article entitled "Schools lose money in wake of pertussis vaccine problems" that "cash-strapped school districts may not have any recourse but to absorb what could add up to millions in lost revenue caused by the absence of thousands of students who were sent home from school last week for not having proper vaccinations."⁴ Making the exemption dependent on a medical provider would put up a significant enough barrier to produce a similar effect making currently complying families out of compliance with their outdated exemption.

Please consider the following points in opposition to AB 2109:

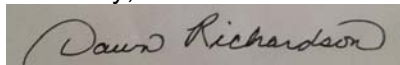
- Forcing parents into a paid contractual relationship with a health care provider they wouldn't otherwise utilize for their children's health care is not only a violation of basic parental rights, it creates distrust and resentment towards public health programs run by the state.
- Especially in California, many families utilize health care providers not reliant on pharmaceutical drugs and vaccines, and only practitioners part of the pharmaceutical paradigm of medicine are allowed to provide the information and sign the form under this bill.
- AB 2109 discriminates against families utilizing complementary and alternative medicine by forcing them into paying money to a medical practitioner they wouldn't otherwise use who is already philosophically opposed to the parent's personal and religious convictions regarding vaccination.
- Parents who utilize vaccine exemptions are typically more educated regarding the risks and benefits of vaccination than both the parents who choose vaccination and aren't required by this bill to receive this information and the health care providers who would be required to sign the exemption in order for it to be valid.

- Many doctors' offices throw families out of their practice for delaying or declining a vaccine. There is nothing in this bill to prevent a doctor's office from refusing to take these appointments to begin with or for refusing to sign the form once a family pays for a visit. These real obstacles will restrict or deny access to the personal beliefs exemption for some families currently using it.
- The state is not in the financial position to pay for all these extra required office visits within 6 months of school starting for families on public assistance and for the kids of state employees who have their health coverage provided by the state and who want to delay or a decline one or more vaccines.
- The information required to be given to parents by this bill is already available to parents online for free to anyone who wants it and coercive measures like this bill do nothing but create and further distrust and resentment towards public health programs run by the state.
- Most vaccination rates in CA for children 19 to 35 months old for individual vaccines are at or above the CDC Healthy People 2020 goal of 90%.⁵ There is NO current crisis that would indicate that CA needs to make it more difficult to obtain exemptions from vaccination.
- Vaccination rates for children entering kindergarten in California have increased from 2010 to 2011 and are at or above the CDC Healthy People 2020 goals of 90%, except for one category, which is at 89.4%.⁶
- Bill Sponsor Assembly Member Dr. Richard Pan, claims in a press release that his bill will help prevent outbreaks of pertussis.⁷ It is important for legislators to understand that the pertussis outbreaks in CA are due to waning immunity of the vaccine, and not because of families using the exemption. Here are some references to back this point:
 - "The rise in pertussis doesn't seem to be related to parents' refusing to have their children vaccinated for fear of potential side effects. In California, pertussis rates are about the same in counties with high childhood vaccination rates and low ones. And the C.D.C. reports that pertussis immunization rates have been stable or increasing since 1992."⁸
 - Children can be susceptible to pertussis even if they are completely vaccinated.⁹ The acellular pertussis vaccine's failure to deliver durable infection protection to children aged 7-10 years led to the 2010 California pertussis epidemic.¹⁰
 - The pertussis vaccine has been found to wane after only 3 years, leaving a much larger population of fully vaccinated children susceptible to pertussis than unvaccinated children. KPBS and the Watchdog Institute performed a joint investigation into the recent increasing pertussis rates in California and found the majority of cases of pertussis were occurring in fully vaccinated populations of children in the 8-12 year old age group. They went on to show that the vaccine wanes after only 3 years.¹¹
- Bill supporters claim that vaccines are safe. The reality is there is real risk. The Vaccine Injury Compensation Program was established by Congress in 1986 to protect vaccine manufacturers and doctors from liability for vaccine injuries and death. As of Jan. 3, 2012, there have been 14,073 claims filed for vaccine injury and 1077 death claims. The total dollar amount of vaccine injury and death awards granted and paid to families of vaccine victims by our government is \$2,366,649,931.¹²

- Just for pertussis containing vaccines alone administered in the state of California, 11,516 reports of Vaccine Adverse Events have been filed with the federal government's Vaccine Adverse Event Reporting System where 77% of the reports of adverse events are for children 6 and under. There have been 5,775 disorders of the nervous system reported and 172 deaths. 96% of the deaths reported were in children three and under.¹³
- The CDC's one-size-fits-all recommendations for children fail to recognize or respect increased individual susceptibility to vaccine adverse responses for genetic and other biological reasons. Individual susceptibility was acknowledged by the Institute of Medicine (IOM) in the 2011 report on Adverse Effects of Vaccines: Evidence and Causality. The IOM found that, out of 158 serious brain and immune system disorders reportedly associated with eight different commonly used vaccines, there were either no studies or too few methodologically sound studies to make a causation determination either way for 135 (85%) of them.¹⁴
- The FDA, CDC and vaccine makers openly state that often the numbers of human subjects used in pre-licensing studies are too small to detect all adverse events caused by a new vaccine.¹⁵ This makes the voluntary, informed decision making about use of government required vaccines extremely important, and the only way for that to occur in California is without the restriction of the control of a medical provider who is already biased in favor of universal vaccination and derives a portion of his/her income from vaccination.
- A medically unrestricted personal belief exemption is especially important to preserve for families with histories of vaccine reactions, severe allergies and immune or brain disorders. Few doctors will write a medical exemption in America today because they are pressured to adhere to very narrow federal (CDC) guidelines defining what constitutes a medical reason to avoid vaccination¹⁶ rather than being allowed to make individual professional determinations about how to protect their patient's health.

NVIC urges this committee to oppose AB 2109 and prevent medical providers from holding exclusive control over all California's exemptions to forced vaccination mandates.

Sincerely,



Dawn Richardson
 Director of Advocacy, National Vaccine Information Center

¹ www.NVIC.org

² NVIC's Cry For Vaccine Freedom Wall. <http://www.nvic.org/Forms/Cry-For-Vaccine-Freedom-Wall.aspx>

³ <http://www.cdc.gov/vaccines/recs/schedules/downloads/child/0-6yrs-schedule-pr.pdf>

⁴ <http://capitolweekly.net/article.php?xid=100bwqw0d6upr5k>

⁵ http://www2a.cdc.gov/nip/coverage/nis/nis_iap2.asp?fmt=v&rpt=tab03_antigen_state&qtr=Q1/2009-Q4/2009

⁶ <http://www.cdph.ca.gov/programs/immunize/Documents/2011SelectiveReviewResults.pdf>

⁷ <http://asmcdc.org/members/a05/newsroom/press-releases/item/2766-dr-pan-introduces-bill-to-provide-parents-immunization-information-to-prevent-outbreaks>

⁸ <http://well.blogs.nytimes.com/2010/08/16/vaccination-is-steady-but-pertussis-is-surgin/>

⁹ <http://www.inewsource.org/2011/03/28/experts-zero-in-on-waning-immunity/>

¹⁰ <http://www.internalmedicinews.com/news/conference-news/infectious-diseases-society-of-america-conference/single-article/acellular-pertussis-vaccine-s-waning-immunity-caused-california-epidemic/71de9826f4.html>

¹¹ <http://www.kpbs.org/news/2011/sep/20/whooping-cough-vaccine-wanes-after-three-years/>

¹² <http://www.hrsa.gov/vaccinecompensation/statisticsreports.html#Claims>

¹³ <http://www.medalerts.org/>

¹⁴ <http://www.iom.edu/Reports/2011/Adverse-Effects-of-Vaccines-Evidence-and-Causality.aspx>

¹⁵ Institute of Medicine. 1994. Research Strategies for Assessing Adverse Events Associated with Vaccines. Washington, D.C.: National Academy Press. www.nap.edu

¹⁶ <http://www.cdc.gov/vaccines/recs/vac-admin/downloads/contraindications-guide-508.pdf>