

Erika Higgins and Steve Higgins

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Good afternoon, my name is Erika Higgins, a voter from Wichita. As a parent and a Kansas citizen hopeful in a government that protects parental rights, informed consent and freedom of conscience, this bill for a conscientious exemption to state-mandated vaccinations is very important to me and many Kansans. Thank you again for your respectful time and consideration last year and I am grateful to be here with you again today to work together on this important bill. With those of us here today, we bring you 46 written testimonies and over 700 signatures on our petition from other Kansans throughout the state. I hope you will take time to look over the testimonies these Kansans spent time and careful effort to provide you.

As parents, we know that diseases can be very serious---history and real-life experience has shown us this. Parents have a lot of concerns today. That's our job as parents—to be concerned and cautious with our children's lives. We want them to be happy and have friends and do well in school and we also want them to be safe and healthy. Of course we want to prevent illness and disease as much as possible not just for our own kids but for also for others around us. Undoubtedly, the invention of vaccines has played a significant role in the history of disease prevention, yet, despite their acclaimed success, parents are still cautious when it comes to this *incredibly* important decision of injecting these vaccines into their children's bodies, especially since the first vaccination, for Hepatitis B, is required for newborns before parents leave the hospital with them soon after birth. Parents are concerned with the "one-size fits all mandated approach" to disease prevention and they are also concerned with the number of vaccines that are now required and injected into their babies' growing bodies in *multiple doses and for multiple diseases in one doctor's visit*.

There are three basic reasons parents choose to opt out of *or delay* one, some or all the required and recommended vaccinations. 1) They have valid safety concerns, 2) OR, they understand and appreciate the possible risks associated with the diseases but they choose to approach health from a natural perspective. 3) OR, they are morally opposed to the use of all

vaccines, or to some such as the vaccines for sexually transmitted diseases such as HPV (Gardasil) & Hepatitis B, and especially to the ones that are undeniably produced in aborted-fetal cell lines (see the testimony provided you by scientist and pharmaceutical company and vaccine researcher Dr. Teresa Deisher and all her appendixes if you have any doubts on this matter)

Parents who make an informed decision to decline or delay or selectively vaccinate are generally very *responsible* parents who are involved and pro-active in their children's health because they take their children's health very seriously. Disease prevention is important for them so they establish healthy habits such as proper hand-washing, which we all know thanks to the Kansas Department of Health and Environment's posters in all Kansas restrooms, is the "best way to prevent disease". Maintaining nutritious diets and healthy living environments and taking care of illness quickly and effectively and being mindful of others and keeping kids home when sick are all ways these parents responsibly participate in disease prevention for their family and in effect those around them.

In Kansas, for the 2011-2012 school year, there are 25 doses of 8 vaccines for 12 diseases required for school daycare children. There are 9 doses of 4 vaccines for 4 diseases that are currently recommended.¹ As you know, in Kansas a child can be exempt from one, some or all the required vaccinations for school and daycare for medical reasons or if they have membership in a "religious denomination whose teachings are opposed to such tests or inoculations". For the most part, these exemptions have been adequate and have caused little problem for both those seeking an exemption and for those seeking to keep vaccination rates high. Vaccination rates in Kansas are above "herd immunity levels" and the exemption rates in Kansas are very low. The average percentage of reported Medical Exemptions in Kansas public and private schools from the 2002-2010 school years was .3% and the average percentage of reported Religious Exemptions in Kansas public and private schools for those same years was .7%.²

However, it is still difficult for parents to obtain medical or religious exemptions. Medical exemptions are reserved for children who have a true medical condition that makes them at

¹ <http://www.kdheks.gov/immunize/schoolInfo.htm>

² <http://www2.cdc.gov/nip/schoolsurv/rptgmenu.asp>

risk of danger from the vaccines. Since there are, as of yet, no tests available to predict a vaccine reaction in a child, many doctors assume the child will *not* have a reaction, even if a sibling or close relative has experienced a severe vaccine injury. One doctor told me that she would be happy to sign the medical exemption for my son after he had a bad reaction or died from a vaccine. Needless to say, we did not continue seeing that doctor.

Due to the restrictive wording of the religious exemption, there are a growing number of families, such as ours, who are not allowed to use the religious exemption because of its unconstitutional restriction of belonging to a religious denomination and of belonging to one that has precise teachings against vaccinations. Restrictive wording like this in Kansas' religious exemption has been proven in court in other states to be unconstitutional (see Legal Memo in back of the Conscientious Exemption Binder for a sample of applicable court cases) since limiting religious exemptions based on membership in specific religious denominations with specific tenets violates both the First and 14th Amendment since a law cannot favor one religion over another. Kansas law grossly discriminates here with this. Kansas Secretary of State, Kris Kobach, took one look at the wording and immediately confirmed it's illegality and supports HB 2094 for this reason and, I quote, because "throughout the country, the rights of parents to control the upbringing of their children is under threat from intrusive government regulations. In Kansas we respect and protect the rights of parents." Kansas HB 2094 will give parents back their right to make private and individual health care decisions for their children without undue penalty or discrimination.

From a public health standpoint, data from other states with these broad exemptions shows there is no significant public health risk from these exemptions. All 50 states have medical and or religious exemptions and 19 states also have conscientious exemptions. That means about 48% of the total US population is allowed a conscientious exemption to the required vaccinations. According to information from the CDC and state health departments, there have been no consistent direct correlations between the reported exemptions and the reported exemption rates. In fact, these states generally maintain high average vaccination participation rates, above 'herd immunity' levels and they also generally have low exemption rates. (See pages 13-18 of our presentation manual for charts comparing reported disease incidences with reported exemptions to

see there is no consistent or direct relationship between the two.) In Texas, this same wording for a conscientious exemption was adopted in the Texas statutes of required vaccinations and exemptions in 2003. Their vaccine rates have remained high with a 98.2% average vaccination rate through the 2004-2010 school years; exemption rates have stayed low with a 1.7% average conscientious exemption rate through those same years.³

Disease outbreaks in these states, and in Kansas, have occurred in both under vaccinated populations and in fully vaccinated groups since vaccinations are not 100% effective. Those who make informed decisions to exempt from one, some or all the required vaccinations cannot bare sole responsibility for disease outbreaks. Fully vaccinated individuals can also bear responsibility for the spread of disease. For instance, the vaccine package insert for Merck's Varivax (chicken pox) vaccine acknowledges that it is possible to transmit the vaccine virus to others after vaccination and cautions vaccine recipients to avoid, whenever possible, close association with susceptible high-risk individuals such as immunocompromised individuals, at-risk pregnant women and at-risk newborn infants for up to six weeks. Yet there are no school policies that require this for the protection of these susceptible high-risk individuals.⁴

Also, while outbreaks are found in "pockets of unvaccinated groups" it is not correct to connect these occurrences with exemptions. For example, Kansas requires children to be vaccinated to attend any Kansas school yet many schools in Kansas allow parents to enroll and send their kids to school until October or November, or sometimes even later, of each school year *even if they have not turned in their immunization or exemption forms*. Each year, literally thousands of children in Kansas attend the first semester of school without being up to date on their vaccinations not because their parents have made informed decisions to exempt or because they cannot afford it but simply because they "haven't gotten to it yet." How then can disease outbreaks in school be blamed exclusively on exemptions? State and school policies that require immunization and exemption records by the *first* day of school would seem more logical if the purpose of required vaccinations is to keep kids in school healthy. Again, in

³ <http://www2.cdc.gov/nip/schoolsurv/rptgmenu.asp>.

⁴ Merck & Co, Inc., *Varivax Varicella Virus Vaccine Live* package insert; http://www.merck.com/product/usa/pi_circulars/v/varivax/varivax_pi.pdf.

keeping the focus on exemptions, there are no consistent direct correlations between reported exemption rates and reported disease outbreaks.

From a fiscal point of view, the state understandably has concerns about the fiscal impact of disease outbreaks in the state because they have certain responsibilities to pay for the cost of providing vaccines and paying for the cost of treating and containing disease outbreaks.

However, the state, physicians in Kansas, and vaccine manufacturers, bear absolutely NO liability for any mild or serious adverse reactions that occur from vaccines.⁵ If a child is severely injured from a vaccine, all the financial burden of caring for this child or for burial expenses is left with the parents. The state and vaccine manufacturers are not required to and do not sponsor any long-term studies on the safety of vaccines. Doctors are not required by the state to report vaccine reactions in the same way they are for disease incidences. State health departments are not required to keep a record of reported vaccine reactions nor do they keep a record of how serious or mild reported disease cases are therefore there is no factual way of knowing just how safe or unsafe vaccines are or how their risks compare to the risks of the diseases they are meant to prevent.⁶ This lack of important information is a severe discrepancy for both public health authorities and parents who both seek the same thing: healthy children and low rates of diseases.

Neither the risks associated with diseases nor the risks associated with vaccines can be casually dismissed. No matter how much they may help to prevent serious diseases, vaccines still are not 100% safe. Simple common sense tells us that a reaction from a vaccine is certainly *plausible*, vaccine package inserts and the United States Government admit that adverse reactions from vaccines, including significant health risks, permanent damage and even death, are possible and have happened. 14,073 petitions have been filed and over \$2 billion in petitioner awards has been paid since 1989 by the National Vaccine Injury Compensation Program to those injured by vaccines.⁷ The CDC and FDA Vaccine Adverse Event Reporting estimates that “approximately 30,000 VAERS reports are filed annually, with 10% - 15%

⁵ <http://www.law.cornell.edu/supct/cert/09-152>

⁶ Confirmed through private email conversations with several Kansas Health Department employees.

⁷ United States Department of Health and Human Services Health Resources and Services Administration, *National Vaccine Injury Compensation program reports VICP Post-1988 Statistics Report*; <http://www.hrsa.gov/vaccinecompensation/statisticsreports.html>

classified as serious (resulting in permanent disability, hospitalization, life-threatening illnesses or death).”⁸ VAERS acknowledges that underreporting is common.

The American Academy of Pediatrics encourages parents to follow the recommended schedule for childhood vaccinations for disease prevention and encourages parents to be informed so they can make the right choices about what is best for their children’s health. They also note that continued refusal after adequate discussion should be respected. The Association of American Physicians and Surgeons fully supports parental rights and informed consent and “recommends that vaccine and relevant information be made conveniently available to all who wish to receive it, and that the right of Americans to make their own medical decisions should be respected.”⁹

Parents need to have the freedom and flexibility to work with their doctor to discuss personal and individual decisions about their children’s health and about disease prevention and immunizations and then make the best decision for their child without the pressure of a requirement. Parents cannot make a truly free or informed decision if they have to choose between vaccinations and an education for their child. The conscientious exemption will give parents back that parental right and that personal freedom and that individual responsibility.

Thank you again for your attention and consideration. I am aware of the many important issues you are dealing with this session and understand the pressures you are under from all sides regarding this bill. I still sincerely hope you will remember us, the people you represent, and the factual evidence we have carefully provided you. We hope that *all* of you will decide together to support this bill to protect parental rights, informed consent and freedom of conscience for families in Kansas.

⁸ <http://www.cdc.gov/vaccinesafety/Activities/vaers.html>

⁹ http://www.aapsonline.org/index.php/site/article/colorado_influenza_letter/