



Exemptions from School Immunization Requirements

Policy Brief

The Healthy States Initiative

A partnership to promote public health

The Healthy States Initiative helps state leaders access the information they need to make informed decisions on public health issues. The initiative brings together state legislators, Centers for Disease Control and Prevention (CDC) officials, state health department officials and public health experts to share information and to identify innovative solutions.

The Council of State Governments' partners in the initiative are the National Black Caucus of State Legislators (NBCSL) and the National Hispanic Caucus of State Legislators (NHCSL). These organizations enhance information-sharing with state legislators and policymakers on critical public health issues.

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Why Public Health?

State legislators play a vital role in determining the structure and resources available to state and local agencies dedicated to protecting the public's health. Public health agencies educate the public and offer interventions across a wide spectrum of public health issues including:

- Ensuring that children and at-risk adults are immunized against deadly diseases;
- Assisting victims of chronic conditions such as cancer, heart disease and asthma;
- Preventing disease and disability resulting from interactions between people and the environment;
- Researching how HIV/AIDS infections and other sexually transmitted diseases can be prevented;
- Promoting the health and well-being of people with disabilities; and
- Working with schools to prevent risky behavior among children, adolescents and young adults.

Information Resources For State Policymakers

New information resources produced under this initiative include:

- **Healthy States Web site.** This unique Web site offers information and resources on many public health issues. Visit <http://www.healthystates.csg.org> to get information, sign up for publications and view other information on the initiative.
- **Health Policy Highlights and Healthy States e-weekly.** Each week, this free weekly electronic newsletter brings the latest public health news, resources, reports and upcoming events straight to your inbox.
- **Healthy States Quarterly.** CSG publishes a free quarterly newsletter covering public health legislative and policy trends, innovative best practices from the executive and legislative branches, current research and information on Healthy States activities.
- **Forums and Web Conferences.** Web conferences are offered to allow public health experts, legislators and legislative staff to interact on priority public health issues. Forums include educational sessions on public health issues, new legislator training and roundtable discussions with peers and public health experts.
- **Healthy States Publications.** New resources will assist state legislators interested in public health topics, including obesity and chronic disease prevention, HIV/AIDS and sexually transmitted disease prevention, vaccines, health disparities and school health.

For More Information

If you are interested in the learning opportunities available through the Healthy States Initiative, visit <http://www.healthystates.csg.org>, <http://www.nbcs.org> or <http://www.nhcs.org>.

State laws that require immunizations for school entry have contributed greatly to the success of the U.S. immunization program in preventing, and in some cases eliminating disease. All states require children entering school to receive certain vaccines and all states allow medical exemptions to these requirements. Most states also allow religious exemptions and some have personal belief exemptions. Children who are exempted from immunization requirements are at greater risk of contracting vaccine-preventable diseases and transmitting disease to others.

This legislator policy brief provides state policymakers with information to address the ongoing debate surrounding the issue of nonmedical exemptions to school vaccination requirements. Legislators face a challenge balancing the demand for exemptions with safeguarding the effectiveness of state mandatory school vaccination programs.

What Do State Legislators Need to Know About the Vaccine Exemption Debate?

Vaccines are considered the greatest public health achievement of the 20th century and state laws requiring immunizations have helped to bring childhood immunization rates to 95 percent for the past two decades.¹ With the success of immunization programs in preventing disease, public attention has shifted from the diseases to the risks of vaccination, putting states' immunization policies under attack. As a result, expanded state exemptions now include broad nonmedical exemptions with minimal or no public health administrative oversight. Some states offer both personal belief and religious exemptions while others make these exemptions widely available regardless of the nature of the beliefs and without documentation.

Studies have repeatedly shown that vaccines work and individuals who receive them are far less likely to contract vaccine-preventable diseases than those who have not been vaccinated. Communities can be at risk due to pockets of unprotected people who create a weakness in the community's defense against disease. Conversely, with "herd immunity," a population can resist a disease if a large proportion of its members is immune, or vaccinated. When less of the population is immunized, it is easier for disease to spread.

What Can State Legislators Do?

State legislators can play key roles in protecting their communities against vaccine-preventable diseases by developing state vaccination policies that balance the health of children and the community while providing exemptions for strongly held personal beliefs against vaccination. Legislators can also support broad-based educational campaigns on the value of vaccines.

Background

- Approximately 1 percent to 3 percent of children in the U.S have been exempted from vaccine requirements, but this small group can have big impacts on communities. Schools in some communities have exemption rates as high as 15 percent to 20 percent.²
- More exemptions result in more diseases:
 - Schools with exemption rates as low as 2 percent to 4 percent are at increased risk for disease outbreaks.³
 - The number of young children who are not fully vaccinated has been steadily increasing over the last decade. Schools with higher numbers of exempt children have higher rates of disease.⁴
 - In a recent study, states that made it easy to get exemptions had 90 percent more cases of whooping cough than states with stricter rules; states that allowed only religious and medical exemptions did not have a significantly higher rate of whooping cough.⁵
 - Exempted children have been found to be 22 to 35 times more likely to get measles than vaccinated children.⁵
 - Exemption rates are not evenly distributed within states; there are geographical clusters with exemption rates several times higher than state averages.⁶ This clustering of unvaccinated children contributes to the potential for outbreaks.
- States that easily permit exemptions have significantly more exemptions than states that make the process more difficult.⁷
 - The number of exemptions granted for nonmedical reasons grew by 6 percent per year between 1991 and 2004 in states that offered personal belief exemptions.⁸
 - In a recent study, in 34 states with religious but not philosophical exemptions, only 21 states reported that requests for exemptions were ever denied.⁷

Actions for State Legislators

Demonstrate Leadership

- Know the exemptions to school immunization requirements in your state. Medical, religious and philosophical or personal belief exemptions are worded differently in each state.
- Proactively review your state's nonmedical exemptions. Children who have medical reasons for not being immunized are covered under medical exemptions in all states. Broad vaccination exemption policies increase the risk that vaccine-preventable diseases may return.
- Talk with state public health officials about the latest research on vaccine safety and effectiveness. Vaccines are considered the greatest public health achievement of the 20th century.

Support Public and School Awareness Campaigns

- Engage in multilingual public education campaigns to explain the value of vaccinating children against preventable diseases and the science and safety of vaccines. Concerns about vaccine safety are the main reason parents seek nonmedical exemptions.
- Provide for the education of school officials regarding the laws for exemptions in your state. A recent study found that although some states did not allow philosophical exemptions, many schools were permitting them anyway.⁹

Legislation and Oversight

- Work with your public health department to develop an exemption process that balances valid parental concerns and beliefs and promotes immunization.
 - Exemption legislation should ensure documentation of conscientious and well-informed beliefs against vaccination. Require the exemption process to be more than a convenient check-the-box opt-out.
 - All parents should be informed about the risks and benefits of vaccination. Link mandatory parent education to the exemption process to ensure that the parent is adequately informed of the risks of not vaccinating and is getting the most accurate and reliable information available on vaccine safety and effectiveness.
 - Require annual renewal of exemptions to make sure there has been no change in a parent's decision not to vaccinate.
- Support funding to establish a system to monitor state trends in exemption rates.

Key Facts & Terms

State School Immunization Requirements

- All school immunization requirements are state-based—there are no federal laws mandating vaccination.¹⁰
- School vaccination laws have been upheld by the U.S. Supreme Court.
- State laws requiring immunizations have been important in keeping diseases at record low levels and both smallpox and polio have been eliminated in the U.S. Coverage of school-age children for most vaccines has been about 95 percent for the past two decades.¹
- Most states do not monitor the vaccination status of home-schooled children.

Exemptions to State Immunization Requirements

- All states permit exemptions to school and day care immunization requirements for medical reasons.
- There is no constitutional requirement for states to offer nonmedical exemptions.
- Forty-eight states, the District of Columbia and Puerto Rico allow a religious exemption to vaccination (all but Mississippi and West Virginia). A *religious exemption* allows parents to exempt their children from immunization if it contradicts their religious beliefs.
- As of 2004, 20 states allowed for *personal belief* or *philosophical exemptions*.¹¹ A *philosophical exemption* allows for an exemption based on “moral, philosophical or other personal beliefs.”
- In many states, the process of claiming a nonmedical exemption is simpler and less time-consuming than fulfilling immunization requirements. States that have an easier exemption process have higher rates of exemptions.⁵

The Dangers of Not Vaccinating

- Every year, children get sick or even die from a disease that could have been prevented by a vaccine. The number of young children who are not fully vaccinated for preventable diseases has been steadily increasing over the past decade.⁴
- Children with exemptions have contributed to outbreaks of vaccine-preventable diseases.^{8, 12}
- Unvaccinated children put unprotected people in the community at risk. This is especially important for those who cannot be immunized, including:
 - Those who are too young to be effectively vaccinated for certain diseases;
 - Those who cannot be vaccinated for medical reasons; and
 - Those for whom the vaccine proves ineffective, that is, they do not develop adequate immunity to disease (about one or two out of every 20 people immunized will not have adequate immunity).
- The level of population immunization necessary to protect the entire population, or “herd immunity,” varies from disease to disease.
 - Incidence rate of Haemophilus influenzae type b (Hib disease) falls rapidly once 85 percent of infants are immunized.
 - Approximately 95 percent of the population needs to be immunized to stop outbreaks of measles.

- Outbreaks of whooping cough continue to occur even with high levels of immunization; these outbreaks are thought to be due to waning immunity in adults, who then infect infants who have not yet been immunized.¹³

Vaccines and Safety

- Concern about vaccine safety is the most important factor reported by parents who do not have their children vaccinated. One study found that 69 percent of parents who sought exemptions did so because they feared vaccination did more harm than the disease it prevents.¹⁴
- Concerns about thimerosal-containing preservatives in vaccines persist.
 - The Institute of Medicine concluded that “the evidence favors rejection of a causal relationship between thimerosal-containing vaccines and autism.”¹⁵ Since 2001, all vaccines manufactured for the U.S. market and routinely recommended for children age 6 or younger have contained no or only trace amounts of thimerosal, with the exception of flu vaccine.¹⁶
 - A newly published Canadian study confirms older findings that there is no association between autism and thimerosal or the measles, mumps and rubella vaccine. In fact, the study found the highest rates of autism in children with no exposure to thimerosal from vaccines.¹⁷
- Concerns about illnesses caused by vaccines remain.
 - While almost all known vaccine adverse events are minor and limited to the vaccinated person, some vaccines have been associated with rare, but serious health effects.¹⁸
 - There is no evidence that sudden infant death syndrome is caused by diphtheria, tetanus or pertussis (whooping cough) vaccine or exposure to multiple childhood vaccines.¹⁹

Resources & References

Resources

Centers for Disease Control and Prevention—Vaccines and Immunizations

<http://www.cdc.gov/node.do/id/0900f3ec8000e2f3>

Centers for Disease Control and Prevention—Program Managers by State

<http://www2a.cdc.gov/nip/progmgr/fieldstaff.asp?rpt=pm>

National Immunization Program

<http://www.cdc.gov/nip/>

Institute for Vaccine Safety

<http://www.vaccinesafety.edu/>

Institute of Medicine

<http://www.iom.edu/?ID=4705>

Association of Immunization Managers

http://www.immunizationmanagers.org/policies_pub/recommendations.phtml

The Institute for Vaccine Safety, the Johns Hopkins Center for Law and the Public's Health and the Arkansas Medical Society, Draft Immunization Policy

<http://www.vaccinesafety.edu/DraftExemption.htm>

The Johns Hopkins Center for Law and the Public's Health

<http://www.publichealthlaw.net/>

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- ¹²*MMWR*, Brief Report: Imported Measles Case Associated with Nonmedical Vaccine Exemption—Iowa, March 2004. March 26, 2004; 53(11); 244–246.
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- ¹⁷Fombonne E, et.al. “Pervasive Developmental Disorders in Montreal, Quebec, Canada: Prevalence and Links with Immunizations.” *Pediatrics*; 2006; 118 (1); 139–50.
- ¹⁸CDC. *Epidemiology and Prevention of Vaccine-Preventable Diseases. The Pink Book*. February 2007.
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Preventing Diseases: What Works

Policies That Work Based on the Research Evidence

1. Promote healthy eating.

Policies that give kids healthier food choices at school can help curb rising rates of youth obesity. Ensuring that every neighborhood has access to healthy foods will improve many Americans' nutrition.

2. Get people moving.

Policies that encourage more physical activity among kids and adults have reduced rates of obesity and helped prevent other chronic diseases.

3. Help smokers quit and youth never start.

Policies that support comprehensive tobacco control programs—those which combine school-based, community-based and media interventions—effectively curb smoking and reduce the incidence of cancer and heart disease.

4. Encourage prevention coverage.

Policies that encourage health insurers to cover the costs of recommended preventive screenings, tests and vaccinations are proven to increase the rates of people taking preventive action.

5. Promote health screenings.

Policies that promote—through worksite wellness programs and media campaigns—the importance of health screenings in primary care settings are proven to help reduce rates of chronic disease.

6. Protect kids' smiles.

Policies that promote the use of dental sealants for kids in schools and community water fluoridation are proven to dramatically reduce oral diseases.

7. Require childhood immunizations.

Requiring immunizations for school and child care settings reduces illness and prevents further transmission of those diseases among children. Scientific, economic and social concerns should be addressed when policies to mandate immunizations are considered.

8. Encourage immunizations for adults.

Policies that support and encourage immunizations of adults, including college students and health care workers, reduce illness, hospitalizations and deaths.

9. Make chlamydia screenings routine.

Screening and treating chlamydia, the most common sexually transmitted bacterial infection, will help protect sexually active young women against infertility and other complications of pelvic inflammatory disease (PID) that are caused by chlamydia.

10. Promote routine HIV testing.

Making HIV testing part of routine medical care for those aged 13 to 64 can foster earlier detection of HIV infection among the quarter of a million Americans who do not know they are infected.

Learn more about these and other proven prevention strategies at <http://www.ahrq.gov/clinic/uspstfix.htm>, <http://www.thecommunityguide.org/policymakers.html> and http://www.prevent.org/images/stories/health_policy.pdf.

What does the CDC do for states?

The Centers for Disease Control and Prevention (CDC) is part of the United States Department of Health and Human Services, which is the main federal agency for protecting the health and safety of all Americans. Since it was founded in 1946 to help control malaria, CDC has remained at the forefront of public health efforts to prevent and control infectious and chronic diseases, injuries, workplace hazards, disabilities and environmental health threats.

Helping state governments enhance their own public health efforts is a key part of CDC's mission. Every year, CDC provides millions in grants to state and local health departments. Some funds are in the form of categorical grants directed at specific statutorily-determined health concerns or activities. Other funds are distributed as general purpose block grants, which the CDC has more flexibility in deciding how to direct and distribute.

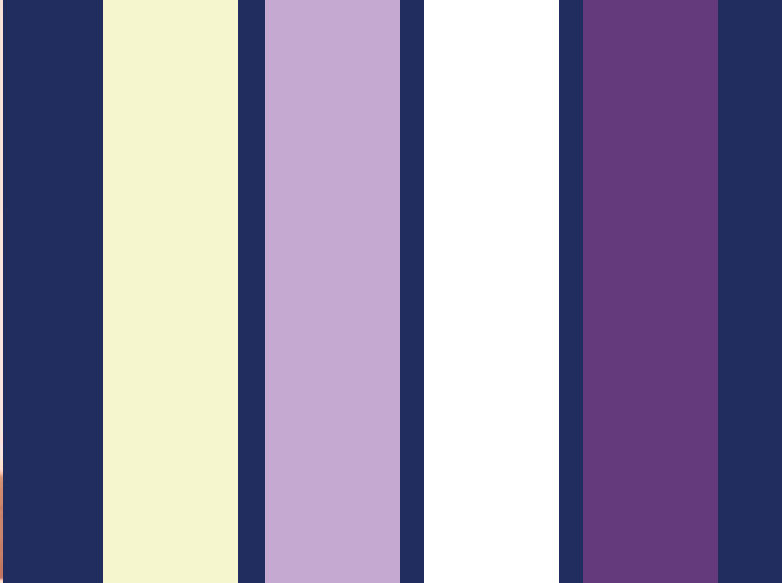
The CDC does not regulate public health in the states. Rather, it provides states with scientific advice in fields ranging from disease prevention to emergency management. It also monitors state and local health experiences in solving public health problems, studies what works, provides scientific assistance with investigations and reports the best practices back to public agencies and health care practitioners.

For state legislators who are interested in improving their state's public health, the CDC offers a wealth of resources, including:

- Recommendations for proven prevention strategies;
- Examples of effective state programs;
- Access to top public health experts at the CDC;
- Meetings specifically aimed at state legislative audiences;
- Fact sheets on policies that prevent diseases; and
- State-specific statistics on the incidence and costs of disease.

This publication from the Healthy States Initiative is also an example of CDC's efforts to help states. The Healthy States Initiative is funded by a cooperative agreement with the CDC.

The CDC has developed partnerships with numerous public and private entities—among them medical professionals, schools, nonprofit organizations, business groups and international health organizations—but its cooperative work with state and local health departments and the legislative and executive branches of state government remains central to its mission.



The Council of State Governments' (CSG) Healthy States Initiative is designed to help state leaders make informed decisions on public health issues. The enterprise brings together state legislators, officials from the Centers for Disease Control and Prevention, state health department officials, and public health experts to share information, analyze trends, identify innovative responses, and provide expert advice on public health issues. CSG's partners in the initiative are the National Black Caucus of State Legislators and the National Hispanic Caucus of State Legislators.

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