



Daycare Center and School Immunization Requirements

A position statement of Vaccinate Your Family: The Next Generation of Every Child By Two

Adopted: December 5, 2012, revised October 20, 2021

As one of the nation's most highly respected nonprofit organizations committed to reducing the burden of vaccine-preventable diseases in people of all ages, Vaccinate Your Family: The Next Generation of Every Child By Two (VYF) strives to ensure that everyone is immunized in accordance with the Centers for Disease Control and Prevention's (CDC) recommended immunization schedules. The CDC's recommended immunization schedules for children and adults are created, regularly reviewed and modified by the Advisory Committee on Immunization Practices (ACIP), a group of medical and public health experts that develops recommendations on how to use vaccines to control diseases in the United States. The childhood immunization schedule is designed to protect children when they are most vulnerable to diseases. This schedule is endorsed by the American Academy of Pediatrics (AAP) and the American Academy of Family Physicians (AAFP), and an updated schedule is published annually by the CDC.

Vaccinate Your Family's cofounders, Rosalynn Carter and Betty Bumpers, were instrumental in helping to pass laws in each state requiring proof of immunization for attendance in schools. These laws are the foundation on which public health departments ensure that children attending daycare centers and schools are protected from deadly and debilitating vaccine-preventable diseases. VYF recognizes that there are legitimate medical contraindications that may necessitate an exemption from specific vaccines. VYF supports the allowance of a medical exemption that requires a child's family to present a document authorizing the exemption, signed by an authorized medical professional (as determined by each state) who is licensed in the child's state of residence. This document, which would be provided to the child's school or daycare center, should contain the child's name and date of birth; the specific vaccine(s) for which the exemption is being requested; the medical reason for the exemption request; and the time period for which the exemption is being requested (up to one year). The medical exemption document should require renewal on an annual basis as established by state law.

VYF recognizes that states must consider a number of variables when developing or amending school and daycare immunization requirements. For this reason, VYF supports state-by-state decision making on this issue and respects the need for careful deliberation. However, recognizing that unvaccinated children impose a risk to their peers, VYF does not encourage states to allow the inclusion of non-medical exemptions (also known as philosophical, personal belief, and religious exemptions) to immunizations. VYF contends that the availability of medical exemptions adequately covers all of the valid reasons for a child to be exempted from vaccination. In the event that a state does allow these exemptions, VYF recommends that the state consider adopting policies that will impose rigorous procedures for receipt of non-medical exemptions (i.e., required education of parents on the safety and effectiveness of vaccines and the dangers of vaccine-preventable diseases, accompanied by a

signed declination form, which would need to be renewed annually for each vaccine for which the child is being exempted.)

Justification

Enforcement of mandatory immunization requirements for children entering daycare centers and schools has resulted in record high immunization coverage levels in the U.S. While all states and the District of Columbia allow vaccination exemptions for medical reasons, and all but two offer exemptions to accommodate religious beliefs, some states also allow exemptions based on a parents' personal beliefs/philosophy. Several outbreaks of measles, *Haemophilus influenzae* type b, mumps and varicella (chickenpox) have been traced to pockets of unvaccinated children in states that allow personal belief/philosophical exemptions. Studies show that in areas where the number of vaccine exemptions are high there is an associated increased risk of infection and death from vaccine-preventable disease in that population.

A study published in the *Journal of the American Medical Association* demonstrates that children exempt from vaccines were 22.2 times more likely to acquire measles and 5.9 times more likely to acquire pertussis than were vaccinated children. The study, which used data collected from Colorado, also indicated that the schools with pertussis outbreaks had more vaccine exponents than the schools without outbreaks. In addition, at least 11% of the *vaccinated* children who contracted measles during the outbreaks acquired the infection through contact with a child who was not vaccinated and had an exemption on file.¹

States with less stringent procedures for obtaining exemptions recorded a higher number of children exempting from vaccines than states that require more rigorous requirements for receipt of an exemption. Between 1991 and 2004, the percentage of children who obtained nonmedical exemptions from school immunization requirements increased from 0.98% to 1.48%. States that offered easy-to-obtain exemptions had an increase in their exemption rates from 1.3 to 2.5%. The percentage of children in states that allow exemptions for philosophical/personal beliefs rose from 0.99 to 2.54%. States that had more "difficult-to-obtain" exemptions and/or only offered religious exemptions did not record a significant increase in exemption rates.²

Between 2001 and 2008, a total of 557 confirmed cases of measles and 38 outbreaks of the disease were reported in the United States. Of those outbreaks, the three largest occurred primarily among "personal belief exponents" (defined by the ACIP and World Health Organization as persons who were vaccine eligible, but remained unvaccinated due to personal beliefs). From 2004 to 2008, a total of 68% of reported measles cases were among unvaccinated U.S. residents who were age-eligible for vaccination, but claimed a personal belief exemption to state immunization requirements.³

International travel to countries where measles is endemic is a well-known risk factor for measles and disease importations continued to occur between 2011 and mid-2019 in the U.S., leading to multi-state outbreaks and over 2,500 reported cases of measles, mostly within communities with high numbers of unvaccinated people⁴.

Due to its contagiousness, measles requires a high rate of vaccination. As shown during the measles outbreaks throughout the U.S., there are many communities across the country where the rates are lower than necessary. One example is Clark County, Washington, where a measles outbreak originated. The percentage of kindergarteners in the country who received a vaccine for measles between 2004 and 2017 fell from 96.4 percent to 84.5 percent⁵.

Individuals who decline immunizations are making a choice that affects the larger community. Immunizations are the best protection against outbreaks of disease. Vaccinate Your Family seeks to ensure that every child is offered protection from vaccine-preventable diseases at the earliest possible time and supports efforts to protect people of all ages through community immunity.

About Vaccinate Your Family

Vaccinate Your Family was founded as “Every Child By Two” in 1991 by Former First Lady of the United States Rosalynn Carter and Former First Lady of Arkansas Betty Bumpers as a result of the measles epidemic that killed over 120 people, many of them young children. Mrs. Carter and Mrs. Bumpers have been working on immunizations since their husbands were governors in the early 1970s and have been credited with the passage of laws mandating school-age vaccination requirements. In 2018, Every Child By Two was renamed to reflect the broader mission of the organization and is now known as “Vaccinate Your Family: The Next Generation of Every Child By Two”. The mission of VYF is to protect people of all ages from vaccine-preventable diseases by:

- Raising awareness of the critical need for timely immunizations
- Increasing the public’s understanding of the benefits of vaccines
- Increasing confidence in the safety of vaccines
- Ensuring that all families have access to life-saving vaccines
- Advocating for policies that support timely vaccination

To forward its agenda, VYF enlists the support of elected officials and their spouses, concerned community leaders, and representatives of many national organizations. VYF has worked with partners at the grassroots and national levels to develop initiatives that have had major impact on the overall system of vaccinations. These programs have helped to educate the public, healthcare workers and lawmakers about the importance and safety of immunizations, and have assisted in facilitating resolutions to immunization barriers. For 30 years, VYF and its partners in public health have developed many successful strategies; however, there is still much to be done to ensure that people of all ages, in our nation and abroad, is protected from vaccine-preventable diseases.

¹Feikin DR, L. D. (2000). Individual and Community Risks of Measles and Pertussis Associated With Personal Exemptions to Immunization. *JAMA* , 284:3154-3150.

² Saad B. Omer, W. K. (2006). Nonmedical exemptions to school immunization requirements: secular trends and association of state policies with pertussis incidence. *JAMA* , 296:1757-1763.

³ Parker Fiebelkorn A, R. S. (2010). Measles in the United States during the postelimination era. *Journal of Infectious Diseases* , 202(10): 1520-28.

⁴ (Centers for Disease Control, 2019)

⁵ (ASHTO Staff, 2019)