

Trading One Epidemic for Another: Child
Immunization Waivers and the Fight Against
Evading Stricter Waiver Requirements

Annette Wojciechowski*

I. INTRODUCTION

The Centers for Disease Control and Prevention (CDC) deems immunizations a successful public health intervention in preventing morbidity, mortality, and healthcare costs.¹ One of the methods used to control the number of vaccine-preventable diseases is mandating immunizations for children entering the school system.² Instead of being federally mandated, all laws requiring vaccinations are made at a state or local level.³ All fifty states allow for exemptions to vaccinations for medical reasons,⁴ and forty-eight states allow exemptions to vaccinations for religious reasons.⁵ As of

* Juris Doctor Candidate, Loyola University Chicago School of Law, Class of 2015. Ms. Wojciechowski is a staff member of *Annals of Health Law*.

1. See Ctrs. for Disease Control and Prevention, *Ten Great Public Health Initiatives*, 60 MORBIDITY AND MORTALITY WEEKLY REPORT 605, at 619 (2011), available at <http://www.cdc.gov/mmwr/pdf/wk/mm6019.pdf>; Daniel A Salmon, PhD, MRH, *Mandatory Immunization Laws and the Role of Medical, Religious and Philosophical Exemptions* (Oct. 2003), <http://www.vaccinesafety.edu/exemptreview101503.pdf>.

2. Salmon, *supra* note 1.

3. *Id.*

4. Proof of a medical exemption requires a form of a signed statement by a Medical Doctor or Doctor of Osteopathy (D.O.) which explains that the administration of one or more vaccines would be detrimental to the health of the individual. *Vaccine Laws*, NAT'L VACCINE INFO. CTR. (2013), <http://www.nvic.org/vaccine-laws.aspx#> (last visited Mar. 30, 2014) [hereinafter NAT'L VACCINE]. Most doctors use forms provided by The American Academy of Pediatrics or the CDC or similar forms. *Id.* Most states do not allow a D.O. to write medical exemptions to immunizations. *Id.* Additionally, some states allow for a private physician's written exemption and often review the doctor's exemption and revoke it if health department officials do not believe the exemption is justified. *Id.*

5. *States with Religious and Philosophical Exemptions from School Immunization Requirements*, NAT'L CONF. OF STATE LEGISLATURES (2012), <http://www.ncsl.org/research/health/school-immunization-exemption-state-laws.aspx> [hereinafter NAT'L

December 2012, nineteen states allow exemptions to children whose parents have philosophical or personal belief objections to immunizations.⁶

In states like California that have looser vaccination requirements, a rise in outbreaks of vaccine-preventable infections and diseases, such as whooping cough and measles, is occurring.⁷ To combat the increasing numbers of unimmunized children in the state, states such as California have passed legislation to make it more difficult for a parent or guardian to receive a personal belief vaccination exemption for their child.⁸ However, the rise in retail clinics offering the ability to sign immunization waivers diminishes the effort toward creating tighter vaccination exemption laws.⁹

Ultimately, the increase in unvaccinated individuals in the United States poses a public health concern that is more important than a parent's person-

CONF., *States*]. Mississippi and West Virginia are the two states that do not allow exemptions to vaccinations for religious reasons. *Id.*

6. NAT'L CONF., *States*, *supra* note 5. Philosophical exemptions are more commonly known as personal belief exemptions. Ben Kleifgen & Justin Silpe, *Vaccination Requirements and Exemptions*, THE GREENWALL FOUND., http://www.vaccineethics.org/issue_briefs/requirements.php (last updated July 2010). These nineteen states which allow personal belief exemptions are Arkansas, Arizona, California, Colorado, Idaho, Louisiana, Maine, Michigan, Minnesota, Missouri, North Dakota, Ohio, Oklahoma, Pennsylvania, Texas, Utah, Vermont, Washington, and Wisconsin. NAT'L CONF., *States*, *supra* note 5. The Missouri philosophical or personal exemption applies only to daycare, preschool and nursery school. *Id.* In addition, some states will allow exemptions to vaccinations for certain diseases if proof of immunity can be shown to exist. NAT'L VACCINE, *supra* note 4. Immunity can be proven if the parent or the child has had the natural disease or has been vaccinated for it, or if a blood test proves that there is a high enough level of antibodies in the blood. *Id.*

7. See Gabriela Quirós, *Health Officials to Consider Tightening Vaccine Exemption*, KQED (Oct. 13, 2010), <http://science.kqed.org/quest/2010/10/13/health-officials-to-consider-tightening-vaccine-exemptions/>. In 2013, 189 people in the U.S. were reported to have measles, compared to the average of sixty cases per year. CENTERS FOR DISEASE CONTROL AND PREVENTION, *Measles Outbreaks*, <http://www.cdc.gov/measles/outbreaks.html> (last updated Jan. 14, 2014) [hereinafter CDC]. This represented the second largest number of cases in the U.S. since measles was eliminated in 2000. *Id.* About twenty-eight percent of these individuals unvaccinated for measles contracted the disease from travelling abroad, infecting others back in the U.S. *Id.*

8. Amy Norton, *States May Be Getting Stricter on Child Vaccine Exemptions*, HEALTHDAY (Feb. 11, 2014), <http://consumer.healthday.com/caregiving-information-6/infant-and-child-care-health-news-410/states-may-be-getting-stricter-on-vaccine-exemptions-684784.html>.

9. See Diana Lambert, *Clinic opens for parents who oppose vaccinating children*, THE SACRAMENTO BEE (Dec. 18, 2013), available at <http://www.sacbee.com/2013/12/18/6012620/clinic-opens-for-parents-who-oppose.html>.

al belief against vaccinating his or her child.¹⁰ However, there should be an exemption to the general rule mandating all children to get vaccinated if there is a medical or religious reason against doing so, as long as parents are properly educated on the risks of not vaccinating their children. California's attempt to pass laws to decrease personal exemptions from vaccinations serves as an example of good intentions that nevertheless fall short.¹¹ This article argues that there is a disconnect between states' general push toward vaccinating children versus the infringement upon a parent's autonomy to make personal decisions on behalf of his or her own child. This article also argues that the lack of regulation amongst retail clinics may begin to obstruct state resolutions to combat vaccine-preventable diseases amongst its population. Section II will analyze how the rise in personal belief exemption waivers contributes to the recent whooping cough epidemic in California, and it will analyze how a general mistrust in the government and safety concerns regarding vaccinations led to the increase in exemptions in California and across the country. Section III will explore state governments' response to the higher rate of vaccine-preventable diseases within their population and assess the likelihood of success of such measures. Section IV will illustrate the increase in the number and willingness of retail clinics to provide services for signing immunization waiver exemptions, and it will analyze how these services may conflict with the government's push for increasing the number of vaccinated children.

II. SKEPTICISM TOWARDS VACCINATIONS AND INCREASE IN EXEMPTIONS

In 2010, California was swept with the worst outbreak of whooping cough since 1947, sickening 9,120 people and killing ten infants, most of

10. See EMILY OSHIMA LEE ET AL., CTR. FOR AM. PROGRESS, THE EFFECT OF CHILDHOOD VACCINE EXEMPTIONS ON DISEASE OUTBREAKS 1 (Nov. 14, 2013), available at <http://www.americanprogress.org/wp-content/uploads/2013/10/VaccinesBrief-1.pdf>.

11. See Nancy Shute, *How A California Law to Encourage Vaccination Could Backfire*, NPR (Nov. 9, 2013), <http://www.npr.org/blogs/health/2013/11/09/243937869/how-a-california-law-to-encourage-vaccination-could-backfire> [hereinafter Shute, *California Law*].

whom were too young to be vaccinated.¹² This highly contagious disease continues to circulate throughout California.¹³ In response, researchers of John Hopkins Bloomberg School of Public Health analyzed the number and location of whooping cough incidents in 2010¹⁴ and compared them with the number and location of parents who obtained personal belief exemptions for their children.¹⁵ They discovered that the increased number of vaccine refusals indeed contributed to the increase in whooping cough cases.¹⁶ Researchers found that people who lived in areas with high rates of personal belief exemptions were two and a half times more likely to live in an area with a prevalence of whooping cough cases.¹⁷

California continues to house high rates of personal belief exemptions, with the number of Sacramento-area starting kindergarteners without vaccines soaring by thirty percent between September 2012 and September 2013.¹⁸ Health experts say that Sacramento's large immigrant population is

12. Nancy Shute, *Vaccine Refusals Fueled California's Whooping Cough Epidemic*, NPR (Sept. 30, 2013), <http://www.npr.org/blogs/health/2013/09/25/226147147/vaccine-refusals-fueled-californias-whooping-cough-epidemic> [hereinafter Shute, *Vaccine Refusals*].

13. *Pertussis (Whooping Cough)*, CAL. DEPT. OF PUB. HEALTH, <http://www.cdph.ca.gov/healthinfo/discond/pages/pertussis.aspx> (last modified Feb. 7, 2014, 8:40AM).

14. See generally Jessica E. Atwell ET AL., Nonmedical Vaccine Exemptions and Pertussis in California, 2010, 132 AM. ACAD. OF PEDIATRICS 624 (Sept. 30, 2013), available at <http://pediatrics.aappublications.org/content/early/2013/09/24/peds.2013-0878.full.pdf> (discussing original study, identifying that the nonmedical vaccination exemptions were clustered spatially and were associated with the clusters of whooping cough cases, and that both exemptions and clusters of whooping cough cases tended to be in neighborhoods with higher levels of education and income).

15. Shute, *Vaccine Refusals*, *supra* note 12.

16. *Id.* When the number of vaccinated individuals in a community drops below ninety-five percent, the community loses herd immunity to highly contagious germs, leaving babies and unvaccinated individuals prone to the contagion. *Id.* In 2010, ninety-one percent of kindergarteners were up to date on their shots in California. *Id.*

17. *Id.*

18. Diana Lambert & Phillip Reese, *Local schools lead state in personal belief vaccination exemptions*, THE SACRAMENTO BEE (Sept. 16, 2013), <http://www.sacbee.com/2013/09/16/5742274/local-schools-lead-state-in-personal.html>. In the Sacramento region, the number of children entering kindergarten with a personal belief exemption from vaccinations was one in twenty—double the statewide rate. Lambert, *supra* note 9. In contrast, New York has actively taken a role to diminishing illnesses by requiring children five years old and younger to obtain a vaccine for influenza who attend licensed pre-school or day care. Celeste Katz & Jennifer Fermino, *Mayor Bloomberg: Mandatory Flu Shots For NYC Pre-Schoolers Will Save Lives*, DAILY NEWS (Dec. 13, 2013), <http://www.nydailynews.com/blogs/>

one of the factors behind the growing number of exemptions.¹⁹ Because immigrants are new to the country and its laws, they are likely unfamiliar with their state's vaccination requirements, which are at times different from their homeland.²⁰ Specifically, about fifty-eight percent of kindergarteners at Community Outreach Academy, a Sacramento charter school that caters to families from the former Soviet Union, have personal belief exemptions on file.²¹ Parents from this school state that they do not remember receiving as many vaccines when they were children in their home country and know that immunizations are one way for a doctor to make money.²²

The fear that vaccinations are not safe also deters parents from allowing their children to be vaccinated.²³ This fear was triggered in 1998 when a small study connected the measles-mumps-rubella vaccine to autism.²⁴ However, the CDC concluded from several studies examining the trends in vaccine use and the changes in autism frequency that there was not a meaningful association between thimerosal, a preservative in vaccines, and autism.²⁵ Despite this discovery, the question of vaccine safety ensues, and celebrity activists such as Jenny McCarthy still maintain presence in the public eye to speak out against the current vaccine schedule and insist that

dailypolitics.com/2013/12/mayor-bloomberg-mandatory-flu-shots-for-nyc-pre-schoolers-will-save-lives.

19. Lambert & Reese, *supra* note 18. During the 2012-2013 school year, Sacramento beat the fifteen largest counties in the state with the highest number of philosophical or personal belief exemptions among kindergarteners. *Id.*

20. *See id.*

21. *Id.*

22. *Id.*

23. Norton, *supra* note 8.

24. *Id.*

25. *Concerns about Autism*, CTRS. FOR DISEASE CONTROL AND PREVENTION, <http://www.cdc.gov/vaccinesafety/concerns/autism/>, (last updated Feb. 3, 2014) [hereinafter CDC, *Autism*]. Thimerosal, previously used as a preservative in many recommended childhood vaccines, is the vaccine ingredient that has been specifically studied. *Id.* Since 2001, it has been removed or reduced to trace amounts in all childhood vaccines except for one type of flu vaccine, and there are thimerosal-free alternatives available for influenza vaccines. *Id.* Despite the change in the use of this ingredient, the CDC supports the Institute of Medicine's conclusion that there is no relationship between vaccines containing thimerosal and autism rates in children. *Id.*

more research be done on the safety of vaccine ingredients.²⁶ In response to some of these public concerns, the Institute of Medicine (IOM) conducted a thorough review of the current scientific evidence on vaccines and certain health events that may be observed after vaccination.²⁷ In August 2011, the IOM released a report on eight vaccines given to children and adults, deeming them to be generally safe and stating that serious side effects following these vaccinations are rare.²⁸ With the CDC and the IOM's approval of the safety of vaccines, state legislatures should encourage vaccination by proposing new legislation to minimize the amount of individuals who can exempt their children from vaccination.²⁹

III. NEW STATE LAWS ON IMMUNIZATION WAIVERS AND THE LIKELIHOOD OF THEIR SUCCESS

The fear of outbreaks of vaccine-preventable diseases and the increase in vaccination exemptions, combined with concerns regarding the safety and necessity of vaccinations, results in a mixed response from legislators.³⁰ Between 2009 and 2012, eighteen states introduced at least one bill on vaccine exemptions.³¹ Most of the bills, thirty-one in total, were aimed at launching or expanding personal belief exemptions, but none passed.³² While some states like California try to pass legislation to demand stricter requirements for parents to obtain vaccination exemptions for their children, they pose

26. *Jenny McCarthy: Report of new stance on autism, vaccines 'irresponsible and inaccurate,'* CTV NEWS (Jan. 4 2012), <http://www.ctvnews.ca/entertainment/jenny-mccarthy-report-of-new-stance-on-autism-vaccines-irresponsible-and-inaccurate-1.1617795>. TV personality star Jenny McCarthy has been known for her stance that her son's autism was caused by vaccines, and claimed that the current vaccine schedule for babies is "too bloated." *Id.* Health experts in the U.S. and Canada state that her views may be influencing parents not to vaccinate their children, which could lead to problematic consequences. *Id.*

27. CDC, *Autism*, *supra* note 25.

28. *Id.*

29. *See id.*

30. *See* NAT'L CONF., *States*, *supra* note 5. For example, Illinois allows personal belief exemptions, while California does not. *Id.*

31. Norton, *supra* note 8.

32. *Id.*

problems or fall short of being as effective as likely intended.³³

Due to the unsteady rise in vaccination exemptions for children beginning kindergarten in California, the state legislature passed a law to make it more difficult for families to obtain immunization waivers.³⁴ Effective January 1, 2014, this law requires parents seeking personal belief vaccination exemptions to first learn about the risks and benefits of vaccines from a healthcare practitioner.³⁵ There is a mandated California immunization waiver form that includes a box for a healthcare provider to sign, indicating that a conversation has taken place.³⁶ However, when the governor of California signed the bill into law, he issued an executive order directing the Department of Public Health to add a separate religious exemption on the form.³⁷ This new religious exemption effectively allows people whose religion precludes vaccinations to not be required to seek a healthcare practitioner's signature.³⁸ This form allows individuals to check a box which states that they are a member of a religion that prohibits them from seeking medical advice.³⁹ By checking this box, the individual does not have to seek a signature from a healthcare provider, and thus would circumvent the opportunity to be educated on the signs, symptoms, and importance of vaccines.⁴⁰ Researchers say that this new religious exemption option could fatally weaken the law and encourage parents to lie by checking the exemption box because it is easier than taking their children in to the doctor

33. See Shute, *California Law*, *supra* note 11.

34. See *id.* Vermont and Washington are also states which have recently passed stricter laws on allowing personal belief exemptions. Norton, *supra* note 8.

35. See *id.*

36. Shute, *California Law*, *supra* note 11.

37. Letter from Edmund G. Brown Jr., Governor of Cal., to Members of the Cal. State Assembly (Sept. 30 2012) (on file with California State Assembly), available at http://gov.ca.gov/docs/AB_2109_Signing_Message.pdf.

38. *Id.*

39. CAL. DEP'T OF PUB. HEALTH, *Personal Beliefs Exemption to Required Immunizations*, available at <http://media.npr.org/documents/2013/nov/vaccine-exemption.pdf> (last visited Mar. 31, 2014).

40. *Id.*

for shots.⁴¹ This new legislation intended to tighten the requirements for parents seeking personal belief exemptions, in reality allows these individuals to circumvent the important education of disease prevention and symptom-recognition from a healthcare practitioner.⁴²

California's government needs to hold medical providers and the parents who seek exemptions to higher standards. Medical providers need to properly educate parents about how their children may become ill and may spread diseases and infections to other non-vaccinated children.⁴³ Additionally, parents who are exempting their children for religious reasons should be required to prove their religious identity in some way instead of simply checking a box on a waiver form.⁴⁴ If states refuse to abolish personal belief vaccination exemptions, then parents need to be personally informed of the dangers and risks of not vaccinating their children by qualified medical authorities, in a regulated matter.⁴⁵

41. Shute, *California Law*, *supra* note 11.

42. *See id.* The other issue that researchers see is that the governor may not have the authority to unilaterally change the bill, and state agencies and parents may not know whether they need a doctor sign-off because the forms say they do not, while the law says they do. *Id.*

43. *See LEE*, *supra* note 10, at 5-6.

44. *See* NAT'L VACCINE, *supra* note 4. One way a parent could prove their religious identity is through a signed affidavit by a pastor or spiritual advisor. *See id.*

45. *See LEE*, *supra* note 10, at 5-6. Oregon, a state with the highest rate of nonmedical exemptions from immunizations for kindergarteners in 2012 is another that needs stricter personal exemption laws. *Oregon's 2013 Rate of Vaccine-Exempted Kindergarteners Increases Statewide Over 2012*, THE LUND REP. (May 7, 2013), http://www.thelundreport.org/resource/oregons_2013_rate_of_vaccine_exempted_kindergarteners_increases_statewide_over_2012. Oregon's current law requires parents to either talk to a healthcare practitioner who will sign a Vaccine Education Certificate or view an online vaccine education module during which parents must print a Vaccine Education Certificate. *School Law Nonmedical Exemptions: New Process Begins on March 1, 2014*, OREGON HEALTH AUTHORITY (2014), available at <http://public.health.oregon.gov/PreventionWellness/VaccinesImmunization/GettingImmunized/Documents/SchNonmedExmptQApartners.pdf>. This law broadens the definition of religious exemption to the more-encompassing term, nonmedical exemption, allowing for a wider range exemptions." *Id.* As the law stands, parents who have religious beliefs against vaccinating their children must now choose whether to speak with a healthcare provider or view the online video. *Id.* However, individuals seeking to obtain nonmedical exemptions will choose the video option due to convenience instead of setting an appointment to see a healthcare provider. *Id.* If a parent only needs to print a Vaccine Education Certificate, there is no guarantee that these parents will be held accountable to viewing the video in its entirety, or viewing it at all. *See id.* Creating a con-

IV. RISE IN RETAIL CLINICS AND THE ACCESSIBILITY TO IMMUNIZATION WAIVERS

In response to the new California legislation that curbs the ability for parents to receive personal belief vaccination exemptions, a new retail clinic opened in California in January 2014.⁴⁶ The clinic opened for the primary purpose to aid parents without a primary care provider or those who have a healthcare practitioner who refuses to sign an immunization waiver for their child.⁴⁷ This clinic allows families to meet with a medical practitioner in the hospital's pediatric outpatient clinic to receive the signature required to allow them to enroll their children in school without immunizing them.⁴⁸ Although this clinic provides consultation to parents seeking to exempt their children from vaccinations,⁴⁹ the lack of state licensure of California clinics raises the question of how these clinics are educating parents on the benefits of vaccines.⁵⁰

This new California business is the beginning of a rise in retail clinics that will provide services to sign immunization waivers so children can be exempt from vaccinations. With the implementation of the Patient Protection and Affordable Care Act (PPACA),⁵¹ tens of millions of previously un-

venience for parents to view a video to obtain a nonmedical immunization waiver instead of receiving an education in person about the risks of not immunizing their children is not the way to lower the alarming rate of vaccination exemptions. See THE LUND REPORT, *supra* note 45.

46. *New clinic provides immunization information to Sacramento area parents*, UC DAVIS HEALTH SYSTEM (Jan. 14, 2014), <http://www.ucdmc.ucdavis.edu/publish/news/newsroom/8572>. University of California, Davis (UC) Medical Center physician Dean Blumberg, M.D. initiated the new clinic, stating that he is pro-immunization, but pro-parental rights. Lambert, *supra* note 9. Dean Blumberg originally supported the California law that makes personal belief vaccination exemptions more difficult to obtain. *Id.*

47. UC DAVIS HEALTH SYSTEM, *supra* note 46.

48. Lambert *supra* note 9.

49. UC DAVIS HEALTH SYS., *supra* note 46.

50. See MARY TAKACH & KATHY WITGERT, ANALYSIS OF STATE REGULATIONS AND POLICIES GOVERNING THE OPERATION AND LICENSURE OF RETAIL CLINICS 16 (Feb. 2009), available at <http://nashp.org/sites/default/files/RetailClinics.pdf?q=files/RetailClinics.pdf>.

51. See generally Patient Protection and Affordable Care Act, Pub. L. No. 111-148, 124 Stat. 119 (2010), available at <http://www.gpo.gov/fdsys/pkg/PLAW-111publ148/pdf/PLAW-111publ148.pdf>.

insured will gain access to health care,⁵² thus increasing the demand for primary care.⁵³ Such a demand will likely result in a decrease to access to primary care physicians, allowing for an increased demand for retail clinics.⁵⁴ While retail clinics often offer vaccinations services amongst others,⁵⁵ as the newly insured individuals flood the healthcare market, the retail clinic business will expand and progress, providing more services for more people.⁵⁶ It is quite foreseeable that as the retail clinic business will grow, the number of clinics that will offer immunization waivers will grow to accommodate newly insured individuals and increase profits.⁵⁷ Although these clinics can provide education about vaccinations to parents, the lack of regulation amongst retail clinics in states like California poses a threat to the consistency between what is said to each parent regarding the risks and benefits of vaccines.⁵⁸ This lack of regulation jeopardizes the effectiveness of these clinics' abilities to deter vaccination exemptions and to encourage vaccinations in the future.⁵⁹

California's legislatures, as well as legislatures in other states, need to encourage child vaccination by passing legislation to limit the number of

52. *Study: Number of Retail Health Clinics to Rise Sharply in Wake of ACA*, CAL. HEALTHLINE (June 13, 2013), <http://www.californiahealthline.org/articles/2013/6/13/study-number-of-retail-health-clinics-to-rise-sharply-in-wake-of-aca>.

53. *Special Feature: Retail Clinics Play Growing Role in Health Care Marketplace*, RAND HEALTH, <http://www.rand.org/health/feature/retail-clinics.html> (last visited Mar. 31, 2014).

54. *Id.*

55. Approximately ninety percent of retail clinics visits are for the following ten acute conditions and preventative care: upper respiratory infection, sinusitis (sinus inflammation), bronchitis, sore throat, immunizations, inner ear infections, swimmer's ear, conjunctivitis, urinary tract infections, and screen blood tests. *Id.*

56. *See* CAL. HEALTHLINE, *supra* note 52.

57. *See id.*

58. *See* Takach, *supra* note 50. As of February 2009, California had 90 clinics open, operating under different models. *Id.* States such as Illinois require a permit to operate a retail clinic issued by the Department of Public Health, while states such as Massachusetts regulate what medical conditions can be treated, medical record keeping procedures, what age groups can be treated, the treatment of repeat patients, and tobacco sale regulations. *Retail Health Clinics: State Legislation and Laws*, NAT'L CONF. OF STATE LEGISLATURES, <http://www.ncsl.org/research/health/retail-health-clinics-state-legislation-and-laws.aspx> (last updated Sept. 2012) [hereinafter NAT'L CONF.].

59. *See* Takach, *supra* note 50.

parents to receive immunization waivers for their children.⁶⁰ The government should mandate medical providers to educate the parents of exempt children on the signs and symptoms of vaccine-preventable diseases to encourage vaccination and seek medical care immediately if their child shows warning signs of such diseases. State governments should ensure that parents whose children are exempt from vaccinations due to religious beliefs can recognize the warning signs and symptoms of vaccine-preventable diseases.⁶¹ These individuals should also be required to sign an affidavit to prove their religion, have a witness testify to their religious beliefs, or submit any documents or certificates that would prove an affiliation to a certain religion.⁶²

Additionally, states such as California need to pass legislation to regulate retail clinics to provide the same high level of education about the benefits of vaccination to parents who wish to obtain personal exemptions for their children.⁶³ Since the CDC and IOM have proven the safety and effectiveness of vaccines,⁶⁴ these groups can work with school officials to provide information on state and country-wide immunization rates to make the data more transparent and to encourage parents to vaccinate their children.⁶⁵ Educating parents about the benefits of immunizations may encourage them to understand the importance of vaccinating their children.⁶⁶

60. See Norton, *supra* note 8.

61. See LEE, *supra* note 10, at 6.

62. See NAT'L VACCINE, *supra* note 4. Certain laws require a signed affidavit from a pastor or spiritual survivor of the parent who wishes to have their child religiously exempt from vaccines. *Id.* Other laws allow a parent exercising religious exemption to sign a notarized waiver on behalf of their child. *Id.*

63. See NAT'L CONF., *supra* note 58.

64. See CDC, *Autism*, *supra* note 25.

65. See LEE, *supra* note 10, at 6.

66. See *Id.*

V. CONCLUSION

The new retail clinics that sign vaccination waivers for schoolchildren and the states that are passing ineffective laws designed to decrease vaccination exemptions are participating in the re-emergence of diseases and infections that were once deemed cured in the United States.⁶⁷ It is unethical for the state legislature and the healthcare industry to loosen its requirements for child vaccination exemptions.⁶⁸ It is in the best interest of society to reduce the number of allowed personal belief exemptions.⁶⁹ If legislators decline to reduce the number of waivers, then they should require parents and qualified healthcare practitioners to have an in-person conversation about the dangers of their unvaccinated children contracting and spreading preventable diseases and infections.⁷⁰ Overall, the greater well-being of society at times outweighs the interest of a parent's individual autonomy over their child, and every effort must be made to lower the number of immunization waivers in the United States.⁷¹

67. In 2000, measles was declared eliminated from the United States' population. CDC, *supra* note 7.

68. See CAL. DEP'T OF PUB. HEALTH, *supra* note 39.

69. See LEE, *supra* note 10, at 5-6.

70. See Shute, *California Law*, *supra* note 11.

71. See LEE, *supra* note 10, at 5-6.