



October 28, 2020

The Honorable Muriel Bowser
Mayor of the District of Columbia
John A. Wilson Building
1350 Pennsylvania Avenue, NW
Washington, D.C. 20004

The Honorable Phil Mendelson
Chairman, Council of the District of Columbia
John A. Wilson Building
1350 Pennsylvania Avenue, NW
Washington, D.C. 20004

Dear Mayor Bowser, Chairman Mendelson, and esteemed members of the Council of the District of Columbia,

The Center for Inquiry (CFI) urges you to pass and enact the Minor Consent for Vaccinations Amendment Act of 2019 (Bill 23-171) to allow minors of eleven years or older to consent to immunizations that are recommended by the Advisory Committee on Immunization Practices (ACIP) at the U.S. Centers for Disease Control and Prevention (CDC). CFI is a nonprofit organization that seeks to foster a secular society based on science, reason, and humanist values. Its executive office is located in the District of Columbia. On June 26, 2019, CFI Director of Government Affairs Jason Lemieux testified in support of Bill 23-171 at a Public Hearing of the Committee on Health.¹

In the history of vaccine-based immunization, children have been among those with the most to gain from access to safe and effective vaccines. For example, according to the World Health Organization (WHO), unvaccinated young children are at the greatest risk of complications from the measles virus. These complications include pneumonia, encephalitis, and death. Prior to the widespread administration of the measles vaccine, an estimated 2.6 million people, most of them children, died each year globally from measles complications. The advent of a safe, effective vaccine caused the rate of death to plummet. WHO estimates that the measles vaccine prevented 21.1 million deaths from 2000–2017.² Despite this heroic progress against the disease, measles remains one of the leading global causes of death in children under age five, claiming the lives of approximately 92,000 children over the same period.³

A highly contagious virus, measles can easily spread throughout populations in which the immunization rate is less than 95 percent. Despite the clear and substantial benefits of achieving this “herd immunity,” the District of Columbia is not currently meeting the 95 percent immunization threshold necessary to protect those few residents who are not medically eligible

¹ Video available online at http://dc.granicus.com/MediaPlayer.php?view_id=2&clip_id=5105.

² World Health Organization. December 5, 2019. Available online at <https://www.who.int/news-room/fact-sheets/detail/measles>. For statistics on the period from 2000–2017, see <https://www.cnn.com/2019/02/05/health/how-measles-kills-explainer/index.html>.

³ World Health Organization. Available online at https://www.who.int/gho/child_health/mortality/causes/en/.



to receive the vaccine. The DC Department of Health estimates that 87.5 percent of kindergarteners in the District’s public, charter, and private schools were covered by the Measles, Mumps, and Rubella (MMR) vaccine in the 2019–2020 school year.⁴ Furthermore, a close examination of the Department’s current school-level data reveals the existence of elementary schools with MMR immunization rates as low as 59.7 percent.⁵

The novel coronavirus pandemic illustrates with brutal clarity the potential public health impact of permitting adolescent minors to give informed consent to safe, effective vaccinations. According to the CDC, from March 1 to September 19, at least 277,285 cases of COVID-19 were reported in U.S. children. Of these cases, the incidence of COVID-19 for children aged twelve to seventeen—the age cohort affected by Bill 23-171—was twice that of children aged five to eleven.⁶ In the event that a novel coronavirus vaccine is approved by the Food and Drug Administration (FDA) for adolescent minors, every minor who is able to give informed consent to such a vaccine should have the opportunity to do so. By passing and enacting Bill 23-171, you will be providing children with the means to ensure their future remains bright rather than being cut short by disease.

At present, organized opposition from a small but extremely vocal minority has dangerously undermined immunization coverage in the United States. Because adherence to ACIP-recommended immunization schedules is a requirement for admission to and attendance at public schools and day care centers in most U.S. states and the District of Columbia, this organized opposition has its most immediate impact on the immunity of school-age children. By spreading pseudoscientific conspiracy theories, these opponents of health and progress sow fear and mistrust in vaccines, which are among the safest and most effective medical interventions ever devised. Unfortunately, many parents caught in this fire hose of misinformation choose not to vaccinate their children, often by seeking nonmedical exemptions under the guise of a religious objection.

When parents are unable or unwilling to provide vaccines to their dependent children, it is incumbent upon society to protect those children from contagious diseases that could rob them of their health and safety. Bill 23-171 empowers minors of eleven years or older to protect their health along with the health of their fellow District residents by vaccinating to limit the spread of contagious disease. In addition, Bill 23-171 provides appropriate precautions to protect

⁴ District of Columbia Department of Health. October 2019. *Immunization Coverage Rates in DC Public, DC Public Charter and DC Private Schools for MMR, Varicella and DTaP Vaccines*. Available online at https://dchealth.dc.gov/sites/default/files/dc/sites/doh/page_content/attachments/DC%20Immunization%20Coverage%20%28Updated%2010.16.19%29_1.pdf.

⁵ District of Columbia Department of Health. Available online at <https://dchealth.dc.gov/node/1409756>.

⁶ Centers for Disease Control and Prevention. October 2, 2020. Available online at <https://www.cdc.gov/mmwr/volumes/69/wr/mm6939e2.htm>.



patient privacy and to ensure that affected minors are able to meet the standard of informed consent in consultation with a health care provider.

In closing, CFI urges you to pass and enact Bill 23-171 with all appropriate expediency. We thank you for your leadership on this legislation and for your attention to our letter.

Sincerely,

A handwritten signature in black ink, appearing to read 'Robyn Blumner', with a long, sweeping flourish extending to the right.

Robyn Blumner
President and CEO
Center for Inquiry

A handwritten signature in black ink, appearing to read 'Jason Lemieux', with a long, sweeping flourish extending to the right.

Jason Lemieux
Director of Government Affairs
Center for Inquiry

cc: Councilmember Anita Bonds
Councilmember David Grosso
Councilmember Elissa Silverman
Councilmember Robert C. White, Jr.
Councilmember Brianne K. Nadeau
Councilmember Brooke Pinto
Councilmember Mary M. Cheh
Councilmember Brandon T. Todd
Councilmember Kenyan R. McDuffie
Councilmember Charles Allen
Councilmember Vincent C. Gray
Councilmember Trayvon White, Sr.