

Chairman Lipps, Vice Chair Holmes, Ranking Member Russo, and Members of the House Health Committee, thank you reviewing my testimony on *House Bill 248* (HB-248).

My name is Elizabeth Lanphier, PhD, MS, HEC-C. I am an assistant professor and clinical ethicist at Cincinnati Children's Hospital Medical Center. My training in philosophy and bioethics, and my work in the Ethics Center of Cincinnati Children's Hospital supporting medical teams, patients, and families in ethical medical decision-making, lead me to strongly oppose HB-248. The stated aim of the bill is to promote individual choice and prevent discrimination. Yet HB-248 would result in limiting individual health choices while furthering discrimination.

There are four core principles of bioethics: autonomy, beneficence (doing good), non-maleficence (doing no harm), and justice. Existing systems for vaccination requirements and mechanisms for vaccine exemptions are the best ethical way to protect individual autonomy, promote beneficence, do no harm, and enact justice. HB-248, on the other hand, would diminish autonomy, afford little anticipated benefit, do certain harm, and promote injustice.

If HB-248 were to become law, individuals would not be able to make *informed* decisions to attend schools, or safely seek medical care, in settings they can be sure are promoting personal and public health measures. HB-248 discriminates against the most vulnerable members of our community. Individuals who cannot be vaccinated, or for whom vaccines are not effective due to health conditions, would no longer be able to trust their health would be safe in their schools, workplaces, or doctors offices. Being able to provide and guarantee vaccination among health care workers is a key tool for hospitals and health care institutions to ensure a healthy and available workforce for the benefit of our entire community – a workforce that doesn't inadvertendly transmit rather than treat disease in patients and families.

Part of the ethical reasoning to support vaccination efforts against preventable illnesses is to promote the health and well-being of individuals receiving vaccines. But another component of the ethics of vaccination is protection of the most vulnerable members of our society: infants too young to be vaccinated yet more likely to die from illnesses like pertussis or influenza; immunocompromised individuals for whom vaccines are ineffective; and older adults whose immune systems face dimished capacity to produce antibodies from vaccines or fight off illness.

For many of us choices about vaccines are personal, private decisions. We already have effective mechanisms to appropriately exempt individuals from vaccination for reasons of medical need or religious practice. At the same time, we were all once infants and we can all hope to one day be older adults, reliant on our community, caregivers, and health care workers to promote and protect our health and well-being. HB-248 would not only limit our ability to ethically care for others – it would constrain our ability to take care of ourselves.

Thank you for the opportunity to voice my opposition to this bill.

Sincerely,

Elizabeth Lanphier, PhD, MS, HEC-C