

Elizabeth Ireson, MD
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June 9th, 2021

Dear Chairman Lipps and members of the House Health Committee,

As a pediatrician in Cincinnati, Ohio I am greatly concerned about the negative impact that Ohio House Bill 248 would have on our state's children. H.B. 248 represents an impeding public health crisis. The recent House Health Committee proceedings surrounding this bill have been biased and misrepresented. I urge you to consider the imminent danger and to act **against** H.B. 248.

For children, vaccines serve as a gateway to essential pediatric primary care services. If parents/guardians are readily provided with messaging that vaccines are not necessary, this will likely reduce their trips to the pediatrician. Frequent well child checks serve many purposes aside from the obvious importance of vaccination. In my pediatric primary care clinic, we care for families who live in communities grappling with the effects of long-standing systemic racism. These families face inequities on a daily basis. When they come to clinic for well child checks we can provide developmental screenings, check blood lead levels, provide socioeconomic resources to combat food & housing insecurity, and so much more. Last year in my pediatric primary care clinic I cared for a child whose mother brought them to clinic for vaccinations for kindergarten. During this visit we discovered that the child had a dangerously high blood lead level requiring inpatient care. Just this week, another family brought their twin toddlers to clinic for vaccines for daycare. During this visit we were able to perform developmental screening and noted that one of the toddlers had a speech delay. That visit allowed us to intervene early – which is essential for changing the trajectory of developmental delays. Developmental delays, lead toxicity, and chronic health issues are more prevalent in families who experience poverty and toxic stress. *By minimizing the importance of vaccinations, H.B. 248 undermines the importance of pediatric primary care, and contributes to inequities in access to healthcare as well as long-term health outcomes for Ohio's most vulnerable populations.* This bill seeks to reduce discrimination; however, I would argue that by encouraging healthcare access inequities, it does just the opposite.

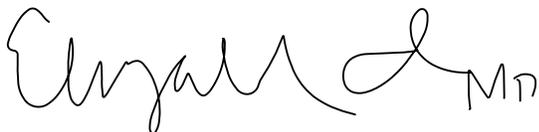
H.B. 248 encourages discrimination against Ohio's most vulnerable populations. Discrimination is commonly defined as different, unfair, or prejudiced treatment of individuals or groups of people on the basis of *inherent* characteristics such as race, ethnicity, sexual orientation, gender, disability, or age. There are decades' worth of data proving that vaccines are effective, safe, and essential in preventing local/national/global pandemics. Vaccines represent one of the greatest public health advancements in our country. *Choosing to ignore scientific data and facts is not an inherent characteristic.* Thus, I would not label different treatment of individuals on the basis of their voluntary choice to act in opposition of well-proven data as discrimination. You could argue that some oppose vaccines on religious or cultural grounds. There are mechanisms in place to protect those choices – mechanisms that I would argue are too forgiving as is. By readily allowing, if not encouraging, reduced vaccination rates in healthy children whose guardians choose not to vaccinate them, H.B. 248 puts chronically ill, immunosuppressed, and other medically vulnerable populations at risk. A healthy child who contracts a vaccine preventable illness such as Whooping Cough or Chickenpox may only suffer mild symptoms (although healthy children are certainly at risk of dying from vaccine preventable illnesses as well). Individuals with cancer, autoimmune disease, inflammatory bowel disease, cerebral palsy, asthma, obesity, or other chronic

illness are more likely to develop life-threatening illness, and are more likely to die, from vaccine preventable diseases. Additionally, some immunosuppressed children cannot receive vaccines because of illness or life-saving medications. H.B. 248 makes schools and daycare unsafe for these individuals. *H.B. 248 discriminates against chronically ill children by reducing their access to safe education and childcare.*

This bill threatens to thwart Ohio's progress in combatting the COVID-19 pandemic. H.B. 248 has been advertised as a bill against "COVID-19 vaccine passports." *The initial bill did not even include the words coronavirus, COVID-19, or passport.* The House Health Committee has added provisions to prohibit "discrimination against an individual who refuses to subscribe to a vaccine or immunity passport or tracking service." The House Health Committee took another dangerous step by including that this bill would prohibit discrimination against individuals who refuse to "provide proof of vaccination against, immunity to, or testing of a specific contagious or infectious disease" (R.C. 3792.02(D)). This threatens the public health efforts that have allowed Ohio to make steps toward recovery from the COVID-19 pandemic. Individuals who have tested positive for COVID-19 may be allowed to return to school or work while they are actively contagious should they choose not to share their results. H.B. 248 would also strip healthcare organizations of the ability to require that their employees are vaccinated against common infectious diseases (such as influenza) or that they wear masks when treating patients known to have infectious diseases such as COVID-19 or tuberculosis. Schools/daycares would also not be allowed to track vaccination status, and thus would not know which children are at risk when an outbreak inevitably occurs. These actions would be an immense step backwards for Ohio's public health. Now more than ever, our government needs to support public health efforts to help Ohio recover from and prevent future pandemics.

Ohio House Bill 248 is not about freedom of choice, it is about public health. We have the incredible ability to protect Ohio's children from vaccine preventable deadly illnesses. Why should those who choose to refuse this privilege threaten the health and safety of the rest of our population?

Sincerely,

A handwritten signature in black ink, appearing to read "Elizabeth Ireson MD". The signature is fluid and cursive, with the letters "MD" clearly visible at the end.

Elizabeth Ireson, MD