

Public Testimony to the Ohio House Health Provider Services Subcommittee - Proponent Testimony HB319

Dear Chairman Al Cutrona, Vice Chairman Jennifer Gross, and Ranking Minority Member Anita Somani,

My name is Jon Morrow, M.Econ, M.Polsci. I'm here to support House Bill 319, also known as the Conscientious Right to Refuse Act. Now, before anyone jumps to conclusions, let me make something clear: I'm not at all against vaccines. In fact, I've had many of them—vaccines that have been studied for decades. But what we're dealing with here, the purpose for why this legislation is at the forefront of the public consciousness is a whole different animal. These modern vaccines that were in response to COVID-19 do not have that all important long-term testing.

I contracted COVID-19 early in the pandemic. As someone who had already battled brain and pancreatic cancer, my immune system was shot. When my fever spiked to 104 degrees, I was in serious trouble. The emergency room doctor told me about a promising treatment from Spain—Hydroxychloroquine. Desperate and fearful, I agreed to try it. By 9 PM, I had the drug in my system, and by midnight, my fever broke. The next day, I went home. Hydroxychloroquine undoubtedly and without question saved my life.

Then, shortly after my experience, everything changed. Once President Trump mentioned he was taking Hydroxychloroquine, the medical community in Ohio did an about-face. Suddenly, the drug that saved my life [was banned](#). This wasn't about science—it was pure politics, and we all know it. And that's a problem!

Since then, I've heard from thousands of people with similar stories through my Committee for a Better Ohio blog. Hydroxychloroquine, Dexamethasone, Montelukast Sodium, Ivermectin—drugs that helped save lives, that were prescribed by doctors unafraid of Big Pharma and Big Insurance, sometimes even after people had been vaccinated for COVID-19. Yet here we are, with no long-term data on these new vaccines, being told they're the only solution. It's not adding up. It was never adding up. It will most likely never add up.

Now let's talk about my own change of heart regarding private companies mandating vaccines without long-term studies. At first, I was all for it - I thought I was following the science and as it turns out it was I who was the jassack. Just as all climate change models are very questionable because the data is not accurate is the same reason

that climatologist have never been able to produce an accurate model that mirrors our actual climate. I believed businesses had the right to make their own decisions, even if that meant requiring employees to get the jab. But then, reality hit me square in the face. I lost a friend who died shortly after getting the vaccine. Two more friends, the picture of health, suffered strokes. These weren't isolated incidents in my mind—they were part of a pattern I couldn't ignore.

As more and more people shared their stories with me, it became clear that the risks were real and often downplayed. When you see this kind of overwhelming response, you start to question the narrative. The more I learned, the more I realized that mandating vaccines without solid, long-term data was a dangerous game. It's one thing to trust in science; it's another to blindly follow without asking hard questions. Businesses should have the freedom to operate as they see fit, but not at the expense of individual rights and health. This isn't about being anti-vaccine; it's about being pro-choice and pro-data. It's about making informed decisions, not rushed mandates driven by fear and politics. I contend that no vaccine should be mandatory and that the government should make the case to the people for vaccines and if the people believe it is in their best interest then they will get the vaccine. It's their choice.

Consider this: Currently, in the last 3 years, more people vaccinated against COVID-19 have died from it than those who weren't. How are we calling this a success? How can we trust the data when anyone who died with COVID-19, regardless of the actual cause, was listed as a COVID death? ***It's like saying someone who had cancer but got hit by a car died from cancer. It doesn't make sense.***

Initially, I supported businesses having the choice to mandate vaccines. Then, I lost a friend who died shortly after getting the shot, and two more had strokes. These were healthy people. Coincidence? Maybe. But when you have over 40,000 people sharing similar stories on my blog, it's hard to ignore.

The government hasn't convinced Ohioans that these new vaccines, rushed to market without long-term studies, aren't part of the problem. During a time of fear, drug companies made billions while we took all the risks. Dr. Fauci's revelations under oath have made many believe these vaccines may have done more harm than good and that pandemic policies had more to do with mitigating fear rather than implementing science.

Shouldn't vaccines always be voluntary? ***What do we say to parents whose child died from chickenpox because they weren't vaccinated? Do we offer the same condolences to parents whose child died after getting the COVID-19 vaccine?*** And, yes my dear friends, Died Suddenly, is not just a social media term dreamt up by luddites and those seeking attention. Remember Benjamin Franklin's

words: “Those who would give up essential Liberty, to purchase a little temporary Safety, deserve neither Liberty nor Safety.” During the pandemic, we saw legislators passing the buck and passing the decisions on to doctors—some of the same doctors responsible for Ohio’s opioid epidemic. And those same legislators, that found that they could not make a decision during the pandemic, that gave up on our Representative for of government concerning COVID-19 - received campaign funds from Big Pharma and Big Healthcare. This is not avoiding the perception of a conflict of interest and unethical behavior. How is this not a conflict of interest?

HB319 isn’t perfect, but it’s a step in the right direction. It protects the rights of Ohioans to make their own medical decisions without coercion. This bill prohibits discrimination based on an individual’s refusal of certain medical interventions. It provides a legal framework for individuals to seek justice if their rights are violated.

In closing, I urge you to support HB319. This bill is about preserving our freedom to make personal medical decisions. It’s about recognizing the real and valid concerns of countless Ohioans. It’s about ensuring transparency, accountability, and respect for individual liberties in our government and medical institutions.

Thank you for your time and consideration.

Sincerely, Jon Morrow, M.Econ, M.Polsci