

Submission to the Health and Community Services Committee of the Queensland Parliament

RE: The Public Health Amendment Bill 2013
(Exclusion of Unvaccinated Children from Child Care)

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Summary

The proposed bill should not be passed. Immunisation rates in Australia are high and stable, contrary to the rationale of the accompanying the proposed bill. Should it be passed, the bill would likely result in unintended consequences that are undesirable, excluding children from society on the basis of decisions taken by others on their behalf.

An alternative approach will more effectively encourage Immunisation, and will yield better health outcomes for children, for parents, and the community. This alternative approach universally mandates childcare centres to accept only children whose immunisation status is recorded. Children would be required to present a certificate of full immunisation, a medical exemption form, or a signed conscientious objection form.

The proposed bill is based on an inaccurate assumption that immunisation rates are in decline.

The Australian Childhood Immunisation Register (ACIR) contains immunisation records for very nearly all Australian children and is thus a highly reliable source of information on our childhood immunisation rates.

Supporting text to the bill asserts there is a recent decline in immunisation rates – this is incorrect. ACIR data show that childhood immunisation rates are high and stable in Australia (See the figure below 2), obviating the fundamental basis of the proposed bill.

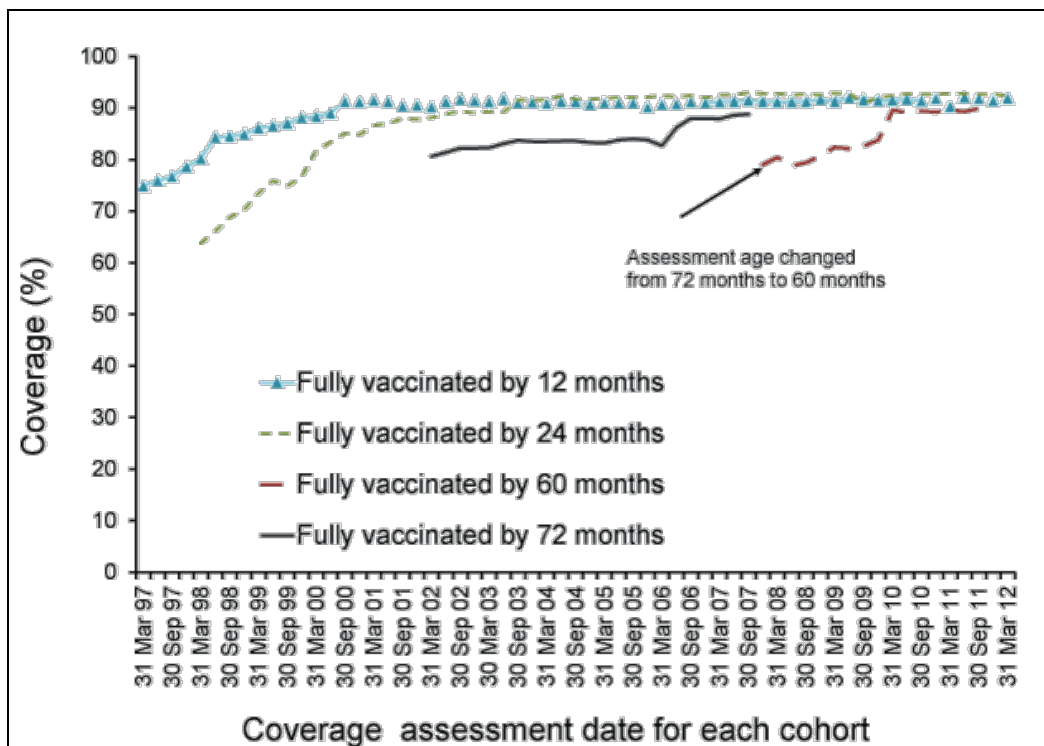


Figure: Trends in vaccination coverage, Australia, 1997 to 31 March 2012

Should the bill be passed there will be unintended consequences that are counter to public health aims.

Passing the bill as proposed could lead to unintended consequences that are undesirable. The first of these is the increased risk of disease outbreak at the community level due to the likely concentration of unvaccinated children into centres that elect to forego the ban.

The documented 1,502 local children on the Sunshine Coast are currently spread amongst fully immunised children, providing a degree

of 'herd immunity'. By allowing childcare service operators the discretion to ban children - but not the obligation - some centres would elect to not ban children (given that there would be an emergent demand for childcare services by parents of unvaccinated children).

These centres who forego the ban would become the de facto centres for unvaccinated children, virtually ensuring the concentration of unvaccinated children, and a resultant reduction in 'herd immunity' that is afforded to the community when unvaccinated children are more evenly spread amongst the community.

Not only would the unvaccinated children be at risk, once a disease outbreak starts other children would also be at risk. This includes those too young to be vaccinated, those in whom there is vaccine failure and those who cannot be vaccinated for medical reasons.

The second unintended consequence would be the ethical and pragmatic considerations that result from enforcing a consequence on children for the decisions of the parents. A ban on unvaccinated children punishes parents no doubt – in the form of inconvenience. But it also potentially punishes children for the decisions of their parents, decisions which they have no part in. It does this by reducing their opportunities for preschool education in a context where childcare is already in short supply in some regions.

The third unintended consequence is the likely reactionary response by parents who oppose vaccination on an ideological or philosophical basis. Coercion and strong-arm tactics are known to backfire in many domains of health behaviour, including immunisation. The bill presents a form of compulsory vaccination which is counterproductive. Alternative measures that respect the autonomy of parents are considered by most researchers in this area to be much more effective. The [Royal Australasian College of Physicians recommends](#) that attempts to increase our (already high) immunisation coverage rates should focus on delivering consistent, positive messages to parents through well-trained and well-informed practitioners. [A recent article from the Lancet](#) by experts in immunisation policy and practice further argues against compulsory vaccination:

...we have achieved high uptake rates of childhood immunisation with strategies that include improved information systems, use of vaccination reminders, and provision of immunisation services by well trained, enthusiastic health professionals who are able to discuss parents' concerns and questions effectively.... It is unlikely that compulsory immunisation would progress these goals; to the contrary, we believe it could be detrimental.

Universally mandate childcare centres to require documentation of immunisation status at enrollment.

In a [recent article co-authored by the writers](#), we argued for a more effective yet less coercive approach where parents must provide documentation of vaccination status in order to enroll in childcare services.

Importantly, ‘immunisation status’ may include any of the following:

- a certificate of full immunisation,
- a medical exemption form, or
- a signed conscientious objection form.

Such an approach has several advantages over the proposed bill.

Firstly, mandating registration of vaccination status – regardless of whether the child is immunised, medically exempt, or the parents have refused vaccination – will serve as a useful reminder to parents who haven’t yet vaccinated their children because of busy lives or lack of awareness.

Secondly, mandatory registration will allow a ready mechanism to exclude unvaccinated children from childcare centres *should an outbreak occur*. As a result, unvaccinated children are not permanently disadvantaged by exclusion from an educational facility because of their parents’ decision.

It is noteworthy that this mandatory reporting of immunisation status has support amongst federal, state and territory health officials and law makers. The NSW state government recently considered a ban on unvaccinated children, and decided against it in [favour of mandatory reporting](#). A recent meeting of [federal and state health ministers also supported this alternative approach](#), albeit for school-entry rather than childcare centres.