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Kansas Action for Children
Verbal Testimony in opposition to SB 314
Senate Committee on Public Health and Welfare

Chairperson Gossage and members of the Committee:

Thank you for the opportunity to provide testimony in opposition to SB 314, which would prohibit KDHE from requiring the COVID-19 vaccine for child care centers and public school attendance. Kansas Action for Children is a nonprofit advocacy organization working to make Kansas a place where every child has the opportunity to grow up healthy and thrive. We work across the political spectrum to improve the lives of Kansas children through bipartisan advocacy, partnership, and information-sharing on key issues, including early learning and education, health, and economic security for families.

First, we must acknowledge the sentiments that led to this bill. As we're climbing out from a life-changing pandemic after the last three years, we can see the world has witnessed science evolving in real time through the tracking of a brand new virus that has left an adverse impact upon society.

This bill attempts to address concerns about the COVID vaccine, **but we are alarmed that SB 314 could have far-reaching impacts on vaccinations in general.**

First, we are **deeply troubled that passing SB 314 could place the entire required childhood vaccination list in question or in peril**; that is a worst-case scenario from our perspective. As we have seen in proposed SB 20 and SB 315 legislation, those bills take language already in statute regarding the COVID-19 vaccine for businesses, strike the COVID-19 language, and apply it to all vaccines. Any situation that could result in eliminating all vaccine requirements from Kansas for children is a dangerous bridge that must never be crossed. It would jeopardize the health of our communities for decades to come.

Vaccines are safe. They are effective. They protect children's health; they protect the community's health; they protect the health of immunocompromised people; they keep parents in jobs; and they keep vaccine-preventable disease outbreaks from overwhelming our health care system and hurting our communities.

Without vaccines, newborns, the elderly, and those with compromised immune systems are most likely to suffer from vaccine-preventable diseases, including life-altering side effects or even death. And without vaccines, there is a severe economic impact on a community. Parents

miss work, children miss school and child care, and vaccine-preventable disease outbreaks overwhelm our health systems and responses can cost millions of dollars.¹²

Second, Kansas Department of Health and Environment (KDHE) staff are subject matter experts on vaccines and have applied their expertise and competence on the required childhood vaccines list changes over the past several decades. KDHE has rarely updated the required vaccine list in the past, and when the agency has added to the list, great care has been taken to only add vaccines that have been available for many years. **Any childhood vaccination that is approved and added to the required vaccination list has been in use for long periods of time before it is ever made a requirement in Kansas.**

Finally, while we must emphasize, repeatedly, that while the SARS COV-2 virus IS NOT the same as influenza viruses, when it comes to the vaccines, we may be moving into a time where we see a lot of parallels between the annual flu vaccine and the COVID vaccine. **KDHE has never considered including the flu vaccine on the required vaccination list for child care centers or schools.** And KDHE has publicly indicated several times already they do not plan to add the COVID-19 vaccine to the required list.

For the sake of Kansas children and their health, **please vote “NO” on SB 314. The repercussions from passing such a bill are too dangerous to pursue.**

Thank you for the opportunity to share our opposition to SB 314. Please do not hesitate to contact me at heather@kac.org if you have any questions

¹ Pike, J., Leidner, A. J., & Gastañaduy, P. (2020). A review of measles outbreak cost estimates from the United States in the postelimination era (2004–2017): Estimates by perspective and cost type. *Clinical Infectious Diseases*, 71(6): 1568–1576. <https://doi.org/10.1093/cid/ciaa070>

² Pike, J., Melnick, A., Gastañaduy, P., Kay, M., Harbison, J., Leidner, A., Rice, S., Asato, K., Schwartz, L., & DeBolt, C. (2021). Societal costs of a measles outbreak. *Pediatrics*. 147(4). <https://doi.org/10.1542/peds.2020-027037>