**Thesis Statement**

*Vaccination for diseases listed on the Government of British Columbia’s Immunization Schedule for infants and school-aged children should not be mandatory or enforceable.*

**Support**

Vaccination is one part of an overall strategy to minimize the danger that children face from infectious disease. However, there are several reasons why parents may choose not to vaccinate their child. In many cases, the advent of highly effective treatments for most of the childhood diseases may, in their eyes, obviate the need for vaccination. Many parents, when they were children, did not receive vaccines for many of these diseases and were not put in harm’s way. Sickness may happen but most kids get over it. Furthermore, the chances of an adverse event from vaccination is non-zero. The risks may be minimal, but they are there. It is unnecessary to force a parent to vaccinate their child when the ratio of benefit to risk is not obvious to them. If an adverse event were to occur, which is inevitable, the damage to the fight against the anti-vaccine community would be devastating. Instead of bringing parents on to the side of the scientific community willingly, forcing them to vaccinate their child will only prime them to look for a reason to panic. We need education rather than enforcement.

**Opposition**

In 1929, there were over 9,000 cases of diptheria in Canada; after introduction of the vaccine, there was a decline to 38 cases by 1959.1 Vaccines are an evidence-based way to reduce sickness, suffering, and death and as such, should be mandatory in children. Just as parents and guardians can be found legally negligent for withholding care from their children, vaccinations deemed medically necessary should be provided to all children, not left to the decision of caretakers. But, regardless of the benefit at the individual level, the most important outcome for a vaccination program is the maintenance of herd immunity, where a proportion of vaccination in the population protects those who are not able to be vaccinated (the elderly and the immune-compromised, for example). If almost everyone else gets vaccinated, these people remain relatively safe. Thus, anyone who refuses to vaccinate their child puts other children at risk. Putting your own child at risk by not vaccinating them is much different than putting those around them at risk. The decline in vaccination rates in children is a worrying threat to herd immunity. At a population level, the benefit of ensuring high vaccination rates in children supersedes the threat of a potential media backlash after one bad reaction. Importantly, these laws should be accompanied by education, not replace it.

**Response**

The argument that the benefit of vaccination outweighs the risk of adverse events is only true if it is not your child who has an adverse reaction. At a population level, enforcement may make sense. However, at an individual level, forcing parents to do something that puts there child at risk when they do not see an obvious benefit to their child is a recipe for disaster. To be sure, the goal of public health officials should be to improve or maintain vaccination rates and preserve adequate herd immunity. However, to achieve this, the government should be trying to win hearts and minds, not forcing people to get in line and raise their children in a particular way. The number of vaccine hesitant (or outright anti-vaccine) parents is relatively small but the backlash from one adverse event after an enforced vaccine in this community would entrench their position and potentially send more parents to their side. The overall benefit of vaccine enforcement in this low number of parents and children would thus be small and although the risk is low, the implications could be extreme. Parents concerns need to be taken seriously, not ignored with legislation. This has the benefit following the principle that, in a democracy (where possible), we use words, not force, when we disagree with one another. It also avoids the downside of having to figure out what to do in case of non-compliance, which could be expensive and at risk of being enforced inequitably across the population. Overall, the goal should be to have parents *willingly* vaccinate their children — that can only be achieved through education and community outreach.

**Conclusion**

Childhood vaccines were introduced to reduce the risk of disease and death. They are an incontrovertibly effective component of a public health strategy against infectious diseases. The state has it in its power to introduce legislation to force parents to comply with this strategy. However, forcing parents to vaccinate their children, which always comes with risks of adverse events, is a precarious proposal that could put the public’s trust in the public health system at risk. A more reasoned approach is to engage with the fears and concerns some parents have and overcome them. It is more important to build trust among the public than gamble what trust remains by forcing action through legislation. In this case, education trumps enforcement; it is better to shake hands than force them.

1. https://www.canada.ca/en/public-health/services/immunization/vaccine-preventable-diseases/diphtheria/health-professionals.html