

By all accounts, 2018 was a great year for me and my family. We welcomed our first child - a little girl - in February. She came right on the heels of a cousin in January, and was followed by another cousin this past December. All three cousins live in the Portland metro area and our families visit often.

Unfortunately, December 2018 quickly turned into January 2019, when a measles outbreak began in Clark County, Washington. The outbreak subsequently spread to Multnomah County. As of February 25, there are 65 confirmed measles cases in Clark County and another four in Multnomah County. Almost all victims are young children and almost all are unvaccinated. (Those that are not are either partially vaccinated, i.e., 1 of 2 vaccines, or their vaccination status has not been confirmed.) While the outbreak shows signs of slowing, it is far from over - the disease has a 21-day incubation period and can be spread prior to a person displaying symptoms.

Measles is not a benign childhood rash - it has a death rate of 1-2 per 1,000 cases, and although the U.S. has not seen many measles cases in recent decades (thanks to vaccination), one need only look to Ukraine, the Philippines, or Madagascar to see the heartbreak the disease can render. Even among survivors, measles can cause immune amnesia - increased susceptibility to other infectious diseases - years after the measles infection has passed. In addition to the health impacts, a disease like this can have serious costs - Washington state has spent over \$1 million trying to contain the outbreak in Clark County, and that figure does not include the cost of lost school time, lost workdays for parents caring for a sick child, etc.

While my wife and our adult friends and family are vaccinated against the measles virus, most young children are not - children cannot be vaccinated prior to 12 months as the vaccination doesn't generally promote an immune response at that age. And, a single vaccination is only 93% effective - a second dose around age four or five increases that effectiveness to 97%.

To celebrate her first birthday (and Oregon's 160th), my daughter received her MMR (measles-mumps-rubella) vaccine on February 14th. Before that, she had no immunity to the disease and had to rely on others for protection. Her youngest cousin is still in that position, as are countless younger Oregonians and those with compromised immune systems, who rely on "herd immunity" to protect them from dangerous diseases. Those who can get vaccinated must be vaccinated, in order to protect those who cannot.

Throughout Oregon, vaccination rates among school-age populations are frequently too low to ensure herd immunity. Parents can rely on non-medical exemptions to "opt out" of vaccines for entirely spurious reasons: internet rumors, pseudo-science, or a misinformed belief in "alternative medicine." HB 3063 would go a long, long way towards eliminating this sort of opportunism and ensuring vaccination rates high enough to protect young and vulnerable Oregonians.

You will hear a lot of testimony about "medical freedom" or "parental rights" as reasons to deny this bill passage. I would challenge those assertions. My family should have the freedom to travel to public places without fear of exposing our daughter or her young cousins and friends to serious yet entirely preventable diseases. And any parent choosing to exercise his or her "parental rights" must also recognize their parental responsibilities, both towards their own children and others in the community.

Please advance HB 3063 and help keep Oregonians healthy. Thank you.

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