

HB1616: Public Health Impacts of Prohibiting State Vaccine Advertising

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Professor Bутtenheim of nursing and health policy at the University of Pennsylvania: "This is a really, really dangerous moment. Lower vaccination rates means more preventable illness, more hospitalizations, and a higher risk of outbreaks. Expect more outbreaks like the Texas measles outbreak. Communities with patchy coverage are vulnerable to diseases we can actually prevent. "

Reductions in vaccine promotion and public health communication have been associated with **lower vaccination rates and increased disease outbreaks**. Five Examples:

1. Measles Outbreaks in the United States (2014–2023)

- Measles is one of the most contagious diseases known.
- It requires **very high vaccination coverage (approximately 95%)** to prevent outbreaks.
- In multiple U.S. outbreaks (including California, New York, and Minnesota), investigations found that **declines in vaccination uptake**—often linked to misinformation and lack of public health messaging—preceded outbreaks.
- In communities where **public health agencies increased outreach and communication**, outbreaks were brought under control.
- Where public messaging was absent or constrained, outbreaks **lasted longer and spread further**.

Relevance to NH:

Even small reductions in vaccination rates can lead to outbreaks, particularly in schools and childcare settings. NH Childhood Vaccines rates have trended down to 89%.

2. Pertussis (Whooping Cough) Resurgence

- Several states experienced **resurgences of pertussis** after declines in childhood vaccination.
- Public health reviews found that **reduced public awareness** of booster recommendations contributed to falling coverage, especially among adolescents and adults.

Impact Observed

- Increased hospitalizations of infants (who are most vulnerable)

- Higher public health costs due to outbreak response and contact tracing
 - **Relevance to NH:**
Pertussis outbreaks disproportionately affect infants too young to be fully vaccinated, relying on community immunity for protection.
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3. Influenza Vaccination and Public Messaging

- Seasonal influenza vaccination rates are **highly sensitive to public messaging**.
 - During years with strong state and local flu campaigns, vaccination rates increased.
 - During years when messaging was reduced or inconsistent, vaccination rates fell, followed by:
 - Increased hospitalizations
 - Increased deaths, especially among seniors
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4. COVID-19: Communication Gaps and Outcomes

- Areas with **clear, consistent public health messaging** achieved higher vaccination rates and lower hospitalization rates.
- Areas with **limited or constrained public communication** experienced:
 - Greater misinformation
 - Lower uptake
 - Higher strain on healthcare systems

Lesson Learned:

When public agencies cannot communicate directly, **misinformation fills the void**, often faster and louder than factual information.

5. United Kingdom (MMR Vaccine, late 1990s–early 2000s)

- Reduced trust and insufficient counter-messaging led to a drop in measles vaccination.
 - Resulted in **large measles outbreaks** and preventable childhood deaths. Restoration of strong public health communication was required to rebuild coverage.
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When public messaging is removed:

- Health disparities widen
- Outbreaks disproportionately affect vulnerable populations
- Emergency response costs increase

6. Cost Implications

Vaccination is among the **most cost-effective public health interventions**.

Without advertising and education:

- Fewer people vaccinate
- More outbreaks occur
- Costs shift from prevention to:
 - Emergency care
 - Hospitalization
 - Outbreak investigation and containment

Key Takeaways for Policymakers

- Vaccine advertising is not coercion; it is **public education**
- Limiting state communication:
 - Reduces vaccination uptake
 - Increases outbreak risk
 - Raises healthcare costs
 - Allows misinformation to dominate
- Historical evidence consistently shows that **strong public health messaging prevents disease**