January 10, 2022

Dear Senator Claxton, Representative Meyer, and distinguished members of the Joint Standing Committee on Health and Human Services. My name is Kate Bourne. I am a resident of St. George. I am writing in opposition to LD 867: "An Act To Prohibit Mandatory COVID-19 Vaccinations for 5 Years To Allow for Safety Testing and Investigations into Reproductive Harm."

I have worked in global health for the past three decades. From Nigeria to Vietnam to India, I have seen what vaccines can do, and more importantly, what the absence of vaccines leads to: preventable illness and death. Closer to home, I serve as a COVID-19 advisor to my local school here in Maine.

The staff of our school are doing everything they can to keep school operating in the face of rapidly increasing COVID cases affecting both teachers and students. Many are still not vaccinated, and others are immunocompromised. Anxiety is high, and the staff don't know whether they will be able to keep school open through January. The task of protecting both the learning environment and the health of the school community would surely be easier with higher rates of vaccination.

Vaccines are the most thoroughly studied medical intervention that we have ever had, and vaccinations have saved more lives than any public health intervention in history other than clean water and sanitation. During the past year COVID-19 vaccines have been administered to more than half of the world's population. These vaccines have been proven to be incredibly safe and highly effective.

But COVID vaccines have been caught up in the ongoing controversy over routine childhood vaccines in the United States. In recent decades some areas in the U.S. have relaxed their vigilance and expanded exemptions to these vaccines. As a result there have been periodic outbreaks of measles, mumps and whooping cough. 2019 saw 1,282 cases of measles in the U.S., a potentially fatal childhood disease that many pediatricians had never seen, representing the highest number of cases since 1992.

Vaccination requirements have for centuries provoked dissent from a vocal minority who either believe vaccines will cause harm or are benefitting from sowing doubt and confusion. No sooner is one imagined harm debunked -- in the 18th century, it was that vaccination caused people to grow cow parts -- than another is substituted. While the harms are imagined, the deaths that occur from lack of comprehensive vaccination are real.

Despite these naysayers, vaccines and vaccination requirements remain common throughout the world, because they are highly effective in saving lives. Ceasefires have been negotiated in the midst of wars to allow for vaccination campaigns to proceed to benefit both sides. There is currently a resolution being negotiated in the United Nations for a pause in all local hostilities around the world to facilitate vaccination against COVID-19.

Most people, even those who initially refuse, eventually come around and get vaccinated, but often not until they have witnessed people close to them become ill, or even die. As we have seen in recent months with COVID-19, vaccine mandates work to persuade fence-sitters, those who just haven't found time, and many others, to make the effort to get vaccinated. Most people who are slow to be vaccinated are *not* "antivaxxers," but they *do* need a nudge to get vaccinated – mandates provide that nudge.

With SARS CoV-2, we find ourselves facing the greatest health crisis of a century. Thanks to decades of research by committed scientists, and no small amount of luck, the world quickly developed several vaccines, some of which are highly effective in reducing transmission and moderating the severity of disease. Unfortunately, we did not make the best use of these tools, which would have required accelerating production, rapidly sharing our vaccines with the world, and yes, mandating near-universal vaccination. The weakness in our response has allowed the virus to spread, mutate, and re-spread.

Would speedier, more aggressive action have reduced the devastation of the pandemic and allowed us to control it sooner? We will not know for sure, but it merits careful study, as SARS CoV-2 is unlikely to be the last pathogen we face.

We are now faced with the prospect of living for many years with COVID-19. The shape that future takes may well depend in part on whether we have widespread and regular use of vaccination, which will require vaccine mandates for maximum effectiveness.

Public health is up against formidable foes. As described in <u>The Disinformation Dozen</u>, much of the furor around vaccine resistance is mobilized by people who have a strong financial interest and are profiting from selling bogus therapies, generating clicks, or other means of self-promotion.

The people of Maine have already made their views in favor protecting their communities through vaccination clear by overwhelmingly voting NO on Question 1 in 2020. The proposed bill, LD 867 is harmful today, and hobbles us in confronting the challenges to public health in the future.

Please do not support this legislation.

Katherine L Bourne, MPH St. George