

# The National Childhood Vaccine Injury Act of 1986

## The Aftermath

In 1986, when the National Childhood Vaccine Injury Act of 1986 became law, the CDC's Advisory Committee on Immunization Practices (ACIP) recommended that all children receive 23 doses of 7 different vaccines.<sup>1</sup> Currently, ACIP recommends that all children receive 69 doses of 16 different vaccines.<sup>2</sup>

The number of vaccines has more than **doubled**, and doses of each recommended vaccine have **tripled**. Not all these vaccines are currently required for school entry; however, we cannot be certain they won't be added in the future. In fact, many states, including Wisconsin, are actively working on adding additional vaccines to the required schedule for school children.

The National Childhood Vaccine Injury Act of 1986 made the U.S. Health and Human Services Department (HHS) directly responsible for nearly all aspects of vaccine safety. HHS was required to prepare and submit biannual reports to Congress detailing vaccine safety improvements. They failed to do so. Further, according to the 1986 Act, HHS was also mandated to oversee the Task Force on Safer Childhood Vaccines. In 1998, HHS, in violation of the law, disbanded the Task Force and was never held accountable by Congress.<sup>3 4 5</sup>

HHS has also refused to publish a vaccinated vs. unvaccinated study, even retrospectively, to address outstanding vaccine safety concerns. HHS claims that it would be unethical to study health outcomes of fully vaccinated children compared to fully unvaccinated children.<sup>6</sup>

How is it ethical to mandate liability-free pharmaceutical products as a condition of school entry when we don't know if children who receive 69 doses of 16 different vaccines are healthier than children who do not? Considering that over half of all U.S. children suffer from chronic illness, it is not unreasonable for parents to ask that this question be answered – especially when legislators are considering the removal of our right to an exemption from these products.<sup>7</sup>

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<sup>1</sup> CDC. Recommended schedule for active immunization of normal infants and children 1983. (<https://tinyurl.com/hh4jxr3>)

<sup>2</sup> U.S. Centers for Disease Control and Prevention (CDC). Recommended Child and Adolescent Immunization Schedule for Ages 18 or Younger, United States, 2019. Feb. 3, 2020. (<https://tinyurl.com/y69exn4t>)

<sup>3</sup> U.S. Code 42 USC CHAPTER 6A, SUBCHAPTER XIX, Part 2: From Title 42—THE PUBLIC HEALTH AND WELFARE - CHAPTER 6A—PUBLIC HEALTH SERVICE SUBCHAPTER XIX—VACCINES (<https://tinyurl.com/y5d4re7v>)

<sup>4</sup> ICANDECIDE.ORG Stipulated Order Confirming Non-compliance With 42 USC 300AA-27C July 2018 (<https://tinyurl.com/y5tsnz2c>)

<sup>5</sup> ICANDECIDE.ORG Re: HHS Vaccine Safety Responsibilities and Notice Pursuant to 42 U.S.C. § 300aa-31 Dec. 31, 2018 (<https://tinyurl.com/yxemwug3>)

<sup>6</sup> Ibid. Page 59

<sup>7</sup> Bethell CD, Kogan MD, Strickland BS, Schor EL, Robertson J, Newacheck PW. A National and State Profile of Leading Health Problems and Health Care Quality for US Children: Key Insurance Disparities and Across-State Variations. *Academic Pediatrics* May-June 2011; 11(3): S22-S33. (<https://tinyurl.com/y2go5r52>)