

MEASLES (RUBEOLA) VACCINATIONS

Adopted by Convention Delegates May 1990

Reviewed by Board of Managers November 2010

- WHEREAS,** The third Object in the *Objects of PTA* is “To secure adequate laws for the care and protection of children and youth;” and
- WHEREAS,** In early March 1990 the public was informed that the incidence of measles was increasing to epidemic proportions and that during a very short period of time several children had died from the disease; and
- WHEREAS,** Measles is a viral disease with serious complications that can result in death for children and adults, and in miscarriage or spontaneous abortion in pregnant women; and
- WHEREAS,** Measles is preventable through vaccinations and the American Academy of Pediatrics recommends vaccinations be given at age 15 months and at entry into kindergarten or junior high school; and
- WHEREAS,** A significant number of school children would require a “booster dose” vaccination at kindergarten or junior high school entry; and
- WHEREAS,** California law requires a single measles vaccination before a child enters the first grade and, with the funding currently available, public health agencies are only able to provide one vaccination at low cost; now therefore be it
- RESOLVED,** That the California State PTA request the California State Legislature to change current law to require ALL necessary measles vaccinations for all school-aged children and youth, and to provide the funding needed to enable public health agencies to provide low-cost and, where necessary, free vaccinations; and be it further
- RESOLVED,** That the California State PTA, its units, councils and districts inform parents through parent education of the necessity for such vaccinations and assist parents in obtaining vaccinations for all children and youth; and be it further
- RESOLVED,** That the California State PTA, its units, councils and districts insist that school districts comply with the law requiring measles vaccinations; and be it further
- RESOLVED,** That the California State PTA submit this resolution to the National PTA for consideration at the June 1990 National PTA Convention.

* Measles (rubeola) is often a severe disease frequently complicated by middle ear infection or pneumonia. Encephalitis occurs in approximately one of every 1,000 cases; survivors often have permanent brain damage and mental retardation. Death occurs in one of every 1,000 measles cases.

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BACKGROUND SUMMARY

Over the last six months it has become more widely known that California is in the midst of an increase in cases of measles. This is a concern to the community because of the attendant increase in the serious complications of the disease – miscarriages, spontaneous abortions, and death. If the health of our children and youth is to be protected, we must respond immediately to this threat.

This epidemic is occurring even though a simple solution exists – **prevention** – in the form of the measles vaccination. Why then this surge? Many reasons can be given, but the “bottom line” is that not all who should be vaccinated have been. Whether because of ignorance, negligence or cost, parents have not kept their children’s immunizations current.

Current California law states that only a **single** measles vaccination is required to enter the first grade at public school. Because this is a requirement, funding traditionally becomes available so that the public health agencies can provide this inoculation at low cost. The American Academy of Pediatrics now recommends **two** measles vaccinations to be given at age 15 months and either entry into kindergarten or entry into junior high school. This contradiction means that public health agencies, depending on their state of funding, may, and in many cases must, charge the unsubsidized higher rate for the subsequent inoculation.

According to a report issued in August 1989, by the California State Health and Welfare Agency’s Department of Health Services, three things are needed to stem the epidemic.

First, a consensus among the medical community, the public health agencies and the disease control offices about the need and timing of the vaccinations. The report states that this is now accomplished with the American Academy of Pediatrics recommendation becoming universally accepted.

The second need is a commitment for funding for the public health agencies so that they may continue the low-cost measles vaccinations and extend them through the second vaccination as recommended.

Third, a change in the state law to require proof of measles vaccination at 15 months of age and at entry into kindergarten or junior high school. This step would help to open funding sources and force parents to be sure the inoculations were kept current.

These steps should solve the problems of ignorance, negligence, and cost and provide the children and youth of California the protection they deserve.