

Senate Human Services Committee

SB 2384

January 25th, 2023

This testimony is submitted by North Dakota citizen, Kali Bauer, in opposition to SB 2384.

My name is Kali Bauer. I am a born and raised North Dakotan, graduated from the University of North Dakota, and have lived here for almost my entire life. I moved back to North Dakota after living in Minnesota for a couple of years, because North Dakota will always be home. I believe we can all agree that the pandemic in 2020 has greatly impacted us all. It has changed the way we work, learn, and live our lives, still to this day.

SB 2384 focuses on not only prohibiting, but criminalizing, any healthcare professional from providing or administering a vaccine developed using messenger ribonucleic acid, or mRNA, technology. This is clearly targeted towards the COVID-19 vaccine, which is currently the only FDA approved vaccine that uses this technology. However, this bill blatantly ignores ongoing research that could lead to breakthrough treatments for many other medical conditions in the future.

According to the National Library of Medicine and the National Center for Biotechnology Information, mRNA technology could potentially provide global long-term solutions for a vast array of diseases and conditions, ranging from Influenza, RSV, HIV/AIDS, insect-borne viruses such as Zika and Dengue fever, Rabies, Ebola, and pathogens such as E-coli, Salmonella, and Shigella. (See Citation #1). More recently, according to the National Cancer Institute, research has already begun on utilizing mRNA technology for treatments for multiple sclerosis, and immunotherapy for prostate cancer, gastrointestinal cancers, and skin cancers such as melanoma. (See Citation #2)

This bill focuses on criminalizing healthcare professionals for simply doing their job and what they were educated and trained to do, while simultaneously undermining medical research professionals and scientists working for the greater good of humankind – future treatments for already existing diseases.

This bill should not be about our personal beliefs surrounding the current vaccine for COVID-19. No one is forcing anyone to get a vaccine that they do not wish to receive. If a parent does not wish for their child to receive a vaccine of any kind, there is a vaccination waiver that allows them an exemption for doing so, and there are currently no other vaccine mandates in the state of North Dakota. Simply put, no adult is required to receive a vaccine they do not wish to receive, and parents are allowed the option to waive any vaccines if they do not wish for their children to receive them. There is no justification for the overreach in trying to criminalize healthcare professionals for doing an integral part of their job. Regardless of whether or not you agree with any vaccine in question, the choice of receiving it should be left up to an individual and their healthcare provider. It is each and every one of our own responsibilities to ask questions, do the research, assess the risks and benefits, and make our own informed decision on whether or not a vaccine is the right choice for us. I ask this committee, who else is being harmed when someone like myself asks their provider if they can receive a vaccine? It is

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up to us as individuals, who are fully capable of making the best decisions for ourselves and our children, to determine if the perceived risks outweigh the benefits. Who else is harmed if I choose to receive a vaccine? There is currently no other state in the country that has gone as far as trying to impose a penalty on healthcare professionals for an immunization or treatment that is something the individual must opt-in to receive in the first place.

What peer-reviewed scholarly articles are being cited that determine this technology is detrimental in any way and should be criminalized? If it is fear that is motivating this course of action, I implore you to consult experts in the field that can provide statistics and research-backed conclusions, not scare tactics and opinion articles found in today's vast landscape of social media and entertainment news.

One of the biggest sources of misinformation surrounding the COVID-19 vaccination comes from a survey administered by BioMed Central Infectious Diseases, which asked less than 3,000 individuals if they knew someone who had died from the COVID-19 vaccination, without producing any reliable methodology of establishing cause of death. Simply put, these anecdotal testimonies were treated as fact when they were not verified, and this study went viral on social media and is the source of fearmongering phrases such as "the death jab". Since the release of this study, nonpartisan healthcare research experts have condemned this survey as unreliable, and the survey has since been rescinded on their website due to these criticisms of unsubstantiated claims and lack of peer review. (Citation #3 & 4).

According to the Food and Drug Administration and the Center for Disease Control, there is a requirement for healthcare providers to report any death after a vaccination, even if it is unclear if the vaccination was the cause. Of over 668 million doses of the COVID-19 vaccine that were administered from December 14, 2020 to January 26, 2023, only nine deaths were found to have been caused by the Johnson & Johnson/Janssen COVID-19 vaccination. Nine out of 668 million. That's 0.0000001342 percent. (Citation #5). With that being said, my question is this: does this flawed source of fear truly justify the willingness to criminalize scientific and medical progress toward future potential vaccinations?

If you don't want a vaccine, don't get it. It's as simple as that. Exemptions exist. The greater issue with this bill is the problematic criminalization of healthcare professionals, and the blatant disregard for the potential development of future treatments. This bill is not only unnecessary but leads us into dangerous territory by criminalizing healthcare providers trained to help their patients, with zero risk of imposed harm on anyone else should we choose to receive a vaccine, now or in the future.

I urge you to vote in opposition of SB 2384 and continue to allow healthcare professionals to do their jobs, and the citizens of North Dakota to make our own informed decisions about what is right for us as individuals.

- (1) Jain, S., Venkataraman, A., Wechsler, M. E., & Peppas, N. A. (2021). Messenger RNA-based vaccines: Past, present, and future directions in the context of the COVID-19 pandemic. *Advanced drug delivery reviews*, 179, 114000. <https://doi.org/10.1016/j.addr.2021.114000>
- (2) November 15, 2022, November 2, 2022, & October 6, 2022. (n.d.). How mRNA vaccines might help treat cancer. National Cancer Institute. Retrieved January 25, 2023, from <https://www.cancer.gov/news-events/cancer-currents-blog/2022/mrna-vaccines-to-treat-cancer#:~:text=The%20vaccine%20can%20include%20genetic,Bauman>
- (3) Skidmore, M. (2023, January 26). The role of Social Circle Covid-19 illness and vaccination experiences in covid-19 vaccination decisions: An online survey of the United States population - BMC infectious diseases. BioMed Central. Retrieved February 6, 2023, from <https://web.archive.org/web/20230202162148/https://bmcinfectdis.biomedcentral.com/articles/10.1186/s12879-023-07998-3>
- (4) Baseless claim that covid-19 vaccines killed more than 200,000 comes from flawed BMC Infectious Diseases Study. Health Feedback. (2023, February 3). Retrieved February 6, 2023, from <https://healthfeedback.org/claimreview/baseless-claim-covid-19-vaccines-killed-more-than-200000-from-flawed-bmc-infectious-diseases-study/>
- (5) Centers for Disease Control and Prevention. (n.d.). Selected adverse events reported after COVID-19 vaccination. Centers for Disease Control and Prevention. Retrieved February 6, 2023, from <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/safety/adverse-events.html>