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Equal rights for children under the law



Spiritual health care as depicted in Christ and Christmas by Mary Baker Eddy

Church fails to get prayer-fee mandates in health care bills

The Christian Science church lost a big one in Congress this fall despite investing years of groundwork and outlay for lobbyists.

Anticipating a national health insurance mandate, the church placed scores of op-eds in newspapers arguing for “inclusion” of “spiritual health care” in health care plans. Aping medical terminology, the church calls the faith healers “practitioners,” their prayers “treatments,” and the people they pray for their “patients.” The practitioners bill for their prayers. The church was attempting to mandate that insurers reimburse for “treatments” consisting only of prayer.

Church lobbyists told the press that about 300 insurance companies used to reimburse for Christian Science “treatment,” but with the advent of managed care most insurers now require a medical diagnosis before they will pay for health care. The church wants public and private insurers to pay for the prayer treatments without a medical diagnosis.

Its main argument was that the goal of health care reform was to include everyone, and therefore it should provide “all Americans the opportunity to use the method of care that best meets their needs.”

The lobbyists pointed out that “spiritual care” was already reimbursed by Medicare and Medicaid and proclaimed that many “effectively and responsibly” use the “spiritual-care system.”

The arguments were disingenuous on several levels. Medicare and Medicaid do pay for Christian Science “nursing” given in the church’s “sanatoria,” but the church was now asking for public subsidy of the bills their faith healers send for their prayers.

Furthermore, in 1996 CHILD and two U.S. citizens filed a taxpayer suit against the federal government challenging the Medicare/Medicaid payments for Christian Science nursing. The church joined the suit as a defendant-intervenor and insisted that the nursing care being reimbursed by public money was secular rather than “spiritual care.” The payments were upheld by the federal courts on the rationale that the nursing care was secular and “a subset of medical care.” *CHILD v. DeParle*, 212 F.3d 1084 (8th Circuit, 2000).

In July, 2009, the U.S. Senate Health, Education, Labor, and Pensions Committee (HELP) passed its health care reform bill. Senator Orrin Hatch, R-Utah added an amendment requiring insurers participating in “the Gateway” to reimburse charges “for religious or spiritual health care” that the Internal Revenue Service allowed to be deducted as a medical care expense. S.1679 §3103(a)(1)(D)

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Prayer-fee mandate put in House bill

In September we heard that Congressman John Shimkus, R-Illinois, whose district includes a Christian Science college, was sponsoring a similar amendment to the House Energy and Commerce Committee's health care bill.

We called an E&C Democratic staffer and asked if a mandate to pay bills for prayers was being added to the bill. She was startled at the question and was sure it would not be. When we told her we had read that Shimkus was sponsoring such a provision, she said he was in the minority and the Democrats didn't take direction from them.

A few hours later, however, she called us back and sheepishly admitted that the Shimkus amendment was in the bill (HR3200 §125), but that the staff just had not realized that "religious or spiritual health care" included prayers and that people were sending bills for prayers that would be reimbursed under the provision.

Mandates tied to IRS ruling

The provisions in both bills were couched as non-discrimination clauses. The House bill section was titled "PROHIBITION OF DISCRIMINATION IN HEALTH CARE SERVICES BASED ON RELIGIOUS OR SPIRITUAL CONTENT."

The Christian Science church had cleverly tied the reimbursements to religious methods that the IRS allowed to be deducted as medical care expenses. Congressional staffers likely assumed that the IRS had some standards related to effectiveness.

No quality standards; any amount paid primarily to affect body is medical expense

CHILD went into high gear fighting what we dubbed the "prayer-fee mandates." We placed an op-ed in the *Cedar Rapids Gazette* pointing out that the IRS had no quality standards. Since the 1950s the IRS has allowed bills sent by Christian Science practitioners for their prayers to be deducted from federal income tax as medical care expenses. Internal Revenue Ruling 55-261, 1955-1- C.B. 307, held that "any expense paid primarily for the diagnosis, cure, mitigation, treatment, or prevention of disease is allowable as a medical expense deduction" and that "amounts paid primarily for the purpose of affecting some structure or function of the body are allowable as a medical expense deduction."

Providers' qualifications irrelevant

In 2000 the IRS wrote that the "experience, qualification, or title" of the person rendering the services is irrelevant to whether they are allowed as a deductible medical care expense. Whether anyone besides the person paying for the service thinks it is medical is also irrelevant. (Letter from Congressman Tom Latham to Rita Swan, Dec. 15, 2000)

Thus, the only real criterion was that the person paying for the service believes its primary purpose is to heal, prevent, relieve, or diagnose disease. If the customer believed that, then the service was deductible medical care.

"You may not think," we wrote in one of our many letters to Congress, "voodoo or witchdoctors or dancing in the moonlight are medical care, but if the person paying for the service thinks it will cure his disease or even alleviate it, then it is deductible medical care. And it doesn't matter if the provider is a qualified dancer or witchdoctor; it's still deductible."

Special privilege

"It is," we continued "hypocritical for Congress to claim they are trying to prevent 'discrimination' against religion with their provisions in the health care reform bills. Those provisions are a special privilege for religion, not an anti-discrimination measure. The bills do not require the insurance industry to reimburse for everything that unqualified people claim will affect a function or structure of the body, but only religious and spiritual practices."

IRS policy may not have cost the public much money yet because most religious ministers do not send bills for prayer or ritual and because one can deduct only medical care bills that exceed 7.5% of his adjusted gross income in a given year and then only a percentage according to his tax bracket.

Prayer should cost as much as medical treatment

Having the federal government forcing the insurance industry to pay for prayer, however, would have likely encouraged a new cottage industry to spring up. As a Presbyterian minister wrote, the mandates in the federal bills "had 'Welcome, Charlatans' written all over them."

Christian Science founder Mary Baker Eddy directed church "practitioners" to "make their charges for treatment equal to those of reputable

physicians in their respective localities.” (*First Church of Christ, Scientist, and Miscellany*, p. 237)

These practitioners set their own rates, but sometimes their charges are indeed comparable to medical bills. In 1989 Christian Science healer Mario Tosto charged parents \$446 for two days of prayer-treatment for Ian Lundman, an 11-year-old Minnesota boy with diabetes. The boy died.

In Michigan an insurance company balked at paying a Christian Science practitioner’s bill of \$1,775 for prayers on top of medical bills for the patient. The couple sued the company. The company settled out of court. *Stephenson v. State Farm*, 48th Dist. Court, as reported in Michigan Trial Lawyers Association newsletter, October 1986, page 22.

Prayer-fee mandate might preempt abuse laws

Beyond the money, however, CHILD’s main concern was that provisions forcing insurers to pay for prayer and calling prayer and other religious rituals medical care could preempt the states’ child abuse and neglect laws. If federal law called prayers medical care, then parents relying exclusively on prayer might have grounds to claim that they were providing their sick children medical care and therefore not negligent.

American Humane Association, American Professional Society on the Abuse of Children, Every Child Matters Education Fund, and the American Academy of Pediatrics signed on to one of our letters to Congress. Later, the Child Welfare League of America wrote its own letter to Congress against the prayer-fee mandates.

Secular humanist organizations, including Freedom from Religion Foundation, American Atheists, and Secular Coalition for America asked their members to voice their opposition to Congress, and many did so. Americans United for Separation of Church and State met with congressional staffers and watchdogged the committee processes.

CHILD set in motion press coverage that snowballed. *The Los Angeles Times*, *Chicago Tribune*, *Washington Post*, and *New York Times* wrote articles on the mandates that were picked up by many other newspapers. “Should Universal Health Care Cover Faith Healing?,” asked a *TIME* magazine article. Wherever the articles appeared, dozens of readers posted indignant comments.

House removes prayer reimbursements

On October 29 we got the wonderful news from a House staffer that the prayer-fee mandate had been dropped. She wrote, “Your dedication is an inspiration. This is an important issue to our staff, and we’re very glad the provision was finally removed.”

Senators John Kerry, D-Mass., and Orrin Hatch, R-Utah, had offered a “non-discrimination” prayer-fee amendment to the Senate Finance Committee’s health care reform bill. Kerry’s staffer Whitney Smith defended the amendment to the *Los Angeles Times*, claiming that it was not a mandate. We immediately wrote her pointing out that it said in plain English that the insurer could not deny benefits for “religious or spiritual health care” that are recognized as deductible by the IRS.

With the gathering storm of protest, the Senate Finance Committee voted out its bill without the Kerry-Hatch amendment.

That left a prayer-fee amendment only in the HELP Committee’s bill. Iowa Senator Tom Harkin had become its chair after Ted Kennedy’s death, so I made several trips to Harkin’s local office.

11,000 e-mails & \$150,000 for outside lobbyists

The Christian Science church asked every member to write an e-mail to Senators Chris Dodd, D-CT, Max Baucus, D-MT, and Harry Reid, D-NV, who had to merge the two Senate committee bills into one. The church provided a sample letter claiming that the member had found Christian Science to be “an effective form of health care” and insurers must be prohibited from “discriminat[ing] against religious or spiritual health care.” The church delivered 11,000 e-mails to the Senators.

The church also paid the Mayer Brown law firm in Washington \$150,000 to lobby for the prayer-fee mandates in 2009.

Only evidence-based care should be reimbursed

We kept up our letters to the health care staffers of Dodd, Baucus, and Reid. Here’s an excerpt from one:

We believe Congress should have held hearings on the effectiveness of “religious or spiritual health care” before mandating that insurers and the public pay for it. We have members who are disabled because of their parents’ religious

beliefs against medical care. One member recently had to have her leg amputated after decades of suffering caused by osteomyelitis that went untreated because of her parents' Christian Science beliefs.

It is quite offensive to many of us that we should have to help pay for Christian Science prayer treatments.

We wish the government would confine its mandates upon the insurance industry and its public option coverage to evidence-based health care. The government should not be promoting, subsidizing, or mandating reimbursements for prayers.

We made sure that Reid's staffers saw the *Las Vegas Review Journal's* editorial against the prayer-fee mandates (Nov. 9) and that Dodd's staffers saw the *Boston Globe's* eloquent protest against a bill that mandated payment for prayer and still left millions without coverage for basic medical care. (Nov. 27)

Senate drops prayer-fee reimbursements

In December the merged Senate health care bill appeared. The prayer-fee mandate in the HELP Committee bill was not in the merged bill.

Thousands of amendments were filed as the bill went to the floor. Our special thanks to Cindy Pellegrini of the American Academy of Pediatrics who carefully combed through the amendments and the gargantuan bill to determine that it had no reimbursement for "religious or spiritual health care." The bill passed the Senate just before Christmas with no reference to faith-based health care.

The church blamed the removal of its prayer-fee mandate "on vehement and often misleading opposition voiced by a longtime critic of Christian Science as well as a coalition of atheist groups opposed to the notion of anything religious in law." *San Jose Mercury News*, Jan. 6, 2010

Church disclaims responsibilities to children

The mandate certainly stuck in the craw of the Swan family. In 1980 we filed the first wrongful death suit against the Christian Science church and its practitioners. Our complaint charged that they had breached duties they owed to Matthew and us.

Top church officials strenuously denied having any kind of a health care system or the responsibilities that go with it. They swore under oath that the church has no "supervisory control" over its practitioners, that it does not "ever evaluate a practitioner's judgment about the condition of sick children," that it has no training, workshops or meetings for practitioners that "include any discussion on how to evaluate the seriousness of a child's condition," that it has never "named the death of a child as a grounds for revoking a practitioner's listing," and that it keeps no records on children who die while receiving Christian Science treatments.

But in 2009 the church spread the word throughout the land that they had a spiritual health care system that the government should mandate reimbursements for. This time they lost.

Sources include: depositions of Hal Friesen, Ruth Jenks, and A. Dean Joki in case #80 004 605 NI, Wayne County Circuit Court, Detroit, and Rita Swan, "Does one bizarre health care policy merit another?," *Cedar Rapids Gazette*, Oct. 18, 2009.

Court upholds mandatory immunizations; CHILD filed amicus brief

In November the U.S. District Court for the Southern District of West Virginia dismissed a lawsuit brought by a parent seeking a religious exemption from immunizations and thus upheld the state's right to require them over parents' religious objections.

West Virginia and Mississippi are the only states that do not allow religious exemptions from immunizations of schoolchildren.

Frightened parent gets medical exemption

They do allow medical exemptions, so when Jennifer Workman wanted to enroll her daughter, identified in court as MW, in a Lenore, West Virginia, pre-kindergarten program, she obtained a medical exemption from Dr. John MacCallum, a child psychiatrist.

Workman's older daughter SW has been diagnosed with "pervasive developmental disorder" and severe sleep disorder. MW also has language

delays. Workman's fears that vaccination would harm MW were the original basis of her objection.

The Mingo County health officer accepted the exemption signed "by a reputable physician," and MW was enrolled in the pre-kindergarten program in 2007. But a school nurse challenged it, so the superintendent asked the West Virginia Department of Health and Human Resources for guidance in maintaining a consistent, fair policy.

Health Dept. denies exemption requests

Acting Department Head Dr. Cathy Slemph responded that the American Academy of Pediatrics, American Academy of Family Physicians, and the Advisory Committee for Immunization Practices do not consider a sibling's autism or language delays to be a contraindication for vaccination and that the Department relies on their guidance to "assure our evaluations are based on current standards of current scientific knowledge." Slemph recommended denying the exemption out of concern both for MW and for the other schoolchildren. State law makes the Department the final authority on whether to accept an application for a medical exemption. The school then asked Workman to remove her daughter from school.

In 2008 Workman enrolled her MW in Head-start, which accepted the request for a medical exemption signed by Dr. MacCallum, but the Lenore school system again rejected it when she tried to enroll MW in kindergarten.

Child enrolled in state that allows religious exemptions

Documents show that Workman then enrolled MW in a Kentucky kindergarten with a religious exemption from immunizations. Workman, however, says that she home-schooled MW.

In April, 2009, Workman filed suit against the Mingo County Board of Education and the state health department, claiming both a First Amendment religious freedom right to decline immunizations and charging that the denial of her medical exemption application was arbitrary and capricious.

Bible cited for religious opposition to vaccines

Workman reportedly belongs to the Baptist Church, Victory Christian. In deposition, she cited two bible verses as the basis of her religious beliefs

against vaccinations. One said, "Your body is the temple of the Holy Spirit. . . , which you have of God and you are not your own." I Corinthians 6:19. The other said that God will destroy any man who defiles His holy temple. I Cor. 3:17.

She also cited bible verses entrusting parents with the obligation to care for their children and testified that it was her religious duty to seek a medical "specialist" on vaccines and to follow his advice.

Her religious beliefs became rather muddled in deposition questioning as she conceded that her beliefs did not require her to follow the advice of her child's regular doctors, but only that of the psychiatrist, who she believed was "more educated" on vaccines.

How did she determine he was "a specialist" on vaccines? From talking to him, she replied.

She did not submit evidence contesting the safety or efficacy of vaccines and filed a motion for suppression of the defendants' medical testimony on the grounds that "medical issues are irrelevant."

CHILD's amicus brief

CHILD filed an amicus brief in support of mandatory immunizations. It was prepared by Professor James Dwyer of William and Mary College of Law. (See our webpage at www.childrenshealthcare.org.) It is the third amicus brief Jim has done for CHILD *pro bono*, and we are very grateful to him. We also thank the Hamstead and Associates firm of Martinsburg, West Virginia, for filing the brief and getting Jim admitted *pro hac vice* to practice in the state.

Outbreaks among religious objectors posted

CHILD compiled a list of outbreaks of vaccine-preventable disease among children with religious or philosophical exemptions from immunizations and posted it on our webpage. It was used in an affidavit by one of the county's expert witnesses.

We were also pleased to have these organizations co-signing our brief: the West Virginia Chapter of the American Academy of Pediatrics, Center for Rural Health Development, West Virginia Association of Local Health Departments, and Voices for Vaccines.

Federal court upholds state law

The court cited a wealth of case law for its holding that parents do not have a First Amendment

right to enroll an unimmunized child in school. It also rejected Workman's claim that her equal protection rights were violated because she was not allowed to follow her religious beliefs while others with children in school were able to follow theirs. The immunization law is neutral; it does not discriminate against any religion.

Workman was represented by Patricia Finn whose firm specializes in defending First Amendment rights and particularly persons who have religious objections to vaccines. Finn plans to appeal the ruling.

The ruling will be available as *Workman v. Mingo County Schools*, ___ F. Supp. 2d ___, S.D.W.Va. No. 2:09-CV-00325 (Nov. 3, 2009).

West Virginia vs. Iowa

In the Workman case described above, West Virginia not only defended its right to require immunizations without exception for religious belief, but also showed that irrational fear is not a sufficient basis for a medical exemption.

Given the fear of vaccines today, there may be many parents who get medical exemptions from immunizations without a medical basis for them. Furthermore, in most of the 48 states with religious exemptions, it is easy to claim religious beliefs against vaccines, and the state does not have the right to ask probing questions challenging the sincerity of a person's religious beliefs. Chiropractors, for example, are commonly opposed to vaccines on non-religious grounds, but they can join the Universal Life Church, which has whatever beliefs any member wants, and then claim a religious objection.

State defends immunization law in legislature

Bills providing a religious exemption have been introduced in several West Virginia legislative sessions by politicians arguing that West Virginia should be like the other 48 states. The Department of Health responds that maybe West Virginia is the one doing it right and cites the data on reduction of once common deadly diseases because of vaccines.

It would have been easy for West Virginia to accept Ms. Workman's application for a medical exemption signed by a medical doctor. But child advocates and agency administrators did not hesi-

tate. They felt strongly that the state law and policy were in the best interest of children. It was a joy to support them with the amicus brief.

West Virginia's immunization program and Iowa's metabolic screening program are in glaring contrast. Iowa's screening program administrators seem to feel the fewer requirements the state places on parents, the better.

Iowa lets all parents refuse health screenings

Iowa law states that "all newborns born in this state shall be screened for congenital and inherited disorders in accordance with rules adopted by the department," but two sentences later says the law "does not apply if a parent objects to the screening." Iowa Code 136A.5

Iowa Department of Public Health administrative rules likewise proclaim a "policy" that "all newborns and infants born in the state of Iowa shall be screened for all congenital and inherited disorders" specified by the state board of health. Admin. Rules 641-4.3(1)(a) And likewise, with no irony or transition, the rules go on to allow all parents to refuse the screening for religious reasons or no reason at all. Rules 641.4.3(2)

Wish is not policy

CHILD has told IDPH administrators that they don't have a policy of screening all newborns. They may have a wish, but not a policy. They are not, however, interested in semantic niceties.

Also bad in CHILD's view is that last year the IDPH did away with a requirement that the parents object to the screening in writing.

The IDPH does require that a hospital or attending health care provider document the refusal in the infant's medical record and notify the central laboratory of it.

Number of babies without screening rises

Iowa has made it very easy for parents to refuse metabolic screening, and it is hardly surprising that the number of babies who don't get screened for metabolic diseases is increasing. Last year there were 79 babies born in Iowa whose parents refused the screening—79 that we know of, that is.

Measles at Principia: the view from Public Health

The Christian Science church always proclaims that its members cooperate with public health officials and obey state laws. There are, however, limits to the cooperation of people who believe there is no life, truth, intelligence, or substance in matter. This is sharply illustrated in an essay by Charles Jennings, an Illinois Department of Public Health official in the 1980s, which appears in a new book entitled *Outbreak Investigations Around the World*.

On February 13, 1985, a school nurse called him with a rumor of a 17-year-old female [Charlotte Bertleson], who died at a hospital in Alton, Illinois, with a suspected rash. The hospital confirmed that she had died on February 5th with severe dehydration and a very high temperature of 107° F. The hospital had suspected measles, but had not reported it as required by law. No autopsy was done, and the funeral home director did not even know she was a Principia student before he cremated the body.



Principia chapel

Later that day Jennings received a call from a “nurse” at Principia College located in Elsah, Illinois, about 12 miles from Alton and the only college for Christian Scientists in the world. She told him she wanted to comply with the law and to report six students currently in the college sick room with

measles. She also said that she had previously reported cases to the Jersey County Health Department but had not received any feedback.

Nurse explains her skill level

He asked how she could confirm measles; she said from a picture in a book. She said all cases felt warm and had a rash similar to the picture. She ex-

plained that as a Christian Science nurse “she cannot take temperatures or blood pressure measurements or provide any care other than to make the person comfortable, assist with drinking and eating, and guess what something is from textbooks.”

Jennings asked about the 17-year-old female who had died. She confirmed that the girl was a Principia student and had been in the sick room. Later though [reportedly after the girl lapsed into a coma], the family chose to remove her from Christian Science care and seek medical attention.

Jennings left immediately for Principia to begin investigating.

New case definition; limited access to students

The Centers for Disease Control and Prevention has a case definition of measles as a 3-day rash + fever + one of these: cough, coryza, conjunctivitis, and photophobia. Because the Christian Science nurses could not recognize most of those conditions or take temperatures, Jennings and the Jersey County Health Dept. modified the CDC case definition to a rash and feeling warm.

The only entrance to the college is guarded around the clock. Jennings and county health officials were escorted from the entrance gate to meet college administrators and the Illinois manager for church lobbying and public relations.

Jennings requested access to the campus so he could determine whether a measles outbreak was occurring and, if so, could then offer clinics for vaccinating students, staff, and families. The Christian Scientists said they would obey the laws of the land but also strive to practice their religion.

Jennings continues,

“To my amazement, there were currently 16 students who had a rash and felt warm in the sick room facility. There was no attempt at isolation of these rash illness cases, and thus, these students in the sick room were sharing common space with other ill students. Being the first part of February, it was my opinion (as I also was responsible for influenza surveillance for the state of Illinois) that influenza was also circulating on campus as well as in the community and this region of the state. The girl that had died was in the sick room at the same time as others with influenza-like symptoms. If someone who was debilitated with one disease should

become infected with another disease, the outcome could be more severe than would normally occur. In fact, the 17-year-old that died was in the sick room with influenza-like illness while incubating measles.”

No real quarantine

“Over the next 6 days my investigation continued. On the second day after arriving at the sick room, the building was surrounded by students singing and praying for those in the sick room. On the same day, the college agreed to close the campus, not allowing people to enter or leave without some proof of previous vaccination. This, I thought at the time, was actually a huge step, for I had been told the day before that as Christian Scientists they do not believe in medical care or immunizations. They did, however, only tell the students that if they had a vaccination record at home they could have someone send it to them but would not agree to making these a part of the student’s file. We learned later that this ‘quarantine’ of the campus was not enforced to any extent, as sports teams, visiting families, and other groups were allowed to enter and leave the campus freely. Students also knew how to sneak their way off campus through the fence. Serious isolation and quarantine would come later as the outbreak became more serious. Suspected measles cases and those considered susceptible (persons with no history of immunity from past disease or vaccine) need to be isolated from the outbreak for up to 21 days after the onset of rash of the last known case. Measles is a highly communicable virus and is spread by respiratory droplets so that strict airborne isolation is necessary; however, their restrictions on access did not apply to families of staff attending school at Principia College’s grade school and high school across the river in Missouri.”

Students talked out of allowing blood draws

“Our access to ill students was limited. Although college officials stated that we could have all of the access we needed, we were always escorted by school officials, and they were always present during any interview. One of my goals was to be able to draw blood for measles specific IgM, for confirmation that measles was occurring. When a student would agree to let me draw blood, he or she

eventually would change his or her mind after talking with a school official. I even suggested obtaining throat swabs for viral isolation, as this would be less invasive to the body, but this too was denied. By the third day, school officials were visiting each student before I was allowed to talk to them.”

Reading and neck rubbing

“The Christian Scientist nurses were as helpful as possible. They explained to me that if a Christian Scientist is ill, it is because their thoughts and minds are not right with God. While a student is in the sick room, a Christian Scientist reader will come and sit with them for hours reading to them from the bible and from the literature of Mary Baker Eddy, the founder of the Church of Christ, Scientist. They explained that with the girl that died they would read to her and rub her neck to get her to swallow water. When the family decided to put her in the hospital, all Christian Science spiritual assistance stopped. Above the Christian Scientist nurse is the Christian Scientist practitioner (considered the ‘doctor’ of Christian Science). An ill person can hire the practitioner to provide the spiritual care to get the person’s mind right with God; however, that spiritual help ends when a person chooses medical care.”

“What rash?,” students say to new friend

“The interviews that I conducted with the ill students typically went like this. The school official would introduce me as a new friend here to meet them who would like to talk to them about their being here in the sick room. I would then attempt to do an epi-investigation; however, many factors would hamper the collection of good data. I asked, ‘How long have you had this rash?’ The answer more often than not would be, ‘What rash?’ I came to learn as the investigation progressed that the students would drape towels over their mirrors so that they would not see the rash, as being ill meant their mind was not right with God. Denial of symptoms seemed to be the norm. If they didn’t see it, they didn’t have it.”

Did boy die of accident or measles?

“It was also on the third day of investigation that I was told by college officials that a 19-year-old male student [Scott Shedrick] had died, but it turned out that he had not been included among the stu-

dents I had interviewed, which further led me to believe I was not being told everything and/or not being told of all suspected cases. This student who died had been found unresponsive in the bathroom of his dorm, and CPR was attempted to revive him. I immediately asked why CPR was attempted on him when medical care is generally not allowed. I was told that this student while being read to went into the bathroom and fell and hit his head, and thus, it was considered an accident and not because of any illness. I was further told that when an accident happens (i.e., a sports injury) that first aid is appropriate. This was confusing to me because the investigation showed this young man to have met the case definition, and an autopsy showed massive Gram-negative bronchopneumonia.”

Ill children moved from house to house

“As we attempted to make home visits to interview ill family members, we would see evidence of ill persons in the home (such as bowls out in the open, probably used for vomiting); however, it was believed that ill children were being moved from house to house ahead of our team. We believed this because not all of the children could be found when visiting homes. Some families would tell us of sick children in other homes, but having to make “appointments” to visit the homes, we would find that the suspected case would be visiting friends or relatives at another location.”

After weeks of trying to get a blood draw and always being refused, Jennings and his team got one from Scott Shedrick’s sister, who had contracted measles after visiting her brother. She chose medical treatment because she was not a Christian Scientist or a Principia student. She provided an acute-phase IgM measles-specific serum specimen—at last giving Public Health confirmation that there really was an outbreak of rubeola measles.

News blackout backfires

The college told Jennings they didn’t want any press coverage, and Jennings agreed not to talk to the press. But after the outbreak leaked to the press, Jennings writes, “It became a full time job just trying to respond to them. My hotel was 12 miles from the campus. On one morning, I actually had two cars and one helicopter follow me to the campus. The news media set up camp outside the gate

and helicopters even attempted to land on campus.”

Jennings suggested the college hold a news conference on campus, “where they could control what was presented.” The college asked him to take the lead. He presented the facts honestly and after that the press was satisfied with daily updates and left Public Health alone to do their work.

Bereaved dad wishes he had understood vaccines

One evening Jennings visited Shedrick’s sister in the hospital. Her father was in town to make arrangements for his son’s body. Jennings sat and talked with him for several hours.

Jennings writes,

“We talked about many things, but I took the opportunity to explain measles and how vaccine can prevent illness. I explained how I needed to get the college to accept vaccine. After he and I shared a tearful 2 hours, he stated that he wished he knew the things we talked about before he lost his son. He asked me whether other parents really knew what was going on, to which I said I could not answer that because the college controlled the communication with the parents.”

CS parents demand vaccine clinics on campus

“That night I received a phone call at my hotel from the dean of students asking me how quickly could I offer vaccine on campus. He also stated that a 16-year-old female [Jennifer Evans], the daughter of a faculty member, had now died too (another case we knew nothing about!). Without showing just how excited I was, I said we could have a clinic set up by 8:30 a.m. the next day. I learned later that the father to whom I had explained the public health facts about measles, along with many other parents, had put pressure on the college. [The dean] had contacted us to allow us to do whatever was necessary to control the outbreak.”

After third death college wants vaccine clinics set up immediately

On February 27 the *Alton Telegraph* had quoted the dean as saying that none of the 75 children living at the college who attend the Principia K-12 schools in St. Louis had contracted measles and that they were being isolated from the college students.

At 7:50 p.m. on Friday, March 1, however, one of those 75 children died, and a few hours later the

dean called Jennings giving permission for vaccination on the college campus.

By 8:30 a.m. Saturday morning, staff members from the Illinois Department of Public Health and the Jersey County Health Department had set up a vaccination clinic on campus and vaccinated 403 students, staff, and families that day. Fifty students who refused vaccination were quarantined on campus for several weeks, and this quarantine was strictly enforced.

As an inducement to vaccination, Jennings promised that all vaccinated persons could immediately have access off campus with no further restrictions (including going home during spring break). He realized that some who received vaccine could still be incubating disease but felt this compromise was necessary to encourage participation. Fortunately, only one person who received the vaccine developed a rash within 7 days of being vaccinated.

College allows medical exams of minors under threat of child abuse charges; medical care for dogs is o.k.

“At about this same time,” Jennings writes, “I received a call from the Illinois Department of Children and Family Services. They were concerned about a number of complaints that there may be children in this community that were ill and not receiving appropriate health care. They were consulting with me about the possibility of filing child abuse charges against parents and even the college. I approached the college administration to let them know what this state agency wanted to do. I offered that I could encourage the department to not pursue the issue if the college would allow us the opportunity to have all ill persons be examined by a physician of our choice. Dr. Wassilak [from the CDC] was chosen to do this, as he had developed a strong relationship with the college administrators; however, the college stipulated that he examine only minor children. One of the minor children that Dr. Wassilak examined, a 12-year-old female, was the sister of the 16-year-old female who had recently died. The parents agreed to allow the ill child to be examined; however, the parents stated that they were only agreeing to the exam because of the agreement we had with the college. They made it very clear that no further medical care was to occur, no matter what Dr. Wassilak determined. . . .

While the exam was being conducted, a little dog was running around the house. The mother of the girl being examined stated that the poor little dog had been sick that day and that they had just taken it to the vet. With a great deal of surprise I had to ask how they were able to seek medical care for the dog but would refuse it for their children. I was told that the dog is not able to think for itself and that it does not have the thought processes as the humans do, and thus, they need to make the decision for the dog. Humans are capable of thinking and that God has given every person the chance to keep their minds right with God or be punished with an illness.”

High attack rate and case fatality ratio

Before it was finally controlled, the outbreak at Principia was sustained for six generations of cases with 125 cases among the 714 students and 121 staff and resident family members (overall attack rate of 15.0%). Principia’s case fatality ratio was 2.2% while the U.S. case fatality ratio was less than 0.01 % at the time.

The CDC’s Dr. Walter Ornstein said those were the kind of mortality statistics we see in the developing world. He pointed out that only three deaths due to measles had been reported in the entire United States during the previous three years.

Even though the college campus is isolated from the village of Elsah, 11 people not associated with the college or related to anyone on campus contracted measles after being exposed by members of the college community.

247 cases nine years later

In 1994 another measles outbreak occurred at the Principia College and K-12 schools. Jennings found the same family names involved with that outbreak as in the 1985 outbreak. This time he went directly to the parents of the students, as he found that often only one parent was a Christian Scientist and the non-Christian Science parent would always be cooperative. The college enforced strict isolation and quarantine and allowed students’ immunization records to be put in their student files, which helped Jennings determine who was immune.

Jennings felt the 1994 measles cases at the college in Illinois were handled efficiently, but most of the cases in that outbreak were at the Principia K-12

schools in Missouri. Measles spread from the Christian Science school into the St. Louis public schools and infected many non-Christian Science children. There were a total of 247 cases of measles in that outbreak, which remains the nation's largest since 1992. It cost St. Louis County more than \$100,000 to manage. There were no deaths.

Comment

On March 6, 1985, the Illinois Department of Public Health wrote Principia College President John Boyman expressing his “appreciation for the cooperation and support that you have provided to the Jersey County Health Department and the Illinois Department of Public Health.”

The church thrives on that sort of compliment, bolstering their image of Christian Scientists as respectable, law-abiding citizens.

The real purpose of Public Health's letter, however, was to increase the likelihood that the college would keep their verbal agreement by putting it in writing. While scrupulously fair in tone and substance, Jennings' essay makes clear that in many important respects the college community was uncooperative and even dishonest.

The students' refusal (under the guidance of college administrators) to allow blood draws allowed the church and college to tell the media for many days that health officials had not linked student deaths to measles.

The college's refusal to put any vaccine records in the students' files kept Public Health from determining who was immune.

With their willful, self-imposed ignorance, college officials claimed that Shedrick and Evans had been at least temporarily healed by Christian Science. “Good progress was made, but [Scott] suddenly took a turn for the worse,” Boyman said.

“We thought he was beyond the measles, and he was improving,” said the dean.

After Evans' death, the dean also claimed that she had recovered from the measles by Christian Science treatment.

A few hours after Public Health officials finally got confirmation of measles, the Christian Scientists shifted gears and claimed the cause of death was irrelevant to them. “Whether there is a connection with the measles or not, these tragic events are troublesome,” Boyman said. “We are learning, as many

medical people recognize, that the contagion of fear is as much a factor as anything else.”

Charlotte Bertelson's mother was the stereotypical passive-aggressive Christian Scientist, complaining to the press that she was forced to get medical treatment for her daughter because of “almost irrational” prejudice against Christian Science, that her constitutional rights were violated, the law didn't “allow us to work it out” spiritually, the antibiotics might have caused the girl's death, but that nevertheless the doctors were loving and kind—doing the best they know how, as Christian Scientists often patronizingly say.

The Jersey County Health Department was later penalized during health department accreditation hearings for not investigating when Principia first reported “a rash illness” on January 18. The county's public health nurse told CHILD, however, that the report was so vague that she had no reason to suspect measles. The Christian Science nurses did not take the students' temperature, feel their enlarged lymph nodes, or report the Koplik spots that would have alerted county health officers to measles. “A rash illness” could have been roseola, Dukes disease, pityriasis, etc.

After the death of Charlotte Bertelson in February, the Principia “nurse” may have gotten alarmed that the Jersey County Health Department did not step in to save the Christian Scientists from their own craziness. She had already been law-abiding and reported to the county, but on February 13 she reported to the Illinois Department of Public Health in Springfield, again on the pretext that she was doing so only to be law-abiding.

Not much has changed in the 25 years since that deadly outbreak of measles. There have been three non-fatal measles outbreaks at the Principia schools and at least two at Christian Science camps since then. The church still claims that outbreaks are caused by “mental contagion” rather than viruses.

The quotations from Charles Jennings' article, “Measles among religiously exempt persons” are used with permission. The article appears in Mark Dworkin, ed., *Outbreak Investigations Around the World* (Sudbury, Mass: Jones and Bartlett, 2010). Sources also include *Alton Evening Telegraph*, Mar. 4, 1985; *St. Louis Post-Dispatch*, Feb. 27 and Mar. 5, 1985; and *Omaha World-Herald*, Feb. 28, 1985.

Ireland learns about Matthew Swan



As most readers know, my husband Doug and I were Christian Scientists and lost our only son Matthew in 1977 because of trusting Christian Science practitioners for healing. We left the church right after his death.

Over the next 18 months I wrote a 50-page manuscript about that experience. I sent it out to a few magazines but was soon consumed with television coverage instead and people writing about us. So my manuscript stayed in a file drawer.

Last summer our daughter Marsha asked to read it. Some weeks later, to my astonishment, she told me she had edited it and sent it to the *Dublin Review*, which wanted to publish it.

I agreed, and I must say it was a meaningful mother-daughter experience. Marsha and the *Dublin Review* editor posed probing questions that stretched my understanding. I enjoyed seeing Marsha's prowess as an editor, and she gained a deeper understanding of what her parents had been through before she was born.

My article is titled "Matthew, you cannot be sick," and appears in the winter 2009-2010 issue of the *Dublin Review*. The issue can be ordered at www.thedublinreview.com. CHILD's webpage at www.childrenshealthcare.org has *The Irish Times's* review of the article.

The fifth phone call

In 1979 Doug and I appeared on *Phil Donahue's* television program and told about the loss of our son when we were Christian Scientists. We received over 600 letters. Many people also reached me by phone at Jamestown College where I was teaching.

One day a distraught young woman called and spoke to me anonymously. She was a Christian Scientist who feared that her daughter would be crippled for life because she had waited too long to get medical attention.

Her husband was not a Christian Scientist, and she said regretfully, "I always thought he wouldn't let it go too far." Unfortunately, he let his wife continue relying exclusively on Christian Science, and when they finally did get surgery, the physician told them that the daughter's condition could not be completely corrected.

She called me four times that day from pay phones.

Thirty years later she called me again. This time she gave me her name. She is still a Christian Scientist, but said her daughter's handicap grieves her more than it does anyone else. The daughter is happily married and an educated, professional woman. She tries to assuage her mother's guilt, saying "I think my operation turned out good."

"But I can see. . .," the mom told me, and then choked up, unable to finish the sentence.

She talked about what the Christian Science practitioner told her at the time, how it seemed wrong to her, questions she had raised with church officials since. She was sincerely concerned for how we could cope with the loss of our son.

We talked for ninety minutes, and it seemed like a comfortable, supportive conversation between two mothers with neither of us hurting the others' feelings or challenging the others' beliefs.

But then she asked the \$64 question—does Christian Science work? I told her I didn't believe Christian Science ever heals disease—that its claimed healings are only the body's natural mechanisms for healing itself, that the believers' self-diagnoses are often inaccurate, and that even the small fraction of testimonials that claim a medical doctor's diagnosis do not have medical records with them, so we can't see whether testifiers are reporting the medical diagnosis correctly.

Instantly, the comfort level between us dropped with a thud; she could not go there with me. She had only mechanical politeness left and quickly hung up.

So many religions have a realm that cannot be challenged or rationally evaluated. For the Christian Scientists, it is their healings.