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Throughout the United States, infant vaccination continues to be a highly controversial and pressured decision that parents must face upon their child's birth. In order to maintain complete objectivity, multiple viewpoints must be critically analyzed and explored in an unbiased manner; therefore, I will examine the positives and negatives regarding adolescent vaccinations, provide general viewpoints and solutions to the debate about which infants should receive vaccinations, and supply the data required to support the arguments relevant to each side. The first viewpoint suggests that infant vaccinations should be heavily regulated due to alleged medical ramifications and adverse side effects. Many Americans support this ideology, including parents and various physicians who firmly believe that infant vaccinations induce medical complications instead of preventing them. The second viewpoint is known as selective vaccination, which is supported by most American parents and various doctors, who affirm that parents deserve the right of authority over their child because the child's best interest trumps obligatory immunization. The third viewpoint suggests that some U. S. parents and medical professionals advocate mandatory vaccination in order to protect infants from illnesses; thus, ultimately striving for widespread public health. Infant vaccinations should be heavily regulated due to alleged medical ramifications. Parents whose infants have suffered from an alleged adverse vaccination side effect affirm vaccines lead to medical complications, and therefore the parents should become thoroughly educated on the procedure, regulate the quantity, and refuse to put their

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infant in harms way. Haugen and Musser (2012) suggest that citizens required to vaccinate their children are forcefully putting their children at risk of possibly developing certain syndromes, disorders, and diseases. When Haugen and Musser (2012) state, " vaccines are being overused, resulting in more cases of autism, attention deficit hyperactivity disorder, and other neurological problems in children", they are claiming that higher quantities of vaccines being administered results in more infants developing adverse medical complications. If more parents educate themselves on the health consequences vaccinations might cause their child, then perhaps parents will critically analyze the importance of the vaccines. According to Haugen and Musser (2012), understanding the health risks before vaccinating an infant will raise awareness in parents, will protect children who don't medically qualify, and will contribute to reducing debilitating health disorders. When they noted that parents are " mobilizing against the state policy" (Haugen & Musser, 2012), they imply that many citizens will not be compliant with the mandatory policy of immunization, will congregate together, and will petition the policy to have it reversed. If parents extensively research the vaccination process, some of them will have a better understanding and will be able to make an educated decision for their child's health. While Haugen and Musser (2012) rely on logic to support their claims, others rely on data to restate the importance of understanding the vaccination process and differentials. In his expert testimony, Dr. Jack Rabin (2012) acknowledges how autism has not been directly linked to vaccines; however, he proposes that the amount of vaccinations administered to children has astoundingly increased, which should be extensively analyzed and administered in increments over time.

When Rabin (2012) notes that 60 years ago " doctors gave only eight
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vaccinations to infants five to six months old, and now there are 29 vaccinations given at birth", he asserts that vaccinations are being administered far more frequently and in much higher quantities. If vaccinations are administered accordingly to an infant's medical prognosis regarding the antidote, then the high quantity of vaccines given might decrease because fewer infants will respond positively to the immunization. According to Rabin (2012), the quantity of vaccinations required for infants have raised more than three and one half times the requirements from 60 years ago, and the amount keeps steadily increasing. When Rabin (2012) explains how "vaccine moderation needs to be advocated to protect children", he uses his statistical data to acknowledge the major increase in vaccines, to inform parents of the increase in risk infants face from being vaccinated, and to advocate an increase of time-delay to administer the drugs after an infant's birth. If a vaccination 'interval plan' was made available and designed accordingly to an infant's prognosis, instead of a 'cocktail' of 29 combined injections given at birth; subsequently, less infants would have adverse side effects, more parents would feel comfortable with vaccinations, and public health as a whole would remain stable. Many people believe selective vaccination should be permitted, which would allow an infant to receive an antidote at their parent's discretion. A significant amount of parents lean towards selective vaccination and are currently fighting to have control over which antidotes their child receives. Sarah Glazer (2010) asserts that citizens wanting to engage in vaccinating their child should first seek a professional medical opinion, a diagnostic examination, and a full understanding of the vaccination process. When she notes that vaccinations given at birth "intervene with the immune system and could cause

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problems" (Glazer 2010), she asserts that injecting a virus into a newborn baby's blood stream can increase the likelihood of an illness, inhibit the natural development of an infant's immune system, and trigger an autism disorder to be expressed in genetically predisposed individuals. According to Glazer (2012), researchers from the CDC found an autism rate of one in every 150 individuals, which is three times the amount they previously cited for the general population in 2004. If all infants received the same quantity of vaccinations directly after birth, many doctors and parents speculate the statistics of autism would exponentially increase. When Glazer proclaims, " I don't criticize the method of immunization in the whole, but I advise everybody to get an extensive consultation" (Glazer 2010), she is encouraging parents to seek personalized diagnostic treatment for their children in order to eliminate any specific vaccines that will cause adverse reactions. If parents feel uncomfortable with the immunization process, then they will be unable to be confident about the treatment, they will become paranoid about their child's health, and their decision over the selection of vaccines will not be in the child's best medical interest. While Glazer claims that parents should seek extensive consultation with physicians, others suggest that even with consultation, doctors tend to neglect addressing the parent's questions with adequate answers. Shana Kluck (2010) argues that obligatory vaccination without the parent's full understanding and consent is inappropriate; thus, the parents of the child should ultimately have the authority over their child. When Kluck (2010) notes that " many doctors dismiss parents concerns without fully answering the questions they have asked", she compliments physicians because they have attended medical school specifically to treat patients, deal with the consequences of medical

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procedures, and understand the most effective and efficient ways to protect patients' health. However, just because specialized physicians state that a patient's prognosis 'indicates' a certain procedure is in their best interest, whether that team elaborates on the minute details or not, assuming they are most likely correct is fallible. According to Kluck (2010), parents commonly do their own exterior research about vaccination treatments, which is more than likely subsequent to a medical professional's previously stated advice; thus, due to some physicians only being able to provide platitudes and vague medical facts, parents must resort to drastic measures of educating themselves to protect their child. To illustrate her claim, Kluck describes the desensitization of parents as a "yearly shot at the doctor's office is a way of life" (Kluck 2010), which is such a common practice that it has stripped away the awareness of the dangers of potential side effects with immunizations. If citizens allow the government to override their rights as parents, and they don't demand an extensive prognosis in order to rule out the differentials of their child's genetics, then genetically predisposed infants are at risk of contracting a health disorder from the extensive vaccination antidote. Most physicians and trained medical professionals declare that immunizations must be given in order to guarantee public safety and should be mandatory. In their academic journal, Destefano and Chen (2001) refer to clinical research studies performed throughout the world; ultimately, there has been no conclusive evidence linking the autism epidemic with infant vaccinations. When Destefano and Chen (2001) states, "any vaccine or vaccine constituent believed to cause autism is a hypothesis with little supporting evidence", she means that the available epidemiological and closely related researched evidence does not support a causal association

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between infant vaccinations and autism. If parents can access this information, observe the fundamental studies, and accept the vaccinations to be safe, then widespread immunization will ensue. According to the writer, the government requires adolescent vaccinations in order to keep children immune to illnesses, protect public health, and ultimately avoid any form of contagions or epidemics. When Destefeano and Chen (2001) claims, " In most cases, autism is present at birth, " she asserts that immunizations inducing the condition is highly unlikely, that no current evidence shows associations between linking vaccines and disorders, and that infant vaccination is safe. If people listen to medical specialists, instead of following untrained and unspecialized biased opinions, then more parents will feel comfortable about vaccinations, will engage in their child being immunized, and will advocate the current evidence disproving vaccination dangers. Supporting Destefeano and Chen's view, Lisa Miller and Joni Reynolds (2010) describe additional researched data to expose the fabricated evidence about infant vaccinations. In Miller's and Reynolds (2010) journal, they assert that meticulous scientific studies have not identified links between autism, the measles, or mumps with any rubella or thimerosal-containing vaccines. Miller and Reynolds (2010) remark that current " scientific review by the Institute of Medicine (IOM), which was validated by the CDC, " found the current research in favor of rejecting the casual association between autism and thimerosal-containing vaccines. If the CDC, as well as the IOM has conclusive evidence disproving any relationship between disorders and vaccinations, then parents should now feel safe vaccinating their infant (Miller & Reynolds). According to Miller and Reynolds, the government denies selective vaccinations in order to nationally maintain public health. When the <https://assignbuster.com/examining-infant-vaccination-and-americas-diverse-perspectives-aaron-lawson/>

authors validated legal proof by stating that on February 12, 2009, " 5, 000 pages of transcripts, 939 medical articles, 50 expert reports, and hearing testimony from 28 experts" were submitted in the U. S. Court of Federal Claims under the Omnibus Autism Proceeding, they concludes the Court found that the MMR and thimerosal-containing vaccines were not causal factors in the development of autism (Miller & Reynolds, 2010). If parents become aware of the disproved theory that infant vaccinations cause health issues, then they will not hesitate to immunize and protect their child's health. Supporting Miller and Reynolds evidence, Chris Mooney (2009) reveals the truth about Andrew Wakefield's falsified hypothesis. Andrew Wakefield (" the autism guru") fabricated evidence in 1998 linking autism to infant vaccinations; subsequently, Wakefield has become one of the most reviled doctors of his generation (Mooney, 2009). Thus, Wakefield is blamed both indirectly and directly, depending on the accuser, for irresponsibly starting a panic with tragic repercussions by fallaciously leading citizens to believe infant vaccinations cause autism. When Mooney (2009) discusses Wakefield's hypothesis, he shows how Wakefield's coauthors have now retracted the autism implications of their work in 1998. If Wakefield never released falsified data on autism being linked to infant vaccinations, then there wouldn't be a global panic of parents, especially in the United States, of fearing adverse side effects from vaccinations. Since the inception of my analysis, I have avoided taking a biased outlook in order to critically examine each aspect of the three viewpoints. Although each viewpoint I have analyzed holds an interesting perspective, only one is without critical fallacies: infant vaccination should be mandatory. Lamentably, doctors and parents who believe vaccines should be heavily regulated due to alleged

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medical ramifications made an assumption that autism statistics will decrease if less kids receive vaccinations. Since the theory of autism and vaccination was disproved, parents are directly putting their child at risk if they do not immunize their child. Furthermore, others have drawn false conclusions by claiming that selective vaccination would benefit an infant by allowing only certain vaccines to be administered. However, not fully immunizing a child to all the potential health hazards subsequently leaves a child susceptible to contracting the illness, and then subsequently results in spreading the contagion. After researching infant vaccination, I have concluded that immunization should be mandatory to maintain public health and stop the possibility of an epidemic occurring. Works Cited DeStefano, F. and Chen, R. T. " Autism And Measles-Mumps-Rubella Vaccination: Controversy Laid To Rest?." *CNS Drugs* 15. 11 (2001): 831-837. Academic Search Premier. Web. 16 Sept. 2012. Glazer, S. (2003, June 13). Increase in autism. *CQ Researcher*, 13, 545-568. Retrieved from <http://library.cqpress.com/cqresearcher/> Web. 16 Sept. 2012. Haugen, David and Musser, Susan. " Requiring Mandatory Vaccination Is Dangerous." *Opposing Viewpoints. Epidemics*. Detroit: Greenhaven Press. (Reprinted from *Protest over Mandatory Flu Shots for Preschoolers*, Associated Press, 2008) Retrieved from <http://ic.galegroup.com/prox.miracosta.edu/> Web. 16 Sept. 2012. Kluck, S. (2010). " Mandatory Vaccinations Deny Parents Their Rights". In N. Merino (Ed.), *At Issue. Should Vaccinations be Mandatory?*. Detroit: Greenhaven Press. (Reprinted from *Mandatory Vaccines Override Parental Rights*, United Liberty, 2008, October 18) Retrieved from <http://ic.galegroup.com/prox.miracosta.edu/> Web. 17 Sept. 2012. Miller, Lisa, and Joni Reynolds. " Autism And Vaccination-The Current Evidence." *Journal For* <https://assignbuster.com/examining-infant-vaccination-and-americas-diverse-perspectives-aaron-lawson/>

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