


AUGUST 2023



**FOUNDATION**  
for a **Healthy North Dakota**

A large, semi-transparent green circular graphic is overlaid on the bottom right of the page. It contains two stylized green leaves and the main title and subtitle of the report.

# The State of North Dakota's Immunizations

A Report about North Dakota's  
Wellness Vaccine Protection  
for its Communities







Dear North Dakotans,

[The Foundation for a Healthy North Dakota](#) (FHND) is a newly established non-profit organization. Our mission is to promote health and wellness by empowering communities, families, and individuals to build a healthier North Dakota.

Our primary goal is to build a statewide coalition focused on three key areas: [children's health](#), [hunger](#), and [wellness vaccines](#). This report focuses on wellness vaccines.

We owe a debt of gratitude to those who have worked tirelessly in our public health and healthcare systems on an issue important to the foundation. As a community wellness advocate, I encourage us to acknowledge the many ways in which our health system is working for the people of North Dakota but also to keep an eye on challenges and opportunities to better protect our community members from preventable and unnecessary illness, which threatens both quality of life and life itself.

Through this report, a great deal of insight will be gained to assist and inform communities, citizens, and decision-makers in planning, policy development, and the pursuit of resources related to maintaining or improving vaccine confidence.

We believe the people who live in a community know best what it needs to thrive. By equipping communities, citizens, and decision-makers with accessible health information – in this case about vaccines — we hope to advance towards a healthier state population who can enjoy full community, economic, and civic participation.

After all, **health provides the freedom for people to live fully, enjoy liberty, and pursue happiness.**

With that, we offer you this data analysis so that you can assess the current state of routine wellness and influenza vaccine coverage in North Dakota.

Wishing you good health,

Sandra Tibke  
Executive Director  
Foundation for a Healthy North Dakota

# INTRODUCTION

Wellness vaccines are an essential part of preventative health care and disease eradication. From the time wellness vaccines arrived in our state, North Dakotans have dutifully and safely gotten immunizations from infancy and throughout the lifespan to prevent their own illness and protect their communities from life-threatening or life-altering diseases.

Second only to clean water, vaccines are widely considered one of the most successful and cost-effective public health interventions. They are also the most effective way to prevent infectious diseases. North Dakota is falling behind the nation for wellness vaccines, leaving our most vulnerable community members susceptible to preventable diseases like certain forms of cancer, measles, and shingles.

Freedom means being able to live the life we choose, and illness often prevents us from exercising our freedoms. By working together, we can help prevent illness and ensure that we all have access to what we need to lead healthy, fulfilling lives in the places it matters most, our homes, schools, workplaces, and faith communities. When our communities enjoy good health, we all prosper by experiencing lives free from the interruptions of illness.

## KEY HIGHLIGHTS

The Advisory Committee on Immunization Practices (ACIP) collaborates with the Director of the Centers for Disease Control and Prevention (CDC) by providing advice and guidance regarding the use of vaccines and related agents for the control of vaccine-preventable diseases (VPD) throughout the population of the United States (Center for Disease-Vaccines-ACIP, 2022). Table A provides a list of recommended vaccines and the diseases they prevent for both adults and children. The spread of VPDs decreases when communities focus on their overall health and stay up to date on the recommended vaccines.

**Table A: List of Recommended Vaccines for Adults and Children and Diseases They Prevent**

DISEASES PREVENTED BY VACCINES	VACCINES
Tetanus, Diphtheria, and Pertussis (whooping cough)	DTap/Tdap/DTP/DT/Td
Hepatitis A (liver disease)	Hep A
Hepatitis B (liver cancer, cirrhosis)	Hep B
<i>Haemophilus influenzae</i> B (meningitis, pneumonia, blood infections)	Hib
Measles, Mumps, and Rubella	MMR
Poliomyelitis (polio)	IPV/OPV
Rotavirus (severe diarrhea)	Rotavirus
Varicella (chickenpox)	Varicella
Human papillomavirus (cervical cancer, oral cancer)	HPV
Influenza	Flu
Meningococcal (meningitis, blood infections)	MCV4/MenB
Pneumococcal (pneumonia, meningitis, blood infections)	PCV/PPSV23
Shingles	RZV-Shingrix
COVID-19 coronavirus (SARS-CoV-2)	COVID-19

# SECTION 1

## WHY VACCINATE? AND THE COSTS WHEN WE DON'T

VPDs are illnesses that are dangerous enough to cause serious illness, disability, and even death, all of which can be prevented with a safe and effective wellness vaccine. When wellness vaccines are avoided, the cost to our communities has a ripple effect with economic, social, and obvious health consequences.

### COMMUNITY PROTECTION & IMMUNITY

**Community protection** is the incremental level of protection gained by a high proportion of people in a specific area receiving wellness vaccines. When enough people in a community are immunized and protected against any given disease, it becomes less likely for a VPD to enter and spread. High levels of vaccination can provide protection for those who cannot be vaccinated for medical reasons or because they are still too young to receive vaccines. This is also known as **community immunity** or **herd immunity**.

Each VPD requires a different percentage of the population to be vaccinated to achieve community immunity. By reaching the target goals for community protection, our communities become almost completely protected from outbreaks of VPDs. The federal government's [Healthy People 2020](#) and [2030](#) report sets forth these goals, which take community protection into account when setting target levels.

Vaccine coverage in North Dakota falls short of many of these goals.

### THE STATE OF WELLNESS VACCINES IN NORTH DAKOTA

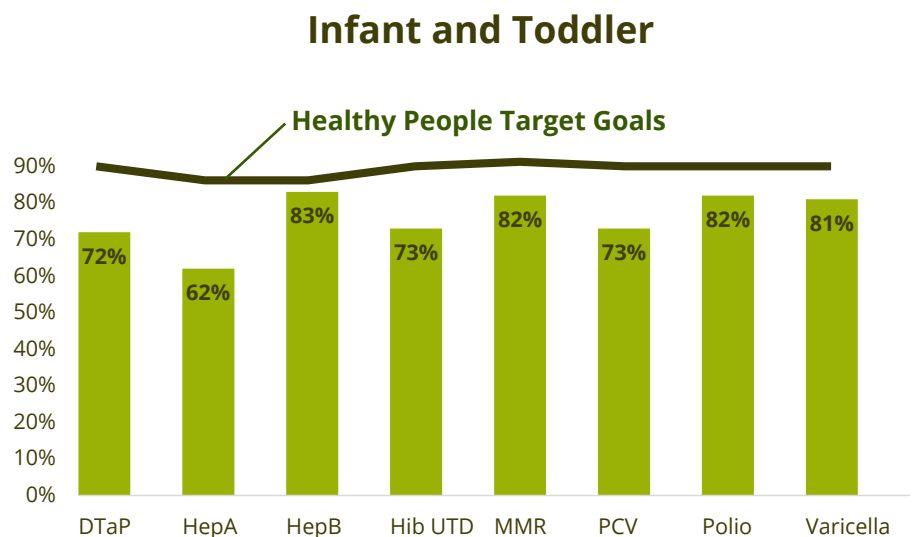
This snapshot summarizes the coverage rates for routine wellness vaccinations across all age groups for the state of North Dakota for the year 2022. It also recaps uptake rates for the annual influenza vaccine for the 2022-23 flu season. We are using the [Healthy People 2020](#) and [2030](#) public health objectives compared to the state's 2022 average coverage rates.

For the 19–35-month-old age group, North Dakota achieved the following uptake rates for 2022 (targets noted as the top line for context). None of the vaccine coverage rates met the defined targets of 80-91% for [Healthy People 2020](#) and [2030](#) goals.

**Figure A: North Dakota 2022 Quarterly Averages for Vaccination Coverage Rates for 19-35-Month-Old Age Group**

*\*Healthy People target goals noted as the top line for context*

*Source: North Dakota Immunization Information System*

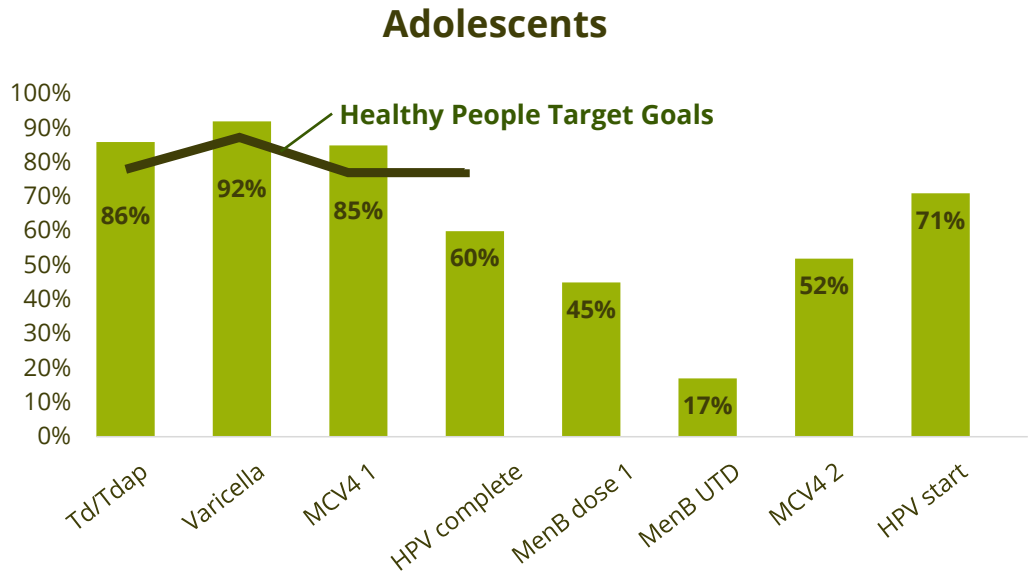


For the adolescent age group in 2022, North Dakota met most targets for recommended vaccines with defined objectives from the [Healthy People 2020](#) initiative. However, the state fell short of meeting the 80% threshold for the completion of the cancer-preventing HPV (human papillomavirus) vaccine series for this age group. Presently, there are no measurable objectives set for the second dose of the MCV4 (meningococcal conjugate) vaccine, nor for the first and second doses of MenB (meningococcal B).

**Figure B: North Dakota 2022 Quarterly Average for Vaccination Coverage Rates for 13-17 Age Group**

\*Healthy People target goals noted as the top line for context

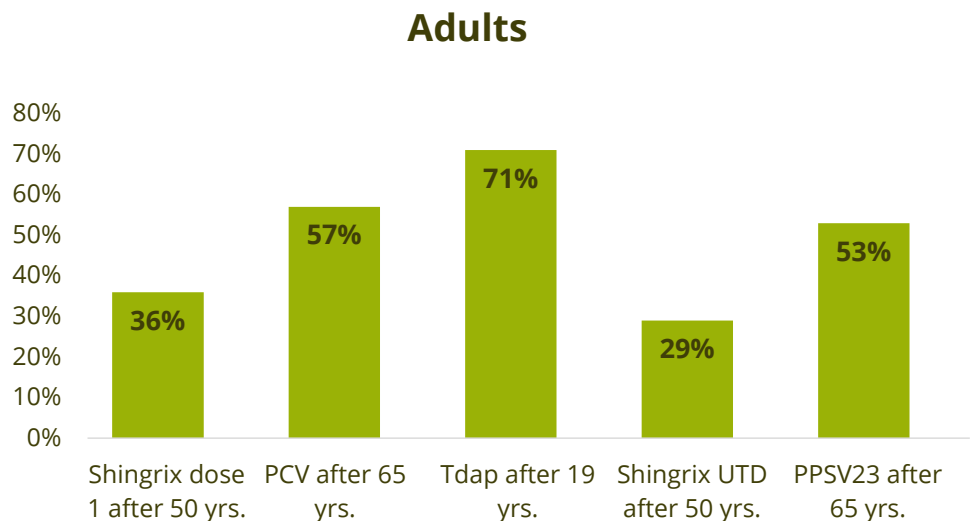
Source: North Dakota Immunization Information System



Adults are recommended to receive the first dose of the Shingrix vaccine (shingles) at age 50 or older. This target was set by the former *Healthy People* initiative at 30%; North Dakota exceeded it by reaching 36% coverage. A goal of 90% was selected for the PCV (pneumococcal conjugate vaccines) or PPSV23 (pneumococcal polysaccharide vaccine). These vaccines are administered in varying sequences and timing with attention to pneumococcal vaccine history, health status, or which pneumococcal-type vaccine people received as a first adult dose. The state's rates for 2022 resulted in PCV at a 57% coverage rate, and PPSV23 was 53%.

**Figure C: North Dakota 2022 Quarterly Average for Vaccination Coverage Rates for Adult Age Group**

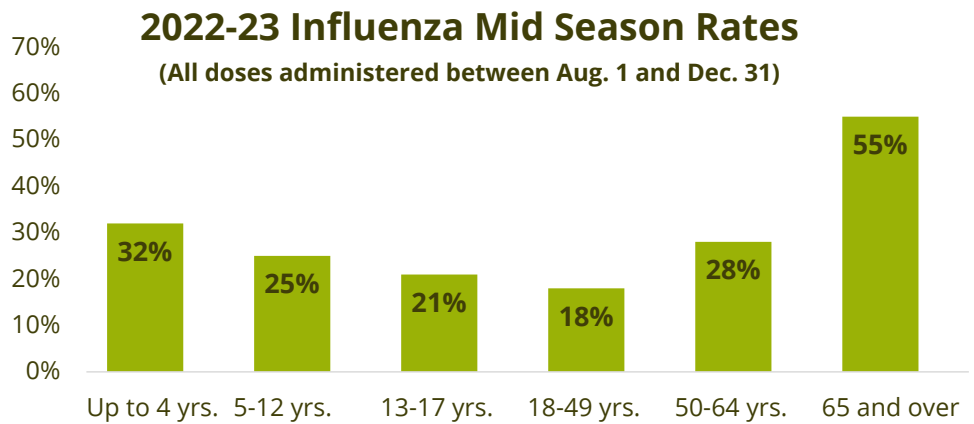
Source: North Dakota Immunization Information System



In the most recent *Healthy People 2030* initiative, the target for the annual influenza vaccine is 70% of all people, six months or older, receiving their influenza immunization for protection during the current flu season. No age group in the state met the target by December 31, 2022 (end date of mid season) during the 2022-23 flu season.

**Figure D: Vaccination Coverage Rates Across All Age Groups 2022-23 Influenza Mid Season**

Source: North Dakota Immunization Information System



**CHILDREN AND OTHER VULNERABLE POPULATIONS**

Vaccination against disease is a crucial way to help ourselves and our friends and family stay healthy (Immunization Resources for Parents & Parents-to-be, 2022). However, some people cannot be vaccinated. Vaccination is often not medically advised for people with a medical condition that compromises their immune system. Others have a severe allergy that prevents them from receiving certain vaccines, and some children are too young to be immunized against all vaccine-preventable diseases to which they may be exposed (Common Concerns About Vaccinations, n.d.). These vulnerable populations must depend on the rest of us to be vaccinated to reduce their chances of exposure to disease and remain healthy.

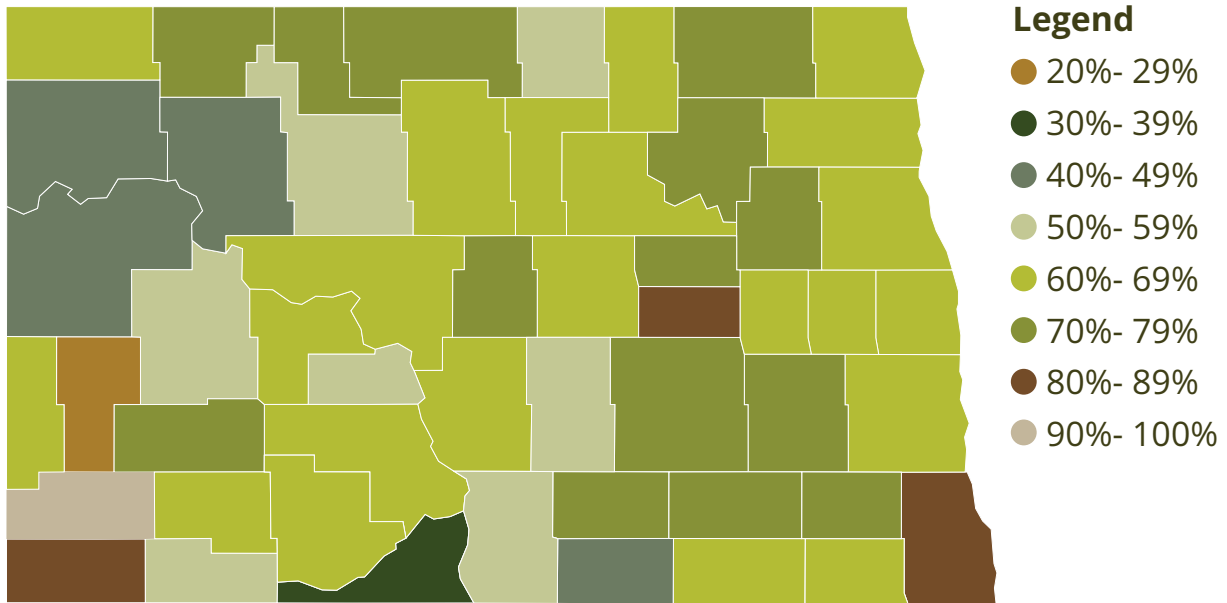
The map below shows the coverage rates for the first quarter of 2023. Only four counties met the Healthy People 2020 goal of an 80% or higher coverage rate for our state for the complete series of childhood vaccination rates. The overall coverage rate for the state is around 65% in the first quarter of 2023.





## Map A: 2023 Quarter 1, 19-35-month Age Group, 4:3:1:3:3:1:4 Series Vaccination Coverage Rates by County \*4+DTaP, 3+Polio, 1+MMR, 3+Hib, 3+HepB, 1+Varicella, 4+PCV

Source: North Dakota Immunization Information System



## INFLUENZA CASES RISING IN OUR STATE

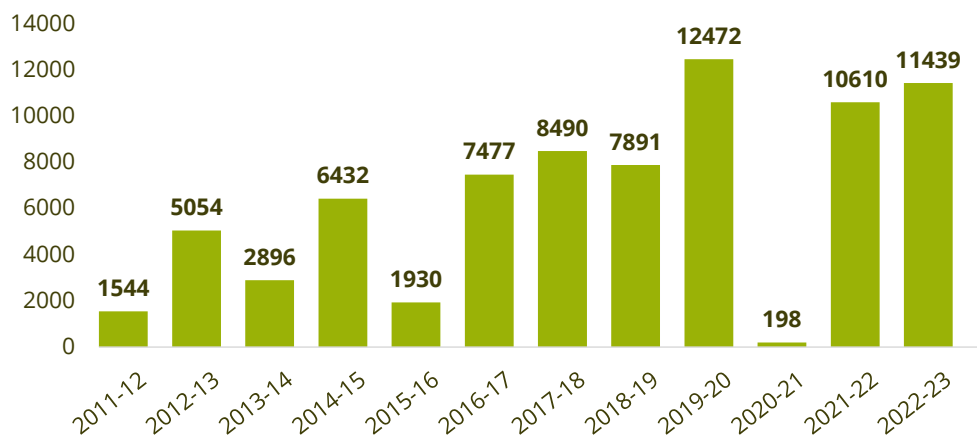
Influenza is the second most frequent cause of death from a vaccine-preventable disease in the United States, and rates of infection from seasonal influenza are highest among children. The risks for complications, hospitalizations, and deaths are higher among adults aged 65 years and older, children younger than five years old, pregnant individuals, and people of any age with medical conditions that place them at increased risk for influenza (Ask the Experts, 2022).

Influenza cases have fluctuated in our state, but cases have been on the rise for the last few years. In the 2019-20 season, North Dakota rose to 12,472 cases. The 2020-21 season saw a significant reduction due to periodic mitigation measures, such as masking and social distancing. However, reported cases in the 2021-22 season rose significantly again. During the 2022-23 influenza season, we saw weekly surges of confirmed cases in the first few months of the season. These numbers do not include people infected with influenza who do not seek testing or care for their illness; therefore, the actual number of cases is likely higher than reported (ND Department of Health & Human Services, n.d.).

### Cases Per Influenza Season

**Figure E:**  
Cases Per Influenza Season

Source: North Dakota Department of Health & Human Services Influenza Data

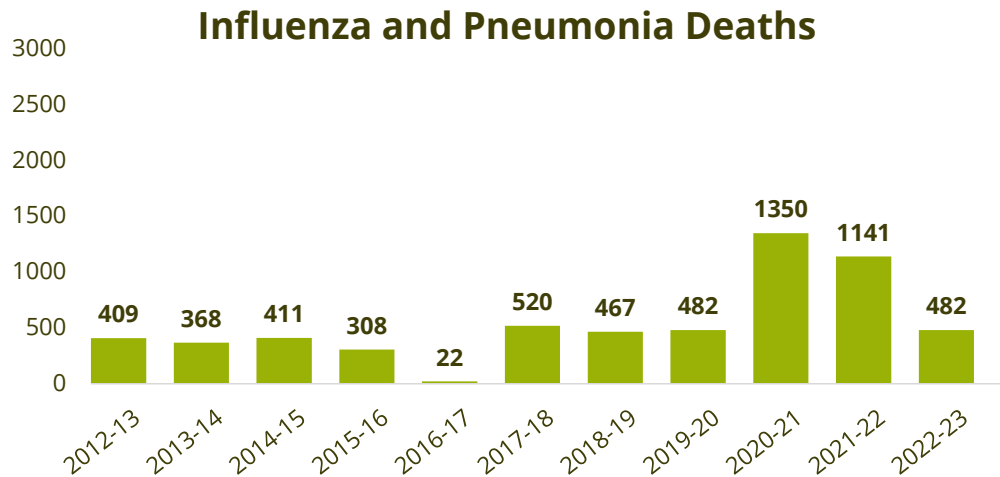




During the 2022-23 flu season, 35 influenza-related deaths were reported in North Dakota. For the 2021-22 season, there were 23 influenza-related deaths in our state. Deaths due to influenza are often attributed to other conditions, such as pneumonia, so it is assumed our state's actual number of influenza deaths is underreported (North Dakota Department of Health & Human Services, n.d.). Influenza typically contributes significantly to the number of pneumonia deaths during influenza season, so tracking the number of pneumonia deaths also illustrates the magnitude of an influenza season (North Dakota Department of Health & Human Services, n.d.). The figure below shows the deaths reported due to influenza and pneumonia in the last decade. Unfortunately, there has been a significant increase over the previous few years.

**Figure F:  
Influenza and  
Pneumonia Deaths**

Source: North Dakota  
Department of Health & Human  
Services Influenza Data



Yearly influenza vaccination continues to be recommended for everyone age six months and older and offers the best protection against severe illness from influenza (Ask the Experts, 2022).

## WORKFORCE AND ECONOMIC IMPACT

There is a considerable cost saving to vaccinating and preventing a vaccine-preventable illness outbreak. According to *Vaccinate Your Family* in 2020, for every \$1 spent on childhood vaccinations, the United States saves \$10.90. Keeping a community healthy is essential. There is a spiraling effect when a disease outbreak occurs. In the 2019 measles outbreak in Minnesota, Hennepin County and the State Department of Health recorded \$1.3 million in costs to contain, not including additional costs for private insurance or indirect costs paid by individuals and families (Vaccines are cost savings, 2020). Cost-effectiveness is important to consider, especially for healthcare personnel who come into contact with vulnerable populations. Cost-effectiveness studies in adults aged <65 years indicated that vaccination can reduce both direct medical costs and indirect costs from work absenteeism, resulting in 13-44% fewer healthcare provider visits, 18%-45% fewer lost workdays, 18%-28% fewer days working with reduced effectiveness, and a 25% decrease in antibiotic use for influenza-like illness (Pearson, 2006).

VPD outbreaks can have a significant effect on a community. In 2013, looking at adults and four VPDs, which included influenza, pneumococcal, shingles, and pertussis, the United States estimated the total annual cost at \$26.5 billion among adults aged 50 years and older (McLaughlin et al., 2015). The staggering amount shows the need for communities to stay informed on recommended vaccines to avoid a disease outbreak and illustrates the economic burden VPDs can cause.

The nation is experiencing what is known as “The Great Resignation,” and the healthcare industry is one of the hardest hit, with the workforce reporting losses of 20 percent over the past two years, including 30 percent of the nursing workforce (Poindexter, n.d.). This economic and workforce impact can be observed nationwide, and the shortage of healthcare workers is felt in most communities.

# SECTION 2

## THE STATE OF CHILDHOOD IMMUNIZATIONS

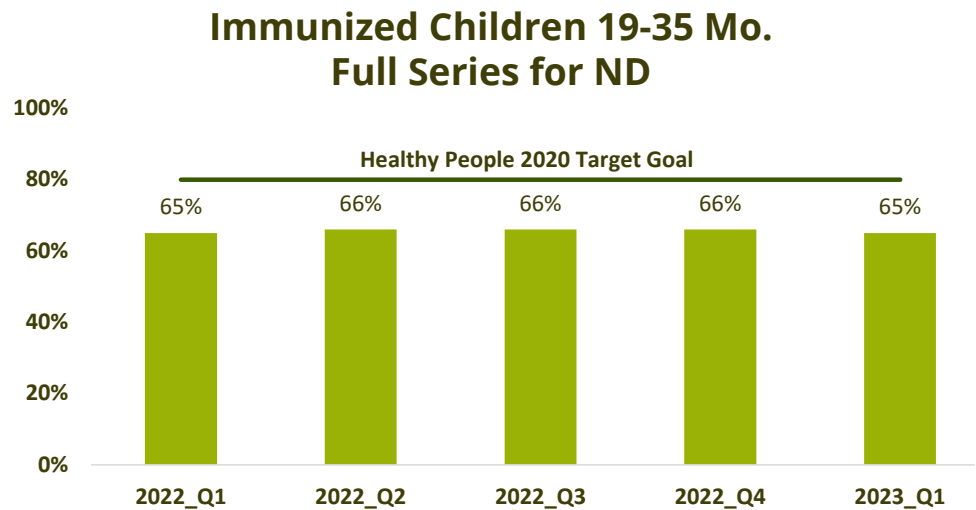
### FALLING BEHIND THE GOALS

According to recent North Dakota Immunization Information System data (table below), our state has struggled to meet Healthy People 2020 goals for childhood immunization coverage. From quarter one of 2022 until quarter one of 2023, North Dakota has not met the 80% goal for the combined seven series or 4:3:1:3:3:1:4 series of recommended vaccines for children 19-35 months of age per Healthy People 2020 goals. Children who miss one or more doses are potentially vulnerable to the harmful infectious diseases that these vaccines prevent (Immunize Colorado, 2017).

**Figure G:**  
**Immunized Children**  
**19-35mo Full Series**  
**for ND**

\*4+DTaP, 3+Polio, 1+MMR, 3+Hib,  
3+HepB, 1+Varicella, 4+PCV

Source: North Dakota Immunization  
Information System



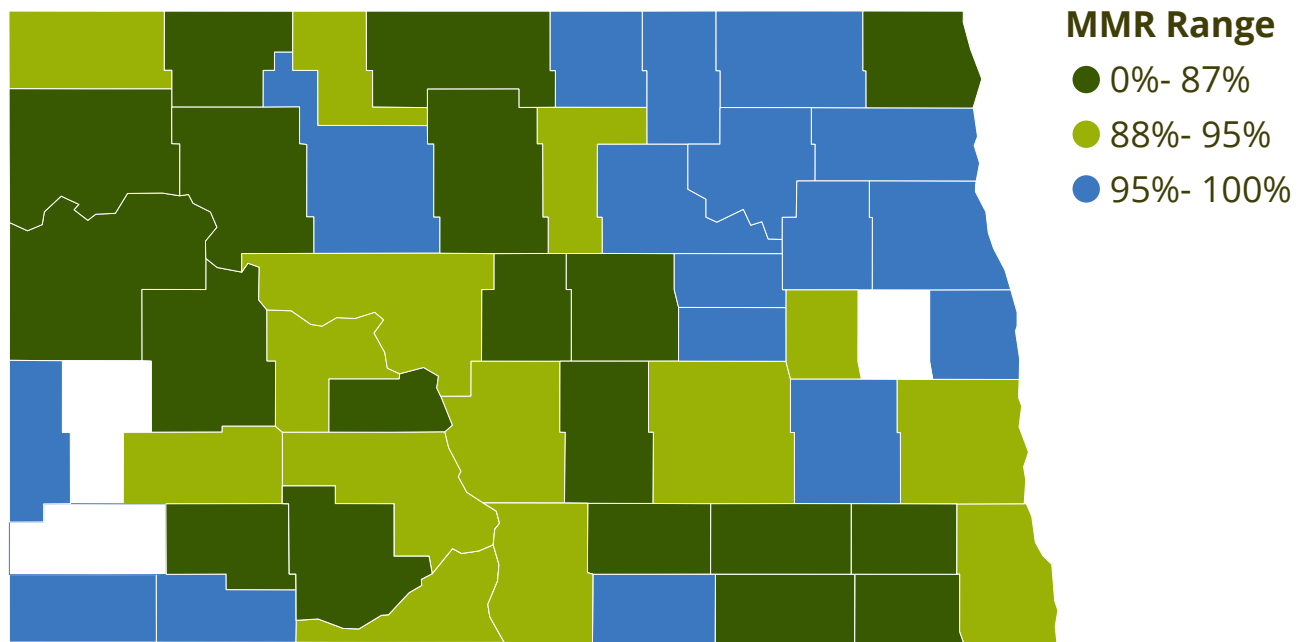
### UNDERIMMUNIZATION

As noted, vaccination coverage in North Dakota has varied over time for most recommended vaccines. When looking at a geographical depiction of county-level coverage rates for our state, it is evident what areas are at alarmingly low rates for immunization against specific diseases. For example, measles is a highly contagious viral disease with an abrupt onset. Anyone who has not been vaccinated or has not previously had measles is at risk for developing the disease (North Dakota Dept. of Health and Human Services, 2019).

The example of the map on the next page shows the county-level breakdown for the Measles, Mumps, and Rubella (MMR) vaccine coverage rates for kindergarteners during the 2022-2023 school year. The herd immunity threshold (a sufficient percentage of the population becomes immune to an infection through previous infection(s) or vaccination) for the MMR vaccine is around a 95% coverage rate (CDC, n.d.). A good portion of our state's counties met this goal, but most did not, and nineteen counties are at a worrying level of 87% or lower.

## Map B: 2022-2023 School Year, Kindergarten MMR Coverages Rates by County

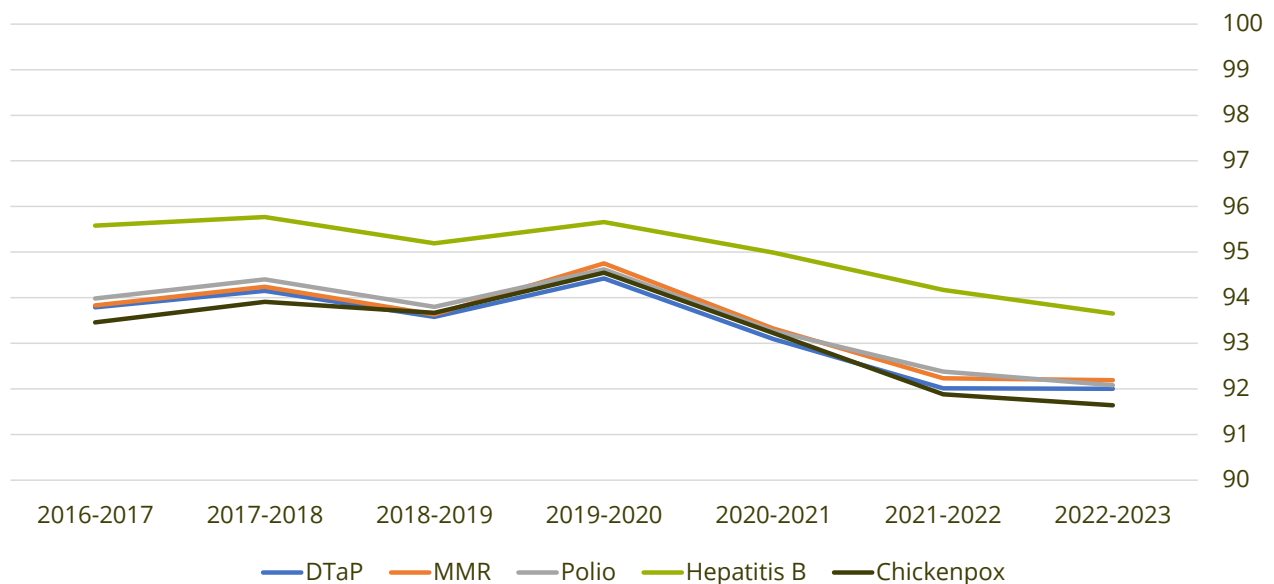
Source: North Dakota Department of Health and Human Services



The coverage rates for the five required vaccines for kindergarten entry have fluctuated over the past five to six years. However, there has been a continuous decline in coverage rates across the board for all five vaccines in the last few years. If this continues to decline, the risk of infection from vaccine-preventable diseases will increase. We continue to see cases of some of these diseases in our state. We must be vigilant about these other diseases possibly infecting our schools due to increasing cases in nearby states.

## Figure H: ND Kindergarten Coverage Rates for Vaccines

Source: North Dakota Department of Health & Human Services

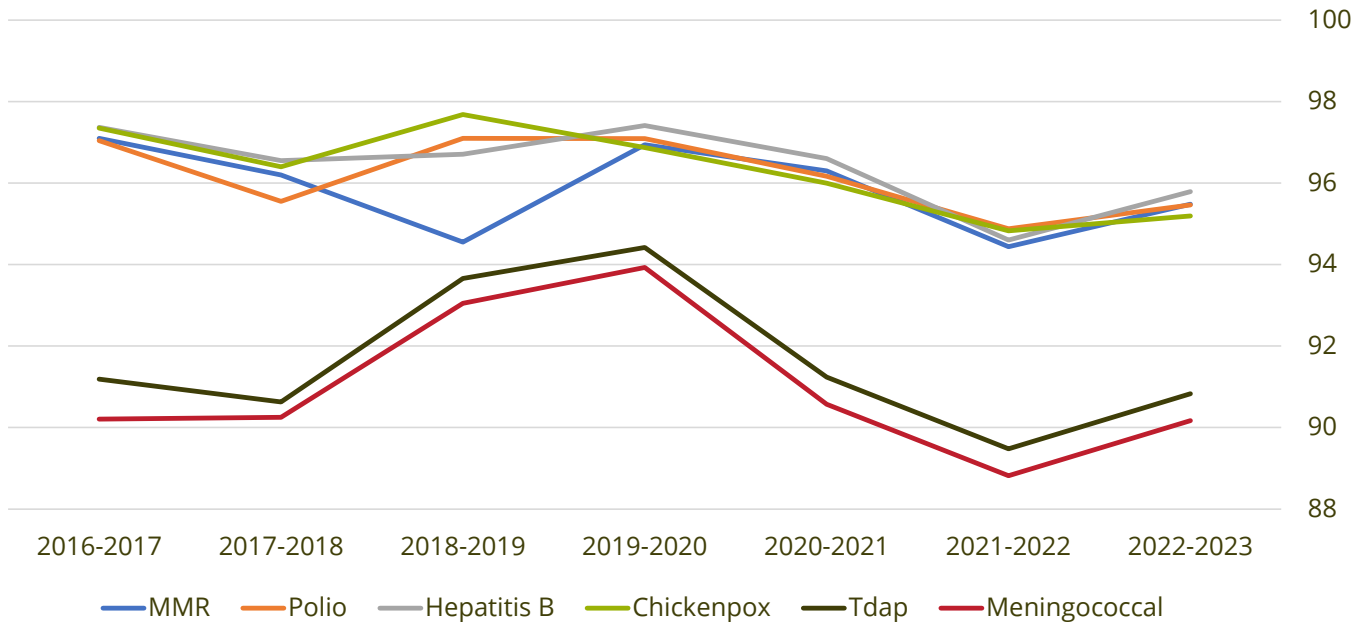




There are six vaccines for which children entering seventh grade must have immunization or exemption documentation. There has been some fluctuation for this grade level as well, but with noticeable steep declines in the last few years, much like kindergarten has seen. Figure I indicates coverage rates are slightly increasing when comparing 2021-2022 versus 2022-2023 data for seventh grade.

**Figure I: ND Seventh Grade Coverage Rates for Vaccines**

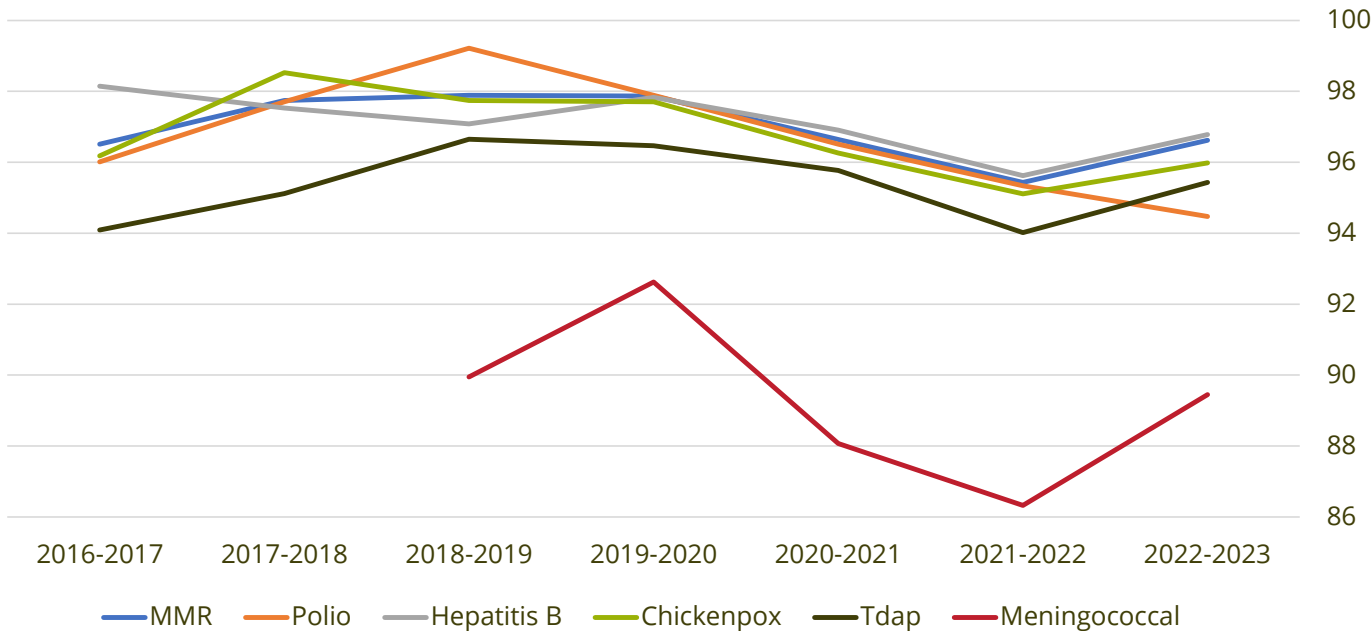
Source: North Department of Health & Human Services



For the eleventh-grade cohorts, the vaccine coverage rates have been more steady but declined overall with an increase that starts when comparing 2021-2022 and 2022-2023 data.

**Figure J: ND Eleventh Grade Coverage Rates for Vaccines**

Source: North Dakota Department of Health & Human Services



## EXEMPTIONS

All 50 states require vaccines for children before attending school and child care, although every state grants exemptions to children for medical reasons. Almost all states also grant exemptions for people whose religious beliefs oppose immunizations.

[North Dakota Century Code 23-07-17](#) mandates that all kindergarten through 12th-grade students meet the minimum required immunizations before school entrance (North Dakota Department of Public Instruction, n.d.). All children must be up to date, have claimed an exemption by October 1st of each school year, or be excluded from school (North Dakota Department of Public Instruction, n.d.).

There are three options for vaccine exemptions. Under the North Dakota State Century Code 23-07-17-1, "any minor child, through the child's parent or guardian, may submit to the institution authorities either a certificate from a licensed physician stating that the physical condition of the child is such that immunization would endanger the life or health of the child or a certificate signed by the child's parent or guardian whose religious, philosophical, or moral beliefs are opposed to such immunization. The minor child is then exempt from the provisions of this section."

Figure K illustrates the trend of kindergarten exemption rates spanning 2015-2016 to 2022-23. There is an overall trend toward increasing exemptions and, most significantly, for philosophical (personal) beliefs. If this continues, more children will be under-protected against vaccine-preventable diseases, affecting community health. By maintaining high vaccination rates, we protect ourselves, vulnerable infants who are not fully vaccinated yet, and people of all ages with weakened or failing immune systems (Vaccines protect communities, 2021).

**Figure K: North Dakota Kindergarten Exemption Rates from 2015-2023**

Source: North Department of Health & Human Services

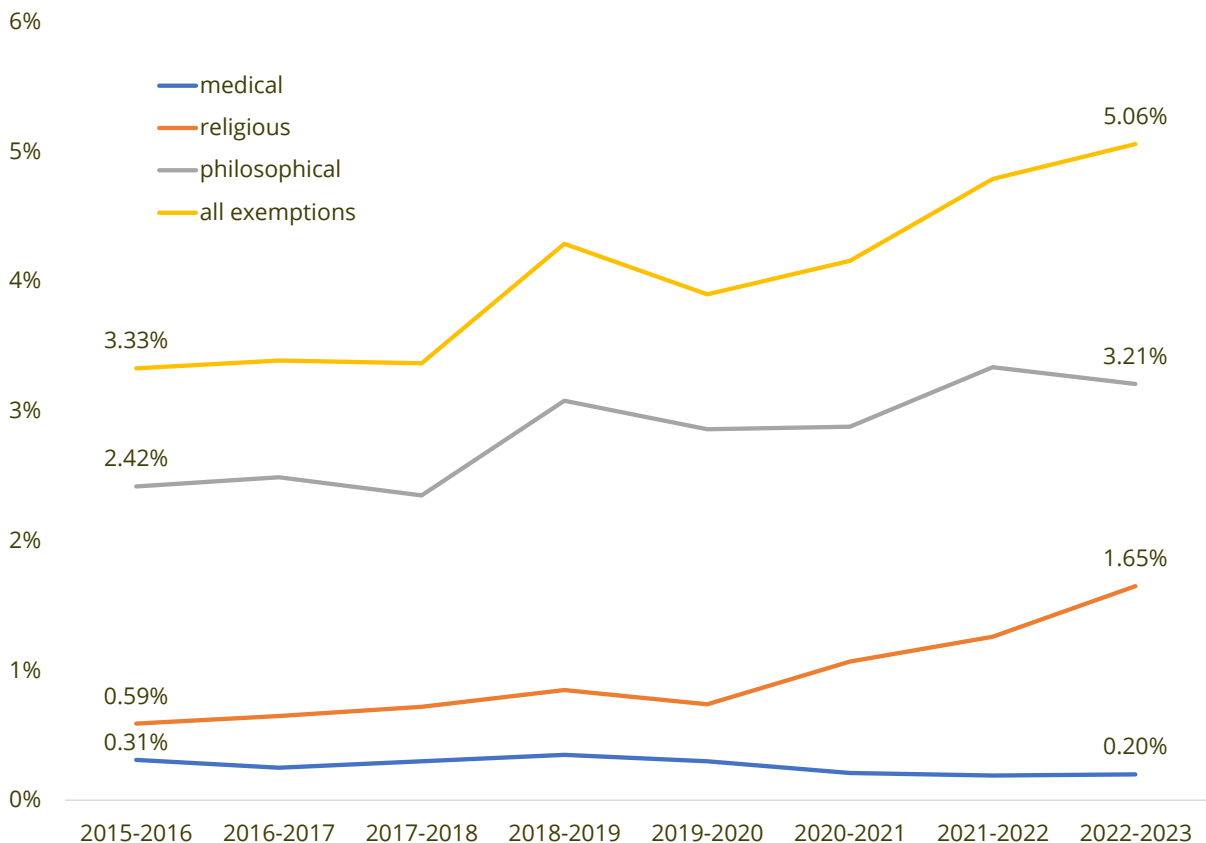
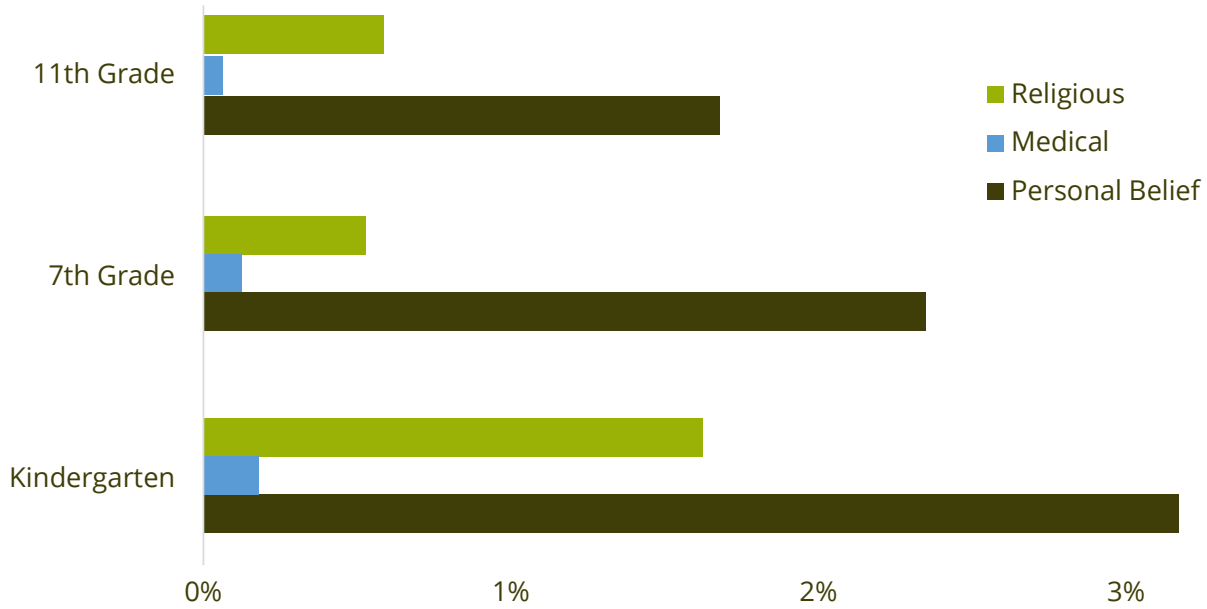


Figure L shows the grade level of state exemption rates for North Dakota, continuing to illustrate the trend that most choose exemption for philosophical (personal reasons). Additionally, the rate of exemptions is higher in kindergarten overall for each category. There is an urgency to improve rates, especially in kindergarteners, who are the most under-protected for required school vaccinations based on these exemption rates.

**Figure L: 2022-2023 ND State Level Exemption Rates for all Grade Levels**

Source: North Dakota Department of Health & Human Services

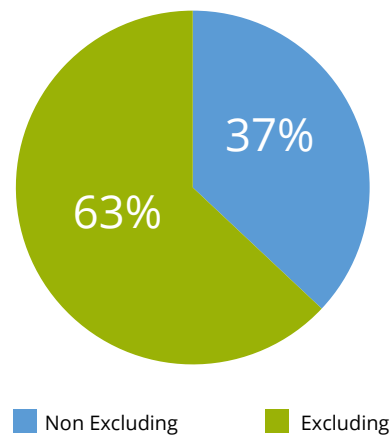


## COMPLIANCE

The chart below provides data on the percentage of North Dakota Schools excluding or not excluding students from school for non-compliance with required vaccines during the 2022-2023 school year. Schools are to enforce the requirement, and all required exemption documentation is due by October 1st of the school year before becoming non-compliant (North Dakota Department of Public Instruction, n.d.) Having approximately 37% of schools not excluding students based on having proper documentation and still allowing students to attend is alarming. If an outbreak such as measles were to take place, this could leave many community members in a vulnerable situation.

**Figure M: Percentage of ND Schools Excluding Students for Non-compliance During School Year 2022-2023**

Source: North Dakota Department of Health & Human Services





# SECTION 3

## WHY ISN'T NORTH DAKOTA MEETING PROTECTION GOALS?

### PROBLEMS FACED BY PROVIDERS

Common barriers to immunizations for healthcare providers include a lack of knowledge about warning signs for contraindications to immunizations, poorly trained medical staff, and the absence of a reminder system for missed vaccinations (Anderson, 2014). With providers being trusted messengers for patients, this poses an issue in creating vaccine confidence. Medical staff must be comfortable with immunization recommendations, and physicians must communicate to parents and medical staff the importance of giving vaccines on time according to published guidelines (Anderson, 2014). Increasing the knowledge and training on immunizations will help prepare medical staff to address parents' concerns around immunizations. It will be beneficial in sustaining and creating a healthy future for families and children.

Motivational interviewing aims to support decision-making by eliciting and strengthening a person's motivation to change their behavior based on their arguments. The technique is based on three main components; the spirit to cultivate a culture of partnership and compassion; the process to foster engagement in the relationship and focus the discussion on the target of change; and the skills to enable healthcare providers to understand and address the parent/caregiver's genuine concern (Gagneur, 2020). Consistent provider and medical staff training on motivational interviewing could be an essential tool to help increase confidence in delivering vaccine information to patients.

### THE ROLE OF PARENTS

A parent has many decisions to make to ensure their children live healthy lives. Understanding barriers to childhood vaccination, including access and acceptance barriers, is critical in improving vaccination rates (Kaufman et al., 2021). Empowering parents with the knowledge to assist in this decision is important. Common barriers parents face when deciding to immunize include a lack of knowledge about childhood vaccinations, fears about vaccine safety, lack of transportation, unawareness of the threat of vaccine-preventable illness, availability of safe and effective vaccines, and convenient office times (Anderson, 2014). Having a strong relationship with a trusted medical provider can be critical in overcoming the challenges parents face when making decisions about the health and wellness of their children. By getting childhood vaccines on time, we not only protect children, but we're also helping to protect friends, family, and the community, too (CDC, n.d.).

### BARRIERS TO ADULTS

Additionally, there are barriers to adult immunization. A study revealed that 82% believed that it was important to keep up-to-date with immunizations, yet, 34% were skeptical about receiving any type of vaccine, which reflected misunderstandings about vaccinations (Johnson, 2008). Furthermore, consistent opportunities to educate adults on the immunization guidelines are necessary to increase immunization uptake. Healthcare providers cited concerns such as side effects, fear of needles, and lack of insurance coverage as reasons consumers forego vaccination along with practice issues lacking an effective reminder system (Johnson, 2008).

# SECTION 4

## LOCATIONS AND DEMOGRAPHICS

We know vaccines can prevent illness but are effective only if they reach the majority of the population at risk (Martinez and Coles, 2020). As we have reviewed earlier in this report, most of our state's coverage rates for recommended vaccines across all age groups do not meet the goals defined by Healthy People 2020 and 2030.

The differences in vaccine uptake among regional and demographic groups have been apparent for some time. Such differences also occur at the national level and are based on many factors, such as race and ethnicity, economic status, and rural versus urban residence locations (Martinez & Coles, 2020). Our state has seen vaccine coverage rates fluctuate for all recommended vaccines across all age groups. However, even with the periodic increases in coverage rates, we do not often see the rates meet recommended targets.

According to a recent analysis, differences in vaccination rates and differing attitudes towards vaccination exist between western and eastern North Dakota (Linster, et al., 2022). That is, eastern North Dakota often has considerably higher vaccination rates and lower exemption rates for required school-entry vaccines than western North Dakota (Linster, et al., 2022).

When considering rural versus urban settings within our state, eastern and western North Dakota differences are consistent with urban and rural trends. The western part of the state is more rural, which presents more barriers to healthcare, especially with the rapid changes in its population. Rural communities may feel they are less at risk for disease outbreaks due to their population being more scattered than the population of urban areas (Linster, et al., 2022).

When looking at demographics, we see in our state that age does play a factor in recommended vaccines. For example, for the recommended annual influenza vaccine, the elderly, one of our most vulnerable age groups, receive their flu vaccine at the highest rates across all age groups for our state. Our young adult population has the lowest rates for this vaccine.

When considering race and ethnicity for recent vaccination coverage rates, the NDIIS shows that infant immunization coverage rates are highest among the white population. For the adolescent immunization coverage rates, the American Indian population has the highest rates for most of the recommended vaccines, except for the MenB vaccine, which shows the white population with the highest rate. For the adult age group, the white population has the highest coverage rates for suggested vaccines, apart from the Tdap vaccine, which sees the American Indian population having the highest rate.

Also, economic status is an important factor to consider as well because the cost, access, coverage, attitudes/beliefs, and systems issues regarding vaccines are all reasons that play a role in the differences in vaccine uptake among our population (Martinez & Coles, 2020).



# SECTION 5

## IMMUNIZATION POLICIES

North Dakota has seen few key legislative updates regarding vaccines in recent years. The North Dakota Century Code was updated in 1975 to include school immunization requirements. Nearly 20 years later, the Vaccines for Children (VFC) Program was created at the federal level to serve as an entitlement program for eligible children aged 18 and younger (CDC, 2016). Then in 2013, the Affordable Care Act began to require that new health plans cover recommended preventive services, including vaccines recommended by the ACIP, without charging a deductible, copayment, or coinsurance (Immunize Colorado, 2017).

The 1975 immunization law that was passed in North Dakota initiated vaccine requirements for school entry for our state. Since then additional vaccines have been added per recommendation by the ACIP; however, exemptions have been approved as well with the most recent type of exemption being philosophical, or for personal reasons. Federal laws regarding vaccine requirements in certain occupational settings have continued, which many North Dakotans adhere to. Additionally, during the recent, special legislative session for our state, a significant vaccine law was passed regarding vaccine passports and prohibiting the requirement of the COVID-19 vaccination in specified situations.

Under [North Dakota Century Code 23-12-20](#), the state Department of Health is prohibited from creating, administering, providing, or contracting for a vaccine passport. Further, this law asserts that neither a state government entity nor a political subdivision may require the COVID-19 vaccination as a condition of access to funds, property, or services, nor may the state government require private businesses to require the vaccination.

Through the same bill, the [North Dakota Century Code 34-03-10](#) was enacted and stated if an employer requires COVID-19 immunization as a condition of employment, exemptions must be allowed. With these aspects of the state law that prohibit the COVID-19 vaccination requirements, it is noted that there are exceptions regarding public health units and applicable federal law.





# SECTION 6

## MOBILIZING FOR WELLNESS VACCINES

We know that healthy communities, families, and individuals are vital to the success of our state now and in the future. We believe members of our communities want the best health outcomes for themselves, each other, and all North Dakotans.

The future of North Dakota depends on a healthy, thriving population for our workforce and economic growth. That’s why we need to re-establish trust in our communities around public health issues, continuing the great North Dakota traditions of self-determination, working beyond differences, and wanting the best for one another.

Political polarization has had an unfortunate cascade effect, where peoples’ worry and mistrust of public institutions has extended into the sphere of health, a topic over which North Dakotans traditionally agree. The unfortunate result of this significant shift has meant that some North Dakotans have grown distrustful of wellness vaccines that have been safely administered for decades. Regaining confidence in wellness vaccines is a critical component of the health of our communities.

The degradation of trust and continued polarization has meant more North Dakotans do not know where to turn for reliable information about their health and need more robust community support to improve health outcomes. Foundation for a Healthy North Dakota advocates for community-based, collaborative efforts to promote health and well-being across various pressing public health issues, including wellness vaccines.



# CONCLUSION

Wellness vaccines are essential to preventative health care and disease eradication. From the time wellness vaccines arrived in our state, North Dakotans have dutifully and safely gotten immunizations from infancy and throughout the lifespan to prevent their own illness and protect their communities from life-threatening or life-altering diseases.

North Dakota is falling behind the nation for wellness vaccines, leaving our most vulnerable community members susceptible to preventable diseases like certain forms of cancer, measles, and shingles. For certain diseases, like measles, for example, there are areas of our state with alarmingly low immunization rates, making us vulnerable to outbreaks.

Though most parents in North Dakota vaccinate their children, the rising number of vaccination educational exceptions granted for philosophical or personal beliefs paired with declining kindergarten vaccination rates indicates a concerning trend for the future of North Dakota.

The consequences of not meeting immunization goals are numerous and extend beyond individual and population health. Disease outbreaks have massive economic and workforce consequences, which neighboring states have encountered.

There are also many opportunities to correct this course, and we look forward to working with communities around the state to discover solutions that work at the local level together.





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## DATA DISCLAIMER

Data referenced in this report is current through the end of June 2023.

# JOIN THE COALITION

We are building a statewide coalition where the local community is at the center of everything we do. We're planning educational opportunities, public health messaging support tailored to your community, digital tool kits, resources, and our staff and partners' support to spotlight your work towards a healthier North Dakota.

We welcome you to join the coalition by visiting our website to receive all the member benefits listed above and more as we continue to build and grow.

## WEBINARS

Each month, we host a lunch and learn webinar on a health topic relevant to the lives of North Dakotans. These free learning opportunities bring together health experts like physicians, pharmacists, researchers, and public health professionals with storytellers from the community with real-life experiences.

Our webinars are appropriate for everyone, from an average North Dakotan community member looking to learn more to professionals working in healthcare or public health.

Recent webinar topics have included:

- Children's Wellness Vaccines Best Practices
- RSV & Flu
- Shingles
- Preventing HPV



## FOR MORE INFORMATION

Please visit our website at [foundationnd.org](https://foundationnd.org) for more information, to join the coalition, join webinars, and to contact us with questions.





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for a **Healthy North Dakota**

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