Case 2:23-cv-02995-KJM-JDP Document 21 Filed 06/28/24 Page 1 of 27 1 ROB BONTA, State Bar No. 202668 Attorney General of California 2 DARRELL W. SPENCE, State Bar No. 248011 Supervising Deputy Attorney General 3 EMMANUELLE S. SOICHET, State Bar No. 290754 Deputy Attorney General 4 455 Golden Gate Avenue, Suite 11000 San Francisco, CA 94102-7004 Telephone: (415) 510-4426 5 Fax: (415) 703-5843 6 E-mail: Emmanuelle.Soichet@doj.ca.gov Attorneys for Defendants Tomás Aragón and 7 Rob Bonta 8 IN THE UNITED STATES DISTRICT COURT 9 FOR THE EASTERN DISTRICT OF CALIFORNIA 10 11 12 AMY DOESCHER, STEVE DOESCHER, 2:23-cv-02995-KJM-JDP 13 DANIELLE JONES, KAMRON JONES, RENEE PATTERSON, and DR. SEAN 14 PATTERSON, individually and on behalf of their minor children, MEMORANDUM OF POINTS AND 15 **AUTHORITIES IN SUPPORT OF** Plaintiffs. **DEFENDANTS' MOTION TO DISMISS** 16 FIRST AMENDED COMPLAINT v. 17 Date: September 13, 2024 10:00 a.m. Time: 18 TOMÁS ARAGÓN, in his official capacity Courtroom: as Department of Public Health Director Judge: The Hon. Kimberly J. Mueller 19 and as the State Public Health Officer; ROB BONTA, in his official capacity as Attorney Action Filed: December 22, 2023 20 General of California, 21 Defendants. 22 23 24 25 26 27 28

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INTRODUCTION

Plaintiffs challenge Senate Bill 277 (SB 277), which eliminated the personal belief exemption from California's compulsory school vaccination law in 2015. Plaintiffs allege that requiring vaccination of their children to attend school infringes on their religious beliefs in violation of the First Amendment. But courts have repeatedly upheld compulsory school vaccination laws against Free Exercise challenges, and SB 277 itself has already survived three such challenges. Those cases should foreclose Plaintiffs' claims, which offer nothing new.

Plaintiffs' First Amended Complaint is deficient for several reasons. As a preliminary matter, it should be dismissed against Attorney General Bonta because he has no enforcement nexus to the laws challenged, and thus enjoys Eleventh Amendment immunity. Additionally, Plaintiffs have failed to state a valid First Amendment claim because they have failed to allege any facts (beyond mere conclusions) establishing that SB 277 violates their religious beliefs or tenets. But, even if they had, SB 277 is a neutral and generally applicable law that meets rational basis. Finally, even if SB 277 were not neutral or generally applicable, it would satisfy strict scrutiny. This is because SB 277 was a narrowly tailored law that carefully balanced the interests of protecting the health and safety of students and the community, with students' educational rights. Thus, while it repealed the personal belief exemption, which had become a broad loophole undermining public health, it also created limited exemptions protecting students' right to access education. For these reasons, the Court should dismiss the First Amended Complaint (FAC).

BACKGROUND

I. HISTORY OF IMMUNIZATION REQUIREMENTS IN CALIFORNIA

As the COVID-19 pandemic has recently illustrated, vaccination is one of the greatest public health achievements in preventing death and illness due to communicable diseases. *See* Request for Judicial Notice (RJN) Ex. 13 at 3. Vaccination reduces a person's risk of infection to a disease by working with the body's natural defenses to help it safely develop immunity to that disease. *Id.* at 2. While vaccination provides individual immunity, it is also critical to developing "community immunity" or "herd immunity." *See id.* at 4-5; RJN Ex. 12 at § 1(f). This is when a significant portion of the population has become immune to a disease, such that the transmission

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of disease from person to person becomes unlikely. *See* RJN Ex. 13 at 4-5, Ex. 12 at § 1(g). Community immunity protects the health of those who are unvaccinated (including those who are immunocompromised or too young to receive vaccinations) and lessens the risk of outbreaks. *Id.* For highly contagious diseases, like measles, community immunity is reached when approximately 95 percent of the local population is fully immunized. RJN Ex. 13 at 2; Ex. RJN 26.

For the past century, states have commonly relied on school vaccination requirements to increase vaccination rates and reduce the incidence of childhood disease and community spread of disease. *See Love v. State Dept. of Ed.*, 29 Cal.App.5th 980, 992 (2018) ("compulsory immunization has long been recognized as the gold standard for preventing the spread of contagious diseases"). California's current school immunization scheme was put in place in 1961, requiring immunization against polio for all students entering public or private school in California. *See* RJN Ex. 2. The law allowed two exemptions: if a parent or guardian submitted to a school's governing authority "a letter stating that immunization [was] contrary to" the parents' beliefs, or if they submitted a letter from a physician stating immunization was "not considered safe" based on the child's physical condition or medical circumstances. *Id.* at 3 (§§ 3382, 3384, 3385). Over the next 40 years, the Legislature expanded the list of required immunizations after careful consideration of the public health risks of these diseases, costs to the state and health system, communicability, and rates of transmission. *See* RJN Exs. 3-10; Ex. 13 at 8-9. The Legislature also added other institutionalized childcare settings to the law. *See* RJN Exs. 4, 5. During this time, personal belief exemptions and medical exemptions continued. *Id.*

For the past 25 years, the law has consistently required any student attending public or private childcare center or daycare, elementary school and secondary school in California to be immunized against 10 diseases: diphtheria, haemophilus influenzae type b, measles, mumps, pertussis (whooping cough), polio, rubella, tetanus, hepatitis B, and varicella (chickenpox). Cal. Health & Safety Code § 120335(b)¹; RJN Ex. 13 at 4. All of these diseases pose serious health

¹ All further statutory references are to the California Health and Safety Code unless otherwise noted.

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risks to children, some life-threatening. *Id*. These diseases, except tetanus, can be spread by contact with infected children.² *Id*.

II. SENATE BILL 277 AND REMOVAL OF THE PERSONAL BELIEF EXEMPTION

In 2015, the State Legislature passed SB 277, which primarily removed the personal belief exemption from the school vaccination requirements. *See* RJN Ex. 11. That law was prompted by a measles outbreak in late 2014 and early 2015 that was spread in large part because of communities with large numbers of unvaccinated people. *See* RJN Ex. 13 at 2. During that outbreak, 131 California residents contracted measles; 20 percent had to be hospitalized. *Id.* at 5. A CDC report on the outbreak indicated that 45 percent of the California patients were known to be unvaccinated and 43 percent had "unknown or undocumented vaccination status." *See* RJN Ex. 15 at 8. The overwhelming majority of the vaccine-eligible but unvaccinated patients were intentionally not vaccinated due to personal beliefs; the majority were children. RJN Ex. 26.

In considering SB 277, the Legislature reviewed alarming evidence of falling vaccination levels in communities across the State, alongside a rise in personal belief exemptions submitted by parents to excuse their children from school vaccination requirements. This included a report showing that more than a quarter of California schools had measles-immunization rates below the threshold recommended by the CDC. RJN Ex. 13 at 5. At the same time, the number of personal-belief exemptions had tripled between 2000 and 2013—from 1 percent of kindergarteners in 2000, to 3.15 percent by 2013. *Id.* at 2; *see Love*, 29 Cal. App. 5th at 987. Legislative analysis found these trends were connected, stating that "Studies find that when belief exemptions to vaccination guidelines are permitted, vaccination rates decrease." RJN Ex. 13 at 5.

The high rates of unvaccinated children in some local communities were particularly worrisome. The Legislature reviewed evidence that vaccination rates varied widely across the state, in part because, research had shown, people with lower vaccine acceptance tend to group together in communities. RJN Ex. 13 at 5. Communities with low vaccination rates were not only more susceptible to outbreaks, but made it "difficult to control the spread of disease and

² While tetanus is not communicable by contact with others, the Legislature included it because it is highly fatal and easily preventable by vaccination. *Id*.

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make [the State] vulnerable to having the virus re-establish itself." *Id.* Studies had documented clusters of schools with high rates of personal belief exemptions in suburbs of various California cities. *Id.* Perhaps most alarming was that "in certain geographic pockets of California, [personal belief] exemption rates [we]re 21 percent or more." *Id.*

SB 277 drew fervent support and opposition. *See* RJN Ex. 14 at 11. Supporters presented removing the personal belief exemption as a means to make schools safer from outbreak, to protect infants too young for vaccination and immunocompromised students, and to protect the community at large from outbreaks. *Id.* at 7. In addition to raising parental rights concerns, opponents argued that bill would infringe on "mandated rights of services to students with disabilities under the federal [Individuals with Disabilities Education Act (IDEA)]." *Id.* at 11.

In adopting SB 277, the Legislature stated its intent for the school vaccine law to provide "[a] means for the eventual achievement of total immunization of appropriate age groups" for the ten childhood diseases covered within the law, as well as other diseases deemed appropriate by the California Department of Public Health (Department). § 120325(a). It also stated its intent for the school vaccine law to include a medical exemption, and to incentivize "public health authorities to design innovative and creative programs that will promote and achieve full and timely immunization of children." § 120325(c), (e).

SB 277 removed the personal belief exemption from the school vaccination law, while keeping the medical exemption and adding two further limitations. The first was an exemption for "a student in a home-based private school or a pupil who is enrolled in an independent study program . . . and does not receive classroom-based instruction." § 120335(f). Second, responding to opponents' concerns, the Legislature added a provision that the law "does not prohibit a pupil who qualifies for an individualized education program, pursuant to federal law and Section 56026 of the Education Code, from accessing any special education and related services required by his or her individualized education program." § 120335(h). It also authorized the Department to add to the list of required vaccines for school entry without Legislative action, subject to the condition that any such additional immunizations must include exemptions for both medical reasons and personal beliefs. §§ 120335(b)(11); 120338.

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After an initial increase in statewide school vaccination rates immediately following the passage of SB 277, within one year, immunization rates began to decline. *See* RJN Ex. 16 at 13. By the 2018-2019 school year, the Legislature found, 16 percent of California counties had kindergarten immunization rates below 90 percent. *See* RJN Ex. 12 at § 1(c)(2). At the same time, in the three years immediately after the personal-belief exemption was eliminated, the rate of medical exemptions tripled. *See* RJN Ex. 15 at 7. And again, the Legislature reported, there were pockets of the State where the exemption rate far exceeded the statewide rate and impacted community immunity. *Id.* For instance, at 60 schools, the rate of medical exemptions rose to 10 percent. *Id.* According to the legislative reports, this rise in medical exemptions was associated with physicians issuing exemptions "without medically-justified contraindications" and "a small number of unethical physicians" selling medical exemptions for profit. *See id.* at 7, 9.

In response, the Legislature amended the vaccination law in 2019 to prevent misuse of the medical exemption. Among other changes, the Legislature put into place objective criteria and standardized requirements for medical exemption certifications, and a process for state-level review of medical exemptions in limited situations. § 120372(a), (c)-(d). In the two years after the changes, medical exemptions fell 70 percent for kindergarteners and 75 percent for seventh graders. *See* RJN Ex. 17 at 10, Ex. 18 at 11.

III. PLAINTIFFS' COMPLAINT

Plaintiffs here are three couples—the Doeschers, Joneses, and Pattersons—with partially or wholly unvaccinated school-aged children. FAC ¶¶ 11, 19, 24, 25, 36, 40. The Doeschers and Joneses allege that after extensive prayer, "they arrived at the firm religious conviction that vaccinations violate their creed." *Id.* at ¶¶ 20, 33. The Pattersons allege that "they arrived at the firm religious conviction that they must not vaccinate." *Id.* at ¶¶ 39. None of the Plaintiffs identifies any specific religious beliefs, tenets, conviction, or "creed" that vaccination would violate. Plaintiffs all allege that they "wish" their children could attend public or private school "free from religious discrimination." *Id.* at ¶¶ 21, 34, 41. They assert one claim alleging that SB 277 violates their First Amendment right to free exercise of religion. *Id.* at ¶¶ 84-121; *see id.* at ¶¶ 1, n. 1 (seemingly defining SB 277 to include §§ 120325-120375, as later amended).

LEGAL STANDARD

The party asserting federal subject matter jurisdiction bears the burden of establishing its existence. *Kokkonen v. Guardian Life Ins. Co. of Am.*, 511 U.S. 375, 377 (1994). A jurisdictional challenge under Rule 12(b)(1) may be made either on the face of the pleadings or based upon extrinsic evidence. *Warren v. Fox Family Worldwide, Inc.*, 328 F.3d 1136, 1139 (9th Cir. 2003). A complaint may be dismissed under Rule 12(b)(6) for failure to state a claim "where there is no cognizable legal theory or an absence of sufficient facts alleged to support a cognizable legal theory." *Zamani v. Carnes*, 491 F.3d 990, 996 (9th Cir. 2007). In considering if a complaint states a claim, a court must accept as true all of the material factual allegations in it, but need not accept as true allegations that contradict matters properly subject to judicial notice" or "are merely conclusory, unwarranted deductions of fact, or unreasonable inferences." *Sprewell v. Golden State Warriors*, 266 F.3d 979, 988 (9th Cir. 2001) (citation omitted).

ARGUMENT

I. ATTORNEY GENERAL BONTA ENJOYS ELEVENTH AMENDMENT SOVEREIGN IMMUNITY AND SHOULD BE DISMISSED FROM SUIT UNDER RULE 12(B)(1)

Attorney General Bonta should be dismissed from the suit under the Eleventh Amendment because he does not have any direct connection to or responsibility for enforcement of any law challenged in this lawsuit. The Eleventh Amendment generally bars federal lawsuits brought against a state. "It does not, however, bar actions for prospective declaratory or injunctive relief against state officers in their official capacities for their alleged violations of federal law." *Coal. to Defend Affirmative Action v. Brown*, 674 F.3d 1128, 1134 (9th Cir. 2012) (citing *Ex parte Young*, 209 U.S. 123, 155-56 (1908)). For the *Ex parte Young* exception to apply, the official must have "some connection" with enforcement of the challenged act. *Ex parte Young*, 209 U.S. at 157; *Nat'l Audubon Soc'y, Inc. v. Davis*, 307 F.3d 835, 847 (9th Cir. 2002) (finding action for injunctive and declaratory relief against California Governor and Secretary of Resources barred "as there is no showing that they have the requisite enforcement connection" to challenged ballot proposition). The nexus required "must be fairly direct; a generalized duty to enforce state law or general supervisory power over the persons responsible for enforcing the challenged provision

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will not subject an official to suit." *Snoeck v. Brussa*, 153 F.3d 984, 986 (9th Cir. 1998). The relevant inquiry then is "whether a named state official has direct authority and practical ability to enforce the challenged statute." *Nat'l Audubon Soc'y*, 307 F.3d at 846.

Plaintiffs have failed to plausibly allege that the Attorney General has direct authority to enforce SB 277. They allege simply that because "Attorney General Bonta is the state's chief legal officer," he is "responsible for enforcing, and does enforce, the mandatory immunization requirements of SB 277," by "threatening to bring criminal charges against anyone who violates SB 277." FAC ¶ 44. But courts have repeatedly held that the Attorney General's general duty to enforce State law as its "chief legal officer" alone is insufficient. *See e.g.*, *Bolbol v. Brown*, 120 F. Supp. 3d 1010, 1018 (N.D. Cal. 2015); *Torrey-Love v. State of Cal. Dep't of Educ.*, 2017 WL 11636240, at *3 (C.D. Cal. Jan. 12, 2017) (dismissing Attorney General from SB 277 lawsuit).

Beyond this general duty, Plaintiffs have not identified any actual provision in State law that confers direct enforcement authority of SB 277 to the Attorney General because there simply is none. Rather, the statute expressly confers such power to the California Department of Public Health. For instance, it is the Department, with the consultation of the California Department of Education, that has the express authority to "adopt and enforce all regulations necessary to carry out" the vaccine requirements. § 120330. Otherwise, enforcement of the vaccine requirement is carried out in the first instance by local school districts, who statutorily are responsible for collecting immunization records and requiring adherence. *See, e.g.*, § 120340. And, in the case of physician misuse of medical exemptions, the statute directs the Department to refer the matter to the Medical Board of California or the Osteopathic Medical Board of California—not the Attorney General. § 120372 (d)(7)-(8). Further, contrary to Plaintiffs' suggestion, there simply is no criminal liability for a parent under SB 277, much less criminal liability directly subject to Attorney General enforcement. Without such a direct connection, the Attorney General enjoys Eleventh Amendment sovereign immunity from suit and should be dismissed as a Defendant.

II. PLAINTIFFS LACK STANDING, AND THUS THEIR CLAIMS SHOULD BE DISMISSED

Plaintiffs also fail to allege injury sufficient to establish standing. A plaintiff possesses

Article III standing only if he or she has "(1) suffered an injury in fact, (2) that is fairly traceable

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to the challenged conduct of the defendant, and (3) that is likely to be redressed by a favorable judicial decision." *Spokeo, Inc. v. Robins*, 578 U.S. 330, 338 (citing *Lujan v. Defenders of Wildlife*, 504 U.S. 555, 560 (1992)). To establish an injury in fact, a plaintiff must show a "concrete and particularized" or "de facto" injury. *Id.* at 340; *Lujan*, 504 U.S. at 560.

Plaintiffs have failed to allege any harm to themselves, despite bringing suit in their individual capacities. Food & Drug Admin. v. All. for Hippocratic Med., 602 U.S. ----, *9 (2024) (plaintiff does not have standing to challenge state action simply based on moral or ideological objections). Nor have Plaintiffs alleged any concrete harm to their children, on whose behalf they also bring suit, traceable to SB 277 or Defendants. For instance, the Doeschers' child, A.D., is "exempt from SB 277" and attends a charter school through independent study; there is no allegation that this education is inferior such that A.D. has somehow been injured by SB 277. FAC at ¶¶ 12-13. Similarly, Plaintiffs do not allege the Jones children have suffered any injury by being home schooled, as allowed for unvaccinated children under SB 277. See id. at ¶ 26. And the Pattersons do not allege that their children have been excluded from school at all. Moreover, even if Plaintiffs had alleged some de facto injury to their children from being excluded from school (which they have not), no allegations trace any such injury to SB 277's requirements, as opposed to their own independent decisions regarding how to educate their children. For these reasons, Plaintiffs lack standing and their claims should be dismissed.

III. PLAINTIFFS HAVE FAILED TO STATE A COGNIZABLE FIRST AMENDMENT CLAIM

A. It is Well Settled that Mandatory Vaccination Laws Without Religious Exemptions Do Not Offend the First Amendment

The authority of the California Legislature to require student vaccinations to protect the health and safety of other students and the public at large, irrespective of their parents' personal beliefs, is firmly embedded in our jurisprudence and embodies a quintessential function of government to protect its people from preventable harm. The State has an unquestionably legitimate and compelling interest in protecting public health and safety, as recognized by the

³ Plaintiffs allege that A.D. "attends [a] charter school two days a week in person." FAC ¶ 13. By law, she is not allowed to receive any classroom-based instruction. *See* RJN Ex. 22.

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1	Supreme Court in Jacobson v. Commonwealth of Massachusetts, 197 U.S. 11 (1905), which		
2	upheld the constitutionality of a state's smallpox vaccination requirement and recognized states'		
3	ability to make vaccination a pre-condition to enter or remain in public schools. <i>Id.</i> at 32.		
4	Following <i>Jacobson</i> , the Supreme Court reiterated that "it is within the police power of a state to		
5	provide for compulsory vaccination" in Zucht v. King, 260 U.S. 174, 175–177 (1922). The		
6	Supreme Court further held in <i>Prince v. Massachusetts</i> , 321 U.S. 158 (1944), that "neither the		
7	rights of religion nor rights of parenthood are beyond limitation," and both can be interfered with		
8	when necessary to protect a child. <i>Id.</i> , at 166. In so holding, it reaffirmed that a parent "cannot		
9	claim freedom from compulsory vaccination for the child more than for himself on religious		
10	grounds. The right to practice religion freely does not include liberty to expose the community or		
11	the child to communicable disease or the latter to ill health or death." <i>Id</i> .		
12	California courts have come to the same conclusion. In Walker v. Superior Court, 47		
13	Cal.3d 112 (1988), the California Supreme Court agreed that "parents have no right to free		
14	exercise of religion at the price of a child's life, regardless of the prohibitive or compulsive nature		
15	of the governmental infringement." <i>Id.</i> , at 140, citing <i>Jacobson</i> and <i>Prince</i> . Similarly, in <i>French</i>		
16	v. Davidson, 143 Cal. 658 (1904), the Court upheld a municipal vaccination requirement,		
17	explaining that "the proper place to commence in the attempt to prevent the spread of a contagion		
18	was among the young, where they were kept together in considerable numbers in the same room		
19	for long hours each day children attending school occupy a natural class by themselves, more		
20	liable to contagion, perhaps, than any other class that we can think of." <i>Id.</i> at 662.		
21	Since Jacobson, Zucht, Prince, Abeel, and French, supra, federal and state courts have		
22	repeatedly upheld mandatory vaccination laws over constitutional challenges. See. e.g., Phillips		
23	v. City of New York, 775 F.3d 538, 543 (2d Cir. 2015); Workman v. Mingo County Sch., 667 F.		
24	Supp.2d 679, 690-691 (S.D. W. Va. 2009); Boone v. Boozman, 217 F. Supp.2d 938, 956 (E.D.		
25	Ark. 2002); Hanzel v. Arter, 625 F. Supp. 1259 (S.D. Ohio 1985); Maricopa County Health Department		
26	v. Harmon, 750 P.2d 1364 (Ariz. 1987).		
27	In California, district and state courts have already heard and rejected First Amendment		

Free Exercise claims against SB 277 in three cases. In Whitlow v. California, 203 F.Supp.3d

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1079, 1085–86 (S.D. Cal. 2016), the district court found that the plaintiffs were unlikely to prevail on their free exercise arguments against SB 277. The *Whitlow* plaintiffs alleged that SB 277 violated the Free Exercise Clause of the First Amendment by (1) failing to provide a religious exemption to the vaccination mandate; (2) forcing parents to choose between faith dictates and their children's education; and (3) offering secular exemptions (medical, home schooling and Individual Education Plan (IEP)) while failing to provide a religious exemption. *Id.* Relying on *Workman*, *Phillips*, and *Prince*, the court reasoned that plaintiffs were unlikely to prevail on their first two arguments: because the right to free exercise does not outweigh the state's interest in public health and safety, mandatory vaccination as a condition to school admission does not violate the Free Exercise Clause. *Id.* at 1086. The court also rejected plaintiffs' secular exemption argument because a majority of the Circuit Courts of Appeal refused to find that providing a secular exemption necessarily requires a religious exemption. *Id.* at 1086–87.4

Subsequently, in *Brown v. Smith*, 24 Cal.App.5th 1135, 1144–45 (2018), an appellate court rejected claims (similar to *Whitlow*) that SB 277 violated California's constitutional freedom of religion clause. The court relied on federal authority in reaching its conclusion and further reasoned that, even if it applied strict scrutiny, SB 277 still survived strict scrutiny. *Id.* at 1145.

Finally, the court in *Love v. State Dep't of Educ.*, 29 Cal.App.5th 980, 988–995 (2018) rejected additional constitutional challenges to SB 277 and, as to plaintiffs' free exercise claim, followed the rationale in *Brown* and rejected that claim as well. *Id.* at 996.

Significantly, these decisions have been relied upon and reaffirmed in recent challenges to other states' vaccination laws repealing religious exemptions. *See We The Patriots USA, Inc. v. Connecticut Off. of Early Childhood Dev.*, 76 F.4th 130, 137, 147–148 (2d Cir. 2023) (upholding dismissal of a Free Exercise challenge to a Connecticut law that repealed the state's religious exemption to vaccination requirements); *Milford Christian Church v. Russell-Tucker*, No. 3:23-CV-304 (VAB), 2023 WL 8358016, at *11 (D. Conn. Dec. 1, 2023) (dismissing challenge to related Connecticut law); *see also Doe v. San Diego Unified School District*, 19 F.4th 1173 (9th

⁴ While the U.S. Supreme Court has issued subsequent opinions that impact this Free Exercise analysis, the *Whitlow* reasoning remains valid, as described *infra* at pages 11 to 20.

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upsets the seminal decisions discussed above.

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B. Plaintiffs Have Failed to Identify A Burden on Their Religious Beliefs

Cir. 2021) (upholding school district's COVID-19 vaccine mandate). Nothing in this lawsuit

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Plaintiffs' free exercise claim fails at the threshold because they have failed to properly allege that SB 277 burdens the exercise of their religious beliefs by failing to allege any facts whatsoever about those religious beliefs. To qualify for protection under the Free Exercise Clause, a plaintiff must necessarily allege (and ultimately show) that the challenged law has burdened his ability to exercise his religious beliefs—and not just his philosophical or personal beliefs. *See Sherbert v. Verner*, 374 U.S. 398, 405 (1963) ("first" inquiry is "whether the [law] imposes any burden on the free exercise" of plaintiff's religion); *Fulton v. City of Philadelphia*, 593 U.S. 522, 532 (2021); *Wisconsin v. Yoder*, 406 U.S. 205, 215 (1972) (philosophical and personal beliefs "do not rise to the demands of the Religion Clauses").

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But Plaintiffs here have failed to identify any specific religious belief they hold that forbids vaccination of their children—as opposed to anti-vaccination personal beliefs—and thus have not established that SB 277 has burdened their religious practice. At most, Plaintiffs make the conclusory assertion they collectively "hold unwavering sincere religious beliefs that prohibit them from vaccinating themselves or their children." FAC ¶¶ 4; 90. But it is Plaintiffs' burden at the pleading stage to provide sufficient factual allegations that establish the grounds entitling them to relief—and not just "labels and conclusions" or "a formulaic recitation of the elements of a cause of action." Bell Atl. Corp. v. Twombly, 550 U.S. 544, 545 (2007). Plaintiffs have not met this burden because they failed to identify a single belief of theirs that is violated by vaccination, or the religious tenets that belief is based on. The allegation that they "prayed extensively and consulted the Bible when deciding whether or not to vaccinate their children" may establish the sincerity of their beliefs (see FAC at ¶¶ 20, 33, 39), but it does not establish what their actual beliefs are or why those beliefs are religious rather than personal in nature. This lapse is particularly resonant in the context of SB 277, which eliminated a personal belief exemption to California's vaccination requirements—recognizing that opposition to vaccination may be a matter of personal, not religious, beliefs that enjoy no First Amendment protection. Because

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Exercise claim should be dismissed.

objections to vaccination and not religion.⁵

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C. The School Vaccination Law Is A Neutral and Generally Applicable Law

of Hum. Res. of Oregon v. Smith, 494 U.S. 872, 878-82; see also Fulton, 141 S. Ct. at 1876-77

subject only to deferential rational basis review, which it clearly satisfies. Governmental

Even if there were a burden on Plaintiffs' religion, the vaccine law nevertheless would be

Plaintiffs have failed to allege a burden to any articulated religious belief of theirs, Plaintiffs' Free

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restrictions that incidentally burden religious activity are not discriminatory—and as such are subject to rational basis review—if they are neutral and of general applicability. *Emp. Div., Dep't*

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(declining to overturn *Smith*). The vaccine law is one such law.

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1. SB 277 Does Not Target Religious Belief

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Despite Plaintiffs' conclusory allegations to the contrary, SB 277 is neutral because it addressed a broad category of "philosophical" objections to vaccination and did not target religion. A law is not "neutral" only if it targets religious belief or has a purpose of suppressing religion. *Church of Lukumi Babalu Aye v. City of Hialeah (Lukumi)*, 508 U.S. 520, 533 (1993).

Plaintiffs' assertion that SB 277 was not neutral to religion rests solely on the fact that the

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law "intentionally" repealed the personal belief exemption and "thereby remov[ed] a religious exemption option" from vaccination requirements. FAC ¶¶ 101, 117. This, of course, ignores

that in removing the personal belief exemption, SB 277 actually targeted a broad expanse of

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objections to vaccination that included both secular and religious objections. See RJN Ex. 14 at

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16; see Stormans, Inc. v. Wiesman, 794 F.3d 1064, 1077 (9th Cir. 2015) (regulation was neutral

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because it "applies to *all* objections . . . that do not fall within an exemption, regardless of the

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motivation behind those objections"). On its face, SB 277 focused on this range of philosophical

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In fact, the legislative history for SB 277 shows respectful and considered debate over the removal of California's personal belief exemption, with a recognition that the repeal would have

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⁵ Even if it had repealed a religious exemption, this would still be insufficient to show religious expression was targeted. *See We The Patriots*, 76 F.4th at 149 ("that the Legislature repealed a previously authorized religious exemption does not in and of itself transmute the law into a non-neutral law that targets religious beliefs").

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an incidental impact on the subset of parents who may have previously obtained a personal belief exemption based on religious beliefs. *See, e.g.*, RJN Ex. 14 at 16-17.⁶ SB 277's legislative history shows no animosity to those beliefs. *Id.* Nor does it show any differential treatment. *Id.* Instead, it shows the removal of the personal belief exemption applied equally to all Californians who may have personal beliefs against vaccination, regardless of whether those beliefs may be religiously motivated. *Id.* Because Plaintiffs have not alleged any facts amounting to animus, they have failed to dispute that SB 277 is neutral and should be subject to rational basis review.

SB 277 Does Not Allow for Discretionary, Individualized Exemptions

SB 277 is also generally applicable because it did not create a "formal and discretionary mechanism for individual exceptions." *Tingley v. Ferguson*, 47 F.4th 1055, 1088 (9th Cir. 2022). Under the individualized exemption doctrine, a law is not generally applicable if it provides a "formal mechanism" for granting individual exceptions to the law that vests discretion with the law's enforcing officers. *Id.* (citing *Fulton* at 1879). Plaintiffs allege the medical exemption in California's vaccine law falls within this doctrine because it grants doctors and CDPH staff "individualized review of every exemption in order to make a determination." FAC ¶¶ 53, 104-106. Plaintiffs fail to specify what exact determination Department staff make. But to the extent they seek to infer that Department staff have discretionary power to grant individual exemptions, they misconstrue Free Exercise precedents and misunderstand the statutory scheme at issue.

The individualized exemptions doctrine has "nothing to do with an across-the-board" categorical exemption like the medical exemption contained in Health and Safety Code section 120372. *See Smith*, 494 U.S. at 884. As the Ninth Circuit has explained, the doctrine developed in cases where state law used an "open-ended, purely discretionary standard" ("good cause") that required an "individualized governmental assessment of the reasons for the relevant conduct." *Stormans*, 794 F.3d at 1081; *see also Fulton*, 141 S. Ct. at 1878 (holding a municipal contract

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created a mechanism for individualized exemptions subject to strict scrutiny because it expressly			
afforded a city official "sole discretion" without limits to grant exemptions to the city's anti-			
discrimination policy). Id. The Ninth Circuit has made clear that only this type of "unfettered			
discretion" to create case-by-case exemptions to an otherwise applicable law is at issue in the			
individualized exemptions doctrine. Stormans, 794 F.3d at 1081-1082. By contrast, if an			
exemption is "tied to particularized, objective criteria," the law remains generally applicable. Id.			

In *Stormans*, a state law requiring pharmacies to deliver medications contained an exemption for circumstances "substantially similar" to five enumerated exemptions, one of which was "good faith compliance" with another law. *Id.* at 1081-82. Even though the terms "substantially similar" and "good faith compliance" were undefined—and thus subject to interpretation by officials—the Ninth Circuit rejected the argument that the rule allowed for discretionary, individualized exemptions. *Id.* Rather, it held, "[t]he mere existence of an exemption that affords some minimal governmental discretion does not destroy a law's general applicability." *Id.* at 1082. Critically, the law did not give officials "unfettered discretion" to grant exemptions because "substantially similar" was "tethered directly to those five business-related exemption categories" listed alongside it. *Id.*; *see Doe*, 19 F.4th at 1180 ("the rigidity of the medical exemption" to vaccine policy meant no individualized exemptions existed).

California's medical exemption relies on particularized, objective criteria that leaves no discretion to officials. Specifically, the exemption relies on (1) concrete statutory criteria, (2) published recommendations by medical organizations, and (3) objective standards of care governing licensed medical professionals. For a child to obtain a medical exemption for a required vaccine, a licensed physician must issue a sworn certification that meets particular criteria enumerated in code. § 120372(a)(2)(A)-(H). This includes a "description of the medical basis for which the exemption for each individual immunization is sought" and a statement that the child was evaluated "consistent with the relevant standard of care." § 120372(a)(2)(C), (F). See We the Patriots USA, 76 F.4th at 151 (reliance on doctors' professional judgment to determine if a child qualifies for a medical exemption does not make an exemption discretionary).

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Contrary to Plaintiffs' implied suggestion, the Department does not review every medical

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exemption submitted by doctors. Rather, only in limited situations where the Legislature deemed there was a sufficiently high risk of non-compliance, will a registered nurse or licensed physician with the Department review submitted certification forms to ensure compliance with these standards of care. § 120372(d)(2)-(3) (review limited to schools with immunization rate below 95 percent, medical providers who have submitted five or more medical exemptions in a year, and schools that fail to report their immunization rates). Specifically, the Department nurse or physician reviews the submitted documentation to identify medical exemptions that "do not meet applicable . . . criteria for appropriate medical exemptions," as specifically set forth by the Advisory Committee on Immunization Practices (ACIP) of the federal Centers for Disease Control and Prevention (CDC), and the American Academy of Pediatrics. § 120372(d)(3)(A); see RJN Exs. 19, 20 (ACIP and CDC recommendations with evidence-based contraindications and precautions). And while the Department reviewer "may accept a medical exemption that is based on other contraindications or precautions" (i.e., not included on the published recommendations), such an exemption must still be consistent with the relevant medical standard of care and be supported by written documentation. See § 120372(d)(3)(A); Ex. 21 at 7 (U.S. Dept. of Health and Human Services' Standards for Pediatric Immunization Practice). The medical exemption is thus thoroughly tethered to objective standards of care and published recommendations, leaving Department staff with no discretion. See We the Patriots USA, 76 F.4th at 151.

This reliance on objective standards of care is notably distinguishable from the Mississippi vaccine law enjoined in *Bosarge v. Edney*, 669 F. Supp. 3d 598, 610 (S.D. Miss. 2023) and cited in the Complaint. That law allowed medical exemptions only when, in the "opinion" of a local health officer, the "exemption will not cause undue risk to the community." *Id.* at 610. Untethered to any stated criteria, that law was much closer to an "open-ended" standard subject to strict scrutiny. *See Stormans*, 794 F.3d at 1081. But because California's medical exemption does not provide for any discretionary, individualized exemptions, it is subject to rational basis.

3. SB 277 Does Not Contain a Comparable Secular Exemption

Finally, Plaintiffs fail to establish that the vaccine requirement contains a comparable secular exemption justifying strict scrutiny. A law is not generally applicable if it selectively

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prohibits "conduct motivated by religious belief, but fails to include in its prohibitions substantial,			
comparable secular conduct that would similarly threaten the government's interest." Stormans,			
794 F.3d at 1079; see Tingley, 47 F.4th at 1088-89. Whether secular and religious activities are			
"comparable" is evaluated "against the asserted government interest that justifies the regulation at			
issue" and requires a focus on the risks posed, not the reasons for the conduct. <i>Id.</i> (citing <i>Tandon</i>			
v. Newsom, 141 S. Ct. 1294, 1296 (2021)). Thus, a law lacks general applicability if it "prohibits			
religious conduct while permitting secular conduct that undermines the government's asserted			
interests in a similar way." Fulton, 141 S. Ct. 1877.			

Plaintiffs have alleged that three secular exemptions to the vaccine law exist for: (1) home-based private schooling or independent study programs, (2) medical exemptions, and (3) students with individual education plans (IEPs) pursuant to the IDEA. FAC ¶ 53. But Plaintiffs fail to allege any facts showing that these three alleged exemptions are actually comparable. Nor can they, since the alleged exemptions do not pose the same risk to the State's goal of protecting the health and safety of students through increased immunization.

First, the exemption for home-schooling or independent study applies only to students who remain outside of the school setting, either receiving private instruction at home or instruction from their school district that is delivered remotely without any presence in a classroom. *See* § 120335(f); RJN Ex. 22 (guidance describing independent study); Cal. Educ. Code §§ 51744-51749.6 (statutory requirements for independent study). On its face, this non-institutionalized setting poses a lower risk to the spread of communicable disease than unvaccinated children receiving in-person instruction in the classroom, a setting known for the rapid spread of disease. *See French*, 143 Cal. at 662 ("children attending school occupy a natural class by themselves, more liable to contagion, perhaps, than any other class that we can think of").

Second, the medical exemption (described in detail above) is similarly not comparable to a religious exemption in terms of risk to the State's interest in protecting child health and safety. The medical exemption actually furthers the State's interest in protecting the small portion of students who cannot be vaccinated due to the risk of harm that a particular vaccine may inflict on them. *See id.* at 153; *Doe*, 19 F.4th at 1178 (holding medical exemption "serves the primary

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interest for imposing the mandate" and "does not undermine the District's interests as a religious
exemption would"). By contrast, a religious exemption would directly harm these medically
vulnerable students, for whom community immunity is critical, by threatening that immunity. In
addition, medical exemptions, unlike personal belief exceptions, may be limited in duration. See
§ 120372(a)(2)(G); Cal. Code Regs., tit. 17, § 6035(a)(3). Medical exemptions also only exempt
the specific vaccination or vaccinations that are medically contraindicated—all other vaccinations
are still required. Cal. Code Regs., tit. 17, §§ 6050(a), 6051(a).

Moreover, the exemption is not comparable because it is extremely narrow in scope, as shown by annual statewide school immunization data published by the Department. *See We the Patriots USA*, 76 F.4th at 152-53 (courts compare risk between secular and religious exemptions based on the aggregate risk of the activities at issue, and not risk of individual behavior in a particular setting). That data shows only 0.3% of kindergarteners and 0.1% of seventh graders had a permanent medical exemption in the 2021-22 school year. *See* RJN Exs. 17 at 10, 18 at 11. These rates are notably lower than the rates of the personal belief exemption in 2015-16 before that exemption was repealed; that year, 2.5% of kindergarteners and 2.1% of seventh graders had personal belief exemptions. RJN Exs. 17 at 10, 18 at 11. That is a difference of 830% among kindergarteners and 2100% among seventh graders. This difference is only further heightened when the data is broken out regionally, as personal belief exemptions occurred in deep pockets before they were eliminated, with exemptions reaching up to 21 percent of students in some school districts in 2015—well below the threshold for herd immunity. *See* RJN Ex. 13 at 2.

While this comparison is based on the rate of personal belief exemptions (and not religious exemptions), it is apt given the overlap between the two. In fact, the data likely substantially undercounts the risk posed by religious exemptions to the school vaccine law, given the well-documented surge in religious exemptions to vaccine mandates since the COVID-19 pandemic that Plaintiffs themselves highlight in the Complaint. *See* FAC ¶ 70; *see also* RJN Exs. 23, 24. In fact, the 2022-23 school year saw the "highest exemption rate ever reported in the United States," according to the CDC, with 40 states seeing rises in exemptions. *See* RJN Exs. 25, 27.

Finally, the IEP provision is similarly not comparable. See Doe, 19 F.4th at 1179

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(recognizing "in-person attendance by unvaccinated students with an IEP is not comparable to inperson attendance by students with religious objections to vaccination"). That provision provides
that the vaccine law "does not prohibit a pupil" with an IEP "from accessing any special
education and related services required by his or her [IEP]." § 120335(h). As a general matter,
federal law requires implementation of IEPs, see Doe, 19 F.4th at 1179, which vary in terms of
the in-classroom requirements for students. In any event, as with the medical exemption, recent
immunization data shows that the number of unvaccinated students in California with IEPs is
dwarfed by the historical rates of personal belief exemptions. For instance, only 0.7% of seventh
graders in California were exempted from vaccine requirements based either on their IEP or their
home-school status (publicly available data does not disaggregate the two) in 2021-22; by
contrast, the personal belief exemption rate was four times as high in 2014-15. See RJN Ex. 18 at
4. And, as with the medical exemption, this provision actually furthers the vaccine law's goals in
that it does not force vaccination on children with physical disabilities that may make them
medically vulnerable, while maintaining the community immunity needed to protect them.⁷

Because there are no comparable secular exemptions, the vaccine law is generally applicable and subject to rational basis review only.

D. Even if Strict Scrutiny Applied, SB 277 Would Pass Constitutional Muster

Even if this Court were to conclude that strict scrutiny did apply, the school vaccination law would survive because it is narrowly tailored to achieve a compelling governmental interest. *See Fulton*, 141 S. Ct. at 1881. Courts have long recognized the State has a compelling interest in

Plaintiffs highlight that foster, homeless, and military youth may attend school in California without proof of immunization. *See* FAC ¶ 57. State law does allow these students to transfer to and enroll in a new school without delay, even if the new school has not received their immunization records, in recognition of the students' vulnerable status. *See* Cal. Ed. Code §§ 48204.6(c)(3), 48852.7(c)(3); 48853.5(f)(8)(B). But these students are still subject to the vaccine requirements. *See* §§ 120335, 120341(b), 120375; RJN Ex. 28 at 9 ("the law still requires that the school obtain the student's immunization record and ensure that these students meet all immunization requirements"). As with all transfer students, state law requires they provide proof of vaccination within 30 school days of enrollment. Cal. Code Regs. tit. 17, § 6035(d); Cal. Ed. Code § 49701 (30-day requirement for youth of military families); RJN Ex. 28 at 8-9; *see also* Cal. Ed. Code § 48853.5(f)(8)(C) (burden on new school to request foster youth's records from prior school); 42 U.S.C. § 11432(g)(3)(C)(iii) (school must assist homeless students to obtain missing paperwork or immunizations). A student who does not comply must be excluded. Cal. Code Regs. tit. 17, § 6040. The Ninth Circuit has recognized that conditional enrollment is not the risk equivalent of a vaccine exemption. *Doe*, 19 F.4th at 1179.

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protecting the health and safety of its residents, including the students in its schools and daycares,			
by preventing the spread of communicable diseases. <i>Jacobson</i> , 197 U.S. at 11; <i>Love</i> , 29 Cal.			
App. 5th at 990. More specifically, it has a compelling interest in increasing vaccination rates at			
schools and daycares statewide in order to prevent outbreaks of communicable diseases in schools			
statewide, to protect children unable to be vaccinated who attend those schools (because they are			
too young or are immunocompromised), and to prevent community spread by preventing			
childhood diseases from taking root in schools. To that end, "[c]onditioning school enrollment on			
vaccination has long been accepted by the courts as a permissible way for States to inoculate			
large numbers of young people and prevent the spread of contagious diseases." Whitlow, 203 F.			
Supp. 3d at 1091; see Love, 29 Cal. App. 5th at 992 ("compulsory immunization has long been			
recognized as the gold standard for preventing the spread of contagious diseases").			

It bears repeating that two courts have already determined that SB 277 was narrowly tailored to achieve these ends. *Brown*, 24 Cal.App.5th at 1145; *Love*, 29 Cal. App. 5th at 996.

In 2015—faced with a measles outbreak on the one hand, and alarming pockets of unvaccinated communities on the other—the California Legislature determined that it needed to take significant action to ensure the gold standard of compulsory school vaccination was not undermined. The State did not take blanket action to eliminate all vaccination exemptions, recognizing, for instance, that some children are too young or have medical conditions that make vaccination unsafe. See RJN Ex. 13 at 7. Rather, the Legislature took specific action to eliminate the personal belief exemption that was a growing and unrestricted loophole preventing schools from reaching community immunity and undermining the effectiveness of the school immunization law. See id. at 2. At the same time, to ensure that that elimination of the personal-belief exemption did not impact students' rights under the State constitution to equal education, the Legislature added an exemption for public school independent study programs with no classroom component and home-based schools (as these settings did not carry the same risk of transmitting communicable disease as classroom-based instruction). Similarly, the Legislature added a provision to ensure that the elimination of the personal belief exemption would not impact the ability of students to receive special education services mandated by State and federal

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law. Finally, while the Legislature empowered the Department to impose additional requirements, it limited this ability by requiring that future vaccines mandated without Legislative action include medical and personal belief exemptions.

Plaintiffs concede that the State has a compelling interest "in promoting childhood vaccination," but allege that this interest "is not so extraordinary as to prohibit an exemption for secular reasons, which poses a similar contagion hazard as a hypothetical religious exemption." FAC ¶ 103. But, as explained above, the law does not contain comparable secular exemptions.

Otherwise, Plaintiffs allege that "California does not prohibit unvaccinated children from attending camp, visiting public libraries or museums, or from interacting with their peers in any other way." *Id.* But the lack of a mandatory vaccination requirement in these other areas does not make the law underinclusive. *See Lukumi*, 508 U.S. at 546. Critically, the State does not require mandatory attendance of children in camps, libraries or museums, as it does elementary and secondary school. *See We the Patriots*, 76 F.4th at 156 (requiring "children be vaccinated to attend school – as opposed to participate in community sports leagues, religious gatherings, and social gatherings of all types," is rational because only school attendance mandated by law). Nor is there any allegation that such environments pose the same risk of transmitting disease as schools, where the State has well-established compelling interest to ensure children's safety.

Similarly, Plaintiffs allege that California does not "require that adult faculty, staff members, or school visitors provide proof of immunization." FAC ¶ 103. This is misleading, since the FAC acknowledges that local workplace requirements are in place across the State that that would mitigate such a risk. See FAC ¶ 103. But even if true, this does not establish the law is underinclusive since there is no allegation that adult immunization rates in schools have the same impact on the spread of childhood communicable disease as vaccination of children.

Because SB 277 and the school vaccination law are narrowly tailored to advance the State's interest in preventing childhood communicable diseases, preventing outbreaks, and protecting vulnerable students, the law meets strict scrutiny.

CONCLUSION

For the reasons above, the FAC should be dismissed in its entirety without leave to amend.

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