Review Essay: A Shot in the Dark. Is it time to shine a new spotlight on antivaccination?

*Vaccine Nation: America’s Changing Relationship with Immunization*
Elena Conis
Chicago: University of Chicago Press, 2014, 353 p., $27.50 (cloth), $18.00 (paper), $18.00 (eBook)

*The AIDS Conspiracy: Science Fights Back*
Nicoli Nattrass
New York: Columbia University Press, 2012, viii + 225 p., $30.00 (paper), $29.99 (eBook), $85.00 (hardcover)

*Calling the Shots: Why Parents Reject Vaccines*
Jennifer A. Reich

*The Antivaccine Heresy: Jacobson v. Massachusetts and the Troubled History of Compulsory Vaccination in the United States*
Karen L. Walloch
Rochester: University of Rochester Press, 2015, x + 352 p., $125.00

For many, the vaccine skeptic Jenny McCarthy personified the heroic patient-consumer in the American marketplace. In her well-publicized ventures, McCarthy valiantly challenged the medical establishment, conventional wisdom, and championed alternative approaches to treatment. She promoted the idea that vaccines cause autism and that chelation therapy helped cure her son of autism. Her claims were not supported by medical consensus. Yet, the fact that she empowered herself by going onto the internet to discover new treatments that challenged orthodox medical practices ingratiated her to many people.

This isn’t altogether new. Both Charles Rosenberg and James Patterson have written about the longevity of religious or populist medical countercultures in the US. These “others” or “outsiders” have conflicted with learned medical traditions, and such alternatives may appear and disappear as mainstream medicine selects, refines or rejects them. But new alternatives – or contested medicines – are constantly generated by the limitations and weaknesses of the elite practices they run alongside. McCarthy’s high-profile campaign, which has not fully concluded, was of course an example of an alternative to the mainstream, and a recent assemblage of new books,
many of which flow directly from James Colgrove’s *State of Immunity* (2006), position this movement in a larger history of vaccines and immunization. And while the books depart in geographical, temporal, and disciplinary ways, some well-worn tropes are detectable.²

Karen L. Walloch’s *The Antivaccine Heresy* exposes readers to early wrangling over vaccination – specifically, compulsory vaccination – in Massachusetts. Set against the vivid, shifting backdrop of Progressive Era ferment and, more particularly, a modern paradigm of public health predicated on the rise of bacteriology, Walloch examines the landmark *Jacobson v. Massachusetts* decision of 1905, which upheld a state statute mandating vaccination. It established a “broad and sweeping state authority to compel citizens to undergo medical treatment in the interest of public health” (2). Many of the characters involved believed “they were fighting for a fundamental right to preserve individual health choices against a corrupt group of medical elitists who sought to establish a state-supported monopoly over medicine” (7). Even more, these individuals – sometimes implicitly, other times, explicitly – advanced views of compulsory vaccination as un-American, anathematic to individual liberty, and a by-product of both “scientific subterfuge and political shenanigans” (9). Yet, Walloch avoids criticism of historical actors holding anti-vaccination agendas. “It is simplistic and inaccurate,” she writes, calmly and soothingly, to describe them as “irrational antigovernment cranks” (216). The lesson she is trying to impart is clear. Resistance to immunization or other medical decisions is neither borne out of singular ignorance, nor is it always a function of a paranoid response to big government and the medical establishment.

In Elena Conis’s *Vaccine Nation*, the fluid negotiation over various vaccines, including those for polio, pertussis and Human papillomavirus (HPV), is on full display. Readers are exposed to a “wildly diverse set of influences, including Cold War anxiety, the growing value of children, the emergence of HIV/AIDS, changing fashion trends, and immigration,” that have shaped vaccine acceptance, as well as resistance (2–3). She calls this resistance “vaccine hesitancy,” and describes how, beginning in the late 1960s, segments of the broader second-wave feminist movement began to have reservations about American medical authorities and the compulsory nature of vaccination. This type of critique was reflected in popular magazines, including *Good Housekeeping*, *Redbook*, and *Ladies Home Journal*, and represented both fear and doubt related not just to the side effects associated with vaccines, but also a rejection of benevolent paternalism in the medical marketplace.
Later, the organized vaccine safety movement, which, according to Conis, was a product of conservatism in the 1980s, proved especially skilful in using the mainstream media to disseminate a message of vaccine resistance.

Throughout, Conis is a model of cold dispassion. She does not target anti-science and anti-vaccine conspiracy theorists, practitioners of pseudoscience, or misguided policy makers. On the other hand, as a former journalist for the *Los Angeles Times*, Conis’s critiques of the American media ring loudly. She argues that the media sustained the vaccine and autism discussion – popularized by former *Playboy* model and talk show host Jenny McCarthy – long after it was disproven by scientists, because it made for sensational headlines. It is a fitting and somewhat frightening conclusion to Conis’s story about the contestability of vaccines in modern America and the role of the fifth estate.

A similar manner is adopted by Jennifer Reich in *Calling the Shots*. A sociologist in Colorado who’s conducted award-winning research on welfare and families, Reich uses the term “vaccine refusal” and showcases the various points of view of parents reluctant to get shots for their kids. It’s an intriguing read, as we explore the depths of white, college educated, upper middle class families pushing back against mainstream medicine. What are their beliefs? Aspirations? Fears? Reich begins with Disneyland, where in 2014, a measles outbreak rapidly spread throughout the US and sickened close to 150 people. It’s just one example of an outbreak that medical authorities blame on falling vaccination rates across the country, and an appropriate launching pad to examine the resonance of individual liberties and responsibilities. It is also a reflection upon the social reality that families in California and beyond don’t often perceive community support to be improving their lives. Vaccine requirements in the 1960s and 1970s, as Conis demonstrates in *Vaccine Nation*, were aimed to foment access as part of the War on Poverty and Great Society programs. In short, they were designed to equalize access to health for all children. Sadly, as Reich reveals, they are now perceived as simply one more way in which the state requires public participation without also providing support that increases the well-being of all families, an issue also exposed in her previous book *Fixing Families: Parents, Power, and the Child Welfare System* (2005).

For Conis and Reich, modern vaccine resistance, practiced most commonly by those with the greatest access to resources and education, raises fundamental questions about patient-consumer choice, bodily integrity, collective responsibility, and individuals’ relation-
ship to the state. Walloch, similarly, seeks a cordial dialogue with the anti-vaccinationists. As a group, these books seek to appreciate why well-educated and reasonable people object to medical innovation, and they help develop more sophisticated responses to vaccine counter-narratives and counter-knowledges in the present. This operational approach, of course, extends much further back in the historiography than Colgrove’s seminal work. In tone and tenor, this manner resembles Katherine Arnup’s CBMH/BCHM piece, now a quarter-century old, which questioned whether compulsory immunization in Ontario made Torontonians “Victims of Vaccination.” Arnup wrote that rejecting the anti-vaccines as a lunatic fringe would achieve little other than strengthening their determination to push on. The tactics of contemporary opponents of immunization are similar to their turn-of-the-century counterparts in Canada, she insisted. Not only in that “they write and publish leaflets and books, hold demonstrations, and lobby politicians to repeal compulsory immunization laws,” but they also draw on rhetoric and fear. Arnup insisted we must be willing to examine the arguments put forward by the Anti-Vaccination League of Canada and the Committee Against Compulsory Vaccination, organizations whose members genuinely believed they were fighting “for their own good.” We must remember, too, that the anti-vaccinationists, then and now, do not believe that immunization will help them; on the contrary, they view it as a form of “compulsory poisoning.”

To persuade them otherwise is no easy task – though one must take a shot in the dark. Scholars, in addition to creating dialogue to the “resistors” and “refusers,” should also offer up a challenge. This was the case in Nicoli Nattrass’s book, The AIDS Conspiracy, which evaluates and debunks troublingly persistent AIDS conspiracy theories and their entailing scientific contestation. She examines assertions that HIV was a “man-made bioweapon,” as well as “AIDS denialist” views, which hold HIV as harmless, and antiretroviral medications as the actual cause of AIDS. Scientists and clinicians, according to such renderings, have been hoodwinked or, worse yet, constitute part of a larger strategy to cause harm. As a result, confidence in the scientific consensus on HIV/AIDS is undermined, and this, in turn, manufactures perverse outcomes: unsafe sex, failure to adhere to antiretroviral treatment, and an unwillingness to undergo testing for HIV. Nattrass doesn’t exactly breathe fire, but she certainly takes aim at relativist philosophical stances, anti-science conspiracy mongers, practitioners of pseudo-science, and misguided policymakers.
Instead of kindly, dialogue-driven approaches to the history of American immunization, scholarship and public health might benefit mutually from a harder edge – a confrontation here and there. Very real consequences exist in ignoring the best scientific evidence on inoculating agents. Dismissing the opponents of immunization as minor actors – “mere nonentities,” as Arnup put it – is no longer an option. It’s difficult to underestimate the potency and appeal that their message has: McCarthy’s campaign included conspiracy theories, accusations, a charismatic personality, and eye-catching banners like “Fighting for My Autistic Son” and “How I Saved My Son.” Paul Offit, who adopts an approach similar to Nattrass, argues that modern-day false prophets (such as McCarthy) deceive the public, and he ferociously attacks the lawyers, journalists, celebrities, and politicians who buttress such charlatans. In his history of autism research, he stands inflexibly against unscrupulous science and risky therapies put forward by many anti-vaccination activists – all in the name of public health.5

Vaccines naturally provoke potent social, political, and economic responses. They raise questions about scientific authority and the production of medical knowledge, liberty, and collective goals as a society. Even more, vaccines have challenged the physician’s influence over patient-consumer choice in the medical marketplace, as anyone who observed Jenny McCarthy shape the discussion over autism and anti-vaccination can confirm.

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Notes
2. A typology of resistance is also important. As written in Stephen E. Mawdsley, *Selling Science: Polio and the Promise of Gamma Globulin* (New Brunswick, NJ: Rutgers University Press, 2016), genuine health
risks occasionally accompanied the testing and use of vaccines, which led researchers to use both compromise and coercion to press ahead. At the same time, vaccine resistance and refusal were predicated on vicious and unscrupulous scientific experiments. See Susan Reverby, *Examining Tuskegee: The Infamous Syphilis Study and Its Legacy* (Chapel Hill: University of North Carolina Press, 2009) and *Tuskegee’s Truths: Rethinking the Tuskegee Syphilis Study* (Chapel Hill: University of North Carolina Press, 2000).


