WISCONSIN POLICY FORUM

LAGGING STUDENT IMMUNIZATION, HEIGHTENED RISK

Rates of student immunizations in Wisconsin rose in 2026, which is encouraging but unlikely to reverse a long-term downward trend that sped up in the wake of COVID-19. Students falling behind schedule is a perennial concern, but a rise in personal conviction waivers appears behind much of the recent vaccination rate decline. As students in fewer districts meet minimum immunization requirements, the statewide risk of outbreaks rises.

The proportion of Wisconsin's K-12 students meeting the state's minimum immunization requirements remains at a near-record low despite a one-year increase in the 2025-26 school year (referred to as 2026 in this brief). This increase brings the statewide rate to 87.4%, which is much lower than the level that would provide population-wide protection against outbreaks of disease.

As outbreaks of measles occur across the nation and the state, making such protection a very practical consideration for many communities, we turn to state data to provide a historical perspective on immunization in Wisconsin and to update the Forum's previous research with additional years of data and insight.

FIFTY YEARS OF DISEASE PREVENTION

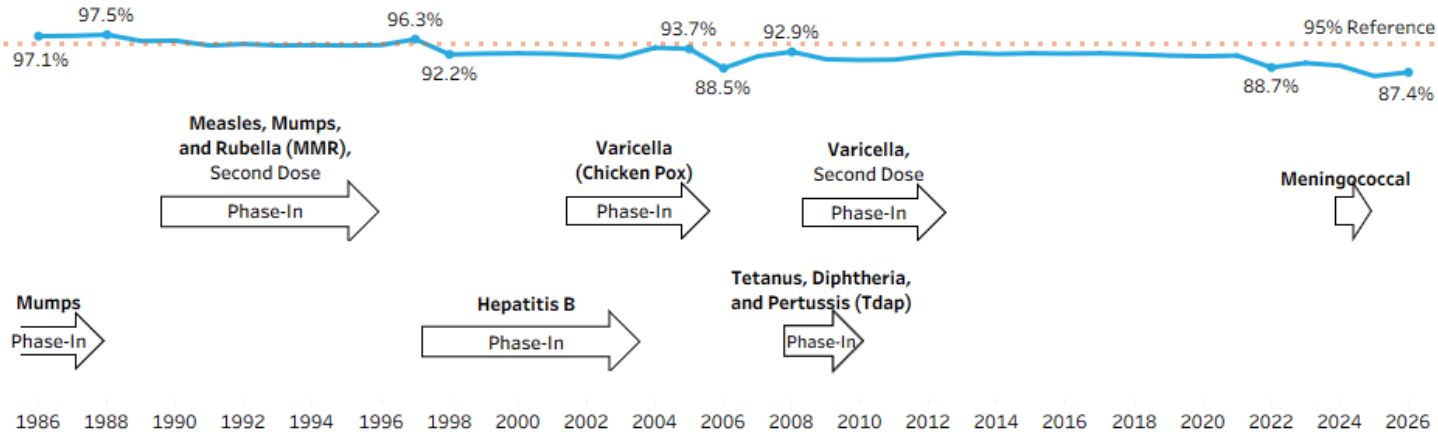
Data from the state Department of Health Services (DHS) show the percentage of Wisconsin students meeting minimum vaccination requirements fell from 97.1% in 1986 to 87.4% in 2026 (see Figure 1). The share of fully vaccinated students peaked in 1988 at 97.5% and has trended downward ever since, dropping by more than 10 percentage points overall by 2026.

Over nearly the same time frame, immunization requirements expanded to include several new vaccinations and additional doses of existing vaccines. Beginning in 1975, the Wisconsin Immunization Law mandated that students be vaccinated against five diseases – polio, diphtheria, tetanus, pertussis, and measles – but allowed exceptions for religious or health reasons. By 50 years later, the list of required vaccines had expanded to ten diseases including rubella, mumps, hepatitis B, varicella (chickenpox), and meningococcal disease (meningitis).

Wisconsin's history of student vaccination includes five years in which the immunization rate dropped by two or

Figure 1: Student Vaccination Rate Gradually Declines Over Time, Sharply Drops in Recent Years

Percent of Wisconsin's students meeting immunization requirements and timeline of vaccination requirement updates



Source: Wisconsin Department of Health Services

more percentage points. Four of these years – 1998, 2006, 2009, and 2025 – occurred as additional vaccinations were being phased into the state's requirements. Those years also saw increases in the percent of students logged as being behind schedule. This correlation suggests that the drops may have been connected to the administration of new guidelines.

Students behind schedule, in the process of a multiple-dose vaccination series, or with no record on file comprised the majority of cases in which a student was not fully vaccinated for every year until 2004 (see Figure 2). Since then, they have made up at least one-third of cases each year, making them an important part of the story behind students not meeting minimum immunization requirements. Many of these students may be new to Wisconsin schools. Access to health care and the degree to which school officials pursue students missing vaccinations may also affect these numbers.

STATE SEES ACCELERATED DECLINE

The fifth year with a large single-year decrease was in 2022. Its 3.2-percentage-point drop from 91.9% to 88.7% did not coincide with a change in vaccination requirements. It also did not correspond with an increase in any specific non-vaccination category like students being behind schedule or requesting a waiver. It did, however, occur after the height of the COVID-19 pandemic, when district leaders were focused on that crisis.

It is possible that the 2022 drop was not as dramatic as it appears on paper. Remote learning likely impacted data collection in 2020 and 2021, meaning that the reporters might not have captured some cases of unfulfilled requirements until 2022. The dataset's irregularities also suggest it is not pristine.

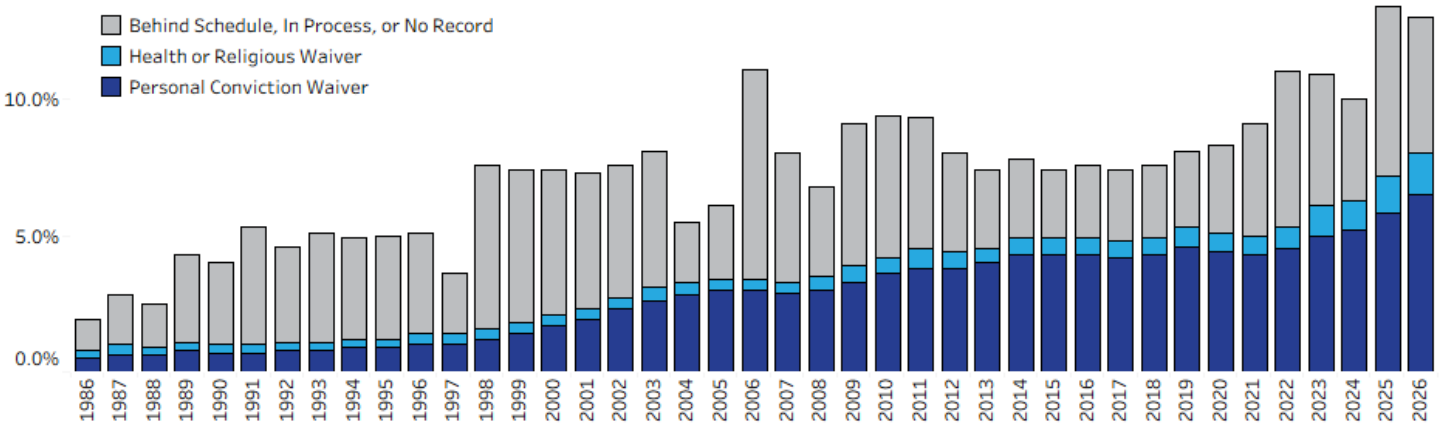
If the recorded 2022 drop were solely a product of data inaccuracy, though, we would expect subsequent years to show a course correction, with rates rebounding. And while rates did rise by 1.2 percentage points from 2022 to 2023, they fell again in 2024 and by even more in 2025. The slow decline that preceded 2022 appears to have accelerated with the disruption and controversy triggered by COVID-19.

Not all of the accelerated decline in the 2020s can be laid at the feet of COVID-19 and its associated impacts. Some of the drop is likely attributable to the new meningococcal vaccination requirement mandated in 2024, as evidenced by the 2025 increases in the rates of students being logged as behind schedule and in process. Figure 2 shows that, combined with students with no record, their total share rose to 6.2% in 2025, up from 3.7% in 2024. By 2026, more students had secured the new vaccine; the combined share of behind schedule, in process, or no record receded to 5.0%; and the vaccination rate rebounded to 87.4% – a full percentage-point increase from the previous year. Still, it was not enough to recover from the large drop of 2.8 percentage points in the previous year alone.

Changing attitudes toward vaccinations appear to be the other major contributor to the accelerating decline in immunizations. The rate of students opting out of at least one vaccine via personal conviction waivers rose

Figure 2: Waivers Drive the Rise in Students Not Meeting Minimum Requirements

Statewide rates of students not fully vaccinated by reason and year



Source: Wisconsin Department of Health Services

to 6.5% in 2026. This is a stark change from the 1990s, when the use of those waivers remained below 2%. It then slowly grew over two decades before its recent surge. The last five years contained the three largest year-over-year percentage-point increases in the use of personal conviction waivers since they first became a legal option in 1980.

Immunization requirements may also be waived for health or religious reasons. The rates of health and religious waivers among Wisconsin's students in 2026 were 0.3% and 1.2%, respectively. Health waivers have remained at the same level for the past four decades. Religious waivers have followed a similar growth pattern as personal conviction waivers – that is, gradually increasing from low points in the 1980s, with recent acceleration in the 2020s.

A STATEWIDE ISSUE

If the decline in vaccinations were driven by just a few communities, perhaps one would consider it to be a regional issue rather than a statewide threat to public health – although, even in that scenario, the connectivity of communities can mean that infectious disease does not remain regional for long.

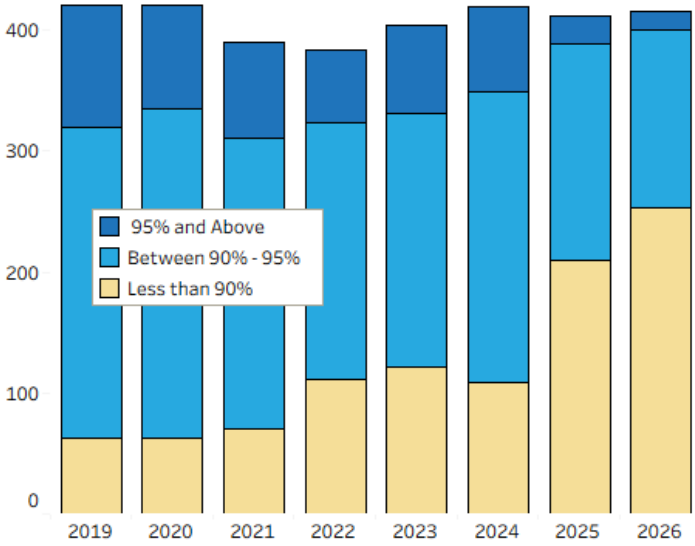
Instead, however, DHS data on vaccination rates by school district show that lowered protection levels are widespread. In 2019 (the first year for which district-level data are available), 101 districts reported that at least 95% of their students met minimum immunization requirements, compared to 16 districts in 2026 – an 84.2% decrease (see Figure 3). The number of districts with rates below 90% quadrupled, from 63 to 253.

Over half of the state's school districts are more than five percentage points away from 95% coverage. In other words, these districts would need to cut the number of students not meeting minimum requirements by more than half to reach 95%. (Although DHS does not set an overall target vaccination rate, this report uses 95% as a point of reference because it is the herd immunity threshold for the most contagious of the listed diseases, measles. The vaccination rates needed to ensure herd immunity vary by the disease, its contagion rate, and the frequency with which community members interact with each other.)

Small districts tend to report a lower share of fully vaccinated students. In 2026, very small districts with fewer than 500 students and small districts with 500 to

Figure 3: More Districts Report Low Immunization Levels

Number of Wisconsin school districts, by year and immunization level



Source: Wisconsin Department of Health Services

1,000 students both reported average rates over 12% for students not fully vaccinated: 12.9% for the former and 12.6% for the latter. Districts serving 1,000 to 4,000 students had an average rate of 11.0%, while districts serving more than 4,000 students (excluding Milwaukee Public Schools, or MPS) reported 10.0%.

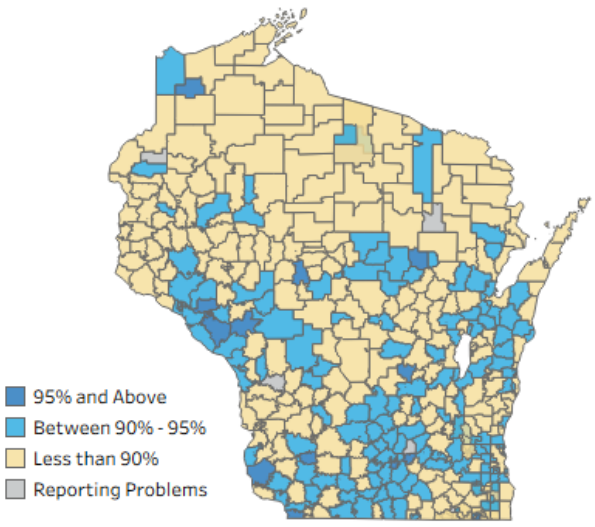
MPS, the largest district in the state, was one of 18 in the state to report more than 20% of the student population not meeting minimum requirements in 2026. (It had 22%.) Within that group of 18 districts, 15 of them served fewer than 1,000 students, and 15 were rural districts according to National Center for Education Statistics locale designations.

Rural districts overall reported an average rate of students failing to meet minimum requirements of 12.7% in 2026, compared to 11.2% among urban districts if MPS is excluded. (The rate jumps to 14.1% when MPS is included.) Suburban districts had the lowest rate at 8.1%, while town districts were at 11.9% (see Figure 4 on the following page).

These findings align with our previous 2023 report on the topic. As in that report, districts in 2026 from smaller and rural communities tended to have more students whose families waived immunization requirements on personal conviction grounds. Districts with high rates of economically disadvantaged families – like MPS – had higher rates of students behind on their vaccination schedules.

Fig. 4: Student Vaccination Rates Vary Around Wisconsin

Percentage of students by category and district, 2025-26



Source: Wisconsin Department of Health Services

GREATER SUSCEPTIBILITY TO OUTBREAKS

Several recent outbreaks of measles have made the risk of low vaccination rates clear. As of November 3, DHS reported that the Wisconsin outbreak included 431 cases. The majority of those affected were unvaccinated (99.3%) and children (57.3%).

The Wisconsin outbreak has primarily been focused in three counties – Grant, Iowa, and Lafayette. The school districts in these counties had combined 2026 vaccination rates of 88.4%, 89.8%, and 86.7%, respectively. While these rates are well below herd immunity levels, they are not the lowest countywide rates in Wisconsin. (The lowest rate is 78.0% in Burnett County.) The cases are illustrative of the increased risk of outbreak in any area within a state given the low rates. They further illustrate that those who are unvaccinated are most likely to contract the disease, including those who cannot receive vaccines, such as the very young or those with compromised immune systems.

EASY TURNAROUND NOT ON THE HORIZON

While the uptick in overall student vaccination rates from 2025 to 2026 is encouraging, DHS data on immunizations among kindergarteners suggest that the long-term downward trend is likely to continue.

Typically, vaccination rates for kindergarteners are lower than the entire student population because they are newly enrolled and more likely to be missing a dose of a vaccine. For example, in the 2026 data, 69.0% of districts reported that fewer than 90% of their kindergarten students were fully vaccinated, compared to the 60.1% of districts below 90% for the entire student body. In addition, 10.0% of districts with kindergarten classes reported that more than 10% of kindergarteners were in the process of getting vaccinated, and 3.4% of districts reported that more than 10% were behind schedule.

These reasons for not being vaccinated may be the most moveable over time, and getting these students vaccinated may be the easiest way to approach herd immunity. To do so, however, families may need encouragement or the removal of barriers to complete their vaccination schedules.

The more concerning trend among kindergarten students is that their rate of personal conviction waivers appears to be higher than the rate of their older peers. More than half of the state's school districts (57.1%) in 2026 reported kindergarten classes with higher or equal rates of personal conviction waivers than the rest of the district's student body. That includes 125 districts in which more than 10% of kindergarteners received personal conviction waivers. In those districts, even if all students who are behind schedule or in the process of receiving their vaccinations get caught up, the high rate of waivers – if left unchanged – will prevent the district from reaching population-level protection.

As health officials work toward greater public protection, they may first think of efforts to target students behind schedule, such as reminders from school nurses and health fairs offering vaccinations. The data show that reducing the number of personal conviction waivers across the state would also be a worthy public health goal. These efforts would require determining the individual reasons behind vaccination hesitancy, which may include misconceptions around the severity of diseases and misinformation about the efficacy and side effects of vaccinations. Health officials may also wish to address the difficulty of accessing medical care relative to the ease of signing a waiver. To the extent that the pandemic deteriorated institutional trust, taking the time to learn and understand the reasons behind immunization avoidance could be seen not only as an effort to restore public health but also an act of rebuilding trust.