

Homeschooling and Vaccines:

Attitudes, Access, and Public Health Considerations

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Key Points




Current research suggests that homeschooling parents are more likely to doubt the efficacy of vaccines and distrust the advice of medical professionals, resulting in higher rates of skipped or delayed vaccinations compared to non-homeschooling parents.




Vaccine hesitancy among homeschooling families is a growing public health concern as homeschooling continues to surge steadily in popularity across almost every state.



Homeschool oversight is lax on the whole in the United States, and this extends to vaccination requirements: only four states require that homeschooled students be vaccinated against preventable childhood illness and have enforcement mechanisms to ensure coverage.



Vaccine hesitancy among homeschooling communities is shaped by many factors, and the homeschooling community is not a monolith. While distrust of government and theological convictions play a role, research highlights how access to care and health education impact coverage.



There are gaps in current research. More engagement with homeschoolers, especially minoritized homeschooling communities and homeschool alumni experiences, is needed to better understand and address vaccine hesitancy.

Homeschooling Background

Rapid growth and changing demographics post-COVID

Homeschooling has experienced a rapid, and unexpectedly persistent, surge in popularity since the COVID-19 pandemic.¹ The Johns Hopkins Institute for Education Policy's Homeschool Hub estimates that approximately 5.92% of school-aged children were homeschooled in 2025, up from an estimated 2.9% in 2019.

The influx of new families has altered the composition of the homeschooling population. While white, religious families who have dominated homeschooling remain well-represented, homeschooling post-COVID has seen growth among communities of color and households making less than \$50,000, and has become substantially more secular.²

Shifts in motivations behind choice to homeschool

Motivations to homeschool have shifted as homeschooling has grown and become mainstream, but key trends persist in the face of significant demographic change.

With roots in leftist anti-school movements and the Christian right, contemporary American homeschooling was originally the province of countercultural groups fueled by strong, explicit ideological or pedagogical motivations.

Now, though many parents express substantive motivations for homeschooling (e.g., prioritizing time together as a family), it appears more parents are being “pushed,” as opposed to “pulled,” toward homeschooling. The most commonly cited motivation to homeschool in the latest national survey of parental and family involvement in education is “a concern about the environment of other schools.” Recent research has shown that minoritized families turn to homeschooling to evade violence and discrimination in brick-and-mortar schools: Black parents choose to homeschool to protect children from discipline disproportionality,³ communities of color *writ large* deploy home education to teach histories ignored or ostracized by public school curricula,⁴ and parents of neurodivergent and disabled children resort to homeschooling when conventional school fails to accommodate their children’s learning needs.⁵ Though many of these families come to appreciate, and even identify with, homeschooling, many homeschool because they see no other viable choice for their family, rendering them “second-choice” as opposed to “first-choice” homeschoolers.⁶

Nevertheless, first-choice and second-choice parents are united by a lack of trust in schools to educate and/or safeguard their children as well as they can. This can translate into what homeschool research leaders Robert Kunzman and Milton Gaither call a “hermeneutic of suspicion” toward government actors and institutions.⁷ One enduring product of such suspicion is outsized vaccine hesitancy in homeschooling communities.

Vaccine Hesitancy and Homeschooling

Vaccine hesitancy and anti-vaccine sentiment have been fixtures of homeschooling for decades. Before the pandemic, studies of homeschooling parents from a range of regions and demographic backgrounds have repeatedly found that they are more likely to doubt the efficacy of vaccines and distrust the advice of medical professionals.⁸ This has resulted in vaccine-eradicable diseases like tetanus⁹ and measles¹⁰ impacting homeschooling children despite being all but eradicated among the general populace.

COVID-19 pandemic exacerbated pre-existing trends

In the wake of the pandemic, anti-vaccine sentiment ballooned across the general public, but became even more pronounced in homeschooling communities. Nationally representative research convincingly shows that homeschooling parents are significantly less likely to vaccinate their children against both COVID-19 and vaccine-eradicable illnesses than non-homeschooling parents. A large survey of families conducted by the Washington Post and KFF in 2025 found that **homeschooling parents are nearly four times as likely as peers to report delaying vaccines or skipping them altogether.**¹¹ Twenty percent of parents who homeschool or have homeschooled applied for vaccine exemptions at least once compared to 8% of total parents.

Analyzing census survey data from over 36,000 parents, Nguyen and colleagues found that **53.7%** of children aged 5-11 in traditional school were vaccinated against COVID-19 compared to **only 32.5%** of homeschooled children in the same age groups; similarly **73.5%** of traditionally schooled adolescents aged 12-17 were vaccinated compared to **just 51%** of homeschooled adolescents.

There is also some evidence that caregivers homeschool, at least in part, to skip vaccines required for school attendance. Although parents do not generally cite vaccine mandates as their primary motivation for homeschooling, researchers examining New York homeschool enrollment found that the state's recent repeal of non-medical exemptions was associated with a small, but significant, increase in homeschooling, suggesting that some parents withdrew children from school to avoid vaccine requirements.¹² This echoes data from earlier research conducted in California after the state eliminated its non-medical vaccination option.¹³

A Unique Constellation of Barriers To Coverage

Mistrust in government and medical institutions

When examined qualitatively, vaccine hesitancy in homeschooling communities is considerably nuanced, and given that homeschoolers are not a monolith, more homeschooling communities need to be engaged by researchers to understand and address their disproportionately low vaccination uptake.

In Nguyen and colleagues' analysis of national data, for homeschoolers, vaccine hesitancy was more strongly associated with an overall lack of trust in government and the COVID-19 vaccine as a whole opposed to concerns about the particular side effects. This accords with a well-documented broader mistrust in the medical establishment, reflected in earlier research. For example, one survey conducted in 2005 found that only 19% of surveyed homeschool parents trust the government to set a vaccine schedule versus 57% of non-homeschooling parents and another finding that while 92% of parents interviewed specified that their doctor recommends vaccines, only 33% stated they would be more likely to vaccinate at their doctor's recommendation.¹⁴ Moreover, prior national-scale research has found that homeschooling parents' health-related behaviors differ from those of their counterparts, suggesting that they are less likely to establish a medical home for children or take them for annual wellness checkups.¹⁵

Influence of parental rights rhetorics

In a study of vaccine attitudes among Christian homeschoolers in Western Pennsylvania, parents regarded choice over whether to vaccinate children as an extension of God-given parental rights to oversee their children's rearing on the whole.¹⁶ The ascendant parental rights movement has roots in the activism of the anti-regulation homeschooling lobby, which premises its work on the theological conviction that parents hold an absolute divine right to control their children.¹⁷

Socioeconomic and educational barriers

However, parental rights and anti-institutionalism are not the only factors at play. In their review of COVID vaccine coverage by educational setting, Nguyen and colleagues found that homeschooled children were more likely to be vaccinated if their parents had health insurance, mirroring medical access issues plaguing under-resourced families on the whole.¹⁸ In addition to socioeconomic barriers, there are access issues unique to homeschooling communities: clinicians researching tetanus and homeschooling advise that “[i]nnovative outreach measures are necessary” for maximizing vaccine coverage in homeschooling communities since they are not subject to the same requirements as those who enroll children in school.¹⁹ They advise that primary care providers and state and local health departments proactively reach out to homeschooling families, homeschool co-ops, and churches to educate parents on the importance of vaccines.

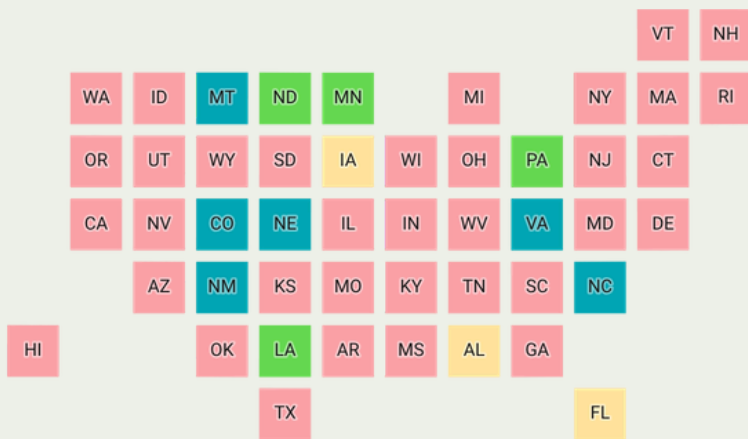
Policy Gaps

Poor oversight creates a refuge for non-compliance

Given that vaccine hesitancy has distinct ideological underpinnings for many homeschoolers, clinicians and public health officials need to be educated on engaging sensitively and effectively with homeschooling parents. Moreover, gaps in homeschool oversight policy have enabled parents not to vaccinate without recourse in the first place.²⁰

More broadly, homeschool oversight is lax across the United States, with only two states ensuring that every homeschooled child be assessed for educational progress at any point in their education. One finds a similar *laissez-faire* approach in homeschool vaccination policies. The Coalition for Responsible Home Education (CRHE) divides states into four categories: 1) those that do not require homeschoolers to vaccinate, 2) those that have conflicting policies across homeschool options, 3) those that technically require vaccination but do not require caregivers to submit proof in order to register a homeschool, and 4) those that mandate vaccination and require proof.

Only four states — Louisiana, Minnesota, North Dakota, and Pennsylvania — require and proactively enforce vaccination in homeschooling communities, **while a majority of states, 35, expressly do not require homeschooled children to be vaccinated.** Lack of enforceable vaccine requirements renders homeschooling a haven for vaccine hesitant families, and emerging research confirms that more stringent vaccine mandates can lead to an increase in homeschooling.²¹



- Vaccines required, proof required
- Vaccines required, but no proof required
- Conflicting requirements
- No vaccines required

Source: Coalition for Responsible Home Education • Created with Datawrapper

Given that the homeschool population is climbing closer to 10% in a number of states, and estimates of full vaccination coverage for homeschooled children hovers just above 50%,²² herd immunity for highly contagious diseases like measles could be threatened if trends persist.

Gaps in Knowledge and Paths Forward for Research, Policy, and Practice

Additional research is needed

While current research illuminates the extent of poor vaccination coverage in homeschooling communities and the policy gaps exacerbating it, far more homeschooling communities need to be engaged to effectively understand and reach vaccine-hesitant homeschoolers. For example, analyses of national data gesture toward race playing a role in vaccine coverage, but no research has been conducted that examines how race and other key demographic variables impact parents' attitudes toward vaccines nor their ultimate choices for their children, despite the fact that they are known to influence vaccination.²³

Research also has yet to explore vaccine-related health perspectives or behaviors of homeschool alumni — that is, adults who were homeschooled themselves. Consulting alumni whose parents did not vaccinate them would illuminate both the extent to which vaccine hesitancy persists across generations and the factors that impact whether it does or does not persist. Finally, given that research has demonstrated homeschooling parents can have unique but varying concerns and face distinct barriers to vaccination, homeschooling stakeholders must be consulted to build an evidence base to design interventions that are effective for the particular localities and communities at hand.

Notes

- 1) Watson, 2024
- 2) See Smith and Watson, 2025; National Center for Education Statistics, 2019; 2023.
- 3) Fields-Smith, 2020
- 4) Batts et al., 2024
- 5) Batts, Kristoff, & Yohie, 2024
- 6) Green-Hennessy & Mariotti, 2023
- 7) Kunzman and Gaither, 2020
- 8) Kennedy and Gust 2005; Corder 2012; Thorpe et al 2012; McCoy et al 2019; Mohanty et al 2020
- 9) Johnson et al., 2013
- 10) Parker et al., 2006
- 11) Kearney et al, 2025
- 12) Correira et al., 2026
- 13) Mohanty et al., 2020
- 14) Kennedy and Gust, 2005
- 15) Corder 2012
- 16) Thorpe et al., 2012
- 17) See Brown and Peterson, 2023
- 18) Nguyen et al., 2024
- 19) Johnson et al., 2013
- 20) See Khalili and Caplan, 2007. For a more detailed overview of homeschooling oversight, see crhe.org/current-policy.
- 21) E.g., Correira et al., 2026
- 22) Kearney et al., 2025
- 23) For example, does medical mistrust in Black communities motivated by racialized medical violence manifest differently for Black homeschoolers?

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