

27th August 2015

To Whom it May Concern,

I am writing to state my objection to the Public Health (Childcare Vaccination) and Other Legislation Amendment Act 2015 with the exception of clause 160D Immunisation status of children allowed to attend without statement. It is imperative that the status of Conscientious Objector be restored and respected as a right for Queensland parents and their children.

The proposed amendments are coercive and violate my rights as a person and a parent according to Section 2.1.3 Valid Consent from The Australian Immunisation Handbook 10th Edition 2013 (updated January 2014). These proposals discriminate against women as the predominant primary care giver and hinder opportunities in returning to and advancing in the workforce. They not only restrict availability to work and job options but also curtail superannuation accrual which will have long lasting consequences for the individual and Australian welfare system. These imposed conditions also discriminate against the child and the child's ability to receive education, co-curriculum and social opportunities entitled to all children in Australia. These conditions will have a monumental impact on the health, welfare, standard of living and opportunities for me and my child.

At 45, after undergoing assisted fertility treatment to conceive, I find myself an unplanned single parent of a healthy and happy 8 month old. Due to my age and need for fertility assistance it is not unreasonable for me to assume that this will be my only child and in common with most parents, I am extremely careful about my child's health and happiness and exposure to danger. I have chosen not to vaccinate my child as I have grave concerns about the safety and efficacy of vaccines. Incidentally, my first full time position was with the Brisbane City Council Immunisation Department so I have first-hand knowledge and experience of the arguments associated with reasons for vaccination.

My reasons for objecting to these amendments are based on the following facts that **vaccination poses a dangerous risk to public health:**

1. **Vaccination has not stopped epidemics** even with a greater than 90% vaccination rate
 - "Is Australia the World Capital of Pertussis?" ¹
 - Australia has only recently emerged from an epidemic of whooping cough that went on for an unusually long period - with about 142,000 cases from 2008 to 2012. ²
 - Whooping cough rates in the United States have been increasing since the 1980s and reached a 50-year high in 2012. ³
2. **Recently vaccinated individuals spread contagious diseases** to non-vaccinated and immunocompromised individuals.
 - One of the main arguments for vaccination is that it is meant to stop the spread of disease and protect the immunocompromised in society (herd immunity). Research undertaken by the Food and Drug Administration in 2013 shows the opposite to be true. "This research suggests that although individuals immunized with an acellular pertussis vaccine may be protected from disease, they may still become infected with the bacteria without always getting sick and are able to spread infection to others, including young infants who are susceptible to pertussis disease." ³

- This is also true for the spread of Measles ⁴ and has strong similarities to the story of 'Typhoid Mary' ⁵.
3. Vaccine use is directly attributable to the **rise of mutated viral strains** which gain a selective advantage. **Vaccinated individuals have significantly higher odds than unvaccinated individuals of becoming infected.**
 - The Center for Disease Control minutes state "Findings indicated that 85% of the isolates were PRN-deficient and vaccinated patients had significantly higher odds than unvaccinated patients of being infected with PRN-deficient strains. Moreover, when patients with up-to-date DTaP vaccinations were compared to unvaccinated patients, the odds of being infected with PRN-deficient strains increased, suggesting that PRN-bacteria may have a selective advantage in infecting DTaP-vaccinated persons." ⁶
 - This is also the case for the Seasonal Influenza Vaccine and Increased Risk of Pandemic A/H1N1-Related Illness. ⁷

I choose not to vaccinate my child for the following safety reasons associated with **adverse events**:

1. Studies show an **increase in infant mortality rates** when correlated to an increased number of vaccine doses ⁸
2. **Decreased neonatal reflexes** after Hepatitis B vaccine ⁹
3. **1 in 168 children require emergency room visits** following their 12 month vaccination ¹⁰
4. Vaccination has also been associated with **asthma, allergies and food sensitivities**, and the introduction of peanut oil as an adjuvant has caused concern about the sudden emergence of **anaphylaxis in children due to peanut allergies** ¹¹
5. The use of **heavy metal toxins** as vaccine adjuvants, in particular Aluminium has led to a new syndrome termed '**ASIA Autoimmune/Inflammatory Syndrome Induced by Adjuvants**' being identified by a team of immunologists in 2011. Symptoms can occur years after the vaccine and have injurious effects on the nervous system ¹²
6. Vaccine adjuvants have also been linked to **impaired neurological function** in over 100 research studies ¹³
7. An internal GlaxoSmithKline report of 2011 ¹⁴ regarding the vaccination "Infanrix hexa", tables a list of serious adverse events. Most notably discussed is the occurrence of '**Gaze Palsy**', a medical condition that affects the movement of the eyes. This condition is generally **caused by stroke or damage to the brain stem or cerebrum**. ¹⁵
8. The United States National Vaccine Injury Compensation Program has **paid out \$3.18 billion of taxpayer money** since 1988 ¹⁶
9. It is also important to note that well-respected medical journal editors and institutions ^{17, 18,, 19}, high ranking pharmaceutical employees ²⁰ and researchers ²¹ are announcing that evidence claiming **vaccine safety and efficacy is biased and that information relating to vaccine harm has been suppressed from the public.**

Based on the above research I consider the implementation of the current vaccination program to be a health risk to my child and others. This research directly shows the fallacy of the herd immunity

argument which is the key component underpinning this legislative amendment to keep unvaccinated children out of child care facilities and schools to minimise contagion. In fact, it is highly more likely that the vaccinated children are the vectors of disease.

I do not see the logic in:

- Vaccinating children to protect them from vaccinated individuals
- Perpetuating the contagion cycle by vaccinating and re-vaccinating
- Increasing the number of vaccines to counter the mutated viral strains which will only serve to create more mutated viral agents
- Increasing the number of vaccines to counter the mutated viral strains which will only serve to increase the quantity and severity of adverse events
- Vaccinating to become more susceptible to mutated viral strains
- Spending tax payer money on keeping a cache of vaccines which may not be applicable to the current disease strain
- Adding to the burden of disease to Australia's hospital and medical systems for the short and long-term effects of vaccination
- Adding to the increased financial pressure on schools to provide more help to those with vaccine afflicted neurological damage
- Discriminating against parents and children who educate themselves in health matters.

SUGGESTIONS

- Reinstate the status of Conscientious Objector as a right for Queensland parents and their children
- Educate the public in regards to vaccine transmission of disease to stop this divisive stance that has emerged between vaccinated and unvaccinated 'teams'
- Educate the public in regards to viral mutations and the vulnerability of vaccinated individuals
- Keep promoting wellness programs which emphasise the importance of sunlight, diet, rest and exercise to promote disease prevention and a healthful life
- If the Qld government decides to discriminate against educated parents and their unvaccinated children then it must provide alternative child care, education and social structures which are equal to the system which is in place.

Everybody is concerned about infectious diseases and the impact they have on the individual, immunocompromised individuals and society at large. Nobody wishes for the spread of or harm from contagious disease and it would be wonderful if there were a magical panacea that could rid humankind of this scourge. However it is imperative that the approach taken to address these illnesses is itself a cure and does not add to the problem of death, illness, incapacity or spread of disease and worse contagion. Governments have a duty of care that what they recommend is in the

public's best interest. There is too much global information regarding the harm and ineffectiveness of the vaccine program to be ignored. I hope that I have supplied enough information to question the validity of these amendments and whether they serve the best interests of the public.

Kind regards

A handwritten signature in cursive script that reads "Jane Tulip".

Jane Tulip

Three horizontal black bars of varying lengths, used to redact contact information such as an address, phone number, or email address.

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