

The Research Director  
Health and Community Services Committee  
Parliament House  
George Street  
BRISBANE QLD 4000

**Re: Public Health – Exclusion of Unvaccinated Children from Child Care Amendment Bill 2013**

The proposal to exclude unvaccinated children from child care should be reconsidered for a number of reasons, including:

- This bill goes against the current Federal Government push for better educational outcomes, by discriminating against a growing segment of the community who will be disadvantaged if excluded from early childhood educational settings. As well as being denied important basic literacy, numeracy and general knowledge provided by these institutions, they will be denied the important social development fostered in these settings.
- The contention that unvaccinated children are a danger to their vaccinated peers is illogical if vaccination is supposed to be an effective protection.
- The reason more people are choosing not to vaccinate is the growing evidence that vaccination is neither as safe nor as effective as proponents claim it to be. People who choose not to vaccinate usually do not do so lightly; rather they make this decision after a thorough personal investigation of the issues.
- Forcing people to vaccinate in order to access child care services will lead to more children being harmed by adverse reactions to vaccines.

Supporting evidence:

**The benefits of early childhood education are well documented.** For example:

“During the first five years, development proceeds at a pace faster than any other time of life. During this time children develop the social-emotional capacities that prepare them to be self-confident, trusting, empathic, intellectually inquisitive, competent and capable of understanding and adjusting well to others.” [http://www.education.com/reference/article/Ref\\_Social\\_Emoional/](http://www.education.com/reference/article/Ref_Social_Emoional/)

“Research is increasingly demonstrating that the policy of investing in early child-hood development, particularly high-quality prekindergarten, provides a wide array of significant benefits to children, families, and society as a whole. Empirical research shows that all children, regardless of whether they are from poor, middle-, or upper-income families, benefit from prekindergarten programs.”  
[http://www.epi.org/publication/book\\_enriching/](http://www.epi.org/publication/book_enriching/)

“The data show that the greatest challenges facing our country – from school dropout rates, to crime to rising health-care costs, to the necessity of competing in the global marketplace – can only be met by focusing on the development of all our children, beginning at birth.”  
<http://www.ounceofprevention.org/about/why-early-childhood-investments-work.php>

“It has been found by numerous studies that good education in the 3-4 year periods, especially lacking in the children from weaker economic strata, has direct effects on wages, schooling, health, performance on achievement tests, crime, teenage pregnancy, smoking etc. It has large positive externalities too - better outcomes in schools adding to the schools quality, lower risks of crime and teenage pregnancy, higher earnings and resulting higher tax revenues, and local economic effects like increased labor-force participation of parents.” <http://gulzar05.blogspot.com.au/2009/02/benefits-of-early-childhood-education.html>

Further evidence regarding early education:

<http://www.who.int/mediacentre/factsheets/fs332/en/>

[http://www.aboutourkids.org/articles/preschool\\_years\\_ages\\_four\\_five\\_expectations\\_challenges](http://www.aboutourkids.org/articles/preschool_years_ages_four_five_expectations_challenges)

<http://pubs.ext.vt.edu/350/350-055/350-055.html>

[http://www.oise.utoronto.ca/atkinson/UserFiles/File/Events/2012-10-22%20-%20Learning%20to%20Care/LTC\\_Alexander.pdf](http://www.oise.utoronto.ca/atkinson/UserFiles/File/Events/2012-10-22%20-%20Learning%20to%20Care/LTC_Alexander.pdf)

**There is considerable evidence that vaccination is not the panacea it is claimed to be, and that many people have been harmed by vaccines.** For example:

Deliberate concealing of information from parents for the purpose of getting them to comply with an “official” vaccination schedule: <http://childhealthsafety.wordpress.com/2012/03/14/government-experts-cover-up-vaccine-hazards>

Two centuries of UK, USA and Australian official death statistics show modern medicine played little part in substantially improved life expectancy and survival from disease in western economies. It had more to do with improved nutrition and sanitation: [Vaccines Did Not Save Us - 2 Centuries of Official Statistics](#)

The March 2011 British Society for Ecological Medicine Scientific Conference: [The Health Hazards of Disease Prevention](#)

Regarding **herd immunity**, note the excerpt below from this paper by Lucija Tomljenovic PhD, Neural Dynamics Research Group, Dept. of Ophthalmology and Visual Sciences, University of British Columbia, Vancouver, Canada:

[The vaccination policy and the Code of Practice of the Joint Committee on Vaccination and Immunisation \(JCVI\): are they at odds?](#)

Here I present the documentation which appears to show that the JCVI made continuous efforts to withhold critical data on severe adverse reactions and contraindications to vaccinations to both parents and health practitioners in order to reach overall vaccination rates which they deemed were necessary for “herd immunity”, a concept which with regards to vaccination, and contrary to prevalent beliefs, does not rest on solid scientific evidence as will be explained. As a result of such vaccination policy promoted by the JCVI and the DH, many children have been vaccinated without their parents being disclosed the critical information about demonstrated risks of serious adverse reactions, one that the JCVI appeared to have been fully aware of. It would also appear that, by

withholding this information, the JCVI/DH neglected the right of individuals to make an informed consent concerning vaccination. By doing so, the JCVI/DH may have violated not only International Guidelines for Medical Ethics (i.e., Helsinki Declaration and the International Code of Medical Ethics) [2] but also, their own Code of Practice

There has long been speculation that the rapidly growing autism epidemic is aligned with the increasing numbers of vaccines on the vaccine schedule. Though the link to autism is continually denied by vaccine promoters, some experts in the field keep coming up with contrary evidence. For example, retired Neurosurgeon, Dr Russell Blaylock, M.D: [Vaccines, Neurodevelopment and Autism Spectrum Disorders](#) *The Danger of Excessive Vaccination During Brain Development: The Case for a Link to Autism Spectrum Disorders*.

A recent study by S. Seneff, R.M. Davidson and J. Liu, *Empirical Data Confirm Autism Symptoms Related to Aluminum and Acetaminophen Exposure*, provides strong evidence of a link between autism and the aluminium in vaccines: <http://www.mdpi.com/1099-4300/14/11/2227>

Autism and vaccination rates are reported to be lower in Amish communities. Preliminary data in the study, [Prevalence Rates of Autism Spectrum Disorders Among the Old Amish Order](#), have identified the presence of ASD in the Amish community at a rate of approximately 1 in 271 children. This reflects favourably against a report from the Center for Disease Control, which estimated the rate of ASD as 1 in 91 children (Kogan, 2009), up from 1 in 150 in 2007. Recent statistics suggest the rate is now 1 in 50.

Also see: <http://vactruth.com/2013/07/04/vaccination-causes-autism/> and <http://www.youtube.com/watch?v=3wwDPcNdxJQ#sthash>

Despite high rates of vaccination, Australia has an ongoing whooping cough epidemic. There is evidence the majority of cases occur in the fully vaccinated. Also the whooping cough vaccine is suspected of having caused the development of a new strain of whooping cough: [Acellular pertussis vaccination enhances B. parapertussis colonization](#). Three interesting articles shed further light on this: [Whooping cough in Australia](#); [Whooping Cough in Australian Children – How Many Were Vaccinated?](#) and [Whooping cough immunity](#).

There is growing anecdotal evidence from doctors as well as parents that unvaccinated children are generally healthier than the vaccinated. The Australian Government has been unwilling to compare vaccination records with Medicare records, which could help settle this issue, however a current survey certainly supports this view, showing that unvaccinated children are far less affected by common diseases than vaccinated children: <http://www.vaccineinjury.info/vaccinations-in-general/health-unvaccinated-children/survey-results-illnesses.html>

Despite the risk of censure by health authorities, many doctors and other medical professionals are now speaking out against vaccines. For example: [International Medical Council on Immunisation](#); <http://vran.org/about-vaccines/general-issues/doctors-speak/the-case-against-immunizations/>; <http://www.vaccinesuncensored.org/doctors.php>; <http://www.youtube.com/watch?v=msGJwaUVdno>.

Promoters of vaccination, including advisers to government health authorities, often have conflicts of interest which are rarely revealed to the public. [REDACTED]

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Further information:

[vaccinationdecisions.net/resources/ConflictsofInterestAustralianAdvisoryGroupImmunisation.pdf](http://vaccinationdecisions.net/resources/ConflictsofInterestAustralianAdvisoryGroupImmunisation.pdf)

In conclusion, people have a right to informed consent to medical treatment, including vaccination, as stipulated in international laws. Children also have a right to a quality education. The proposed Amendment Bill impinges on these rights, and therefore I strongly urge you to reconsider its implementation.

Sonja Hardy BEdSt DipT

Address: [REDACTED] Daisy Hill Qld 4127

Ph: [REDACTED]

Email: [REDACTED]

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