

Dear Chair and Members of the Committee,

Re: Public Health and Wellbeing Amendment (No Jab, No Play) Bill 2015

I am writing to express my deep concerns in relation to the proposed changes to make childcare and/or kindergarten entry conditional upon vaccination (with the removal of the existing conscientious objection exemptions).

These proposed changes impact Victorians in many ways. They

- infringe on personal and parental rights
- remove opportunities for all young children to be supported in health and early childhood education
- fail to address issues of vaccine hesitancy
- do not address a vaccination rate crisis nor any existing epidemic
- fail to address liability if a child is vaccine injured
- create a financial cost to the community as a whole

Pages 2 to 4 provide further information as to each of these concerns and also form the content of a petition I am currently running, with some 600 signatories. My petition can be accessed via the following link:

<https://www.change.org/p/minister-for-health-victoria-where-there-is-a-risk-there-must-be-a-choice>

I appeal to you to consider these facts and not proceed with the proposed changes.

If the government is intent on adopting an immunisation requirement for eligibility to childcare and kindergarten entry, I strongly urge you to include provision for medical exemption and informed conscientious objection (philosophical, religious or medical), with an emphasis on ensuring that parents are provided with education and information on immunisation.

Yours sincerely,

Alexandra Quaglieri

They remove the right to autonomy in health related decisions - free of coercion

There is a considerable difference between giving a seriously ill child a proven life-saving medicine versus subjecting a healthy child to a drug that is known to present the risk of causing severe, or potentially fatal, adverse effects, however small this may be. This is an ethical issue that goes to the heart of our basic human right to informed consent (or informed refusal) to any drug treatment or medical intervention.

Parents must retain the right to be informed first, and then consent to medical treatment for their children free of coercion, manipulation, or fear of Government intrusion. No person should be forced by government regulation or societal pressure to receive any medication or treatment, including vaccines, against his or her will. This includes mandating vaccines as a requirement for childcare or kindergarten admission.

By removing childcare as an option for families who conscientiously choose to selectively vaccinate or not vaccinate, you are putting them in the impossible position of having to choose between working, feeding and housing their families, and vaccinating their children against their will.

Single-parent and low-income families feel the consequences of this coercion more acutely as staying home, or funding alternative care, is not an option for them. These families are left with little choice, either vaccinate against their will or move to a state or country that will allow them to access childcare.

There are moral, ethical and legal reasons to retain the available exemptions. The perceived benefits proposed by medical and scientific reasoning go no way to voiding the legal, moral and ethical framework that underpins our current human right to refuse medical intervention.

They target and penalize children through social and early education exclusion.

It is important to remember the child in this debate. The proposed changes effectively punish children for their parent's decisions by removing their right to participate in social and early education (kindergarten).

Good policy and practice should afford young children every opportunity to be: healthy through immunization; educated through childcare; and supported in their family environment.

Families whose personal, medical, and/or religious beliefs lead them to decline some, or all vaccines, do not deserve to become outcasts in our society. Let's focus on improving opportunities for our children

They do not address the issues underpinning vaccine hesitancy

Removing access to childcare and kindergarten for parents who do not fully immunise their children is unnecessarily punitive and could have a number of negative repercussions.

On the one hand, these measures are unlikely to influence the completely committed vaccine objectors. But not all parents who haven't vaccinated are completely committed to that position. Some registered objectors go on to fully vaccinate their children.

Experts strongly favor strategies that increase the opportunity to vaccinate as most effective, such as: positive policies to remove structural barriers to vaccination up-take; tailored communication strategies; and professional development and engagement of vaccination providers¹. Research shows that maintaining openness and trust is key to

¹) Dr Julie Leask, from The National Centre for Immunisation Research and Surveillance http://ses.library.usyd.edu.au/bitstream/2123/8960/2/Leask_Nature_accepted.pdf
Dr Kristine Macartney, Associate Professor, Discipline of Paediatrics and Child Health at the University of Sydney, has recently, and publicly, expressed her opposition to attaching an immunisation requirement to welfare payments.

guiding parents to feel comfortable to vaccinate². For example, having vaccine-hesitant parents engage with well-qualified health professionals who can take the time to address vaccination concerns is pivotal to helping them wade through the challenges that misinformation can create.

On the other hand, coercive policies may inadvertently serve to galvanise and further radicalise the anti-vaccination movement. These proposals, together with a steady flow of adversarial public discussions, may actually increase exposure of everyone to anti-vaccination arguments and “normalise” vaccine objection. Conversely, the adversarial discussions may result in greater vilification of families who choose not to vaccinate. Vilification is unhelpful to addressing the underlying issues, which may result in increased defensiveness and decreased openness from the minority party.

They do not address a vaccination rate crisis

Australia has a high, and stable rate of vaccination as shown in the tables linked in the footnote³. There is no ‘crisis’ in vaccination rates. Contrary to current media reports of a decline in vaccination rates, we have never had higher rates of vaccination⁴.

As such, there is absolutely zero imperative for a more coercive policy response requiring vaccination.

They do not target an existing epidemic

There is no medically defined epidemic in or near Victoria that warrants such legislation. However, if there were a genuine threat to public health, any such policy response or legislation has to be balanced, dependent on what the vaccine is, the disease type, and all the rest. The efficacy of individual vaccines varies. Furthermore not every vaccine-preventable disease is of equal threat to public health.

For example, research has shown that unvaccinated children are not responsible for whooping cough outbreaks; rather it is waning immunity due to the short ‘life’ of ‘immunity’ provided by the vaccine that is the primary factor⁵. Therefore, this disease will continue in and out of childcare centers regardless of whether laws increase vaccination rates.

Furthermore, the nature of protection afforded by many modern vaccines does not necessarily prevent transmission of disease. Many vaccines are not designed to prevent the transmission of infection - rather, they are intended to prevent disease symptoms. Moreover, there are vaccines for entirely non-communicable diseases (e.g., tetanus).

There is no compensation available for children injured by vaccines

Australia is one of only 3 developed countries that does not have a statutory scheme to compensate victims of vaccine injury. This results in the vaccine recipient bearing all the costs when a serious injury follows vaccination, with very slim prospects of obtaining compensation via litigation. Without a compensation scheme, there should be no mandate.

There is a financial cost to the community as a whole

Denying families childcare may result in caregivers forgoing work in order to provide care for their children who can no longer attend childcare. At the family level the consequence is loss of income. For the community, the financial consequences are at least twofold: a loss in tens of thousands of dollars in taxes together with a loss of \$15 000 to childcare providers for every child forced out of childcare or kindergarten.

² <http://onlinelibrary.wiley.com/doi/10.1111/j.1753-6405.2012.00897.x/abstract>
http://ses.library.usyd.edu.au/bitstream/2123/8960/2/Leask_Nature_accepted.pdf
<http://www.theconversation.com/forget-no-jab-no-pay-schemes-there-are-better-ways-to-boost-vaccination-37921>

³ <http://www.health.gov.au/internet/main/publishing.nsf/Content/cda-cdi3603l.htm>

⁴ <http://www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/acir-ann-cov-hist-data.htm>

⁵ <http://www.thepeoplesvoice.org/TPV3/Voices.php/2015/04/30/harvard-trained-immunologist-demolishes->

Althouse B, Scarpino S. *Asymptomatic transmission and the resurgence of Bordetella pertussis*. *BMC Medicine*, 2015; 13 (1) DOI: 10.1186/s12916-015-0382-8. <www.sciencedaily.com/releases/2015/06/150624071018.htm>.

In short, the proposed changes create far more problems than they solve. Forcing potentially risky procedures on individuals who have legitimate concerns is unconscionable. Public policy should provide incentives to encourage beneficial health goals for everyone.

In a free and democratic country like Australia, with already high vaccination rates, and federal policy that already significantly financially penalizes parents who choose not to vaccinate, there is no place for further coercive policy as proposed.

I appeal to you to consider these facts and not proceed with the proposed changes. If the government is intent on adopting an immunisation requirement for eligibility to childcare and kindergarten entry, I strongly urge you to include provision for medical exemption and informed conscientious objection (philosophical, religious or medical), with an emphasis on ensuring that parents are provided with education and information on immunisation.

Yours sincerely,

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