

[REDACTED]

From: Kate Harrison <[REDACTED]>
Sent: Thursday, 1 October 2015 2:53 PM
To: SARC
Subject: No Jab No Play Policy

Dear Jill Hennessy,

I refer to your decision to penalise parents who make an evidence-based choice not to vaccinate their children, and who are no longer allowed to lodge a conscientious objection form. This decision is based on five beliefs/claims that are not based in science. They are:

1. Infectious diseases are only, or mainly, passed on to others by unvaccinated people.
 - 1.1 Fact: Vaccinated people can carry and therefore pass on infectious diseases to others[\[1\]](#).
 - 1.2 Fact: Some vaccines increase the risk of vaccinated people being carriers of infectious diseases, e.g. the whooping cough vaccine, and therefore recently vaccinated people can put others at greater risk of being infected[\[2\]](#)^[3].
 - 1.3 Fact: Unvaccinated people can put others at risk during the prodromal period but then cease to pose a risk, but some vaccinated people can put others at risk for months and even longer[\[4\]](#).
2. The safety of vaccines has been proven.
 - 2.1 Fact: the short-term risks of vaccines have been demonstrated by payments made to parents of vaccine damaged children in the 20 countries that do have vaccine damage compensation schemes – payments in billions of dollars[\[5\]](#).
 - 2.2 Fact: the long-term safety of vaccines has never been demonstrated with the one type of study needed to do this, i.e. the long term examination of the holistic health of a sufficient number of fully vaccinated and completely unvaccinated children[\[6\]](#).
3. The risks of vaccines are less than the risks of the diseases they are targeting for prevention.
 - 3.1 Fact: Until the research outlined in 2.2 is undertaken it is impossible to make this statement based on complete facts, i.e. the claim is not based in science.
4. Children who are vaccine damaged in Australia are fully supported by State and Federal governments.
 - 4.1 Fact: Australia is one of only 3 developed countries that does not have a vaccine damage compensation scheme.
 - 4.2 Fact: The reporting of vaccine damage in Australia is not thorough, and never will be until an appropriate vaccine damage compensation scheme is in place.
5. Vaccination is the only proven way to protect children against targeted infectious diseases.
 - 5.1 Fact: A safe and comparably effective method of immunisation is currently used by some governments around the world in millions of people[\[7\]](#). Medical authorities in Australia refuse to examine the evidence base of this immunisation method which is not-toxic, much less expensive

than vaccines, and would be accepted by many parents who choose not to vaccinate their children due to safety concerns.

References are available for each of the facts outlined above.

I hope you can see that the legislation proposed is not based on science, but on claims and assertions that avoid accounting for the facts here. I hope you can see that the legislation proposed is deeply inequitable and penalises parents who sincerely care for the wellbeing of their children.

I appeal to you to consider these facts and not proceed with this legislation.

Abstract summarys:

Althouse, Scarpino: The dramatic resurgence of whooping cough is due, in large part, to vaccinated people who are infectious but who do not display the symptoms.

Read et al.: Our data show that anti-disease vaccines that do not prevent transmission can create conditions that promote the emergence of pathogen strains that cause more severe disease in unvaccinated hosts.

Warfel et al.: While all groups possessed robust antibody responses, key differences in T-cell memory suggest that aP vaccination induces a suboptimal immune response that is unable to prevent infection.

Allen: In recent years, there have been major outbreaks of pertussis, also known as whooping cough. Now, intensive studies are under way to investigate why acellular vaccines, dubbed DTaP, don't protect for as long as the original DTP vaccine.

Turville, Golden: Whilst the Taylor meta-analysis reinforced previous findings which showed that the incidence of ASD is similar in groups of differently vaccinated children, it failed to compare the incidence of ASD in vaccinated and completely unvaccinated populations.

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

[2] Read AF, Baigent SJ, Powers C, Kgosana, LB, Blackwell L, Smith LP, [et.al](#). Imperfect Vaccination Can Enhance the Transmission of Highly Virulent Pathogens. Published: July 27, 2015. DOI: 10.1371/journal.pbio.1002198.

<http://journals.plos.org/plosbiology/article?id=10.1371/journal.pbio.1002198>.

[3] Warfel JM, Zimmerman LI, Merkel TJ. Acellular pertussis vaccines protect against disease but fail to prevent infection and transmission in a nonhuman primate model. *PANS*. 2013; **111**(2): 787–792, doi: 10.1073/pnas.1314688110.

[4] Allen A. The Pertussis Paradox. *Science* 2 August 2013; **341**(6145): 454-455. DOI: 10.1126/science.

[5] U.S. Department of Health and Human Services. Vaccine Adverse Events Reporting Service. VAERS Data. <https://vaers.hhs.gov/data/index>.

[6] Turville C, Golden I. Autism and vaccination: The value of the evidence base of a recent meta-analysis. See comment in PubMed Commons below Vaccine. 2015 Feb 24. pii: S0264-410X(15)00157-7. doi: 10.1016/j.vaccine.2015.02.002.

[7] Golden I. *The Complete Practitioners Manual of Homoeoprophylaxis*. 2014. Isaac Golden Publications. Gisborne, Australia.

Kind regards,

Kate Harrison, Ascot Vale, Vic 3032