

# Vaccine Hesitancy

## What Will and Will Not Work

The vaccine industry is concerned with the increasing number of “vaccine hesitant consumers” and the declining trust in the medical industry. An increasing number of parents are questioning vaccine safety, effectiveness and necessity. In response, the medical industry has been actively lobbying governments to enact legislation to make vaccines mandatory and to remove or limit a consumer’s access to religious and personal belief exemptions.

This action by the medical industry represents a clear intent to impose this medical practice by coercion rather than consent. Will the strategy of forced vaccination increase consumer confidence and reduce “vaccine hesitancy”? Below are thoughts by a “vaccine hesitant parent” on what will and will not work.

### What Will Work

#### 1. Provide Solid Clinical Evidence of the Safety and Effectiveness of the Vaccine Schedule.

Parents want evidence. Producing solid, verifiable evidence of safety and effectiveness will go a long way to convincing parents to vaccinate their children. Currently there is a lack of solid scientific evidence of vaccine safety and effectiveness. Until there is clear and compelling evidence any efforts to assure vaccine hesitant parents will fail. The lack of evidence includes the following:

- There are no long-term clinical trials that prove the safety of the current vaccine schedule.
- Most effectiveness trials are limited to the measurement of anti-bodies in the blood rather than producing verifiable evidence that the vaccine actually prevented the targeted disease.
- No safety trials exist that determine the safety of giving multiple vaccinations at once.
- No large safety trials using an unvaccinated population as the control group have proven that vaccines are safe and effective.
- The current vaccine schedule has never been tested for safety in the real world way in which the schedule is implemented.
- No clinical proof exists to support the claim that vaccines are responsible for the decline in mortality, let alone the claim of millions of lives saved.
- There are no biological studies that show injecting mercury is safe in any amount.
- No clinical trials have been conducted to establish the safety of using aluminum in vaccines.

#### 2. Open and Honest Dialogue

Honesty, openness, and public accountability are important safeguards. Currently the medical industry and mainstream media actively discourage open dialogue and honest debate about vaccine safety, effectiveness and necessity. This censorship undermines confidence in the medical industry and implies there is something to hide. If trust is eroded, the vaccine program will collapse.

*The secret of freedom lies in educating people,  
whereas the secret of tyranny is in keeping them ignorant.*  
~ Robespierre

#### 3. Fully Informed Consent

Current efforts to increase vaccine compliance include coercion, fear-mongering, financial incentives and disincentives, punishment, restriction to education, childcare and employment, even imprisonment. The lack of fully informed consent undermines trust, erodes the doctor-patient relationship, and undermines an important safeguard to ensure products are safe and effective. When medical products are imposed by coercion rather than consent the consumer’s ability to choose what works best for them is undermined and our rights as citizens are eroded.

*In this fear-based scenario, the questioning voice of reason is drowned out amid the hysteria surrounding the emerging 'killer infections,' which are such a favorite media topic. The propagation of fear by the media and by its sources in the public health industry has resulted in a growth of power in this industry far beyond the usual checks and balances of our democracy.*  
~ Dr. Philip F. Incao MD

#### **4. Independent Oversight**

Currently the medical industry is challenged by significant conflicts of interest. Federal public health agencies that are responsible for monitoring vaccine safety are also responsible for increasing vaccine uptake. And those responsible for licensing vaccines routinely benefit from the sale of vaccines. As of June 2017 all nine voting members of the National Advisory Committee on Immunization in Canada declared direct or indirect financial or intellectual conflicts of interest. There is increasing concern that our public health institutions have become instruments of corporate interests. Providing truly independent oversight will contribute to consumer confidence.

#### **5. Vaccine Injury Compensation**

Canada is the only G7 nation without a national vaccine injury compensation program. If you or your child is injured or killed by vaccination, you are on your own. It is unacceptable that Canadian parents and health consumers carry all of the risk and responsibility when vaccines cause harm or death. An independent, easily accessible, fair and transparent vaccine injury compensation program would assist in reducing vaccine hesitancy.

#### **6. Long-Term Safety Testing**

Vaccines have not been tested for carcinogenicity (the ability to cause cancer), toxicity (the ability to damage an organism), genotoxicity (the ability to damage genetic information within a cell), mutagenicity (the ability to change the genetic information of an organism), the ability to impair fertility, the impact on pregnant women and fetuses, and for long-term adverse reactions. Product information inserts make this clear. The lack of testing to determine the long-term impact of vaccination undermines confidence in industry and government claims of vaccine safety. To reduce vaccine hesitancy the vaccine schedule must be tested for long-term impact.

#### **7. Tell the Truth About Autism Research**

It is unscientific and perilously misleading for the Centre for Disease Control and Health Canada to assert that vaccines and autism have been exhaustively studied and that no connection has been found. While there are a handful of industry-funded studies that are regularly cited by critics of the vaccine-autism hypothesis, these studies examine only one vaccine product (MMR) and one vaccine ingredient (Thimerosal). It is illogical and dishonest to exonerate all vaccines, all vaccine ingredients, and the total vaccine schedule based on a handful of epidemiological studies of just one vaccine product and one vaccine ingredient. If the medical industry is committed to reducing vaccine hesitancy, it must tell the truth.

*If the science isn't there to suggest they should be definitive, they shouldn't.  
I don't think we should play that game because then eventually you're going to lose trust.  
We need to find a clever way to say what the state of the Science actually is, because often it isn't definitive,  
and I think we need to be transparent about that.*  
~ Tim Caulfield, PhD

#### **8. Provide Evidence Vaccines Improve Health**

Vaccine manufacturers are not required to demonstrate vaccines actually reduce the rate of disease contraction, contagion, complication or mortality and improve health. It is simply assumed that elevated antibody levels equate to immunity despite the lack of supporting evidence. Vaccines are the only medication where evidence of improved health and absence of harm are not required before approval. This is clearly evident with the HPV, birth dose of Hep B, and influenza vaccines. To reduce vaccine hesitancy and increase confidence, evidence of vaccine effectiveness in reducing contraction, contagion, complication or mortality and improving health is necessary.

#### **9. Conduct Vaccinated vs. Unvaccinated Studies**

Most vaccine safety trials use control groups consisting of other vaccinated populations or placebos containing aluminum. These are not true placebos. The failure of the vaccine industry to use a neutral placebo undermines the integrity of Federal health agency claims that vaccines have been proven to be safe and effective. Until true vaccinated vs. unvaccinated research is conducted any claims of vaccine safety and effectiveness is an assumption and not scientifically proven.

#### **What Won't Work**

## 1. Mandatory Vaccination

Mandatory vaccine policy is a clear and direct violation of the Nuremberg Code developed in response to the medical experimentation conducted by the Nazis in WWII, as well as a violation of the Universal Declaration on Bioethics and Human Rights; Article 6 – Consent:

*Any preventive, diagnostic and therapeutic medical intervention is only to be carried out with the prior, free and informed consent of the person concerned, based on adequate information. The consent should, where appropriate, be expressed and may be withdrawn by the person concerned at any time and for any reason without disadvantage or prejudice.*

Vaccine mandates should only be considered if: 1) A disease has a high rate of mortality. 2) The disease is highly contagious. 3) The vaccine is proven to be safe. 4) The vaccine is effective in preventing disease transmission. None of the current diseases and related vaccines meet these criteria. To impose vaccines without consent is medical tyranny.

*All vaccines are not created equal.  
Discussion of both the benefits and the risks of individual vaccines is needed.  
The authoritative medical bodies must end their arrogant stance  
and take an honest look at the literature they have suppressed.  
Negative effects must be honestly brought to light.  
Legislative bodies need to do their homework and reject any thought  
of mandating vaccinations.  
~ Dr. Ralph Campbell, MD*

## 2. Lack of Legal Accountability

Currently the vaccine industry in the United States has legal immunity. This means the vaccine industry is not legally liable for the safety of their products. The lack of legal accountability removes an important and effective measure to ensure products are safe and effective. A consequence of this legal immunity is there is no legal or financial incentive for the medical industry to make vaccines safer, even when there is evidence that vaccines can be made safer. This creates a very dangerous situation. The vaccine industry has effectively been given license to injure and kill with impunity. There is evidence that the legal immunity provided to vaccine manufacturers has increased the risk of harm. To increase vaccine confidence vaccine manufacturers must again be legally liable for the harm and death caused by their products.

## 3. Denying Vaccine Injury

Every pharmaceutical product, no matter how well designed or intended can cause harm. To promote vaccines as “safe and effective” without any conditions or qualifiers and to deny vaccine injury as a matter of policy erodes confidence that the product information is accurate and independent from industry influence. Saying all vaccines are safe and effective is like saying all prescription drugs are safe and effective. The statement also implies that all vaccines are safe and effective for all people. This obviously isn’t true given the US Vaccine Court has awarded more than \$3.7 billion dollars in compensation for vaccine injury since 1989 and the US Supreme Court ruled that vaccines are “unavoidably unsafe”.

*Any possible doubts, whether or not well founded,  
about the safety of the vaccine cannot be allowed to exist.  
~ Federal Register. Vol 49, No 107.*

## 4. Personal Attacks

The medical industry and mainstream media intentionally marginalize people who question vaccine safety and effectiveness with labels like: *anti-vaccine, anti-vaxxer, anti-science, irresponsible, misguided, uninformed*, etc. This is a deliberate attempt to silence those questioning vaccine safety and effectiveness and to attack the person rather than address the issue being questioned. Personal attacks are not limited to vaccine hesitant parents. Scientists examining vaccine safety report they are routinely attacked because of their efforts to investigate vaccine safety. These attacks do nothing to improve safety and instead undermine confidence and trust in the medical industry.

*Approaches that label anybody and everybody who raises questions about the right headedness of current vaccine*

*policies as “anti-vaccine” fail on several accounts. Firstly, they fail to accurately characterize the nature of the concern. Many parents of children with developmental disorders who question the role of vaccines had their children vaccinated. Anti-vaccination is an ideology, and people who have their children vaccinated seem unlikely candidates for the title.*

~ Dr. Peter Doshi, Associate Editor, British Medical Journal

## **5. A One Size Fits All Approach**

The vaccine paradigm utilizes a ‘one-size-fits-all’ approach. Vaccine dosage is not calibrated by age, weight, immune response, gender, genetics, medical or family history, or other variables used to discern safe levels of a medical intervention. In no other area of medicine are individual variables systematically ignored. It is difficult to have confidence in a program that ignores individual patient consideration.

*This mandatory one-size-fits-all approach to vaccination is a de facto state-sanctioned selection of the genetically and biologically vulnerable for sacrifice.*

~ Barbara Loe Fisher

## **6. No Individual Risk-Benefit Consideration**

The decision whether to vaccinate or not ought to be evaluated on a disease-by-disease basis, a vaccine-by-vaccine basis, and an individual-by-individual basis. The merit of a vaccine ought to be determined by taking into consideration the risk of getting the disease, the consequences of getting the disease, the effectiveness of the vaccine, and the safety of the vaccine *for the individual*. This does not occur in the vaccine paradigm. Universal vaccination is not science. It is ideology.

*The current science doesn’t allow for an informed understanding of an individual’s genetically determined risk for an adverse event due to a vaccine.*

~ Dr. Gregory Polland, MD

Vaccine Research Group – Mayo Clinic

## **7. Belief or Coercion as the Basis For Vaccine Decisions**

The decision to vaccinate or not is one of the most important decisions a responsible parent is required to make. At Health Action Network Society we think it is important that we push beyond using belief or coercion as the basis for vaccine decisions and instead decide from a place of information based on quality scientific evidence. Our health is dependent on our willingness to take responsibility for our health and that of our children, the courage to ask questions, and our ability to gather sufficient information to make well-informed decisions.

*Immunization is a complicated topic that needs more reflection and less coercion. It’s time to realize that vaccines, like medicines, are not a mystic panacea and that they are subject to commercial and political pressure and also to the influence of conflicts of interest.*

~ Dr. Claudina Michal-Teitelbaum, MD