



Newsletter 212 Vaccination Choice: The Reason why Governments are Suppressing the Science

20 October 2018

The Australian government and mainstream journalists are going to extreme lengths to prevent the public from receiving the science that supports the public's right to choice in vaccination, with credibility. This includes providing false and misleading information about my qualifications in public health and the framing of the scientific arguments as 'anti-vaccination' or 'a conspiracy theory'.

It is important to remember that vaccines are injected into the human body and, like all drugs, it is necessary to know 'what is injected' and 'what the long-term health effects are'. It is also important to know if governments are using objective science or biased science in the development of these policies.

This bias can be a result of the industry funding of vaccine science combined with the financial conflicts of interest of government representatives and the donations/lobbying of politicians by pharmaceutical companies.

My [PhD research](#) found that governments are promoting vaccines on 3 main myths:

1. The myth that vaccines reduced the risk from infectious diseases by creating herd immunity
2. The myth that vaccine adverse health outcomes are rare
3. The myth that vaccines are not causing the exponential rise in autism or the 5-fold increase in chronic illness, neurological and autoimmune diseases that we are observing in all developed countries. This significant increase is in a direct linear dose-response relationship - an important criteria for demonstrating cause and effect of associations. This has occurred since liability was removed from the pharmaceutical companies in the US in 1986 for any harm caused from vaccines.

Here is a [30 minute video presentation](#) of the scientific evidence in my PhD that demonstrates that there is no valid reason to mandate any vaccine in any population. The mandating of

vaccines is a serious risk to public health and it is most likely destroying the genetic fabric of the population. This video has been made for a scientific conference on vaccination and it is titled '[Vaccination against Multiple Diseases: Is this in the best interests of public health?](#)'

Please note that the control of infectious diseases is a discipline of public health (social medicine). It was not included in the field of medicine for general practitioners until the 1990's. Prior to this it was not a medical issue. This is because Infectious diseases were controlled by political and economic decisions that changed our lifestyle and environment with improved public health infrastructure. This reduced the virulence of these pathogens and childhood diseases in developed countries. This occurred by 1950/60 in all developed nations.

In other words, deaths and illnesses to infectious diseases were reduced without vaccines and it was known that exposure to the infectious agent after 1950/60 resulted in a mild or asymptomatic expression of the disease in the majority of cases that provided long-term immunity to the disease, hence good community protection.

This natural exposure and immunity that was gained was termed 'herd immunity' and this is why it was known that exposure to childhood diseases such as chicken pox, whooping cough and measles from 1950 - 1970 in Australia was beneficial, in the majority of cases, and it primed the whole immune system, not just an antibody response (seroconversion) as in the case of artificial immunity gained from vaccines.

Vaccines only provide short-term immunity (hence many boosters are required) and in many cases it does not provide any immunity at all. This is why it is necessary to know the vaccination status of cases of these diseases that are hospitalised - these are the serious cases of these diseases.

There was no measles vaccine until 1969 in Australia and no chicken pox vaccine until 2013 in Australia. The [whole cell whooping cough \(pertussis\) vaccine](#) was linked to causing encephalopathy (brain damage) in the 1980's and this led to a change to the acellular pertussis (whooping cough) vaccine in the late 1990's. (In Australia it was phased in from 1999-2004).

The whole-cell whooping cough vaccine was only ever used with a 50% up-take rate in Australia up to the 1990's because it was always voluntary and it was not responsible for reducing the risk of deaths and illness to whooping cough disease in Australia. This happened by 1950 and a vaccine was not introduced until 1952 and this was used on a voluntary basis.

Financial inducements were introduced into Australian government policies in the 1990's to increase the up-take rate of all vaccines to 95% - even though there is no disease that has ever been controlled by a 95% up-take of a vaccine. Further, there is no evidence that vaccines can create herd immunity in the population. The evidence for this statement is provided in this [30 min video](#).

On the 23 September 2018, **Peter McIntyre**, the deputy/co-director of the National Centre for Immunisation Research and Surveillance (NCIRS) for 20 years from 1997-2017 [provided false information](#) about my research and qualifications in an article in the **Sydney Morning Herald**.

The journalist, Kylar Loussikian, breached section 121 of the Family Law Act by quoting from my affidavit that is due to be heard in the Federal Circuit Court in December 2018. This journalist used false and misleading information in his article and he has previously written derogatory articles about my university research with false information in The Australian (News Corp) paper

in 2016 - immediately after my PhD thesis was published on 10 January 2016.

On 8 October 2018 **Jane McCredie** also published an article with false information about my qualifications in the [Medical Journal of Australia \(MJA\) Insight Online](#).

In 2014 a medical practitioner from Melbourne, Dr. John Cunningham [fabricated allegations of academic misconduct](#) regarding my [UOW whooping cough research](#) completed in 2006. He was permitted to make an anonymous complaint to the University of Wollongong in 2014 about my research from 2006 and this complaint of 'allegations of academic misconduct' was leaked to the media by 'anonymous medical experts' before the confidential investigation was complete.

UOW provided me with an [apology for this 'unwarranted investigation'](#) but they would not put out a press release to rectify the academic record about this whooping cough research [for the public](#).

There are many more incidences of vexatious complaints that were made about my university research from 2011-2018 and in 2015 when **Prime Minister, Scott Morrison** was the Minister for Social Services the false and misleading information from industry pro-vaccine lobby group activists, that have been permitted [to use the official channels](#) to promote their misinformation, was used to tarnish my research and reputation with politicians.

My research was excluded from debates in the mandating of ~16 vaccines with financial benefits in Australia's social welfare policies in 2016 and this has also resulted in discriminatory enrolment into early childhood education in Australia. This is a blatant breach of human rights. This policy is called the **No Jab No Pay/Play** policy and the campaign to promote this policy and influence public behaviour was run through the News Corp (Murdoch) media. In Australia, Rupert Murdoch now owns approximately 80% of the mainstream media.

Vaccines are a medical intervention that are a serious risk to many people in genetically diverse populations. It is every individual's right to use a vaccine if they believe it is beneficial [to their own health](#) but vaccines are not a 'social responsibility'. This is because there is no vaccine that has ever been used with a 95% up-take [to control any infectious disease in the population](#).

This suggestion is a risk to public health because governments [do not know the health outcomes](#) of this policy and this amounts to undone science or experimentation on the population - a breach of human rights under the Nuremberg Code and many other International Covenants.

Bachelor of Science, University of NSW

Diploma of Education (Science), University of Wollongong

Master of Science (Population Health), Faculty of Health Sciences, School of Public Health, University of Wollongong.

PhD in [The Science and Politics of the Australian Government's Vaccination Program](#), UOW School of Humanities and Social Inquiry.

[Vaccination Decisions](#)



Some of the Ingredients in Vaccines:

Did you know that antibiotics are in most vaccines? Many people are allergic to antibiotics and using any vaccine carries the serious risk of anaphylactic shock to this and many other vaccine ingredients. Are you being informed of this before you give consent to giving your newborn baby a vaccine?

Please consider whether you want these substances injected into the tissues of your new born infant before the blood brain barrier is developed at 6 months of age or their other body systems. These ingredients and more are present in vaccines and the vaccination schedule has expanded to 16 vaccines requiring 52 doses from birth to adolescence.

And the '**new norm**' - allergies, anaphylaxis, Chronic Fatigue Syndrome (CFS), autoimmune disorders (diabetes, childhood rheumatoid arthritis, arthritis, multiple sclerosis etc.), thrombocytopenia purpura (ITP), autism, speech delay, neurological disorders, encephalopathy, meningitis, ADHD, childhood cancers, and many more.



Supporting Public Interest Research

I would like to thank everyone who has supported my research and newsletters over the last 5-10 years. If you have appreciated this unfunded independent research and debate of children's health I hope you will consider a [\\$5 donation](#) for the up-keep of my website and continuation of my voluntary newsletters.

Only funded research is promoted to the public and universities do not promote student research. Hence the need for my website and newsletters to promote my independent research that is in the public interest.

My website [Vaccination Decisions](#) became necessary because the University of Wollongong [is not required to rectify the academic record to the public](#) when organised lobby group activists, such as **Australian Skeptic Inc / SAVN**, and **Friends of Science in Medicine, from the industry/medical complex**, provide false information about my university research in the mainstream media. These lobby groups are deceptively named to suggest that they are grassroots consumer groups using science to argue for the use of multiple vaccines in government policies.

 Forward



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