



Newsletter 227 Richard Di Natale's (Greens Leader) False Vaccination Information in the Australian Parliament

8 April 2019

On 27 June 2013 Richard Di Natale presented [information about vaccines and lobby groups](#) in the Australian parliament that was false and misleading. This misinformation has been used to introduce **mandatory vaccination** in social welfare policies, childcare policies and in employment situations in Australia.

The false and misleading information provided by **Richard Di Natale** includes the following claims:

Claim 1:

- ***'Alongside measures such as access to clean water, sanitation and improved air quality, vaccination is one of the most successful and cost-effective public health interventions in human history.'***

This statement is false. It was the improved public health infrastructure - clean water, sanitation, nutrition and improved air quality - that led to the *significant decline in all infectious diseases* before most vaccines were developed or used in mass vaccination programs. Here are the [comments from all the public health authorities](#) of the 20th century.

Further, Richard Di Natale has ignored the significant harm that vaccines are causing in the population to make this claim and there is no transparent data that shows the government's estimate of this risk in the assessment of the cost-effectiveness of vaccines. This is critical knowledge in the implementation of *a mandatory medical intervention* in the population and yet it has not been provided to the public, doctors or to politicians to support this claim.

Claim 2:

- ***'...a program of vaccination completely eradicated smallpox by 1979.'***

A smallpox vaccine was used for 150 years before the disease was eradicated in 1979 and this

did not occur until *after* the public health reforms were put in place in the mid-twentieth century. Clean water, sanitation, nutrition etc were implemented by 1950 and this allowed case tracing and the isolation of smallpox cases to be used to eradicate this disease.

This was only possible because of the *specific characteristics of the smallpox virus*. There is no other infectious disease that has been eradicated and the vaccine could not have been fully responsible for its decline because many vaccinated people still got smallpox and because there was only enough vaccine for ~50% of the global population (Ch 7 PhD thesis).

Claim 3:

- **'Australia in particular is a vaccination success story'**

Di Natale mentions the use of polio, tetanus and diphtheria vaccines but none of these vaccines were used in mass vaccination campaigns in Australia *until after 1950* when the deaths and illnesses to **all** infectious diseases significantly declined - not just the infectious diseases for which there were vaccines.

After this time the non-serious cases of infectious diseases *were no longer being monitored* - including measles, whooping cough and influenza - because they were no longer considered diseases of serious concern to the majority of Australians (The Commonwealth Year Book of Australia 1953).

A measles vaccine was not introduced in Australia until 1969 and it was not recommended in the national program until 1975 yet from 1950 - 1975 (25 years) measles was not considered a serious threat in developed countries and the non-serious cases of this disease were not monitored. Deaths to measles were extremely rare from 1950 onwards (~1 or 2 deaths per year) and they were a result of a complication of measles due to the individual's own specific circumstances.

Claim 4:

- **'All of these potentially life threatening diseases are now rare but not unheard of in this country.'**

Di Natale claims this occurred around 1981 after the measles and mumps vaccines were introduced in Australia. This is not true. This statement was made by all the public health officials in [Australia in 1950](#). Deaths to these diseases were rare by 1950 and measles and whooping cough were removed from the **National Notifiable Disease List** at this time. This is why there is no data on the incidence of these diseases in the Australian community until the late 1980's.

Deaths to infectious diseases were rare by 1950 and any role that the vaccines have played in reducing the incidence of these diseases in the community is not clear because the government does not provide the number of vaccinated and unvaccinated individuals getting these diseases. This data would clearly demonstrate the effectiveness of vaccines in populations but it has never been provided by the Australian government, doctors or media to support these claims.

Claim 5:

- **'Children in Australia today are protected from many more diseases from chicken pox to human papilloma virus (HPV) thanks to safe and affordable vaccines.'**

The Australian government has not provided evidence for the need for these vaccines as deaths to these diseases were rare when the vaccines were recommended on the NIP in 2007 (HPV)

and 2013 (chicken pox).

Both of these vaccines are linked to serious side-effects and autoimmune diseases that the government has not addressed. The Australian government has not quantified the risks associated with vaccines, that is, the type of adverse events and their frequency in the Australian population.

The other countries that Di Natale refers to that are '*still experiencing the costs of these diseases....*' are the developing countries that do not have access to clean water, sanitation or nutrition.

Claim 6:

- '***..and that's why it is so important that Australia continues to provide generous support to organisations such as the GAVI alliance which are committed to saving the lives of millions of children in developing countries ..***'

The GAVI alliance is made up of pharmaceutical companies, biotechnology companies, the World Bank, the International Monetary Fund, the Rockefeller Foundation, the Bill and Melinda Gates Foundation and many more private-public partnerships. All of these partners have equal input into the recommendations they provide to the **World Health Organisation (WHO)** for national vaccination programs recommended to all the WHO member countries. These are presented to the countries under global health policies.

In other words, the vaccine recommendations for global health policies are being provided to WHO member countries by organisations that make huge profits from their recommendations. This is a breach of the WHO charter to provide *objective scientific advice* on this medical intervention. Further, the majority of clinical research on the safety and efficacy of vaccines that is used by governments is being funded by the pharmaceutical companies.

There is no independent body assessing this pharmaceutically funded research in Australia and Australian government vaccine advisory boards include many representatives with [significant financial conflicts of interest](#) with the vaccine manufacturers i.e. the pharmaceutical companies.

Claim 7:

- '***Indeed vaccination has been such a success in Australia that we forget what it's like to suffer from the preventable infections we fought so hard to conquer..***'

Instead of providing the evidence for the effectiveness of vaccines in reducing the incidence of these diseases (i.e. the number of vaccinated/unvaccinated children getting these diseases) the government makes this unsupported claim about these diseases to explain the fact that many people are choosing not to vaccinate *with some or all* of the recommended vaccines.

These people are choosing not to use some or all of the vaccines because the government has not demonstrated with evidence that the vaccines are beneficial to individuals or community health.

Claim 8:

- '***We are spared the horror of watching a child with whooping cough turn blue and suffer a seizure from a coughing fit..***'

But we are not spared the horror of hundreds of thousands of children suffering seizures,

encephalopathy, anaphylaxis, autism, asthma, allergies and many other chronic illnesses after vaccines. These are being described by Di Natale, doctors and politicians as a 'coincidence' after vaccines - despite the fact that pharmaceutical companies have associated this neurological damage as a side-effect of vaccines for 60+ years.

Why has the Australian government never investigated this direct correlation between the increasing chronic illness in children and the expanding vaccination program? This is the undone science that I have described in my PhD thesis.

Further, parents of these vaccine damaged children are ridiculed on thousands of social media blogs and twitter handles set up by high profile businessman [Dick Smith's Australian Skeptics Inc/ SAVN lobby groups](#). These pro-vaccine lobby groups are controlling the vaccination debate in the media, and journalists are being given false/fabricated information from these pro-vaccine lobby groups that is smearing the concerned community that wants to debate *choice in vaccination*: a situation that has always existed in this country for over 100 years - right up until the pro-vaccine lobby groups gained access to our media and politicians in the 1990's.

The official channels of authority in Australia are allowing these social media blogs and the mainstream media to defame academics/professionals and parents who want to debate the academic literature on children's health and vaccines.

In addition, journalists are being encouraged by the health department to promote anecdotal evidence (one parent's story) about their child's experience with an infectious disease but they are encouraged to ignore and ridicule (as an 'anti-vaxxer') a parent whose child has suffered death or serious disability to a vaccine. This is the '**false balance**' that the public is receiving in the mainstream Australian media on vaccines.

Claim 9:

- '**We no longer encounter people on a daily basis whose limbs have been twisted by paralytic poliomyelitis**'

But we are encountering a generation of children with a 5-fold increase in permanent and life threatening disease and disability and the Australian government has not investigated the combined program of 16 vaccines as a plausible cause of this disease.

The US Institute of Medicine (IOM) described vaccines as a [plausible biological cause of the chronic illness](#) we are seeing increase in children yet governments have **never investigated** this link with a properly designed inert placebo controlled study over a period of 6 months or more. This policy cannot be described as a '**protective health policy for children**' until this science has been done.

Claim 10:

- '**....we should be celebrating the life saving innovation that has saved us and our kids from death and disease.**'

This is an unsupported claim. Firstly, vaccines were not the main factor in controlling infectious diseases and secondly the claim makes the assumption that because one vaccine may be beneficial in providing temporary protection from an illness that all the recommended vaccines should be considered effective and necessary. This is a flawed and unsupported claim and it does not address the risks of vaccines.

This highlights the necessity to examine the risk/benefit assessment for each vaccine, the combination of vaccines and your own genetics before you decide to use all the recommended vaccines in yourself and your children.

Please click on [this link to read Claims 11 - 19](#) - the rest of the false information that Richard Di Natale provided in the Australian parliament on 27 June 2013. This has formed the basis of mandatory vaccination with ~16 vaccines in Australia's social welfare and employment policies that will seriously harm the Australian population and remove fundamental human rights with respect to our right to bodily integrity.

These government vaccination policies experiment on the Australian population with vaccines that have not been proven to be safe or effective in improving the health of the Australian population..

Judy Wilyman PhD

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 [A critical analysis of the Australian government's rationale for its vaccination policy](#)' (the science, politics and ethics of Australia's vaccination policies) , UOW School of Humanities and Social Inquiry.

Website [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?

Here is a link to the [Australian government's list of ingredients in vaccines](#) that is not provided to politicians, doctors or parents before vaccines are given to children.



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

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.

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 other **activists from the powerful industry-medical complex** provide false information about my university research in the mainstream media.



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