



Vaccination Decisions

with Judy Wilyman PhD



Newsletter 269:

A Global Medical Tyranny: Vaccines are Destroying the Genetic Fabric of Society

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The Evidence that supports the Claim that Vaccines are Destroying the Genetic Fabric of Society

In 1960 Australian **Frank MacFarlane Burnet** received the Nobel Prize for immunology. At this time he [stated](#):

*"Genetics, nutrition, psychological and environmental factors may play a more important role in resistance to disease than the **assumed benefits** of artificial immunity induced by vaccination".*

He considered that *"genetic deterioration of the population may be a consequence of universal mass vaccination and he postulated that in the long-term vaccination may be **against** the best interests of the state".*

In addition to these statements, **Stanley Plotkin**, who is considered the 'Father of World Vaccinology' stated in 2019 that ['antibody titre is not a reliable indicator because we do not know precisely how antibodies work'](#). This is significant because the efficacy of all vaccines is based **solely** on the surrogate of **antibody titre**. And as we know many [vaccinated children](#) are still getting the diseases they are vaccinated against.

It is also important to note that the human immune system is **more complex** than just an **antibody response**, and natural immunity is not the same as artificial **vaccine-induced** immunity (antibody titre).

By 2004 [~45% of children 0-14 years of age](#) in all highly vaccinated populations, had a chronic illness and in 2020 this figure is now closer to 50% in many countries.

Many parents are now long-term carers for children who will never reach their potential in life. In addition, the incidence of autism is predicted to be 1 in 2 children by 2032; a disease that is **4-times more prevalent** in boys than girls.

Yet governments globally have ignored these facts and the overwhelming science linking these diseases to vaccines for three decades. They have also ignored the well known **contraindications** to vaccines that are **due to genetics** (family history), by reducing all of these contraindications to just one - **anaphylaxis**. And family history is not enough - you must try the vaccine first.

On the advice of the medical-industry complex, governments and doctors are claiming that this **significant increase in chronic illness in children** is a **'coincidence'** after vaccination. Governments have ignored basic scientific principles of evidence-based medicine to provide this response to parents for decades.

My Publications on the Ethics of Mandatory and Coercive Vaccination Policies

1. ['A new strain of influenza or a change in surveillance?'](#) After investigating the **Swine flu 'pandemic'** of 2009, **that did not turn out to be a 'pandemic'**, I had this article published in the **Australasian College of Environmental and Nutritional Medicine (ACNEM)** Vol 28, No 4, Dec 2009. The article describes how increased surveillance of a disease can be used to give the **appearance** of an **increased number of cases** which can be **misused** by the media to create fear about a new virus. This can be achieved through statistical manipulation as we have observed in both 2009 and now in 2020 with COVID19.
2. [Mandatory and Coercive Vaccination: how ethical is this policy?'](#) - A poster presentation at the **Australian Health Promotion Association** conference in Perth 2009.
3. An article published in the **Medical Veritas Journal** in 2015 - [The Ethics of Childhood Influenza: should Australian children be immunised against influenza? Influenza is a disease that the majority of children and adults are not at risk of dying from - has this changed in 2020 or is it a change to the diagnostic criteria for influenza?](#)

Whilst it can be stated that there has been a serious outbreak of disease in some countries in 2020, this cannot be described as a "**global pandemic**" because this declaration was based on changing the definition of a pandemic in 2009 and on the flawed assumptions used in the **mathematical modelling** for this virus in all countries. This is explained in my [video presentation here](#) and in this document that has just been released - '[Global Report 2019-nCOV: There is no global pandemic. The data is clear](#)'.

Resources

1. [Class action against the Australian government's disproportionate response to SARS-Cov2 and the National state of Emergency.](#) This legal document describes the Commonwealth Biosecurity Act 2015 that states that healthy people should not be medically tested or quarantined. Please download it and stand up for your human rights.
2. '[Global Report 2019-nCOV: There is no global pandemic. The data is clear](#)'.
3. [Curfew 'invalid' and everyone can ignore it says Michael Wyles QC](#) - comment on the Victorian Lockdown
4. [Corona Brucella - the second Wave of Corona](#) by investigative journalist James Grundvig
5. [Open letter from Medical doctors and Health Professionals to all Belgian Authorities.](#)
6. [The Significant Events needed to Create an Appearance of a Global Pandemic](#) by Judy Wilyman PhD.

I have been studying the vaccination topic both formally and informally since 1993 when I vaccinated my first child. Like most people questioning vaccines, I have not come from an anti-vaccination position and the debate is not about pro or anti-vaccination. It is about safety, efficacy and necessity for each vaccine on the schedule. Are they all safe? And are they all effective and necessary?

In 2015 I completed a PhD at the University of Wollongong answering these questions.



My thesis is titled 'A critical analysis of the Australian Government's rationale for its vaccination policy'. In Chapter 7, I present a discussion of the claims made by the government about the safety and efficacy of vaccines that are not supported by scientific evidence.

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](#)

Supporting Public Interest Research

My book - [Vaccination: Australia's Loss of Health Freedom](#) - is now available. This book transforms my PhD into a more readable format and it includes three forewords that are written by health professionals and scientists who have endorsed my research.

The book describes the history of the control of infectious diseases in Australia plus the reasons for expanding the vaccination program. It also has an extra chapter (that is not in the PhD) that describes the strategies the Australian government and the medical-industry complex have used to censor the vaccination debate and to remove health freedom in Australia.

Here are two endorsements of my book:
 1) [Mrs. Vera West](#) and 2) [Scientist Dr. James Lyons-Weiler](#).

My research has demonstrated that **children's health has significantly declined** as the **Australian government's vaccination program** has expanded. This is why the government and media have put so much effort into denigrating and censoring my research. Vaccination programs can not be described as 'health policies' if they are not improving health outcomes in the population.

In the 23 years that **Peter McIntyre** was involved in the NCIRS (1997-2018) he did not ensure that the direct dose-response correlation between the 10-fold increase in chronic illness in children and the expanding vaccination program was *investigated*.

Proof of causality is **essential** before claiming to parents that vaccines are "safe and effective". This correlation is a

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

strong indicator of causality, yet **Peter McIntyre's** response to parents, as Director of the NCIRS, **for 23 years**, was that it is a '**coincidence**' after vaccination. This is not evidence-based medicine.

The Australian government, under **Scott Morrison**, as Minister for Social Services in 2015, has committed a [crime against humanity](#) by implementing coercive vaccination into social services policies when there is **no Health Law** in any **Australian Health Act** to validate these policies as being for a "legitimate public health purpose".

Further, the **Australian Prime Ministers Office**, has refused to release the scientific advice, under the **Freedom of Information Act**, that it relied upon to mandate vaccines in social services policies in 2015. This evidence has been hidden from the public and the debate censored. That does not amount to "a consensus on the science" as governments are claiming.



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