

Mandatory Vaccinations: A Significant Change

Mandating Vaccinations without Exemptions: A Significant Change What Would Change?

Voluntary and Informed Consent

Pressure is mounting to remove the voluntary and informed consent status of vaccinations and make some or all vaccinations mandatory in Canada. If we are to consider this significant change in both our medical practices and in our status as citizens, it is best we be thoughtful and thorough in our understanding of what the consequences of this change might mean and implement appropriate procedures and safeguards.

Loss of Personal Self-Determination

What would it mean to have mandatory vaccinations? It would mean that individuals no longer have self-determination over their own bodies or that of their children. Instead industry and government agents will have the right and the authority to impose medical interventions upon unwilling citizens.

This will set a very dangerous precedent. While the context of the current discussion is about measles, the potential impact is more than simply the measles vaccine. This decision is about our freedom to choose what goes into our body and the bodies of our children.

A Change in Medical Ethics

Mandatory vaccination would mean a significant change in how medicine is practiced. Presently every physician embraces the motto – 'First do no harm'. Forced vaccinations would disregard this medical ethic.

Vaccination is a medical treatment with known risks including death. The Supreme Court in the United States has deemed vaccinations "unavoidably unsafe", meaning that even when used as directed some individuals will be injured or killed by vaccinations. Vaccines are complex biochemical substances that are, by definition drugs, and by their very design, can make healthy individuals sick.

Second, current medical ethics adhere to the belief that no one should be forced to undergo a medical treatment without informed consent and their agreement to the treatment. We condemned the forced sterilization of individuals with developmental disabilities, the Tuskegee experiments that intentionally infected black inmates without their knowledge or consent, and the Nazi medical practices that included involuntary euthanasia, experimentation, and sterilization. Yet today we are considering ethical practices similar to those we previously condemned.

A Change to the Canadian Charter of Rights and Freedoms

Our *Charter of Rights and Freedoms* currently guarantees not only the **fundamental freedoms of conscience and religion**, but also the **legal right to security of the person**. For the government to attempt to enforce any vaccination program without recognizing these rights could invoke at least a judicial process and possibly a legislative one.

What Prerequisite Actions Are Required?

If we are to continue down the path of mandatory vaccinations it would appear a number of foundational prerequisites ought to be in place prior to any serious consideration of mandatory vaccinations. These prerequisites include the following points:

Prerequisite Actions

1. Mandatory reporting of all adverse effects of vaccinations.

Currently the reporting of adverse effects of vaccination is voluntary with no consequence for a failure to report vaccine damage. It is estimated that only two to ten percent of actual vaccine damage incidences are reported. A rigorous and systematic collection of adverse reactions to vaccines needs to be implemented and be fully available to public scrutiny.

2. Training of physicians to diagnose vaccine damage.

Physicians would require training in diagnosing and treating vaccine damage prior to any mandatory treatment. Currently physicians receive no training on how to diagnose or treat vaccine damage.

3. Mandatory compensation for all vaccine damage including vaccine failure.

Currently there is no national vaccine damage compensation program in Canada other than in the province of Quebec. Nor is there any compensation for illness caused by vaccine failure. Canada and Russia are the only remaining countries of the western world not to have a vaccine damage compensation plan.

While the United Stated has a Vaccine Damage Compensation Program, the US Vaccine Court has been criticized for its reluctance to acknowledge and provide compensation for vaccine damage, and for the lack of consistency and accountability of its vaccine court Special Masters. A Canadian compensation system needs to be implemented and provide much more accessible compensation for vaccine damaged individuals.

4. Canadian Vaccine Injury Victims Access to Justice

Canadians who experience significant injury or death as a result of vaccinations are unable to obtain financial compensation through the Canadian court system. While anyone can initiate a lawsuit if they believe they or a family member has suffered a vaccine induced injury, in Canada the victim must prove not only "causality", but also "negligence".

Because this is an impossibly high standard to litigate, to date no vaccine injury case has succeeded in winning damages in a Canadian court. Vaccine injury victims are also precluded from presenting their case to a jury. Only trial by judge is accepted. With these barriers the Canadian legal system offers no meaningful legal recourse to Canadian vaccine injury victims.

Without the precedent of court adjudicated awards for vaccine injury, the Canadian government is enabled to turn a blind eye to the plight of the vaccine injured and refuse to implement a vaccine damage compensation system.

5. Mandatory evidence of long-term vaccine safety and effectiveness.

Currently there are no **long-term** clinical trials that demonstrate vaccine safety or effectiveness.

Efficacy: Most efficacy trials are limited to the measurement of anti-bodies/titres in the blood as surrogate proof of effectiveness, rather than producing verifiable evidence that the vaccine actually prevented the disease.

Safety:

- Most safety trials are limited to only 2–6 weeks. Effects can emerge beyond this limited time period.
- No safety trials exist that determine the safety of giving multiple vaccinations at once.
- No large safety trials exist that use an unvaccinated population as the control group.
- Most safety trials not only use control groups consisting of other vaccinated populations, but also use so-called "placebos" that contain aluminum adjuvants and other vaccine ingredients (minus only the immunizing agent). In medical science, a placebo is defined as an **inactive substance with no pharmacological action.** It is administered to some patients in clinical trials to determine the relative effectiveness of another drug administered to a second group of patients. This failure to use a proper **neutral placebo** undermines the integrity of vaccine safety claims because it masks the damaging effects of aluminum and other vaccine ingredients themselves, which are known to be toxic.

Prerequisite Actions (continued)

6. Oversight by an independent body.

A judicial body needs to be established to oversee and provide independent evaluation of product safety as well as evaluate the justification for imposing medical treatments against consent. This body ought to be independent of both industry and government and have the powers and independence of the judiciary.

7. Mandatory reporting of all vaccine research trials and outcomes.

Currently vaccine manufacturers are able to withhold evidence of vaccine trials and outcomes and only publish or acknowledge those trials that produce the outcomes favorable to their cause. As a consequence any vaccine trial that produces an unfavorable result can be withheld from public and governmental scrutiny.

8. Mandatory quarantine of all vaccinated individuals receiving live and attenuated viruses.

If we are serious about the goal of 'herd immunity' and stopping the transmission of viruses then the quarantine of individuals vaccinated with live/attenuated viruses (measles, mumps, rubella, chickenpox, rotavirus) needs to be implemented. These vaccines are capable of transmitting the virus to others due to viral shedding. Viral shedding can occur for up to six weeks following vaccination.

Summary

We need to be thoughtful and vigilant before endorsing the idea that government and industry should be able to mandate an invasive and potentially dangerous medical procedure without informed consent, especially where the motive of profit and politics can taint the value and benefit of such medical procedures.