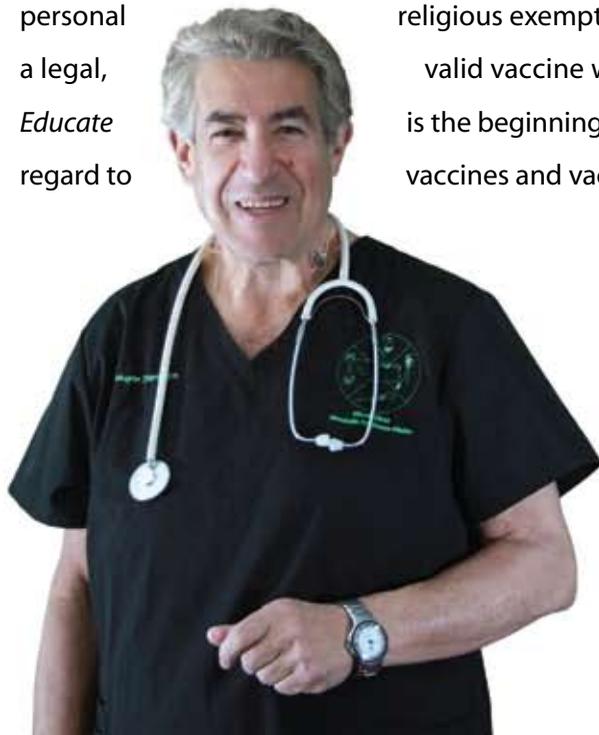


Don't Vaccinate! Before You Educate™

Don't Vaccinate Before You Educate is a compilation of Dr. Eisenstein's lectures, webinars and seminars on vaccinations. Dr. Eisenstein brings his knowledge as a physician, with a Masters in Public Health and his legal expertise as an attorney to help educate you on this very important topic. Dr. Eisenstein has concluded that the scientific literature, both pro and con vaccine, makes it virtually impossible to come to a scientific conclusion with regard to the benefit vs. the risks of vaccines. Unlike most other physicians, he feels parents have the right to be involved in the final decision about vaccinating their children. He discusses vaccine law and the various legal exemptions. In this revised edition, Dr. Eisenstein explains why a personal religious exemption is the best route for obtaining a legal, valid vaccine waiver. *Don't Vaccinate Before You Educate* is the beginning of a path to educate families with regard to vaccines and vaccine exemptions.

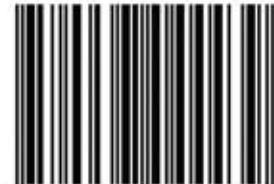


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Don't Vaccinate! Before You Educate™ Mayer Eisenstein MD, JD, MPH



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Updated/Revised

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BEFORE YOU
EDUCATE**

Mayer Eisenstein, MD, JD, MPH

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Foreword to 2012 Edition
Alan Phillips, J.D.
www.vaccinerights.com

Throughout the history of vaccines, critics have objected to them on scientific, religious, and moral or philosophical grounds. The controversy continues today; indeed, it may be more vibrant now than at any other time in history. Throughout my own 18 years of ongoing investigation, a notable difference has stood out between pro-vaccine advocates' and anti-vaccine advocates' relationship to the controversy. Put simply, the latter has far more converts. This may be understandable, given our mainstream educational systems' biased view of the topic. Rather by definition, then, most of those with alternative vaccine views previously held pro-vaccine views, while the majority of pro-vaccine advocates have, more or less, always held the same view. Curiously, this has left the alternate vaccine community with a more complete grasp of the issue than their pro-vaccine counterparts, being the only side that has genuinely experienced being on both sides of the issue. Yet, throughout vaccine history, the anti-vaccine views have remained those of an adamant minority; why? After all, if alternative vaccines views had never really had any merit, surely those views would surely have faded into obscurity long ago; yet, the controversy persists, which suggests that there just may be some merit to those views. But if alternative vaccine views have always had merit, we might expect them to have achieved broader recognition by now. Why then, after so many decades of dispute, has this not yet come about?

My answer begins with a deeply held belief in the fundamental goodness of humanity, a premise that deep down, most human beings are decent, compassionate people who truly want the best for all concerned; and the premise that despite the well-documented corruption, media control, and politics pervading the American healthcare system at all levels of government and industry through which the beliefs of the many are controlled by the few, that if a majority of people actually reviewed the available information on key points of the vaccine controversy with an open mind, a medical revolution would promptly ensue, and that the result would be a radically revised healthcare system that endorses complete and total freedom of choice wherever vaccines are concerned. Indeed, given the superior options, we might see vaccines as we know them today disappear completely.

I submit further that the answer to my question involves barriers psychological in nature, as my own years of research have convinced me that there is no shortage of information to support a revolution; and that these barriers have two distinct parts, which I shall discuss shortly. Finally, I submit also that as the alternative vaccine community begins to recognize and unravel these barriers, we will see an acceleration of the healthcare paradigm shift already underway, and a dramatic, corresponding increase in the health of individuals around the nation and around the world; and that quality-of-health will, inevitably and finally, supersede quantity-of-profit as the primary driving force behind healthcare

policy and law. This is not merely wishful thinking, it is a necessity. Our survival may require it.

The psychological barriers concern fear. Fear pervades the issue on all sides; fear of death from the diseases, fear of injury and death from the vaccines, fear of loss of billions in profits by those invested in the pharmaceutical industry, fear of irreparable harm to humanity from the conspicuously lack of research on the long-term consequences of more and more vaccines, each containing a long list of toxic ingredients—the list goes on. With such high stakes and competing interests, it's no wonder that a calm, open discussion continues to evade mainstream society. Fear is a very effective barrier to transparency and rational thinking.

Which leads us to the first part, a fear I believe is largely a conscious one. I recall years ago as a teenager hearing a radio report about a religious community that didn't vaccinate, and thinking to myself, "Come on—believe in God if you want to, but don't be an idiot!" Steeped as I was in my youth in mainstream vaccine views, the logic of vaccines was clear, simple and straightforward: Vaccines eradicated 20th century diseases, so anyone who objected to vaccines was, quite simply illogical. At the time, I probably could not have heard an alternative view—the mainstream view was too obvious. Today, I see that same inability to hear, that same "deafness," throughout the mainstream, perhaps even defining it. In fact, I submit that it is precisely this "deafness" that prevents anti-vaccine views from getting fair and open consideration. It is not because anti-vaccine

views lack credibility or are unreasonable or illogical, but instead because that they are so “obviously” illogical, and therefore “necessarily” wrong, for the simple fact that they are contrary to a clearly “logical and reasonable” pro-vaccine view. Pro-vaccine advocates don’t hear us because they “know,” without seeing our information, that we are wrong, and therefore, granting us any air time would make them, by association, also irrational.

Indeed, doctors, journalists, pharmaceutical representatives and government officials repeatedly dismiss anti-vaccine advocates categorically, in one fell swoop, by virtue of their own “logical” pro-vaccine position alone. Rarely do they engage anti-vaccine advocates head-on with actual specifics in an intelligent discourse. Vaccines eradicated diseases in the 1900’s, we keep vaccinating and the diseases are pretty much gone, so anti-vaccine advocates are putting everyone else at risk and must be ignored and suppressed. It’s not about free speech, it’s about safety. And so, anti-vaccine evidence fails to see the light of day, to have its proverbial “day in court” where it might finally be viewed fairly and objectively, to rise or fall on its merits rather than by categorical exclusion. On the conscious level, vaccine advocates are afraid of us—not our information, because that’s already wrong by definition—rather, afraid of being associated with an “obviously” dangerous position, afraid that we will cause the resurgence of infectious disease resulting in widespread illness and death. Those fears can be a difficult barrier to penetrate. And our first reflex, to

scream louder and more often, isn't often very effective against this.

As difficult as this conscious fear barrier can be to penetrate, it may be the smaller part. I submit that there is a much deeper seated, more powerful subconscious fear barrier beyond the conscious one, one perhaps best summarized by the simple question:

“What if the anti-vaccine advocates are right?”

The simplicity of the question belies the profundity of the answer. For if the anti-vaccine advocates are correct, then the truth is that we live in a world where governments lie, doctors are severely misinformed in their areas of expertise, pharmaceutical companies kill and injure for profit with virtual impunity, and we are all unwitting pawns in a most insidious game. For most, these are simply unacceptable prospects, unrealistic possibilities for our “free” society, but even more importantly, prospects that are simply unacceptable emotionally, possibilities too uncomfortable to consider seriously, so we reject them out of hand. Perhaps it is no wonder, then, that the abundant evidence supporting alternative vaccine views so often falls on deaf ears, and the vaccine controversy has yet to make the leap into the mainstream, into an open forum where ideas may rise or fall on their merits. Yet, if the vaccine controversy is ever to become a viable conversation, we as a society must necessarily allow for these possibilities, not matter how extreme they may seem, not matter how uncomfortable they may make us feel. For if these are not allowable

possibilities, then we can neither embrace them if they turn out to be true nor reject them if they turn out to be false. Yet, with so much hanging in the balance, we don't have the luxury of excluding any possibilities. Innocent children are suffering and dying from vaccines—that's an irrefutable fact. Exemption rights are being taken away as we speak, while more vaccines are being added to existing requirements, and new categories of people are being added to the list of those already required to be vaccinated. If anti-vaccine advocates are right, even partly, one of the greatest injustices of all time has been occurring for some time, and it is getting worse; time is running out.

As bleak as the situation looks to the anti-vaccination camp, because of the psychological barriers, I don't so much fault those who reject alternative vaccine views as I highly admire those that do. At this point in time, that takes some serious initiative, real bravery. To step outside of the controversy and look back at it objectively; to consider fully the risks and implications not only of vaccines themselves, but of the potential consequences to oneself for choosing to question the status quo on such a politically charged and emotionally sensitive topic; and to have the confidence in oneself to sift through and assess the voluminous, conflicting information and follow the truth persistently wherever it may lead—that takes real guts. And yet, as much as I admire those who pursue that course, I admire even more those in the medical profession who do so, as theirs is a profession with enormous pressure to toe the party line; one where daring

to think outside of the box can bring prompt and severe consequences to one's professional life and future professional prospects. Accordingly, they are few in number. To those rare medical freedom fighters, I offer my highest praise, gratitude, and respect, for they are a rare breed, and these days, a timely gift to humanity.

Enter Dr. Mayer Eisenstein. For decades, Mayer has relentlessly followed truth, come what may. He has shown unusual initiative and independence of thought. He has steadfastly kept an open mind, and gone where the evidence takes him, despite immense pressure to conform to a contrary mainstream view. Moreover, he has endeavored to share that truth, to enlighten others, with full awareness of the risk of personal attack from those with contrary beliefs and agendas. Call it what you may—bravery, naiveté, idealism, altruism—perhaps it is all of these things. Regardless, it is both rare and vital, as we are in one of humanity's darker hours, if the scope of the vaccine illusion is any measure. Many will walk down a freshly cut path, but few will hold the machete and actually forge the new path. It takes humility and strength—for those who buck the system are often brutally criticized; intelligence and clarity—for those unsure of the facts are easily overwhelmed on the battlefield of ideas; and heart—for those who do not believe in themselves may succumb to doubt and falter along the way. Mayer embodies all of these attributes, and for that, we have all benefitted tremendously.

You are about to embark on a critical journey with a gifted tour guide. Be forewarned, though, as the end point

may not be a comfortable one. But don't let that discourage you, as ours is a glass half full. Dare to draw your own conclusions, for the more we defer to others, the more those others will seek to seize the opportunity to control us. But if you should ultimately conclude that our world is unsafe—a place where governments do lie, where the pharmaceutical industry knowingly profits from the misery of innocent others, where politicians too often serve corporations to our detriment—you will be, accordingly if ironically, in a place of potentially immense power. Awareness can be a wonderful thing. Once you awaken to the problem, you are in a position to leverage the truth, to influence change, and that can make all the difference. Go, then, and learn some truth about vaccines. And make haste! The revolution is upon us, and we need you, to help us make the world a better place.

The Buddha was reported to have said: “Three things cannot be long hidden: The sun, the moon, and the truth.” We go forward not dissuaded by the odds against us, but rather, confident in the knowledge that complete transparency is, necessarily, the eventual outcome.

Alan Phillips, J.D.

www.vaccinerights.com

March 2012

Chapter VII

VACCINE LAW

All vaccine requirements and mandates are legislated by the individual states. Different states can theoretically have different laws with regard to vaccine mandates and different laws with regard to vaccine waivers and exemptions. The states derive their power from the Tenth Amendment.

"The powers not delegated to the United States by the Constitution nor prohibited by it to the states, are reserved to the states respectively, or to the people."

The clause, "nor prohibited by it to the states" in the Tenth Amendment bars a state from passing any legislation that would violate the U.S. Constitution.

The First Amendment to the Constitution states:

"Congress shall make no law respecting an establishment of religion, or prohibiting the free exercise thereof..."

Therefore, a state that passed legislation mandating vaccination, would be in violation of the U.S. Constitution, if it would conflict with the individual's religious beliefs.

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Since vaccine mandates are state determined, vaccine laws may vary from state to state. At the present time, all 50 of the United States allow medical exemptions for childhood vaccines. With the exception of West Virginia and Mississippi, all states also allow a religious exemption for childhood vaccines. Currently 17 states have philosophical vaccine exemptions. Before submitting any medical, philosophical or religious exemption documentation, I recommend reviewing your state law with an attorney to see which is applicable in your state.

The following is a discussion of Illinois vaccine law. Most states have adopted similar laws. I recommend that you review your state's vaccine laws with an attorney before you submit any request for a vaccine waiver. The attorney should be one with expertise in vaccine law.

Illinois Medical Exemption From Mandated Childhood Vaccine

Illinois law allows for medical, as well as religious, exemptions from childhood vaccinations, but not a philosophical exemption. Section 665.520 of the Illinois Administrative Code states:

- a) Any medical objection to an immunization must be

- 1) Made by a physician licensed to practice medicine in all its branches indicating what the medical condition is.
 - 2) Endorsed and signed by physician on the certificate of child health examination and placed on file in the child's permanent record.
- b) Should the condition of the child later permit immunization, this requirement will then have to be met.

ME Comments:

The Illinois Administrative Law has given the Illinois Department of Public Health the right to question your physician's medical assessment and substitute its own physician. With an abundance of scientific studies pointing to the safety of vaccines and a corresponding number of studies pointing out adverse effects, it is unlikely that the appointed reviewing physician will find medical contraindications to any of the mandated childhood vaccines.

Illinois Religious Exemption to Vaccines

A search of the medical literature shows that there are as many scientific studies pro vaccine as anti-vaccine. Therefore, to argue that vaccines should or should not be given based on scientific medical grounds, is not definitive.

Vaccine Law

Section 665.510 of the Illinois Administrative Code states that:

“The religious objection must set forth the specific religious belief which conflicts with the examination, immunization or other medical intervention.”



The specific religious objection may be personal or it may be directed by the tenets of an established religious organization. The Illinois case law has held that the objection does not have to be written on church stationery, nor does it have to be signed by a rabbi, priest or minister, physician or attorney, etc. In statutory interpretation there are key words that comprise the elements of the statute. With regard to religious exemption under Illinois vaccine law the key words are **specific, personal** and **tenets**.

You must *specifically* state your sincere religious belief. The word ***specific*** in the law is open to interpretation. It most probably means that religious or biblical references have brought you to that conclusion. It does not mean that you believe that vaccines are medically dangerous and therefore God does not intend for you to give them. That argument would be construed as a medical exemption - not as a religious exemption. A religious exemption implies that even if the vaccines are

shown to be 100% safe and effective you would still object on religious grounds.

There are two ways to qualify for a valid legal religious vaccine waiver:

a) Your belief must be directed by the *tenets* of an established religious organization.

If you belong to a recognized religious organization whose tenets speak against childhood vaccinations, you should present a document stating that you are a member of that religious organization.

b) It may be your *personal* religious belief.

The religious beliefs may be *personal* religious beliefs and not necessarily the tenets of a recognized organized religion. Most states, including Illinois, have adopted the definition of personal as decided by Judge Wexler in a New York case.

Until 1987 New York's law requiring vaccination of school-aged children provided a religious exemption only to "bona fide members of a recognized religious organization," but in that year a United States district judge ruled that limiting the exemption in this manner was unconstitutional.

The United States Constitution mandates that, if New York wishes to allow a religiously-based exclusion from its

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otherwise compulsory program of immunization of school children, it may not limit this exception from the program to members of specific religious groups, but must offer the exemption to all persons who sincerely hold religious beliefs that prohibit the inoculation of their children by the state.

Judge Leonard D. Wexler
United States District Court, Eastern District of New York
October 21, 1987

As a result of the decision New York amended its law to read:

This section shall not apply to children whose parent, parents, or guardian hold genuine and sincere religious beliefs which are contrary to the practices herein required, and no certificate shall be required as a prerequisite to such children being admitted or received into school or attending school.

Illinois law §665.510 also states that

“The local school authority is responsible for determining whether the written statement constitutes a valid religious objection”.

At the present time there is no Illinois case law interpreting this element of the statute. Therefore one can

look to other state law for interpretation. Even though other state law would not be binding for the state of Illinois, it would be very influential in judicial settings where Illinois case law does not address the issue. In May 2001 the Wyoming Supreme Court in Susan LePage vs. The State of Wyoming Department of Health ruled on this very issue.

[¶15] We do not believe that the legislature, through its adoption of §21 -4-309(a), anticipated or authorized a broad investigation into an individual's belief system in an effort to discern the merit of a request for exemption. Rather, we construe the statutory language as mandatory and the exemption as self-executing upon submission of a written objection.

(For a fuller version of the opinion see page 131.)

Illinois courts would most probably hold that the presenting in writing of a personal religious objection to vaccinations stating the specific religious reasons for the objection would be self executing (would be automatically accepted). Therefore, as in the findings of the Wyoming Supreme Court, Illinois courts would most probably find that if the school board tries to assess the sincerity of one's religious conviction it would be a First Amendment freedom of religion issue.

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Excerpts from Illinois Compiled Statute

ILLINOIS COMPILED STATUTES (ILCS)

(410 ILCS 315/0.01)

Sec. 0.01. Short title. This Act may be cited as the
Communicable Disease Prevention Act.

(410 ILCS 315/1)

Sec. 1.

Certain communicable diseases such as measles, poliomyelitis and tetanus, may and do result in serious physical and mental disability including mental retardation, permanent paralysis, encephalitis, convulsions, pneumonia, and not infrequently, death.

Most of these diseases attack young children, and if they have not been immunized, may spread to other susceptible children and possibly, adults, thus, posing serious threats to the health of the community. Effective, safe and widely used vaccines and immunization procedures have been developed and are available to prevent these diseases and to limit their spread. Even though such immunization procedures are available, many children fail to receive this protection either through parental oversight, lack of concern, knowledge or interest, or lack of available facilities or funds. The existence of susceptible children in the community constitutes a health hazard to the individual and to the public at large by serving as a focus for the spread of these communicable diseases.

It is declared to be the public policy of this State that all children shall be protected, as soon after birth as medically indicated, by

the appropriate vaccines and immunizing procedures to prevent communicable diseases which are or which may in the future become preventable by immunization.

(410 ILCS 315/2)

Sec. 2. **The Department of Public Health shall promulgate rules and regulations requiring immunization of children against preventable communicable diseases designated by the Director.** Before any regulation or amendment thereto is prescribed, the Department shall conduct a public hearing regarding such regulation. In addition, before any regulation or any amendment to a regulation is adopted, and after the Immunization Advisory Committee has made its recommendations, the State Board of Health shall conduct 3 public hearings, geographically distributed throughout the State, regarding the regulation or amendment to the regulation. At the conclusion of the hearings, the State Board of Health shall issue a report, including its recommendations, to the Director. The Director shall take into consideration any comments or recommendations made by the Board based on these hearings. **The Department may prescribe additional rules and regulations for immunization of other diseases as vaccines are developed.**

The provisions of this Act shall not apply if:

1. **The parent or guardian of the child objects thereto on the grounds that the administration of immunizing agents conflicts with his religious tenets or practices or,**
2. A physician employed by the parent or guardian to provide care and treatment to the child states that the physical condition of the child is such that the administration of one

Vaccine Law

or more of the required immunizing agents would be detrimental to the health of the child.

(410 ILCS 235/3)

Sec. 3. Public pamphlet. The Director shall prepare and make available upon request to all health care providers, parents and guardians in the State, a pamphlet which explains the benefits and possible adverse reactions to immunizations for pertussis. This pamphlet may contain any information which the Director deems necessary and may be revised by the Department whenever new information concerning these immunizations becomes available. The pamphlet shall include the following information:

- (a) A list of the immunizations required for admission to a public or private school in the State;
- (b) Specific information regarding the pertussis vaccine which includes:
 - (1) The circumstances under which pertussis vaccine should not be administered or should be delayed, including the categories of persons who are significantly more vulnerable to major adverse reactions than are members of the general population;
 - (2) The frequency, severity and potential long-term effects of pertussis;
 - (3) Possible adverse reactions to pertussis vaccine and the early warning signs or symptoms that may be precursors to a major adverse reaction which, upon occurrence, should be brought to the immediate attention of the health care provider who administered the vaccine;

- (4) A form that the parent or guardian may use to monitor symptoms of a possible adverse reaction and which includes places where the parent or guardian can record information about the symptoms that will assist the health care provider; and
- (5) Measures that a parent or guardian should take to reduce the risk of, or to respond to, a major adverse reaction including identification of who should be notified of the reaction and when the notification should be made.

The Director shall prepare the pamphlet in consultation with the Illinois State Medical Society, the Illinois Hospital Association, and interested consumer groups and shall adopt by regulation the information contained in the pamphlet, pursuant to the Administrative Procedure Act.



77 ILLINOIS ADMINISTRATIVE CODE
TITLE 77: PUBLIC HEALTH
PART 665
CHILD HEALTH EXAMINATION CODE

K-12 School Immunization Requirements

Section 665.100 Statutory **Authority**

The Illinois Department of Public Health (Department) is authorized under Section 27-8.1 of the School Code (Ill. Rev. Stat. 1991, Ch. 122, Par. 27-8.1) [105 ILCS 5/27-8.1] TO PROMULGATE THE RULES AND REGULATIONS, SPECIFY THE

Vaccine Law

EXAMINATIONS AND PROCEDURES WHICH SHALL CONSTITUTE A HEALTH EXAMINATION, AND TO PROMULGATE RULES AND REGULATIONS SPECIFYING IMMUNIZATIONS AGAINST PREVENTABLE COMMUNICABLE DISEASES.

Section 665.230 School Entrance

- a) Every child, prior to enrolling in any public, private/independent or parochial school (includes nursery schools, pre-school programs, early childhood programs, Head Start, or other pre-kindergarten child care programs offered or operated by a school or school district) in Illinois shall present to that school proof of immunity against:
 - 1) Diphtheria
 - 2) Pertussis
 - 3) Tetanus
 - 4) Poliomyelitis
 - 5) Measles
 - 6) Rubella
 - 7) Mumps
 - 8) Haemophilus influenzae type B
 - 9) Hepatitis B
 - 10) Chicken Pox

Section 665.270 Compliance with the Law

A child shall be considered in compliance with the law if all immunizations which a child can medically receive are given prior to entering school and a signed statement from a health care provider is presented indicated when the remaining medically indicated immunization will be received. Immunization schedules must be monitored by local school authorities to assure completion of the immunization schedule. If a child is delinquent for a scheduled appointment for immunization he/she is no longer considered in compliance.

Section 665.280 Physician Statement of Immunity

A physician licensed to practice medicine in all of its branches, who believes a child to be protected against a disease for which immunization is required may so indicate in writing, stating the reasons, and certify that he/she believes the specific immunization in question is not necessary or indicated. Such a statement should be attached to the child's school health record and accepted as satisfying the medical exception provision of the regulation for that immunization. **These statements of lack of medical need will be reviewed by the Department with appropriate medical consultation.** After review, if a student is no longer considered to be in compliance, the student is subject to the exclusion provision of the law.

Section 665.510 Objection of Parent or Legal Guardian

Parent or legal guardian of a student may object to health examinations, immunizations, vision and hearing screening tests, and dental health examination for their children on religious grounds. If a religious objection is made, a written and signed statement from the parent or legal guardian detailing such objections must be presented to the local school authority.

Vaccine Law

The objection must set forth the specific religious belief which conflicts with the examination, immunization or other medical intervention. **The religious objection may be personal and need not be directed by the tenets of an established religious organization.** General philosophical or moral reluctance to allow physical examinations, immunizations, vision and hearing screening, and dental examinations will not provide a sufficient basis for an exception to statutory requirements. **The local school authority is responsible for determining whether the written statement constitutes a valid religious objection.** The parent or legal guardian must be informed by the local school authority of measles outbreak control exclusion procedures in accordance with the Department's rules, Control of Communicable Diseases Code (77 Ill. Adm. Code 690) at the time such objection is presented.

Section 665.520 Medical Objection

- a) Any medical objection to an immunization must be:
 - 1) Made by a physician licensed to practice medicine in all its branches indicating what the medical condition is.
 - 2) Endorsed and signed by physician on the certificate of child health examination and placed on file in the child's permanent record.
- b) Should the condition of the child later permit immunization, this requirement will then have to be met. Parents or legal guardians must be

Vaccine Law

REPLY

To: Fran Eaton
Eagle Forum of Illinois
Sent: Monday, August 27, 2001
From: RICHARD GALATI [RGALATI@idph.state.il.us]
Illinois Department of Public Health
Subject: Re: Reference in Illinois Code

There is no state statute REQUIRING newborns to be vaccinated against any vaccine-preventable disease, including hepatitis B. It is the only currently licensed vaccine that can be given to infants shortly after birth. The other recommended vaccines (such as DTaP, Polio, Hib and Pneumococcal conjugate) are not recommended for administration until the infant is 6 weeks of age or older (i.e. on or about 2 months of age). **The immunization rules require children two years of age and older enrolled in child care facilities to be immunized against hepatitis B.** Hope this answers your question.

M.E. Comments

The above response from the Illinois Department of Public Health rules that the Illinois mandates for Hepatitis B Vaccine does not become effective until two years of age unless your child is enrolled in day care or preschool. Administration of Hepatitis B Vaccine by hospitals within 24 hours of birth is their medical decision, not the state law.

**Vaccination Legislation SB 1305
in Illinois Becomes Illinois Law October 2001**

SB 1305 (Illinois Senate Bill 1305 Amends the Juvenile Court Act of 1987 and Adoption Act) Removes **“not immunizing”** as reason for investigation by [Illinois] Department of Children and Family Services (DCFS)

“A child shall not be considered neglected or abused for the sole reason that the child’s parent or other person responsible for the child’s welfare failed to vaccinate, delayed vaccination, or refused vaccination for the child whether due to a waiver on religious or medical grounds as permitted by the law.”

Based on SB1305 the IDCFS promulgated the following change to Administrative Rule 300 which was approved by The Joint Committee on Administrative Rules (JCAR*) effective October 1, 2001.

Allegation #79 - Medical Neglect - has had all references to immunizations removed. Therefore,

we will no longer be accepting reports on situations where a lack of immunizations is the only allegation. State Central Registry (SCR) staff should refer reporters to the Department of Public Health. Child Protection Investigators (CPs) who are currently investigating reports where a lack of immunizations is the only allegation should "Initially Unfound" them if they are still within the 14 day time frame. If not, supervisors

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should review the reports and waive additional contacts so they can be Unfounded.

Exceptions should be made if the investigation has revealed other potential harms.

Two purposes of the committee are to ensure that the Legislature is adequately informed of how laws are implemented through agency rulemaking and to facilitate public understanding of rules and regulations. To that end, in addition to the review of new and existing rulemaking, the committee monitors legislation that affects rulemaking and conducts a public act review to alert agencies to the need for rulemaking....

Illinois Blue Book
1997-1998
Page 134

M.E. Comments

*SB 1305 removes IDCFS' regulation of medical neglect for parents who choose to delay vaccination, fail or refuse to vaccinate their children based on medical or religious exemptions. This was adopted by the Illinois Department of Children and Family Services' [IDCFS] and approved by JCAR**

As determined in the House floor debate, SB 1305's legislative intent, also, includes families who delay or refuse vaccination for their children's developmental problems, e.g., Down Syndrome or minor illnesses.

With SB 1305, doctors are free to advocate different vaccination schedules than recommended by medical societies for developmental issues or minor illnesses without writing a medical exemption.

*JCAR –The Joint Committee on Administrative Rules is a bipartisan legislative oversight committee created by the General Assembly in 1977. Pursuant to the Illinois Administrative Procedure Act, the committee is authorized to conduct systematic reviews of administrative rules promulgated by state agencies. The committee conducts several integrated review programs, including a review program for proposed, emergency and preemptory rulemaking, a review of new public acts and a complaint review program.

The committee is composed of 12 legislators who are appointed by the legislative leadership, and the membership is apportioned equally between the two houses and the two political parties. Members serve two-year terms, and the committee is co-chaired by a member of each party and legislative house. Support services for the committee are provided by 25 staff members.



IN THE SUPREME COURT, STATE OF WYOMING

2110 WY 26 - March 8, 2001

OCTOBER TERM, A.D. 2000

*Excerpts from Susan LePage vs. State of Wyoming,
Department of Health*

...The statute provides mandatory language, and the Department of Health may not circumvent the legislature's clear limitation of its powers or expand its power beyond its statutory authority. There is no justification found within the statute for the Department of Health to institute a religious inquiry. As a result, the decision to do so is not in accordance with the law.

Vaccine Law

[¶ 14] Furthermore, construing the statute as the Department of Health suggests raises questions concerning the extent to which the government should be involved in the religious lives of its citizens. Should an individual be forced to present evidence of his/her religious beliefs to be scrutinized by a governmental employee? If parents have not consistently expressed those religious beliefs over time, should they be denied an exemption? Can parents have beliefs that are both philosophical and religious without disqualifying their exemption request? Should the government require a certain level of sincerity as a benchmark before an exemption can be granted? If the legislature chose to address these types of questions with further legislation, such legislation would call into question the constitutional prohibition against governmental interference with the free exercise of religion under Article 1, Section 18 of the Wyoming Constitution. However, those issues need not be addressed in this case because the statute does not provide the authority for such inquiry.

[¶ 15] We do not believe that the legislature, through its adoption of § 21 -4-309(a), anticipated or authorized a broad investigation into an individual's belief system in an effort to discern the merit of a request for exemption. Rather, we construe the statutory language as mandatory and the exemption as self-executing upon submission of a written objection.

[¶ 16] In her request for exemption, Mrs. LePage fully complied with both the statutory and the regulatory requirements. However, it should be noted that, in attempting to enforce the immunization for hepatitis B, the Department of Health failed to abide by its own regulations which do not include the hepatitis

B vaccination. Department of Health Rules, *Immunization Regulations*, ch. 1, § 7(b) (1-13-92). “An administrative agency must follow its own rules and regulations.” *Antelope Valley Improvement v. State Board of Equalization for State of Wyoming*, 992 P.2d 563, 566 (Wyo. 1999), *opinion clarified at* 4 P.3d 876 (Wyo. 2000). This could be an independent reason for reversing the State Health Officer's conclusion that a religious waiver was necessary for exemption from the hepatitis B vaccination.

[¶17] We recognize the genuine concern that there could be increased requests for exemption and a potential for improper evasion of immunization. The state certainly has a valid interest in protecting public schoolchildren from unwarranted exposure to infectious diseases. However, we have been presented with no evidence that the number of religious exemption waiver requests are excessive and are confident in our presumption that parents act in the best interest of their children's physical, as well as their spiritual, health. Again, if problems regarding the health of Wyoming's schoolchildren develop because this self-executing statutory exemption is being abused, it is the legislature's responsibility to act within the constraints of the Wyoming and United States Constitutions.

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ELEMENTS OF A RELIGIOUS EXEMPTION LETTER CONCERNING MANDATED CHILDHOOD VACCINES

Following is an outline of a religious waiver letter regarding childhood vaccines. It is meant as a reference to point out the necessary and required elements as defined by Illinois law. (This outline also applies to the 48 states that recognize a religious waiver) It is not meant as a form letter. Some states, like Florida, require that you fill out the waiver on their specific form. You must research the law in your state to make sure that you are compliant. There are many vaccine sites on the internet that will provide you with the exact vaccine law for your state. To find these sites, type "state law vaccines" into your search engine. You may need to consult an attorney who specializes in vaccine law to help you understand the law.

Each family must assess their religious beliefs or the tenets of their church to see if they meet the requirements of a valid religious exemption.

Dear local school authority...

We are the parents/legal guardian of _____

(grandparents, aunts, uncles or close friends unless they are the legal guardian of the child cannot write a valid religious waiver)

We are exercising our rights as Illinois citizens...

(you must be a citizen of the state that you are writing the waiver)

Under Illinois Administrative Code § 665.510...

(You should quote the Administrative Code § 665.510 verbatim. If you do not live in Illinois quote the code from your

state. The code is readably available on the internet)

We are setting forth our specific religious personal objection why our religious beliefs are in conflict with giving childhood vaccinations...

(You must set forth specific religious beliefs, i.e. passages from scripture. The specific personal religious objection cannot be medical, i.e., vaccines are dangerous therefore I religiously object. Since the scientific literature has articles pro and con with regard to childhood vaccines, it would be difficult to make scientific evidence based decision based on the medical literature. Therefore, if you are a religious person, the reason you would be objecting would most probably be religious not medical. i.e. I don't believe God allows human beings to inject foreign substances into their bodies. If your objection mentions anything medical, it becomes a medical exemption, [must be written by a licensed Illinois physician as discussed in 125], not a personal religious exemption.)

or,

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(b) We are setting forth our specific religious objections based on the tenets of our established religious organization.

(To be in compliance with the law you need to select [a] or [b], you do not need both.)

Both parents should sign the letter in front of a notary.

(This is not a legal requirement, however, in case of divorce or separation one spouse could not claim that he or she was against not vaccinating without recanting the original religious position.)



BIBLICAL & RELIGIOUS REFERENCES

“We believe in God, and that God has created us in his image. In being created in God's image, we are given his perfect immune system. We are bestowed with His gift, the immune system. We believe it is sacrilegious and a violation of our sacred religious beliefs to violate what God has given us by showing a lack of faith in God. Immunizations are a lack of faith in God and His way, the immune system.”

“We believe in Jesus' many promises of protection for us, and the He loves us, and will take care of us if we place our trust in Him. I believe that immunizations show no faith in God's promises of protection for us, saying to God that you trust man more than His holy words of protection for us.”

“God desires us to love Him and our neighbors first and foremost. This is His first command. By loving Him, we are to fully trust on Him for all things. He is our Lord Father. He is our Rock, our fortress and our Savior.”

“Our faith is in God and in the Holy Word, being the Holy Bible which is authored by God. This is the instruction book for

living that He has left us and in it He tells us He is our protector and we stand firm on His promise. Our faith is in Him!”

“And hearing this, Jesus said to them, ‘It is not those who are healthy who need a physician, but those who are sick; I did not come to call the righteous, but sinners.’” (Mark 2:17)

“Know ye not that your body is the temple of the Holy Ghost which is in you, which ye have of God and ye are not your own?” (1st COR 6:19)

“That your faith should not stand in the wisdom of men, but in the power of God.” (1st COR 2:5)

“You must know that your body is a temple of the Holy Spirit, who is within the spirit you have received from God. You are not your own.” (1st COR 6:19)

“As a consequence, your faith rests not on the wisdom of men but on the power of God.” (1st COR 2:5)

“I know with certainty on the authority of Lord Jesus that nothing is unclean in itself: it is only when a man thinks something unclean that it becomes so for him.” (Romans 14:14)

“If anyone destroys God's temple, God will destroy him. For the temple of God is holy, and you are that temple.” (1st COR: 3:17)

“For to his angels he has given command about you, that they guard you in all your ways.” (Psalms 91:11)

“Follow God your Lord, remain in awe of him, keep His commandments, obey and serve Him and you will then be able to cling to Him.” (Leviticus, 19:1,2)

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**Interview with Alan Phillips, J.D., Attorney
and Counselor at Law
Vaccine Rights Attorney**
www.vaccinerights.com

Alan Phillips, J.D. of Chapel Hill, NC, is a leading U.S. vaccine rights attorney. He advises individuals, families, attorneys, groups and organizations throughout the U.S. on vaccine exemption and waiver rights; supports legislative initiatives aimed at expanding vaccine freedom of choice; is published internationally on vaccine health and legal matters; and appears regularly at rallies, conferences, and on radio and TV shows discussing vaccine rights issues. Alan is a featured guest monthly on Freedomizer Radio and Liberty News Radio, and a weekly co-host for Homeopathy World Community's Vaccination and Your Rights radio show (presentation schedule). Alan is also a regularly featured writer for Natural News and Liberty News Radio.

ME: Good Morning Alan, I'm honored to have you on my show today.

AP: Good morning Mayer and the privilege and honor is all mine. It is a real pleasure to be here. One, I just want to just real quickly credit you for having gotten me into daily Vitamin D when I first heard you talking about Vitamin D, probably a year or two ago this point. And there was a recent study you may be aware of, I think it was a Japanese study, that showed that Vitamin D supplement protects from the flu better than the flu vaccine, so maybe that is a nice segue from Vitamin D into vaccines for us.

ME: You're totally right, in fact it is very fascinating, I reviewed some of Dr. John Cannell's work on Vitamin D (www.vitamincouncil.org). He looked back at the great Swine

Flu Epidemic of 1917 (right in the middle of World War I). More troops died from flu and pneumonia than they did from bullet wounds. The soldiers who died the most were the ones in the trenches - but the sailors had a very low mortality rate from flu and pneumonia, which is so fascinating. One of the hypothesis is since the sailors were on the deck of the ships getting sun they had enough Vitamin D; it is just kind of fascinating. No doubt about it - the sun is so protective - it made such a great difference. And what a great segue into vaccines. Attorney Phillips - you were the one who pointed out to me there are three different types of waivers, some states have some - some have others - there are: religious, medical and personal (or constitutional) waivers. You're the one who pointed out that even though 18 or 19 states right now have a personal waiver, which just means essentially that you just say you don't believe in vaccines, that's not a good way to go. Explain to our listeners, because I think that was one of the most important things I learned from you over the last few years.

AP: Sure, and I say this often to my clients as well. I mean any waiver that helps you avoid vaccines, if you want to avoid vaccines, is of course a good waiver to have. But the difference in the philosophical and the religious or the philosophical, personal and religious in the states that offer both is that the religious, even though we are talking about for purposes of schools, a state exemption law, as soon as the state offers a religious exemption Federal First Amendment rights automatically attach to it. The First Amendment of our Federal Constitution has what's called the "free exercise clause" which refers to the free exercise of religion. It is not an unbounded right, but it is a very powerful right. When you have a situation where you deal with state religious exemption laws you have both a state and a Federal First Amendment right, because a federal law has a higher legal authority than state law, you have a more powerful legal right there when you have an exception

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that has that additional Federal Constitutional First Amendment right. So, a lot of times it really won't matter, but there can be situations where having that additional Federal right can make the difference. The two places where I've seen this come up in my practice has to do with a situation that, of course we hope nobody gets into, but inevitable many people in our society do, and that's where parents separate or divorce and end up in a disagreement about whether or not to vaccinate the children. And where you have a history, of religious exemption, the parent that favors not vaccinating the child due to religious exemptions has that additional Federal Constitutional right which is a higher level of law, higher legal authority than the state law, best interests of the child or whatever any given state calls it. So as you might imagine, most judges and attorneys will view a disagreement over vaccination as kind of a no-brainer, well of course, in the best interest of the child, you vaccinate the child end of story.

ME: Let me tell you how important what you're saying is. I'm going to add one more factor that has come up in my practice many times - parents who move from one state to another and their original waiver was a personal waiver, not a religious waiver and all of a sudden they are now living in a state, like Florida, which does not have a personal waiver and now they're kind of stuck in a sense - if their original waiver followed them. Now they have to say, Oops, I think it's a religious waiver. We'll explain, because you outlined very well what it means - a religious waiver. Once you mentioned that to me a few years ago, I said, O my G-d, that is magnificent. It is your ace in your hole but do not use it as your starting position.

AP: If I could just mention real briefly too though - because a lot of people when you say religious exemption they think, oh well, I'm not a Christian Scientist or I'm not a member of any

church, in some cases, I just want to clarify without going into detail here, unless you'd like to

ME: Oh, I'd like to - and I feel this is exactly where I wanted us to head to.

AP: Sure, what qualifies for religious exemption is really broad. I found myself saying in recent months, in kind of summarizing, that basically anybody who is not a devout atheist can potentially qualify for a religious exemption. I've had often, in my practice, all the different variations of denominational and non-denominational Christians, I've had Jews, I've had a couple of Buddhists, I've had a Hindu Sikh, I've had a Taoist, somebody from the Nation of Islam, even people who have no affiliation with any church whatsoever. All of them can potentially qualify for a religious exemption because under Federal law, First Amendment boundaries, you only have to have two things: you have to have a belief that is religious in nature, and it has to be sincerely held. There are certainly some legal pitfalls to avoid, but the starting place is that what qualifies is really, really broad. So, if anyone listening is thinking, well I don't really have religious objections to immunizations or I'm not sure if mine would qualify, I strongly advise not ruling it out until you get a little more information about it.

ME: Let everyone know what your website is, how they can get ahold of you. Because you have a very important prominent place in this fight. You are one of the few lawyers who is willing to help families with vaccine issues and is also knowledgeable about this subject. I mean, there are a lot of attorneys that are going to help but they aren't as knowledgeable to really be able to help. So let all our listeners know how they can get ahold of you.

AP: *Sure, I have a couple of websites but the primary one is*

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vaccinerights.com

All my contact information is there. There is a link on the home page of that website to my other website which is called the "Pandemic Response Project". The vaccine rights website is concerned with what our rights are right now and how does one exercise, or enforce these rights. Many times it is, as you know Mayer, it is very simple depending on what state you reside in or what your situation is - you might just need to check a box, or sign a form, or write a short statement. But the situations in those states and in other contexts, such as military or immigration or healthcare employees are often concerned with Federal law. In situations where you have to write what I call a "Statement of Beliefs" a statement of your religious beliefs, that's where there are potential pitfalls. I know you help people all the time with that and it is really good to have some input or coaching with that just so that people understand, so that they can avoid potential pitfalls. But, depending on how you count, there are really over a dozen different situations or contexts in which the question comes up here in the US - how do I legally avoid immunizations. Each one of these has some overlap of shared law and law that's unique to the situation. For example, we have schools, but we have public schools, private schools, home schools, military schools, colleges. A whole separate category in colleges is those programs that are healthcare programs, such as nursing and medicine curricula and others where they have to do clinical work in local hospitals and then you are subject to the hospital's vaccination policy. So each of these is a different category. There is military but then there are military members, military families, military schools and military contractors. These are all separate categories that may have different law and rights that apply. And then immigration which includes foreign adoptions and healthcare employees. Most people, when you talk about vaccine exemptions, they reasonably think schools, but there really is a long list of subdivisions of that and other categories as well. It is quite a

broad topic. When I first started working in this area, I thought, there are two, three or four different areas and I was quite naive about that..

ME: As were all of us, and you brought up some really important points, the bigger problem that I'm facing and I'd love you to help me address is nurses, in many hospitals around the country, are now being mandated to take the flu vaccine, even now, in the summer, which is the most absurd thing in the world. I mean, even if you assume it's safe, effective, and works, this is not the time that you give a flu vaccine. And, they are threatening again, like they did two years ago, that if nurses don't obtain the yearly flu vaccine the hospital administration will not allow them to work.

AP: I've been seeing a lot of this come up in my practice since the so-called swine flu pandemic of 2009-2010. It is sort of interesting to me because, as I'm sure you're well aware, the swine flu pandemic was even declared, even outright declared, a hoax by at least one main stream European medical official Dr. Wolfgang Wodarg, head of health at the Council of Europe. He accused the makers of flu drugs and vaccines of influencing the World Health Organization decision to declare a pandemic.

Read more: <http://www.dailymail.co.uk/news/article-1242147/The-false-pandemic-Drug-firms-cashed-scared-swine-flu-claims-Euro-health-chief.html#ixzz1opDOW8Em>

Others have heavily criticized, even the Editor of the *British Medical Journal* went to far as to suggest, that leaders in the World Health Organization should consider resigning because of their complete mishandling of the swine flu pandemic. Nonetheless, here in the US the pandemic seems to have become a platform for pushing even more vaccines on all of us. This in particular is sometimes very problematic with healthcare

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employees. So, let me tell you how I've seen that pan out in my practice, quick summary. Hospitals seem to fall in three different categories. There are those that have no interest at all. The starting place is that there is starting law - the Title VII of the 1964 Civil Rights Act -that requires employers to reasonably accommodate their employee's religious beliefs. So, there's law that provides a legal argument for anyone who has religious based exemptions and again what can qualify for that is really broad. So, any nurses or other hospital employees who fall in that category, potentially have a legal argument and a strong one, in my opinion. But hospitals, in terms of their policies, seem to fall into three different categories. They either have no religious exemption policy or they have one but they are over reaching with regard to the First Amendment boundaries, in that they are highly restrictive. They want to see a letter or endorsement from a religious leader, for example, or they require you to be a member of an organized religion. Then there is the third category where they have a religious exemption and they want to see what are your religious beliefs. What I find is that hospitals in the first category with no policy tend to reject any argument you give them and then, unfortunately, they are in the position of saying, in effect, so sue me. You think you have a right, sue me! And the problem comes from the fact that Title VII doesn't say anything about vaccines or healthcare employees refusing vaccines for religious exemption. It is more generalized language, telling employers to reasonably accommodate their employee's religious beliefs. Well, we know they can accommodate their employee's religious belief regarding vaccines because many hospitals have that policy and if some can have it then all can have it. But we know because of the "herd immunity theory", (laugh) whether we agree with that theory or not, it is still a prevailing theory. So arguing under accepted current medical dogma, the herd immunity theory tells that everybody does not need to be vaccinated for everybody to be protected. And, so there is medical argument supporting the

notion that they can reasonably accommodate you. But in the law, when you have a law and you wonder whether or not a specific set of facts, you know the law applies to a specific set of facts, and the way the law is written doesn't tell you, which is the case we have here. Because Title VII doesn't mention vaccines but there is a reasonable argument. But when we look to see who is right if there is a disagreement, we look for legal precedent and to the best of my knowledge there isn't any legal precedent that we can point to that says, Ah Ha, Title VII applies to nurses in hospitals who refuse vaccines for religious reasons. So if the question is, technically, legally undecided, and therefore there is a basis, I think it's a little disingenuous, myself, because I find an argument supporting the employee to be pretty compelling. Nonetheless, it is technically, legally undecided and that gives hospitals a kind of an out to say, "Well, we disagree with your legal argument, if you feel differently then sue us." And of course they don't come out and say that, but in effect what they're saying is "so, sue me." I've had only two or three nurses who had a compelling legal argument and the hospital said "we don't care." The vast majority of the ones that I have worked with have ultimately gotten the hospital to cooperate with them. Sometimes they will say, "Okay, you don't have to get the vaccine, but you have to wear a mask during flu season, or something like that." I find that to be more punitive than scientific, but nonetheless, you know sometimes it resolves the problem.

ME: I love what you're saying and I'm sure we have nurses listening or listeners who have nurses who are friends who are facing this issue and Attorney Alan Phillips is clearly a person that you want to call for help. What I'm interested in is what happened two years ago in NY. Governor Patterson, at the time, issued an Executive Order that mandated the swine flu vaccine and the nursing union protested. Even though the majority of nurses thought that maybe the flu vaccine should be given, they

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said the idea of it being mandated and not allowing them to work if they refused is ludicrous. He immediately rescinded it when he realized he would possibly lose the election because of that. I realize you brought up some great points concerning nurses, which is just one of the categories and also bringing up that there is a tremendous naiveté among school principals, school nurses, school attorneys, hospital nurses, hospital attorneys as to what the actual law is. That is why I'm so grateful for the work you've done. This is a country of laws and that's what is so exciting also.

AP: Well, of course the starting place is always, what are the legal boundaries? What are your rights? And in many cases it's not crystal clear, but it's important for us, even in those situations, to understand where it's not clear and why. The healthcare employee is a good example of where it is not clearly defined in the law. What you really are left with is making a legal argument. But to me, it ultimately comes down to kind of a no-brainer. There are hospitals around the country that have Title VII policies: therefore, clearly, hospitals can accommodate their employee's religious objections to vaccines because there are hospitals all over the country doing that. Yet, you can make that argument to a hospital that has a more adamant pro-vaccine position and they'll essentially say "we don't care" and unfortunately they are in a position to do that if they want to. It is sort of a down-side. But again, the vast majority of healthcare employees I've worked with, I'm happy to say been successful. This is a difficult area. One of the more difficult areas of all the ones that I deal with.

ME: The most important thing that you brought out is somehow there is a reluctance in our society, on the part of the average person, to bring on an attorney to help them. They somehow, sometimes feel that legal representation is going to make things worse. And, the answer is yes, with the wrong

attorney you may make things worse, but if you have any legal issues with vaccines, and boy, they are overwhelming, a consultation with Alan Phillips will be incredible, because you are one of the few attorneys who've really invested an enormous amount of time, energy and effort into understanding the law and you have brought it out so well that there are so many different aspects. I think this could be life or death because these vaccines are dangerous, that's the bottom line. I will give you one minute on the medical part of it - "don't do it".

(laughing) That is my medical opinion on that. So, I am most interested in addressing those people who've already decided that the toxins (in the vaccines) are too much and have realized that the diseases like tuberculosis, cholera, black plague, rocky mountain spotted fever and swine flu all disappeared without vaccines. They've got to explain that to me, all these scientists who talk about all these theories, I won't talk about any of the diseases you want to talk about until you explain to me tuberculosis. I'll give you a very serious answer, all diseases have periodicity - they are around for a period of time and then they disappear. The way we can create a problem, is by injecting these toxins that will kill off some of the milder strains, and we're seeing this, medically, with whooping cough, which virtually didn't exist any more until they started vaccinating the population. Now we're seeing strains of whooping cough that are not disappearing that really causing very serious consequences. The doctors, Alan, have understood, at least in theory, that antibiotics are the wrong treatment for infectious disease except for some life threatening illnesses. They see we've created a bigger problem with super bugs and we've done the same things with vaccines. I believe they have some effect, they have some effect in wiping out the milder strains, the ones that wouldn't have been causing problems in the first place. And so, from a medical standpoint, there are a tremendous amount of problems. And so now this morning, what we're focusing on: you've already made that decision that vaccines are dangerous

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and you don't want to give them to your child, but you do want him to go to school, you do want to be a nurse and work in a hospital, you do want to join the military, which my guess is could be an even bigger problem. Could you address a little bit, what if I wanted to be part of the military but I don't want to vaccinate? Is there a legal challenge that could work?

AP: The military is an interesting arena on several fronts, but the starting place is they have the military equivalent of what we have in the civilian world and let me explain that. Because it is different in the military, because potentially in the military there is a different risk level or considered to be in terms of exposure to infectious disease and particularly if you're stationed in a third world country, for example. The starting place is that the military does have medical and religious exemptions. They even have another administrative exemption if you're going to be leaving or separated in 180 days, or something like that, you can even get out of exemptions because of a time factor there. But the starting place is there is a religious exemption. There is a multi-branch document that sets out in regulations, the particular requirements and so forth. Interestingly enough, there is a part of the regulations that refers to vaccinating military families, which are not technically employed by the military as is the military member, But today you have a husband or wife who is a military member and the family will travel with them to where when they are stationed or move around the country and the world. Yet, interestingly enough, and I think this is just an oversight in the regulations, they don't mention exemption for the family, but they do mention exemptions for the military member. There are a number of, and I honestly think that most of these are just oversights, but there are a number of details that are problematic in the way that the military regulations are drafted, but again there is a religious exemption option, just as within the other context it is really broad. The difficulty in the military

is that the exemption, once granted, can be withdrawn when, if in the opinion of the commander, the mission requires it. One could easily see someone, I mean certainly from a mainstream view of infectious disease and vaccines, saying that hey if you're going to Afghanistan or some other third world country, you need these vaccines anyway. We have the same thing with civilian life. Although here in the states we're not subject to the concerns of being stationed in a third world country, but we have state laws around the country, probably most of the state laws, allow the state to mandate emergency vaccines if there is a declared emergency and throw exemptions out the window. That was a concern that I wasn't even aware of until the recent swine flu epidemic. People started calling me from around the country saying "hey, what do I do if they mandate these swine flu vaccines?" After researching a little bit, I discovered that really what you need to do, is anything and everything you can do, to avoid being in that situation in the first place, because once you're in that situation, under most state laws there may not be anything you can do. I don't think states would go so far as to physically strap you down and inject you, but these same state laws that can mandate emergency vaccines and throw exemptions out the window can also quarantine you and usually that's in a location of their choosing. So, if you say I don't care if there are no exemptions I'm not getting that swine flu vaccine in a declared emergency and also if the vaccines were mandated, they can quarantine you and they get to decide where. That brings up somebody's conspiracy theory notions about the so-called FDMA camps or the like, but the bottom line is the state gets to decide and you could end up in a government facility somewhere. You could end up being there until they decide, or someone else decides there is no longer a threat or an emergency. My point being that this is sort of the parallel issue that ultimately the government gets to decide even if you do have an exemption, even if you do qualify for an exemption. So all of this boils down, in one sense, legislative issues, that is, if we

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don't like the rights we have we need to get busy and change the laws.

ME: We only have a few minutes left and Allan I want you to let our listeners know where they can reach you. And also I want to spend the last 10-15 minutes on grammar school and high school as that's the majority of what we're going to be dealing with. So how can people reach you and where can they get the outstanding piece that you just recently wrote. You have the Colorado situation and what they're trying to do. Their unconstitutional restriction of vaccine exemptions and your response to that because in your response it really outlines, very well, what so many of the issues are that we have to watch for in religious exemptions.

AP: Sure, first all my contact information and a lot of good reliable information about exemptions in all these different areas is available on line at

vaccinerights.com.

Contact information for me is there as well. And you're absolutely right, the issue that comes up for most people most of the time is how do you deal with schools. The starting place for that is always to read your state's statutes and regulations at the **vaccinerights.com** website. If you follow the links, starting at the top with exemptions, I have a page that has links to three different sites that all post state school exemption laws. And I always encourage people to do what your law says, do everything it says, but nothing more than what it says. People sometimes try to make this more complicated than it is. And this point I want to say with the greatest sensitivity: It is really important to understand, and frankly the reason one of the primary reasons I put up the **vaccinerights.com** website, and I've got an ebook available there, that goes into much more depth on vaccine exemption waiver with a focus on religious exemption because that's the one that's most widely available, the one that more

people use than the other two exemptions. There is a lot of information on anti-vaccine websites, a lot of great information about why you might want to consider postponing, or delaying or avoiding vaccines altogether. I've been looking into this issue as a parent myself for 17 years and the deeper I dig the messier it gets and all I can say is my personal position is I can't run far enough or fast enough away from them. My professional opinion is we should make our own informed choices and there may be a range of choices that people would make, but then, of course, the question is what are your legal options, because ultimately this is a legal question. So it is really important to start with your own state laws, I have links to those laws on the **www.vaccinerights.com** website. I caution people about getting vaccine waiver exemption information from anti-vaccine websites. And I say this with the utmost respect because these people are dedicated and these people are exceptional at informing all my peers in raising awareness on the issues. But what I found, bottom line, when I look at the information about exemption waiver policy and procedures and law in general on a lot of these sites is they often have a mixture of accurate and inaccurate information. These are absolutely all intelligent people, obviously independent thinkers or they wouldn't have a site like that in the first place and all have my admiration accordingly. But sometimes the law is a little more complicated than people realize. There are people who have lost rights by relying on anti-vaccine websites and there are many reasons for that. Probably the most common one is there is Federal and legal precedent that allows a religious exemption to be rejected if its copied and there are many sites where they put up sample forms or sample affidavits or sample statements or sample letters and so forth. They are trying to help people and I am sure that many times people rely on that successfully. But again, I would caution because I know, I've seen this in my own practice with a couple that came to me, unfortunately, after they got in trouble and it can be hard to fix something retrospectively.

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You know, Mayer, attorneys make a lot of money fixing problems that clients might have avoided altogether or at least minimized if they'd gone to an attorney in the first place.

ME: Let me tell you, I agree 100% what you're saying. We have to use the anti-vaccine websites for their outstanding information on the dangers of vaccines, but now that they're treading into a legal area, the point that Alan is making that is extremely important. Don't assume it's as simple as just writing a few sentences. You really want to know what the law is and he brought that out so well and even many of our legislators have no clue what the law is. It is like everything else in every discipline, if you haven't studied it, you just can't assume that because you're an attorney it doesn't mean you understand vaccine law.

AP: And we see a real interesting thing, if I might take just a minute or two of this. First of all, thank you for your wonderful compliments about this recent *Natural News* article. If you go to *naturalnews.com*, I have been, in recent months, invited to be a regular writer so as often as I can get an article out there and have something to say, I do. The article you referred to is one where the Colorado Department of Health has recently proposed vaccine exemption forms and what my article does is basically criticize the form and make legal and practical arguments as to why certain things they are doing in the form shouldn't be there. What they're trying to do with the form is to restrict access to exemption, to discourage exemptions and they're doing this – probably more than anything else, because of ongoing gradual increase in exemption. They blame it sometimes on, "Oh, there is these recent outbreaks around the country". But I doubt there is really any increase in infectious disease deaths going on.

ME: Even more, almost all the cases of whooping cough are children who are completely vaccinated. They never tell you what the vaccine history is. Here, in Chicago, we had a measles outbreak, about 2 years ago, and it turns out that virtually every person that came down with measles was vaccinated. So, it is kind of fascinating. They leave that little detail out.

AP: Well, there is another really big detail they leave out - because as you know, as well or better than me, that this is an inherently complex, multi-faceted issue, but some aspects of it are really straightforward and simple. Any time a doctor or health official will tell you there is a net benefit from vaccines they are, whether deliberately or not, telling a blatant untruth, because the FDA and the CDC have both acknowledged that 90-99% of adverse drug events are never even reported. And so, there is not data available that is reliable for us to make the assessment. We are the most heavily vaccinated country in the world, but we are, according to the World Health Organization, about 47th in infant mortality and our ranking in the world in infant mortality has gone up and up and up as we've added more vaccines over recent decades. There is a correlation there. We could go on and on, there are problems here, but again the question is what are your legal options? Washington State recently passed a law where they have restricted access to vaccine exemptions. In my opinion the new law is unconstitutional, and I wrote up an assessment of that and some activists out in Washington state took it to the governor's office and the governor's office said, well, that's not really our concern, that's for the courts to decide. Strictly speaking that's correct, technically, a law is not unconstitutional, not formally unconstitutional unless a court decides it is unconstitutional. And legally, that makes sense because for every person who is going to say, oh, that law is unconstitutional there may be somebody else who says, no it isn't. So who gets to decide, well the courts decide. But the downside of that practical and logical

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reality is that same legislature can pass laws that, bottom line, are not constitutional. And I believe that's just what happened in Washington state and I believe that's what the Department of Health in Colorado was attempting to do at the regulatory level. The Department of Health, as a state agency, is designing forms and in Washington state the option is now for somebody to challenge that law in court to see if they can get a formal court ruling that the revision is constitutional. Although there is some risk there because in other states, when religious exemptions have been challenged and held to be unconstitutional, the religious exemption statute can be stricken. So it is a complicated arena and there certainly is a powerful pro-vaccine lobby and agenda which had a law passed in California that led to 12 year olds being able to consent to STD vaccines without parental knowledge or awareness, which many of us in the alternate vaccine community and perhaps otherwise, find just appalling. I discovered, quite accidentally, right here in North Carolina, we have a law that says and I am quoting the law, "Any child may consent to treatment for the prevention of a sexually transmitted disease," which of course means vaccines and any other reportable disease, which means all the other vaccines. So, if your two year old is asked in daycare in North Carolina if they would like a vaccine and says, sure I'd like a vaccine, they can be vaccinated.

ME: Unbelievable

AP: What was going through the legislature's mind when they used that kind of language? I understand people with a pro-vaccine mentality, believe it or not, are willing to support vaccination as far as it goes. But, we have a Federal 14th Amendment due process right to parent our children and you cannot take that authority away from a parent unless you show the parent is unfit, or unless you have an emergency. I don't think anybody, or few people, would disagree that a doctor

should be able to intervene to save a child's life and tell the parent later in an emergency. But, when you're talking about routine immunizations or any non-emergency situation, taking that right away from the parents and giving it to the children, when the parent has the right to exercise an exemption for example, what were they thinking? But the point here is that again we have to be vigilant, we have to be active. If we are passive we're going to see more and more vaccines continue to be required and less and less access to any kind of right to refuse and so we need to be legislatively active. We need to be informed about what are the laws in our own state? What are the bills that are pending in our own state? What can we do to get bills drafted that will expand our right to make informed choices? Those are all things that we need to become actively involved in.

ME: The exciting thing is you're refining it. I think what you said a littler earlier, you're totally right, with great respect to all the anti-vaccine sites and people involved with it, the site's intention is really good and they've done a great amount of good but they should be very careful when dealing with law. That's not to discourage people from writing up their own religious exemption letters without an attorney consultation, but my feeling is this is highly recommended. I just want to make one comment about religious exemptions because there is a feeling among educators and schools, that people are using this broadly to just find a waiver for vaccines. I know in NY they've done a tremendous amount of harassment and they miss the point. It took me a long time to understand that my objection to vaccines is most probably more religious than medical because there are so many articles that are written pro-vaccine and I have surely not reviewed every single article to know if I'm 100% right, but really at the end of the day, its my belief as a religious person, that G-d couldn't have intended for this to be this way and that really turns out to be my position more than anything else. That

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I will do everything in my power as a doctor to be able to help come up with the data to support that. But really the bottom line is this doesn't feel that it's the right order of the day. The universe was constructed a little bit better than that, that we have to start giving 30, 40, 50 vaccines and that's really the issue. And so, when someone really says that they don't believe in vaccines, for all practicality they're saying its religiously I don't believe in vaccines. Do you find that a valid position, or do you have anything to add to that?

AP: You have expressed my own personal beliefs quite well. I jumped into this arena as a parent when a friend of mine said, "a friend of a friend's child was permanently disabled by vaccines" and I'd never heard of that. And that's what got me onto this. I had never heard of it. At the end of the day it really, in one regard, is that simple that G-d couldn't possibly have intended this. But I want to give a tip to your listeners, who may, for whatever combination of reasons, a lot of people distrust attorneys and I'm sorry to say that the practice that I see supports people's distrust. There are good attorneys, there are good medical doctors, there are good people in government and World Health Organization and so forth, but there is a lot of corruption in all these arenas as well and so caution is advised. But as a legal technicality, there is legal precedent, there is a case where parents' testimony at trial, concerning the school religious exemption, with a mixture of their assertions of religious belief and their assertion of concern about adverse events. The Court felt like the major issue there was really the adverse events and they lost the exemption. I don't read that case the same. You can't have concerns about adverse events and still exercise religious exemptions. I see that case as saying something a little more kind of common sense and that is, don't use adverse events with arguing religious exemption, when your primary concern is something else. So, I'd say don't use any technical terms, or medical terms or raise issues of adverse

events. There are legal arguments as to why that is ineffective as well, but the bottom line is, it is one of those primary legal pitfalls.

ME: And I think that may be the most important thing we've discussed this morning. You're moving into the realm of a medical exemption rather than a religious exemption.

AP: Then you're inviting an argument really, because as right as you may ultimately be, there are going to be medical authorities that will challenge your doctor's medical decisions. With a religious waiver against mandatory vaccinations we have a Constitutionally protected First Amendment right to practice our religion.

ME: Alan thank you very much for this interview.

AP: Mayer it has been delightful talking with you.

THE END

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Remedies

The National Institute of Health (NIH) should call for a consensus conference of 20 - 25 of the top scientists in the country. These scientists will evaluate the scientific literature with regard to childhood vaccines both pro and con. Then they will produce a consensus statement. This consensus statement would reflect a more accurate scientific assessment of the literature on childhood vaccinations.

When these consensus committees met in the past, the following conclusions were formulated:

- 1) Routine prenatal ultra sounds are only expensive baby pictures.
- 2) They found no scientific evidence that screening mammography between ages 40 and 50 increased longevity.
- 3) The Cesarean section rate in this country should be less than 15% - not 20-25%.

A consensus committee on vaccines would most probably come to some wise decisions to help us decide should we or should we not give vaccines to our children.