

## APPENDIX B

### MYTHS & METHODS OF MANDATORY VACCINATION GROUPS

Mandatory vaccination groups operating in Australia have successfully, but dishonestly, ushered in vaccine mandates across Australia, by promoting a false imperative using fear-based tactics, even though there is no evidence that parental acceptance of vaccination is declining, a view supported by Leask and colleagues (2017).

Reading the headlines, it would be easy to believe childhood vaccination rates are declining in Australia, due to an increasing trend towards distrust of vaccines among parents. In fact, vaccination rates in Australia have been high and stable, hovering between 91% and 93% since 2003.<sup>1</sup>

#### **An overview of mandatory vaccination groups operating in Australia**

There are ostensibly three mandatory vaccination groups currently operating in Australia, however, all three groups are interrelated, but choose to operate under different names for strategic reasons.

Catherine and Greg Hughes established Light for Riley, following the death of their baby Riley from Whooping Cough in 2015. Whilst the Hughes have gone to great lengths to portray themselves as merely grieving parents raising awareness about the alleged benefits of vaccination, they are also long-term members of a network of extremist, totalitarian mandatory vaccination groups that have been operating in Australia since 2009.

Stop the Australian Vaccination Network (SAVN) was formed in 2009 in response to the death of Dana McCaffery from Whooping Cough. A splinter group, Northern Rivers Vaccination Supporters (NRVS) was formed in 2013 by SAVN admin Alison Gaylard. Light for Riley is the third branch of this network. Tracey McDermott, who is on the management team of SAVN, is now a director of the Hughes' registered charity, Immunisation Foundation of Australia Limited.

Both the Hughes and McCafferys (the parents of Dana McCaffery) continue to rely on the falsehood that higher vaccination coverage rates would have protected their babies, even though they are well aware that there is no herd immunity for Whooping Cough, and both of their babies were too young to be vaccinated themselves. For a more detailed discussion of herd immunity with respect to Whooping Cough, see the section below called 'The myth of Whooping Cough herd immunity'.

Emeritus Professor Brian Martin from the University of Wollongong has written extensively about the dehumanising strategies employed by these groups, which include denigration and harassment.<sup>2</sup> It is this dehumanisation strategy which has served to normalise the mischaracterisation of parents with concerns about vaccination, as anti-vaccination baby-killers.<sup>3</sup>

As the spouse of a vaccine injury victim<sup>4</sup>, Tanya Hammond was intensively and maliciously targeted on social media by these extremist groups for merely raising awareness about the vaccine injury her husband

suffered. As an example, at Attachment 1 is a screenshot of one of a deluge of posts and private messages she received from Kathy McGrath (and others), who is an associate of Catherine Hughes, admin of NRVS, and member of SAVN.

The management team of SAVN also go to great lengths to portray the group as being grass-roots, however, we recently reported that Dr. Stephen Lambert from Queensland Health is on the management team of SAVN<sup>5</sup>, raising the possibility that other health department officers, including from the Western Australia Department of Health, may also be members of the group.

The influence of these groups over Australian vaccination policy is significant, which they have achieved by recruiting powerful media outlets such as News Corp to promote their mandatory vaccination agenda. The News Corp 'No Jab No Play' media campaign, first initiated in 2013<sup>6</sup> at the behest of SAVN, employed three key falsehoods.

1. The myth that parents were being unduly influenced by the anti-vaccination lobby.
2. The myth that rates of conscientious objection had increased dramatically.
3. The myth that Whooping Cough was making a comeback due to low and plummeting vaccination rates, and that babies were dying as a result.

The name of the News Corp campaign was also adapted, by then Prime Minister, Tony Abbott to describe the federal 'No Jab No Pay' law in 2015.<sup>7</sup>

The McCafferys were the initial face of the News Corp campaign, and have also appeared in at least two misleading promotional videos and one television advertisement funded by vaccine manufacturers. The first was funded by Medicines Australia, the peak body representing vaccine and drug manufacturers.<sup>8</sup> Notably, the New South Wales Ministry of Health purchased 10,000 copies of this video.<sup>9</sup> The second and third were funded by Sanofi Pasteur, which manufactures both infant and adult Whooping Cough vaccines.<sup>10</sup> One of the directors of the Hughes' registered charity, Kerryn Lajoie, was also awarded a grant from Sanofi Pasteur in 2016.<sup>11</sup>

Sanofi Pasteur, along with GlaxoSmithKline (which also manufactures both infant and adult Whooping Cough vaccines), have profited significantly from the extension of Whooping Cough vaccination recommendations to parents; recommendations which have flowed directly from the lobbying of the Hughes and McCafferys.

The Hughes and McCafferys appear to have abandoned the pretence they are merely grieving parents raising awareness about the alleged benefits of vaccination, by recently confessing that they are also actively campaigning for the exclusion of incompletely vaccinated children from childcare and early childhood education services, even though higher rates of vaccination would not have protected their babies.

We recently reported that four members of SAVN, including the Hughes and McCafferys, were paid talent fees for appearing in the federal government's 'Get the Facts' campaign<sup>12</sup>, and Australia's Chief Medical Officer (CMO), Professor Brendan Murphy admitted, during the 2018 National Immunisation Conference, how influential the Hughes and McCafferys have been in lobbying for mandatory vaccination policies.

Many ministers and politicians have been exposed to children or parents who've lost a kid... the Pertussis deaths... those families have influenced politicians.<sup>13</sup>

Obvious questions arise as to (1) why these lobbyists have been able to usher in mandatory vaccination laws on the false premise that higher vaccination rates would have protected Dana McCaffery and Riley Hughes, in circumstances where there is no herd immunity for Whooping Cough; and (2) why they have received funding from taxpayers, many of whom oppose mandatory vaccination.

## **No Jab No Play – No Say**

Cathy O'Leary, the Medical Editor of The West Australian, is one of a stable of journalists that have been recruited by the mandatory vaccination groups to promote their agenda, with great effect, since 2009.

In an appalling opinion piece published recently, she argues that parents with concerns about vaccination (whom she describes as anti-vaccination) should have no say in laws which will adversely affect them.<sup>14</sup>

It would seem surprising that a journalist in a progressive, liberal democracy would support such a position, except that this same strategy has been used previously by journalists in other Australian jurisdictions, to successfully prevent citizens with concerns about vaccination from having a voice in policies which affect themselves and their children.

The term anti-vaccination is used quite deliberately to infer that citizens with concerns about vaccination are lobbying against vaccination itself, when this is not the case. It would be a difficult task to find anybody seeking to prevent others using licensed vaccines. However, there are certainly citizens that hold legitimate concerns about the safety and effectiveness of vaccination, the burgeoning vaccination schedule, the probity of our vaccination program, and of course, vaccination mandates.

## **The myth of the all-influential anti-vaccination movement**

Arguably, the term 'anti-vaccination movement' is a deliberate mischaracterisation of the vaccine-critical groups currently operating in Australia. As the most prominent of these, the Australian Vaccination-risks Network (AVN), which was the initial target of SAVN, promotes vaccine safety, informed consent, and freedom of choice, rather than abolition.<sup>15</sup> Members of such vaccine-critical groups are merely ordinary, concerned citizens, who do not receive funding.

Contrary to the claims of the mandatory vaccination groups, and the media interests promoting their agenda, Martin (2018) suggests that vaccine-critical groups have had little effect on vaccination rates in Australia.

SAVN's campaigning has been based on the assumption that the AVN's activities had negatively affected vaccination rates and that discrediting and silencing the AVN would lead to improved health outcomes. A contrary view is that vaccine-critical groups have had little effect on vaccination rates, but rather are a response to concerns about vaccination that arise for other reasons, such as perceived adverse reactions of children to vaccinations [43]. This is compatible with the findings of a

survey of AVN members showing that very few initially developed vaccine-critical views as a result of AVN materials; more commonly, members had concerns about vaccination and were attracted to the AVN because it provided a forum for these concerns [44].<sup>16</sup>

Vanderslott (2018) has likewise argued that the influence of the anti-vaccination movement (if such a movement exists in the first place) is often exaggerated.<sup>17</sup>

A survey by the University of South Australia found that partners, parents, health practitioners, clergy and friends most influenced mothers' vaccination decisions.<sup>18</sup>

## **Vaccination objection rates are low**

At the end of 2015 – the last time conscientious objection exemptions were officially recorded in Australia – only 1.45% of Western Australian children under the age of seven had such an exemption recorded.<sup>19</sup> A study by Gibbs and colleagues (2015) from the Communicable Disease Control Directorate of the Western Australia Department of Health found an additional 0.8% of parents who were unregistered objectors.<sup>20</sup>

A falsehood cultivated by mandatory vaccination groups, and promoted in the media between 2012 and 2015, was that the rate of conscientious objection in Australia had increased sixfold between 1999 and 2012:

[...] the number of parents registering a conscientious objection to immunisation has leapt sixfold from 0.23 per cent in 1999 to 1.44 per cent.<sup>21</sup>

However, the base rate of 0.23% used in that calculation was the rate of conscientious objection recorded in the Australian Childhood Immunisation Register (ACIR) in 1999, rather than all conscientious objections, both recorded and unrecorded. The ACIR only started recording conscientious objections in 1998, following commencement of the Child Care Payments Act in 1998, which was the first time that parents in Australia were required to formally register a conscientious objection in order to retain eligibility to child care subsidies.

The 1993 National Immunisation Strategy noted that the overall rate of conscientious objection in Australia at that time was less than 2%, suggesting that the true rate was somewhere between 1.5% and 2%, which is consistent with more contemporary estimates.<sup>22</sup> If this larger base rate had been used in the calculation, rather than the 0.23% base rate (conscientious objections recorded in the ACIR for 1999), there would have been very little change in the overall rate of conscientious objection, certainly nothing like a sixfold increase.

Beard and colleagues (2016) concluded that most of the purported increase in the rate of conscientious objection was likely due to increased awareness that registration of such exemptions preserved eligibility for family assistance payments, which rose in value during this period, rather than a real increase. They also reported that vaccination coverage rates during that period were high and stable.<sup>23</sup>

It is also probable that some children, whose parents had registered a conscientious objection prior to 2016, actually had a medical contraindication to vaccination, but their parents chose to register a conscientious objection rather than go through the more arduous process of applying for a medical exemption. As noted

above, the definition of 'conscientious objection' adopted in federal family assistance legislation between 1998 and 2015 included medical beliefs, even though a separate provision for exemption on the grounds of medical contraindication (as assessed by an immunisation provider), was also included in the legislation.<sup>24</sup> Hull and colleagues (2018) reported a significant spike in new medical exemptions recorded in 2015 (which continued in 2016, but to a lesser extent) which is likely to represent a migration of conscientious objectors with medical beliefs against vaccination, into medical contraindication exemptions.<sup>25</sup>

## **The myth of Whooping Cough herd immunity**

The failure of mass Whooping Cough vaccination to provide herd immunity has been a significant factor in the orchestration of vaccine mandates across Australia, in that unvaccinated children have been incorrectly blamed for outbreaks, as well as the deaths of Dana McCaffery and Riley Hughes.

Herd immunity theory provides that non-immune people, such as newborns too young to be vaccinated, will be indirectly protected from a disease when a high proportion of the rest of the population is immune, via vaccination or natural disease.

There is now a large body of evidence to show that Whooping Cough vaccination does not induce immunity against the disease, and therefore, is not capable of generating herd immunity. At most, vaccination reduces disease severity in vaccine recipients for a short period of time following vaccination, but does not prevent colonisation and transmission of the bacteria claimed to be responsible for the disease.<sup>26</sup> Consequently, increasing vaccination rates will not protect babies too young to be vaccinated. The U.S. Centers for Disease Control and Prevention, has confirmed that public health experts cannot rely on herd immunity to protect newborns from Whooping Cough for these reasons, and because the bacteria is spread so easily.<sup>27</sup>

Public health experts from the National Centre for Immunisation Research and Surveillance (NCIRS) and the University of Sydney have also confirmed that, even if 100% of children were fully vaccinated against Whooping Cough, this would not generate strong herd immunity, because vaccination does not prevent mild infection in vaccine recipients.<sup>28</sup>

Professor Peter McIntyre acknowledged the shortcomings of Whooping Cough vaccination, in terms of protecting babies too young to be vaccinated, as far back as 2012.

What's certain is that whooping cough will not go away and, tragically, deaths in very young babies will still occur without better ways to protect them before they themselves can be protected by immunization.<sup>29</sup>

The 'cocooning' strategy, a sub-type of herd immunity theory, was the name given to the practice of vaccinating parents and other close contacts of newborns too young to be vaccinated in the hope this would protect them. Dr. Anne Koehler from the Communicable Diseases Control branch of the South Australian Department of Health, and member of the Australian Technical Advisory Group on Immunisation (ATAGI) Pertussis Working Party, told the South Australian Vaccinology Conference in late 2014 that she knew back

in 2010 that vaccinating people in contact with newborns too young to be vaccinated does not protect these newborns from Whooping Cough.

We were under a huge amount of pressure to introduce a cocooning program and we resisted that because our data didn't suggest that it was going to work.<sup>30</sup> So clearly the vaccination wasn't as effective as we're used to vaccines being. It wasn't preventing infections in most people who got it.<sup>31</sup>

The 'cocooning' strategy was evaluated by the Pharmaceutical Benefits Advisory Committee twice in 2011, and rejected for subsidisation on the basis of uncertain effectiveness.<sup>32</sup>

As high rates of vaccination in children and adults does not provide indirect protection to newborns too young to be vaccinated, via herd immunity, vaccination of pregnant women in the third trimester of pregnancy is now recommended in Australia, on the alleged basis this will offer some protection to newborns.

Falsehoods of mandatory vaccinationists	
<p>"I wish I'd known that the area we lived in had low vaccination rates"</p> <p style="color: #0072bc;">Catherine Hughes (inferring that herd immunity would have protected Riley)</p>	<p>"Dana became the innocent victim of Whooping Cough due to dangerously low awareness and even lower vaccination rates"</p> <p style="color: #0072bc;">David and Toni McCaffery (inferring that herd immunity would have protected Dana)</p>

Despite the unequivocal evidence that higher rates of Whooping Cough vaccination is not capable of protecting newborns too young to be vaccinated, politicians regularly cite the deaths of Dana McCaffery and Riley Hughes as a justification for implementing vaccine mandates. As recently as March 2017, Prime Minister Malcolm Turnbull's implored all states to implement 'No Jab No Play' laws, citing the need for herd immunity, following a meeting with Toni McCaffery.

I met with Toni McCaffery earlier this year, hearing the devastation as she talked of losing her baby Dana, who was only a month old when she died of a whooping cough. Dana was too young to be vaccinated, so like all other newborns, relied on the rest of the community being vaccinated to offer protection. As a father and a grandfather, it was just heartbreaking.<sup>33</sup>

It is understandable that members of parliament would be moved by the lobbying of parents who have lost babies to a disease, which these parents falsely claim could have been prevented by higher vaccination rates. However, as citizens, we rely our elected representatives to evaluate the veracity of lobbyists' claims before abolishing the rights of a sector of the population, based on those claims.

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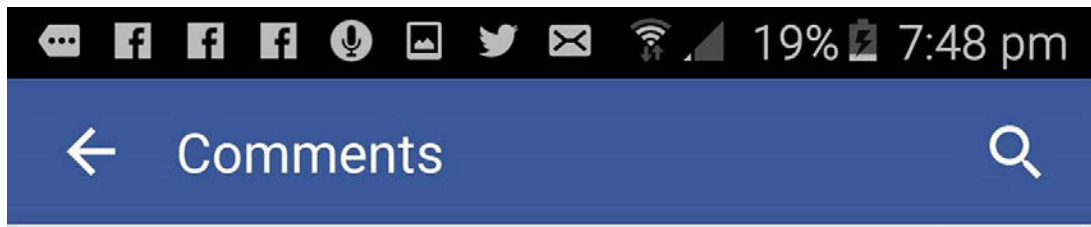
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# ATTACHMENT 1

Kathy McGrath is an associate of Catherine Hughes (Light for Riley), officer-bearer of Northern Rivers Vaccination Supporters, and member of Stop the Australian Vaccination Network. The screenshot below shows one of a deluge of distressing comments and private messages sent to Tanya Hammond by McGrath, alleging that Tanya was exaggerating her husband's injury, and that his injury was not caused by vaccination.



Replies to your comment on **9 News Perth's post.**



**Tanya Hammond**

Kathy McGrath we don't disagree . WE R NOT ANTI VACCINE but people have the right to be informed about the risks

4 Jun 2014 · Like · 2 · Reply



**Paul Davis**

But not mislead.

4 Jun 2014 · Like · 3 · Reply



**Kathy McGrath**

People do have the right to be informed. But that doesn't mean exaggerating your story, misrepresenting/overinflating the risks, or acknowledging that other possibly more likely things have caused the illness. The public needs your honesty and facts.

Just now · Like · Reply