

Kona Hearing

Recording Name:

[181220\_0006]

1 SPEAKER: Are there any more questions before we go on?  
2 Today is Thursday, December 20th, 2018. The time  
3 right now is 2:40 p.m.

4  
5 We're on the island of Hawai'i, at the [inaudible  
6 - 00:26:00] Building G at 74-5044 Ane Keohokalolo  
7 Highway. This is the Department of Health in the  
8 Hawai'i Public Hearing for Docket Number R-157-  
9 18-07, Title 11, Chapter 157, Examination and  
10 Immunization. I'd like to call the first  
11 testifier, Dr. Renee Joy Default. Would you  
12 state your name and spell it for the record?

13  
14 DR. DUFAULT: My name is -- can you hear me? [inaudible -  
15 00:01:15]. All right. My name is Dr. Renee Joy  
16 Dufault.

17  
18 So, for the record, I am testifying against the  
19 permanent vaccination schedule, okay? Before I  
20 begin, I'd like to hand out some literature so  
21 you can follow along. First, I'd like to start  
22 with my credentials. I've been in the field of  
23 infection control, I'm an author, I co-authored  
24 the [inaudible - 00:02:01] on bioengineering, one  
25 chapter is general infection control, the other  
26 is medical [inaudible - 00:02:09] infection  
27 control.

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29 I also would like to advise, let you know that I  
30 received a [inaudible - 00:02:23] service medal

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in recognition of providing technical assistance training locally and internationally for the containment of infectious disease in [inaudible - 00:02:33]. I am a retired public health service officer and the last nine years of my career were with the United States Food and Drug Administration. Now, I run a non-profit called Food Ingredient and Health Research Institute, and I teach full time special education at Ka'u High School. I have been a Hawai'i citizen for 11 years.

So, I'd like to begin going over this brochure and explain to you why I am against the permanent vaccination schedule. First of all, these are Hawai'i statistics, the number of cases of diseases per 100,000 people in Hawai'i County. This is this island. So, from 2008 to 2017, there were five cases of hepatitis C perinatal [inaudible - 00:03:31] identified, that means before and after birth, perinatal, five cases in almost ten years.

Hepatitis C, it's important to know, it is a bloodborne disease. Its transmission is [inaudible - 00:03:45] and infected mothers. So, unless the child is a drug addict at perinatal, there is no risk of getting hepatitis C. So, all we need to do, if you're a health care provider, is, when a pregnant woman comes into the office,

1           you test her for hepatitis C. If she is  
2           positive, then you would think about  
3           intervention. But a kindergartner going to  
4           school does not need hepatitis C, okay?

5  
6           Hepatitis A is spread by people who carry the  
7           virus when they do not wash their hands. So,  
8           food handlers should be tested to determine their  
9           carrier status. If they carry hepatitis A, they  
10          shouldn't be handling food, they should not be  
11          handling, should not be a food handler. If  
12          [inaudible - 00:04:41] hepatitis A, well, then,  
13          their children should be vaccinated. But there's  
14          no reason to vaccinate a kindergartner for  
15          hepatitis A. We should not [inaudible -  
16          00:04:53].

17  
18          The Centers for Disease Control reports that in  
19          the last decade there were five cases, five cases  
20          of listeria in the United States. Just five.  
21          So, we can pretty much [inaudible - 00:05:10] at  
22          this point, I don't think we need to be  
23          vaccinating any more people. What we could do  
24          [inaudible - 00:05:16], we could say visitors to  
25          the United States should be required to be  
26          vaccinated before they enter, vaccinated for  
27          listeria [inaudible - 00:05:24] because these are  
28          pretty much eliminated in our country. So, if  
29          people want to come and visit, they need to make  
30          sure that they [inaudible - 00:05:33]

1 vaccination, so they're not bringing it into our  
2 country. Because when we have cases [inaudible -  
3 00:05:39] visitors bringing it in.

4  
5 What we do have here in the United States, and  
6 presently in Hawai'i [inaudible - 00:05:52] is  
7 pertussis, whooping cough. There were in fact 65  
8 cases, all right? So whooping cough is a  
9 concern. And if you have to vaccinate,  
10 [inaudible - 00:06:02] for Hawai'i, right?  
11 That's [inaudible - 00:06:04]. The other one is  
12 mumps. We do have an outbreak of 290 cases just  
13 recently. So, there is a concern with mumps,  
14 right? So, I'd be okay with that.

15  
16 Tetanus is an organism [inaudible -, and when a  
17 child suffers from a puncture wound [inaudible -  
18 000:06:29 another kid, right? Does that make  
19 sense. But we don't need, children in school are  
20 not likely to need a tetanus shot.

21  
22 Okay. So as far as [inaudible - 06:45] if the  
23 only vaccine for children at this point  
24 [inaudible - 00:06:52] contains thimerosal, which  
25 is a mercury compound. And of all the claims  
26 made to the National Vaccine Injury Compensation  
27 Program, if you file a claim when a child has a  
28 reaction, [inaudible - 00:07:07], 82 percent in  
29 the last ten years of the compensable totals were  
30 due to the influenza vaccine. So, what that

1 means is that the flu vaccine carries a grave  
2 threat of injury and death. I haven't had a flu  
3 vaccine ever. I'm 50 years old and I'm not  
4 planning on getting one. I can't prepare myself  
5 like that, there's [inaudible - 00:07:38].

6  
7 Now, we know that mercury explains the higher  
8 autism in boys, if we consider the [inaudible -  
9 00:07:49] some of you in here are aware of my  
10 work, and you know that I published extensively  
11 on the role of mercury in autism. What that  
12 means is that mercury has the ability to contrast  
13 the primal gene. The primal gene must extract  
14 [inaudible - 00:08:05] express to produce the  
15 protein called [inaudible - 00:08:07], which is  
16 an enzyme that your body needs to break down the  
17 [inaudible - 00:08:15].

18  
19 So, the more mercury exposure you have, and the  
20 less likely that the [inaudible - 00:08:22] one  
21 gene than [inaudible - 00:08:24]. And baby boys  
22 are already born with lower levels of primal gene  
23 activity. So, I just published an article in  
24 Scientific American explaining why this autism  
25 impacts boys more often than girls. The evidence  
26 is there, it's [inaudible - 00:08:40]. I  
27 published this prior to when we published  
28 [inaudible - 00:08:46] from Harvard where they  
29 found that mercury in cord blood actually, they  
30 found that the primal gene that they had for boys

1 [inaudible - 00:08:57] evidence again. They  
2 [inaudible - 00:09:00] higher rate of exposure.

3  
4 So how can we do that? What are the issues that  
5 we should be publishing on in the health  
6 department, if you want to get mercury out of our  
7 food? Because right now, there's no allowable  
8 level of mercury in the [inaudible - 00:09:17].  
9 We have mercury, lead and arsenic in food  
10 coloring that account for hyperactivity and  
11 paying attention. And in the United Kingdom, I  
12 just published an article where you, they have  
13 water levels [inaudible - 00:09:38] ingredients  
14 with a lot of lead, mercury and arsenic. So,  
15 they already have warning labels there. The  
16 warning labels say, warning to parents, this  
17 product contains ingredients known to cause  
18 [inaudible - 00:09:49] activity and inattention.  
19 So, you see the [inaudible - 00:09:54], their  
20 [inaudible - 00:09:55] of ADHD are much lower in  
21 the United Kingdom than the U.S. They have  
22 warning labels on their food.

23  
24 So, we need warning labels [inaudible -  
25 00:10:04]. We need warning labels on our food.  
26 If you're going to let the free market economy  
27 sell whatever they want, you name it, you can  
28 sell anything [inaudible - 00:10:17] levels of  
29 heavy metals, they will need warning labels.  
30 That's something you can work on and get improved

1 child health [inaudible - 00:10:25] rather than  
2 trying to vaccinate when we have no need.

3

4 The last thing is HPV. HPV is a sexually-  
5 transmitted vaccination recommended for sexually  
6 active children. All right? So, you know, this  
7 is, HPV is a sexually-transmitted disease. And  
8 certainly, sexually active children should be  
9 offered this vaccine. But it should not be  
10 mandatory. Because its effectiveness in the  
11 human population remains unknown. HPV cases are  
12 not tracked by the Hawai'i, they're not tracked  
13 by the CDC. So, we're not tracking cases, so we  
14 have no way to measure the HPV vaccine's  
15 effectiveness. So why would you want to  
16 [inaudible - 00:11:18] this vaccine? That's  
17 creepy.

18

19 So, we have all these agencies recommending a  
20 vaccine for which we have accountability in terms  
21 of its schedule. Why? It's not even logical.  
22 This is what we call a red flag. This is a red  
23 flag. We have to dig deeper. Where is the  
24 justification for recommending the HPV vaccine?  
25 HPV is only one of several risk factors for  
26 cervical cancer.

27

28 Furthermore, many, many people with HPV do not  
29 develop cancer. So, in order to understand why  
30 we need to pay attention to this red flag, we

1 have to ask, where does this non-sensical push to  
2 vaccinate is coming from. Well, private  
3 industry, [inaudible - 00:12:03] non-profits  
4 advise the World Health Organization. They're  
5 the ones pushing the vaccine. The Gates  
6 Foundation is the biggest funder of the World  
7 Health Organization through [inaudible -  
8 00:12:17] alliance, G-A-G-I-O-N. So, they  
9 [inaudible - 00:12:21] collaborating with  
10 pharmaceutical companies, or they have been for  
11 many years, but now they've started their very  
12 own pharmaceutical, and it's going to be a non-  
13 profit, non-profit pharmaceutical. Well, it's  
14 like, there's a profit motivator in there  
15 somewhere, because they're going to be  
16 collaborating with all the pharmaceutical  
17 companies.

18  
19 So, the fact is, the World Health Organization  
20 has recommended all, different vaccines. You  
21 have to ask why, especially for something like  
22 HPV, when we're not [inaudible - 00:12:58] its  
23 occurrence. That's what's [inaudible - 00:12:59]  
24 see a red flag, it [inaudible - 00:13:05].

25  
26 So, in addition to opposing the mandatory  
27 requirements for HPV vaccine, I am in opposition  
28 to making the following vaccines mandatory for  
29 the reasons specified in the brochure: Hep B, Hep  
30 A, listeria, measles, rubella and tetanus. None

1 of these should be [inaudible - 00:13:25].  
2 Children need to receive vaccinations according  
3 to [inaudible - 00:13:32] individual need when  
4 there's a true risk, their parents have hepatitis  
5 A or hepatitis B. Or they work in a, their  
6 parents would have to be [inaudible - 00:13:43]  
7 when there's truly need. But not every single  
8 kid [inaudible - 00:13:49].  
9

10 So, as it is now, our children have a higher risk  
11 of developing diabetes or heart disease from all  
12 the allowable mercury, lead, arsenic or pesticide  
13 [inaudible - 00:14:00]. They have a much greater  
14 risk of developing these problems than any of  
15 these diseases. All we have to do is analyze the  
16 death statistics in the U.S. to determine where  
17 we need to focus our efforts to promote child  
18 health. We need to be wary of corporate  
19 interests in making public health policy here in  
20 Hawai'i. We cannot allow corporations to dictate  
21 how we are going to protect our children. And  
22 the health department is responsible for  
23 protecting our families. We cannot allow them to  
24 just [inaudible - 00:14:39] from the World Health  
25 Organization or the CDC without asking why, what  
26 is going on behind the scenes.  
27

28 Now, having worked at the FDA for nine years of  
29 my public health service career, I can tell you,  
30 the FDA does not have our back when it comes to

1 mitigating the harms in public health and  
2 righting [inaudible - 00:15:00]. I had to retire  
3 to publish my findings of inorganic mercury in  
4 corn syrup. And [inaudible - 00:15:11] I called  
5 a for [inaudible - 00:15:13], Canadian  
6 researchers have verified that there is still  
7 mercury in high fructose corn syrup. There just  
8 is no reason why we should rely on organizations  
9 that are guarding, they're basically being paid  
10 [inaudible - 00:15:28] subservient to corporate  
11 America. It's ridiculous.

12  
13 So that's [inaudible - 00:15:34] if we want to  
14 improve our health outcomes, when we use the  
15 problems and diseases that are really likely to  
16 occur, then we need to start focusing on the  
17 mandatory placement of warning labels on food,  
18 the [inaudible - 15:48] contain ingredients  
19 [inaudible - 00:15:50], allowable levels of  
20 mercury, arsenic and lead. And I already showed  
21 you how the patterns of ADHD are better in  
22 countries that do have warning labels. So, with  
23 that, thank you very much.

24  
25 [Applause.]

26  
27 **SPEAKER:** Is there a Jack Ebner here?

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29 **MR. EBNER:** My name's Jack Ebner, I prepared a statement  
30 because I thought [inaudible - 00:16:35].

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SPEAKER: Would you spell your name for the record?

MR. EBNER: JACK E-B-N-E-R. Okay, so otherwise [inaudible - 00:16:44] present a lot more information than what I prepared [inaudible - 00:16:52].

I have a non-medically approved degree in bio physiology from the only school I know of that teaches how to correctly interpret symptoms, nor does a person, and not symptom-treating, money-making businesses. I got involved in the health care industry as a result of listening to a six-hour health lecture given by Tony Robbins in 1989. The overall gist of what he was saying was that symptoms or diseases were caused by less than idea diet and other lifestyle choices and not microorganisms [inaudible - 00:17:33]. He said they may be present, but they are not causative, that [inaudible - 00:17:37] thinking.

Well, that was something I had never, ever heard before. I realized that if he was right, that I had been medically brainwashed all my life, because whenever I "got sick," I thought it was because I caught something. That was 30 year and about 30,000 hours of research and studying ago, I can unequivocally state that he was absolutely correct. I have not taken even one single aspirin since then, as I am no longer causing

1 symptoms or diseases, including the so-called  
2 contagious ones of which none of them are.

3  
4 So really the topic of this meeting, so-called  
5 vaccines, are not only not necessary, they are  
6 deadly, money-making medical scams and you should  
7 never, ever submit to this or most other medical  
8 practices. Do not allow yourself to be bullied  
9 by government or medical personnel. if  
10 necessary, you need to band together and form  
11 your own schools, if you have a problem with  
12 those schools that we're paying for, right, tax-  
13 paid schools, without being [inaudible -  
14 00:18:52]. However, medical training [inaudible  
15 - 00:18:57] and some corrective surgery is mostly  
16 correct. So not everything is [inaudible -  
17 00:19:02]. Everything else that is learned in  
18 medicine in nursing schools is false in theory  
19 and incorrect in practice and can cost you your  
20 life. And this is Rockefeller medicine, where  
21 it's profits over people.

22  
23 If you're interested, see me after this quorum if  
24 you would like to attend a free meeting on  
25 January the 19th, where you will receive a lot of  
26 free information that I paid a lot of money for.  
27 I don't charge anything for my time or services.  
28 This is way too important to put up any possible  
29 barriers to you, for your unlearning and new  
30 learning process, so you and your families are

1           experiencing the best health possible and  
2           permanently eliminating symptoms and harmful  
3           treatments from your life. I brought a picture  
4           of my library [inaudible - 00:19:56] probably the  
5           best health library in the State of Hawai'i. And  
6           I've read every single book except one, and I  
7           just decided I didn't want to know about  
8           delivering babies [inaudible - 00:20:07].

9  
10           [Laughter.]

11  
12   MR. EBNER:       Anybody have any questions?   Okay. Well, I  
13                    could probably go on and on, but that's pretty  
14                    much the gist of it. I'll hand out my name on a  
15                    business card, if you're interested, take one,  
16                    and [inaudible - 00:20:23]. It would take a lot  
17                    more time to explain, but I just told you today,  
18                    the biggest thing is contagion, there's a whole  
19                    other explanation for what causes hepatitis, or  
20                    so-called HPV and all this other stuff. The  
21                    medical interpretation, like I said, they're  
22                    incorrect. It favors industry, has nothing to do  
23                    with favoring individuals. Because it's been  
24                    pounded into your head all your life that you  
25                    catch things from other people. You believe it,  
26                    because you hear the same message over and over  
27                    and over and over again. People will believe it,  
28                    just like I did for 39 years. Of course, I  
29                    don't anymore, it's a joke. But it's a sick  
30                    joke. And it's deadly. And a lot of people have

1 lost their lives because of these wrong concepts.  
2 Thank you.

3  
4 [Applause.]

5  
6 SPEAKER: Jade McGaff.

7  
8 DR. MCGAFF: Hi, I'm Dr. Jane McGaff, I'm a board-certified  
9 doctor on this island. I graduated from medical  
10 school in 1979 and I took an oath to do no harm.  
11 I am putting my life on the line on this issue  
12 now, because there are over 100 dead doctors in  
13 [inaudible - 00:21:43] who have stood up and said  
14 the same thing: vaccines are hurting us.

15  
16 Why are 50 percent of our children hiding an  
17 autoimmune disorder? I should say, a simple  
18 allergy or a peanut allergy that will kill them?  
19 Asthma, heart disease, leukemia, cancers, type 1  
20 diabetes, arthritis, obesity, [inaudible -  
21 00:22:04] is an autoimmune disease. What is a  
22 people-controlled double-blind study? In  
23 medicine, that is a core proof of a really good  
24 study and what comes out of that is the truth. A  
25 people-controlled double blind, meaning you got a  
26 group that gets nothing but a fake, and you've  
27 got a group that gets the poison that you're  
28 trying to give. You compare these, and halfway  
29 through you switch the poison and the fake. And  
30 the people handing out the poison and the fake

1 don't even know what they're handing out. So, a  
2 people-controlled double-blind study. There are  
3 none?

4  
5 Where is the research? I am going to hold this  
6 up and I want you guys to [inaudible - 00:22:47]  
7 where is the research. There are no double-  
8 blind, people-controlled studies on vaccines.  
9 And just [inaudible - 00:22:57] all these  
10 infectious diseases were disappearing by the time  
11 vaccines jumped in. You can see the CDC and NIH  
12 data [inaudible - 00:23:08]. Google Dr. Suzanne  
13 Humphries, she has about [inaudible - 00:23:12].  
14 She's a nephrologist, she's published, she's a  
15 global speaker and author. She will tell you  
16 where the poisons are and why this is a failed  
17 experiment on our people and our children.

18  
19 Have we lost our innate ability to heal? Do we  
20 not know any more than we can heal? This is the  
21 new way, this is not [inaudible - 00:23:34] I do  
22 social medicine. What is the dysfunction, how do  
23 we get back to normal function? It's not that  
24 I'm missing a synthetic molecule in my body, it  
25 means I need to eat something right, or I need  
26 what I'm doing and what I might decide to do, and  
27 to be innately healthy.

28  
29 In 2000, the Bureau of Pediatrics did a study,  
30 did a review of all their data. And they said

1 vaccines are not why we are healthy in the first  
2 half of the century. They said all these  
3 [inaudible - 00:24:08], pediatrics themselves  
4 were behind all this. Where is the research?  
5 I'll take the research, here's a book, there's  
6 thousands of research articles in here that show  
7 the harm of vaccines. In CRP, the information  
8 level [inaudible - 00:24:27] is elevated in the  
9 48 hours following immunization.

10  
11 I checked [inaudible - 00:24:29] people without  
12 it, and they're getting an illness that we can  
13 turn around. Children vaccinated with MMR before  
14 they are 10 are at significantly higher risk for  
15 multiple sclerosis. [inaudible - 00:24:41]  
16 making associated with vaccinations. Why MMRs  
17 are [inaudible - 00:24:46] live vaccine is  
18 associated with higher rates of bedrock  
19 [inaudible - 00:24:46] in the vaccine [inaudible  
20 - 00:24:48]. It goes on and on and on and one.  
21 These doctors share [inaudible - 00:24:54] for  
22 bringing that [inaudible - 00:24:58] issue of  
23 vaccination.

24  
25 Have we lost our innate ability to heal? I don't  
26 think we have. But we have a toxic load. When I  
27 give a pregnant -- well, I never did. But when  
28 they give a pregnant woman a vaccine with  
29 mercury, that infant's liver and brain takes in  
30 it and has no way to get rid of it. It also

1 appears to lower its ability to detoxify for the  
2 rest of its life. Then it comes out and we give  
3 it more mercury and more mercury, we bring  
4 [inaudible - 00:25:29] whatever [REDACTED] they're  
5 dumping out of the sky on us. And then toxic  
6 load gets reached. Any other [inaudible -  
7 00:25:41] infecting you is going to get taken up  
8 by your immune cells and it's going to go to your  
9 brain. And when that cell dies, because of the  
10 poison of aluminum, it's sitting there in your  
11 brain and it's been shown over and over that  
12 aluminum kills brain cells. Aluminum [inaudible  
13 - 00:25:56] thimerosal, mercury, [inaudible -  
14 00:25:58] formaldehyde, [inaudible - 00:26:01]  
15 don't forget fetal DNA, all the vaccines.

16  
17 So, when we do that to the babies, we're starting  
18 their toxic load in the very beginning. And then  
19 they can't get rid of the onslaught of all the  
20 other poisons that we're putting directly into  
21 their bodies. Innate health means I identify a  
22 risk, I [inaudible - 00:26:24] risk, I get  
23 exposed to a virus and my immune system learns to  
24 deal with it. When I inject it into my muscles,  
25 it's a whole different immunity, it is not a  
26 natural immunity, it is not a [inaudible -  
27 00:26:35] immunity. And here we claim, we claim  
28 that we've eliminated chicken pox in a child, and  
29 hear that we're going to have chicken pox as an  
30 adult when it's even more [inaudible - 00:26:47].

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Herd immunity is a good thing [inaudible - 00:26:50]. It does not mean that if you guys are all vaccinated, I will never get sick. It means the herd holds the germs. We are a microbiome. There is one-one hundredth human cells here in this form. One 360th DNA, everything else, and I'm sure your [inaudible - 00:27:15[, okay? Dr. Wakefield [inaudible - 00:27:17] tried to get rid of him. All he showed with the MMR vaccine is they change into microbiomes. And he said, you know, those [inaudible - 00:27:25] sick children have it changed into microbiomes. But when I put the germ into the wrong way, that the body doesn't know how to handle, we change the microbiome and we make people sick. And we now know that we store the microbiome [inaudible - 00:27:41] people get [inaudible - 00:27:43].

As an obstetrician, I know that the human infant is [inaudible - 00:27:48] longer to mature to adulthood of any species. They don't breathe on their own. Our holding them, our [inaudible - 00:27:58] keeps them breathing. When we vaccinate them, and we start adding to the toxic load, and we [inaudible - 00:28:01] the laboratory center and we [inaudible - 00:28:08] somewhere, in a crib somewhere by themselves, [inaudible - 00:28:15. Why don't they ask [inaudible - 00:28:20] vaccine [inaudible -

1 00:28:21]. Where is the research? Why don't we  
2 know how many vaccines that baby had, how many at  
3 a time when it dies in sudden infant death  
4 syndrome.

5  
6 By the way, a [inaudible - 00:28:37], haven't  
7 seen that. But [inaudible - 00:28:38] paralysis  
8 is polio. So, the B.S. about eliminating polio  
9 and eliminating smallpox never happened. Where  
10 is the research? And then they say, oh, we could  
11 have, you know, we should just say [inaudible -  
12 00:28:54] other study, and we had unvaccinated  
13 children and vaccinated children. Unvaccinated,  
14 according to the CDC, means [inaudible -  
15 00:29:00] missing one vaccine. So maybe you had  
16 24 of the other vaccines, but we'll use you in  
17 the unvaccinated population [inaudible -  
18 00:29:07] your aluminum, mercury, phenol and  
19 formaldehyde.

20  
21 So, I'm telling you, our [inaudible - 00:29:15],  
22 our people are [inaudible - 00:29:19], it's time  
23 to look around, it's time to do some real  
24 research, and it's time to stop [inaudible -  
25 00:29:24] to do whatever the [inaudible -  
26 00:29:30] corporations want us to do. And by the  
27 way, the CDC lied. In the 2001 study that they  
28 put out, they decided to leave out 40 percent of  
29 these children, these black, male children were  
30 left out which [inaudible - 00:29:44] changed

1 this data. So [inaudible - 00:29:45] went to  
2 [inaudible - 00:29:47] It took until 2014 people  
3 before someone [inaudible - 00:29:50] jack their  
4 data. CDC is a public [inaudible - 29:55:00]  
5 organization. That data belongs to us, but we  
6 couldn't get it without the Freedom of  
7 Information Act. And then Dr. Booker reviewed  
8 the whole thing, and there is jack [inaudible -  
9 00:30:07] particular [inaudible - 00:30:10].  
10 They lied, they admitted they lied [inaudible -  
11 00:30:16]. Again, where is the research?

12  
13 So that data, vaxinfostartshere.com, [inaudible -  
14 00:30:26] website, I've got a list of all the  
15 ingredients [inaudible - 00:30:29] ugliness they  
16 all are. There are so many [inaudible -  
17 00:30:33], there are so many claims, there is so  
18 much going on. You could spend days on YouTube  
19 listening to people, why don't they want you  
20 [inaudible - 00:30:42], why am I afraid to stand  
21 up and speaking out [inaudible - 00:30:47]. Our  
22 children are sick, our people are sick. The time  
23 has come [inaudible - 00:30:54] research. Thank  
24 you.

25  
26 [Applause.]

27  
28 SPEAKER: Is there a Joe Cassel?

29  
30 DR. CASSEL: My name's Joe Cassel, I'm a naturopathic

1 physician, I'm a licensed acupuncturist, and I've  
2 been in health care since 1970, for 40 years.  
3 Been a primary care provider for 30 years. When  
4 I graduated from nursing school with honors in  
5 1979, my paper was on the values of vaccination.  
6 And I was ignorant. I was uninformed. And the  
7 majority of proponents of universal vaccination  
8 are uninformed.

9  
10 If you look at, doctors are often held as the  
11 great authorities who should be making these  
12 decisions. But unless they are like Dr. Suzanne  
13 Humphries and have spent years studying  
14 immunology, they're not qualified to make these  
15 recommendations. We had one survey course, we  
16 get one three or four, I can't remember, three or  
17 four hours in immunology. That doesn't scratch  
18 the surface. When you look at the intricacy of  
19 the human immune system, and this barbaric  
20 stimulation of the antibody response and claiming  
21 that it's going to elevate antibodies that  
22 therefore the person is immune to the disease is  
23 absurd. It's complete and [inaudible - 00:32:39]  
24 total ignorance of the human immune response.

25  
26 So, I am testifying against the expansion of  
27 mandatory vaccinations schedule as put forth by  
28 DOH.

29  
30 In 1986, the Vaccine Injury Act was passed

1 because of the DPT vaccine and the pharmaceutical  
2 industry threatened to stop making vaccines.  
3 Now, the occupying power of the kingdom of  
4 Hawai'i claims to be the great enabler and  
5 preserver of the free enterprise system. And the  
6 free enterprise system says that the market will  
7 determine the outcome.

8  
9 Now, I don't particularly buy that. But the fact  
10 is, the market did determine it. And the market  
11 said, not worth it, you're going to get your [REDACTED]  
12 sued and you're going to lose money. So, they  
13 wanted to stop.

14  
15 So, what did they do? They recruited the  
16 handmaidens inside the government, the  
17 legislature, to pass legislation that removed all  
18 liability from vaccination for the pharmaceutical  
19 industry. So, the U.S. government was played by  
20 the pharmaceutical industry to protect and now  
21 enhance their profits. Because once they got a  
22 free ticket, why not make more vaccines? They  
23 can't sue us. That's the science behind the  
24 vaccines.

25  
26 So, we're now promoting what will be a never-  
27 ending expansion of vaccine mandates with  
28 impunity and inadequately supported research on  
29 safety. I like to know if this violates this  
30 free enterprise principles. So, in fact, what we

1 don't have is free enterprise any more. What we  
2 have is fascism. And that is the governmental  
3 support of private industry. And that's exactly  
4 what's going on, it's going on for the  
5 pharmaceutical industry as well as the fossil  
6 fuel industry, the tech industry, all of them.  
7 The U.S. government has betrayed its principle  
8 and has become a corporate oligarchy, a revolving  
9 door of conflicts of interest, right? You work  
10 for the FDA for a while, then you work for the  
11 DOH for a while and you work with the CDC for a  
12 while. And then you go back, because you've got  
13 all your buddies on either side of the revolving  
14 door, and you make more money.

15  
16 By the way, one of the great proponents of  
17 vaccination is a guy named Paul Hoffman. Paul  
18 Hoffman sits on a CDC committee that makes these  
19 recommendations that the DOH rubber stamps,  
20 including the siege heil for the CDC [inaudible -  
21 00:35:23]. Paul [inaudible - 00:35:29] did not  
22 recuse himself when they passed the  
23 recommendation for the rotavirus vaccine, which  
24 is one of his babies. Conflict of interest? I  
25 think so. The Hawai'i State Department of DOH  
26 marches in lockstep, or should I say goosestep,  
27 serving these corporate interests under the guise  
28 of protecting human health.

29  
30 In [inaudible - 00:35:52] 1980 Vaccine Injury Act

1 also created theirs, to sort out the course of  
2 vaccine injury. However, the vast majority of  
3 vaccine injuries go unreported. So, then they go  
4 and say, see? They're okay. See? Everything's  
5 okay. But there was one [inaudible - 00:36:12]  
6 in the British Medical Journal which showed a  
7 single report for 200 cases of adverse reaction  
8 in a particular condition. So do the math.

9  
10 Autoimmune disease [inaudible - 00:36:29]  
11 vaccination now has their own acronym, it's  
12 called ASIBA, autoimmune syndrome induced by  
13 agitants. Everybody knows what agitants are,  
14 they're the chemicals [inaudible - 00:36:42]. If  
15 vaccines were a street drug, which some of them  
16 are, because they're full of all kinds of nasty  
17 impurities, [inaudible - 00:36:51] you can't get  
18 enough immune response from just giving the  
19 antigen from the microbe, so you throw in the  
20 cut, which happens to be aluminum. And some of  
21 those aluminum compounds they're using, the  
22 [inaudible - 00:37:02] is one, we know about HPV,  
23 raising [inaudible - 00:37:06] about HPV, because  
24 what's happening to these young women, they're  
25 reaching menopause at age 16, or having radial,  
26 radical extreme neurological or neuromuscular  
27 responses, autoimmune responses, all that kind of  
28 stuff. They're using the same agitant that they  
29 used in the DPT vaccine, which [inaudible -  
30 00:37:29] in 1986 to protect the pharmaceutical

1 companies again. They don't care anymore,  
2 because they have protection.

3  
4 So, what's going on with the immune system here?  
5 So aluminum is the primary agitator. There are  
6 other ones, but aluminum is the primary agitator.  
7 In 1996, the American Academy of Pediatrics, in a  
8 physician paper on aluminum toxicity, stated that  
9 infants and children are, aluminum is now being  
10 implicated in interfering with a variety of  
11 cellular and metabolic processes in the nervous  
12 system and in other tissues. Many cars and  
13 machines, blah, blah, blah, contain lots of  
14 aluminum.

15  
16 My concern about prior vaccination protocols will  
17 lead to the disruption of a normal immune  
18 function and likely potential for neuron toxicity  
19 from agitators, preservatives and other components  
20 of vaccines.

21  
22 It's important to know the impact, know the whole  
23 [inaudible - 00:38:24] of a healthy, mature  
24 immune system. We have three main branches to  
25 our immune system. I wasn't really fully versed  
26 with this when I wrote my paper in favor of  
27 vaccinations. So, you have three, you have TH1,  
28 TH2, and TH3. Now, TH1 is cellular immunity.  
29 TH2 is the humoral immunity and TH3 is the one  
30 that keeps them in check. Now, adding all these

1                   agitants to the vaccinations stimulates the  
2                   humoral immunity. That's your antibody response.  
3                   That's why they say, oh, you have a high antibody  
4                   pattern, that means you're immune to this  
5                   disease. Not true. In fact, that's oftentimes  
6                   when [inaudible - 00:39:06] is the carrier of  
7                   that disease, who's relatively asymptomatic. But  
8                   you have enough humoral immunity to keep from  
9                   showing the traumatic over [inaudible - 00:39:14]  
10                  and not enough to keep you from spreading it to  
11                  everybody else. But they don't take [inaudible -  
12                  00:39:25] of that, and it certainly won't get  
13                  counted.

14  
15                  Well, these are in a remarkably, remarkably  
16                  delicate balance, especially in our children.  
17                  So, you have cellular immune response, that's the  
18                  white blood cells that bottle things up. You  
19                  have the one TH3, which keeps things in control,  
20                  and you have TH2. Now, when the baby's born,  
21                  they get colostrum from the mother. That loads  
22                  them up with the antibodies, which is the end  
23                  result of the TH2 part of the immune system. So,  
24                  the baby has that.

25  
26                  What the baby needs to develop is their cellular  
27                  and cellular immune response. Now, guess what  
28                  does that? Childhood illnesses. People aren't  
29                  getting childhood illnesses any more. But there  
30                  are studies that show childhood illnesses protect

1           you from cancer and heart disease when you're  
2           older. Not only that, if you're an adult who had  
3           fever in the past five years you are much less  
4           likely to have melanoma, the one form of skin  
5           cancer that does have more potential to kill you.

6  
7           So, fever is really not the bad bogeyman that  
8           they're telling us they are. And people who are  
9           going to die of measles -- and so they would  
10          rather vaccinate against rubella, because we  
11          don't want the mother to get rubella, because  
12          that could affect the baby. That's true. But  
13          the best way to go about that is for everyone to  
14          have it and that's it, because that vaccine isn't  
15          going to be lasting by the time, she's a mother  
16          anyway. I hate to say it, but these guys at the  
17          DOH, what are they going to do? They're going to  
18          start demanding that the mothers get vaccinated  
19          too, then, right?

20  
21          So, we have this beautiful, delicate balance that  
22          is completely destroyed by the process of  
23          vaccination. It completely interferes with it  
24          and it promotes [inaudible - 00:41:21] illnesses,  
25          asthma, we talk about asthma, we talk about hay  
26          fever, we're talking about eczema and autoimmune  
27          diseases, are all predisposed and they are in  
28          overabundance because of vaccinations. Because  
29          it's over-priming this antibody response, which  
30          disrupts the balance of the white blood cells

1 that are bottling up the microbes. So, we really  
2 are being profoundly arrogant in intervening with  
3 the natural process in such a dramatic, abusive  
4 and a mercenary way.

5  
6 By the way, they're giving up a [inaudible -  
7 00:42:13] which says [inaudible - 00:42:14:]  
8 Hippocrates, who was, physicians first do no  
9 harm. But Hippocrates was one of the first  
10 doctors to notice that there's an association  
11 with febrile illness and less chances of cancer.  
12 In fact, it was, that's the only vaccine  
13 [inaudible - 00:42:34], I can't say that. I'm  
14 not actually completely, absolutely never  
15 [inaudible - 00:42:39]. There have been  
16 situations where I recommended. The mother was  
17 [inaudible - 00:42:48], and it only seemed  
18 logical to me if I didn't want the child to be  
19 carried [inaudible - 00:42:51]. That's far from  
20 universal vaccination.

21  
22 But there was a guy who used the non-agitant  
23 vaccine to treat cancer back in the 1930s. He  
24 gave microbes, these microbes, [inaudible -  
25 00:43:06] made him get one major, major, major  
26 fever, and a significant number of his patients  
27 cured their cancer through the fever. So, fever  
28 is a normal response of the immune system and it  
29 helps the individual to heal a disease. It will  
30 go to serve, to keep the immune system in balance

1 and to promote good, vital health in that  
2 individual throughout their life.

3  
4 Our vaccination schedules are doing harm, in  
5 violation of the Hippocratic oath.

6  
7 Okay, Hawai'i [inaudible - 00:43:43] 671-3.  
8 Hawai'i Board of Medical Examiners requires  
9 childhood [inaudible - 00:43:49]. What does  
10 through informed consent mean? It means you  
11 identify the condition to be treated. The  
12 description of the treatment or procedure. The  
13 intended and anticipated results of the proposed  
14 treatment or procedure. The recognizable  
15 alternative treatments or procedures including  
16 the option of not providing any treatment at all.  
17 Recognized the risk of serious applications or  
18 mortality associated with the proposed treatment,  
19 the recognized alternative treatment, not doing  
20 anything at all. The recognized benefits or the  
21 recognizable [inaudible - 00:44:24] or  
22 procedures. When has anybody in this room seen  
23 an informed consent in vaccination? That's our  
24 standard. Never. Never. That was required by  
25 the board of medical examiners by statute, not by  
26 their administrative rule. That's the law.

27  
28 So, my question to the DOH is, are doctors  
29 associated with the DOH advocating for adherence  
30 or violation of this statute? A very

1 conservative organization, the institute of  
2 Medicine, which is a branch of the National  
3 Academy, [inaudible - 00:45:04] National Academy  
4 of Science [inaudible - 00:45:08], but even they  
5 said, in summary, to consider whether and how  
6 studies of safety and health outcomes of the  
7 entire childhood immunization schedule, the field  
8 needs valid and accepted metrics of the entire  
9 schedule, the exposure and clear definition of  
10 health outcomes lined to the stakeholder concerns  
11 [inaudible - 00:45:30] and rigorous research on  
12 the pure validity and generalizability. This is  
13 an acknowledgement that they don't have it. They  
14 don't have the information. Dr. McGaff was  
15 asking, where's the study. There are no studies  
16 on lots of levels. But certainly not against  
17 these ever-growing schedules of vaccination,  
18 that's combined intervention, the amount of  
19 aluminum that is accumulated through that, the  
20 total consequences of ever-expanding, because on  
21 [inaudible - 00:46:08] is a non-study. And that  
22 is admitted by conservative associations such as  
23 the Institute of Medicine.

24  
25 In [inaudible - 00:46:19] acknowledgement of the  
26 unknown impacts of vaccination schedules shared  
27 in DOH recommended informed consents for  
28 vaccination, DOH had examples of vaccination  
29 informed consents that the DOH endorses. Do they  
30 meet the requirements set forth in HRS 671-3? Is

1 the DOH encouraging health care providers to  
2 share these conclusions to vaccine recipients?  
3 Please provide examples of unbiased [inaudible -  
4 00:46:46] informed consent for vaccinations  
5 provided by entities associated with the  
6 Department of Health or the Department of Health  
7 itself. Is the DOH expected to or required to  
8 support and adhere to HRS 671-3? Is the  
9 acknowledgement of the unknown impacts of  
10 vaccination schedule shared in DOH recommended  
11 informed consent for vaccinations? Are or would  
12 the vaccines cultured in [inaudible - 00:47:13]  
13 and containing residual fetal DNA, which includes  
14 varicella, rubella, hepatitis A, rabies and  
15 shingles, identified in DOH's informed consent?  
16 Are or would the various animal cell lines,  
17 antibiotics, agitants, including known toxicity,  
18 [inaudible - 00:47:29], history and possibility  
19 of biocontamination of that [inaudible -  
20 00:47:32] be included in vaccine informed  
21 consents?

22  
23 Where does the leap from ATIP recommendations to  
24 the DOH mandates come from? Has it resulted in  
25 alterations to DOH-endorsed informed consents for  
26 vaccination schedules? Does the DOH support  
27 informing parents and patients that vaccination  
28 creates an imperfect immune response and can  
29 predispose the vaccinated to become carriers when  
30 exposed to the [inaudible - 00:48:00] as well as

1 becoming vulnerable to illnesses or [inaudible -  
2 00:48:03] carrier later in life? Will the DOH  
3 agree to the formation of a committee, including  
4 [inaudible - 00:48:07], both advocates and  
5 opponents of universal vaccination, to write  
6 comprehensive informed consents for affected  
7 individuals and parents?  
8

9 Several years ago, I had a fourth-year medical  
10 student who served in my clinic. She noticed how  
11 healthy the children were. I shared with her  
12 that those were the sick ones, that they were  
13 born at home, breastfed and unvaccinated. Later  
14 I pointed out that many of the patients, many of  
15 the parents I worked with followed my suggestion  
16 to give their children moderate amounts of  
17 Vitamin C, which has been used for seven decades  
18 to treat virtually all the childhood illnesses  
19 which are now vaccinated for, including a 100  
20 percent success rate in treating polio by Dr.  
21 Kliner with IV Vitamin C. IV Vitamin c is now  
22 [inaudible - 00:48:52] recognized as a crucial  
23 treatment, increasing the survival in sepsis  
24 significantly.  
25

26 So that will probably trigger a multitude of  
27 alarm bells in conventional dogma. My intention  
28 today is not to convince you of anything. But I  
29 do want to say the following. There is  
30 significant scientific evidence of negative

1 impacts of vaccination, and a paucity of data  
2 supporting multiple vaccination schedule safety.  
3 [inaudible - 00:49:16] to use genuine placebos in  
4 most safety studies. That is [inaudible -  
5 00:49:23] adjust the aluminum shock. It's not a  
6 placebo. If we're suspecting that aluminum is a  
7 significant component in the toxicity of  
8 vaccines, giving the vaccine with the antigen or  
9 the microbe and aluminum, and using aluminum as a  
10 placebo could kill them. It's not safe. And  
11 there's a reason for that [inaudible - 00:49:54].  
12

13 The barriers use genuine placebos in most safety  
14 studies. And therefore, there is a scientific as  
15 well as religion basis, for exemption from  
16 vaccination schedules. The scientific exemptions  
17 are not recognized. It is a violation of civil  
18 rights and the bodily integrity of all those  
19 impacted by these rules.  
20

21 Unlike what is promulgated by the advocates of  
22 current expanding vaccination regimes, the  
23 science supporting vaccine safety is not  
24 conclusive. In fact, there are not only  
25 significant volumes of contradictory research,  
26 but a lot of the requisite into the safety has  
27 not been done. [inaudible - 00:50:34]  
28 impositions of influence, such as DOH, are  
29 violating a sacred public trust by turning CDC  
30 recommendations into mandates and failing to

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honestly convey to parents what is known and unknown about the vaccine effectiveness and safety. A mandatory vaccination policy may well reduce vaccination rates, by forcing parents who would have opted for selective vaccination to choose none on religious grounds, since they are left no other option. There is some serious cynicism afoot, since some of the required vaccines, and the expansion of this vaccine schedule.

The annual flu vaccine is worse than a bad joke. Over 70 percent of annual flu-like illnesses are not the flu at all. The vaccination will not protect against these illnesses. Yet the CDC will include morbidity and mortality from these illnesses in their care package to promote the vaccination. One annual study showed 90 percent of all flu-like illnesses that year weren't actually due to the flu, and 57 percent of the cases were in people who were vaccinated. Meanwhile, adults receiving the flu vaccine five years in a row demonstrated a ten-fold increase in Alzheimer's disease.

The HPV vaccine is another nightmare, with limited, if any, advantage over routine screening in impacting cervical cancer. The fact is that cervical cancer is, with proper treating, is all you need to eliminate any mortality from cervical

1 cancer. And the treatment does not involve  
2 chemotherapy. It's simply treated, you take it  
3 out, you're done.

4  
5 So even the motivation for this vaccine is  
6 absurd. There's questions as to whether some  
7 children are exposed to HPV in the current  
8 process. Now, if they're exposed to the HPV in  
9 the current process, or for some other reason  
10 before they're vaccinated at 11, 12, 13, 14, 15  
11 years old, maybe they were sexually active but  
12 they didn't want to tell their parents. Oh, that  
13 would be a big surprise.

14  
15 [Laughter.]

16  
17 DR. CASSEL: You give them the vaccine, you're going to  
18 increase the risk of cervical cancer besides  
19 these horrendous reactions that we're seeing, it  
20 can impact their neurological system, their  
21 immune system, have their hormonal system,  
22 menopause at 16 years old. Give me a break. The  
23 conclusion of naturopathic physicians and  
24 providers capable of affecting medical  
25 objections, while imposing stringent adherence to  
26 an alien allopathic medical paradigm for making  
27 such [inaudible - 00:53:25] is a hollow and  
28 patronizing conclusion. Might as well leave me  
29 out, because I'm not going to march in goosestep  
30 as you are.

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Finally, imposing vaccination schedules originating from the federal agency of the occupying power, the CDC, is in fact a war crime. No such vaccination schedule exists on an occupied Hawai'i kingdom. So, as you march in lockstep, know you are marching in goosestep, and because you pretend to have scientific verification for the work you are doing, you can't say you were just following orders. Thank you very much.

[Applause.]

SPEAKER: Is there a Clara [inaudible - 00:54:19].

FEMALE SPEAKER: I'd just like to thank you for your patience and your understanding for [inaudible - 00:54:29 in a really nice place, and [inaudible - 0054:32]. Okay, all right, fantastic. Anyway.

I'm a [inaudible - 00:54:41], and I carry a [inaudible - 00:54:44], a consider myself an indigenous practitioner. I'm also a [inaudible - 00:54:53] where I can go back five generations. I was talking [inaudible - 00:55:00] medicine since I was very young. So, I have the [inaudible - 00:55:06] down #00:55:10] my hands [inaudible - 00:55:12]. And I feel as a [inaudible - 00:55:13] practitioner are finely

1 tuned.

2

3 The Department has [inaudible - 00:55:25] I would  
4 totally disagree with that. I've seen it, dealt  
5 with it and worked with it, screened with it. I  
6 can tell you [inaudible - 00:55:34] but the  
7 immune system of those children is [inaudible -  
8 00:55:38]. We work with the fact [inaudible -  
9 00:55:47], we work with this. This is the heart  
10 beat of a baby, something like that, right. Here  
11 is the heartbeat of a [inaudible - 00:56:03].  
12 That's [inaudible - 00:56:06]. This is the  
13 heartbeat of [inaudible - 00:56:10]. Everything  
14 has a beat. Everything has a beat to it. You  
15 have a heartbeat, right? You have a heartbeat?

16

17 SPEAKER: Oh, yes.

18

19 FEMALE SPEAKER: [inaudible - 00:56:19] heartbeat [inaudible  
20 - 00:56:23]. The [inaudible - 00:56:26] have a  
21 heartbeat. Our [inaudible - 00:56:32] they will  
22 not and they cannot do that [inaudible -  
23 00:56:34]. Because you see, our mama is the  
24 earth. And so [inaudible - 00:56:41], oh, I'm  
25 going to move right here. We as indigenous  
26 people are rising. We have also held values of  
27 the earth. Our belief in [phrase in Native  
28 tongue] is so strong because we're connected to  
29 them, we learn from them, we hear their beat, we  
30 kiss them, we talk to them, we kiss them. We

1 love them, we love our mother. The ocean, the  
2 water, we protect everything.

3  
4 And we want to protect indigenous practitioners  
5 work full time, more than full time, it's our  
6 kuleana, we're not doing this for money, it's not  
7 a job. We do it because we love life, because of  
8 our responsibility, and we're accountable for our  
9 actions.

10  
11 So, no matter what the DOH says and runs through  
12 their thing, we know that this is a warm crime.  
13 We will serve them with war crimes over and over.  
14 Lili'uokalani is my queen. I find it amazing  
15 that these legislators and people that are making  
16 all these deals trying to take it away and have a  
17 beautiful bronze statue of her, I always  
18 [inaudible - 00:57:56]. She never signed a  
19 treaty and she never went to war.

20  
21 So right across the street I go and sit longer,  
22 because that's where they imprisoned her. And I  
23 sit there and I sleep with her and I can feel  
24 her, even in her prison, the U.S. military who  
25 was occupying us [inaudible - 00:58:15], she  
26 never gave up. She was [phrase in Native  
27 tongue], she was [inaudible - 005:58:21]. Is she  
28 your queen? She should be. How could she not be  
29 our queen? If she had put us here right now,  
30 because she did not sign that treaty and she did

1 not go to war.

2

3 So, we still taking [[inaudible - 00:58:39].

4 Talk about a baby. A baby inside the womb, they

5 are getting everything from [phrase in Native

6 tongue]. Take about [inaudible - 00:58:53] it's

7 pumping that coca, you're just pumping that to

8 them, pumping it loud, pumping the blood,

9 [inaudible - 00:58:58] oxygen, babies are

10 immature, totally immature. [inaudible -

11 00:59:06]. I can teach you how to dance, but

12 we'll talk about that later.

13

14 [Laughter.]

15

16 FEMALE SPEAKER: [inaudible - 00:59:17]. Anyway. Where we

17 go [inaudible - 00:59:29] dance of the baby, the

18 baby's coming out, the baby's inside and all of

19 you have had [inaudible - 00:59:38] you know how

20 the baby's coming [inaudible - 00:59:44] what

21 physician do you [inaudible - 00:59:49]. But I

22 don't take [inaudible - 00:59:54] about that baby

23 inside the womb, let's say [inaudible - 00:59:59]

24 got the baby right there and that little girl

25 right there [inaudible - 01:00:11] she's

26 [inaudible - 01:00:12]. So, we know things

27 because [inaudible - 01:00:17]. Right? She can

28 take [inaudible - 00:01:00:26] right, this family

29 right here [inaudible - 01:00:28]. We all have

30 beautiful [inaudible - 01:00:35]. So, we not

1 ([inaudible - 01:00:36] come here and then return  
2 and it comes out head here [inaudible - 01:00:41]  
3 popping the shoulder and [inaudible - 01:00:45].  
4 Beautiful. [inaudible - 01:00:49]. They come  
5 out and they [inaudible - 01:00:53] hear that  
6 beat. So [inaudible - 01:01:05 and we take a big  
7 breath. Do that again. Aloha, Hawai'i, ha  
8 [inaudible - 01:01:15].  
9

10 SPEAKER: Yes.

11

12 FEMALE SPEAKER: [inaudible - 01:01:18]. When you take a  
13 slow breath, your endorphin level is going to  
14 kick in and [inaudible - 01:01:25]. So, when  
15 you're looking at this breath and we [inaudible -  
16 01:01:40 and on the sequel, this sequel right  
17 here connects us to the [inaudible - 01:01:50]  
18 taking a board of, what else are they putting in  
19 these vaccines? [inaudible - 01:01:57] DNA.  
20 Anyway, but that's is the stuff that they're  
21 doing. When that baby comes out, it comes up on  
22 you, because they've never breathed before.  
23 Their liver, their [inaudible - 01:02:10] they're  
24 all premature.

25

26 So, they can listen to that or that what happens  
27 to these babies that are born in these hospitals  
28 that are taken for vaccine [inaudible - 01:02:28]  
29 are they totally [inaudible - 01:02:32]. Okay,  
30 so here we go back, and they take them, this is

1 what happens. This is the rest of our [inaudible  
2 - 01:02:47]. That's the baby [inaudible -  
3 01:02:56]. Now you [inaudible - 00:01:02:58].  
4 Okay, this is [inaudible - 01:03:02] oh, that's  
5 how my mama breathes. Oh, I'm learning how to  
6 breathe. If they're connected [inaudible -  
7 01:03:08] because I've heard [inaudible -  
8 01:03:12] it still [inaudible - 01:03:18]. But  
9 the [inaudible - 01:03:21] or any of these things  
10 [inaudible - 01:03:28] it jumps to stem cells.

11  
12 Then those babies come out and then all of a  
13 sudden, they get a vaccine. What happens to them  
14 is they go ah, ah, ah. What a baby needs to do  
15 is balance this stuff out, process, they get a  
16 breath, they come up, they're [inaudible -  
17 01:03:47] about an hour and half they'll drive  
18 you nuts [inaudible - 01:03:57] but anyway they  
19 can actually crawl right up to the breast and  
20 that's how they bond. #01:04:05] nobody's  
21 washing the [inaudible - 01:04:06] disconnect the  
22 partial [inaudible - 01:04:12] see you don't need  
23 that system. We don't need that system. Many of  
24 us have never used it. I've only had it, I had  
25 the vaccine thing when I was 20 years old, from  
26 one of the best pediatricians in the state of  
27 Oregon, Dr. Lennon Smith [inaudible - 01:04:29].  
28 I said, Dr. Smith, what do you think about  
29 vaccines? And he said, give them to me. I said,  
30 I only vaccinate [inaudible - 01:04:37] the only

1 generation that was born in the hospital  
2 [inaudible - 01:04:42] but I still delivered  
3 [inaudible - 01:04:49].  
4

5 So, I went back and I said, how many vaccines did  
6 I get, I was born in 1954. I was told [inaudible  
7 - 01:04:58] for 40 years, do you know my age  
8 [inaudible - 01:04:59] get the flu vaccine, they  
9 looked terrible, and I could hardly -- you're in  
10 bad shape, I'm still like, going, you know  
11 [inaudible - 01:05:11] 6 o'clock in the morning  
12 two or three times a week. But I work, you know.  
13 It is sad. It's so sad, because babies  
14 [inaudible - 01:05:25], they need to know that  
15 they have it. And they have a human right, they  
16 have an indigenous right to keep their DNA pure  
17 [inaudible - 01:05:35].  
18

19 Yet they are vaccinating children across the  
20 board, changing their DNA, changing [inaudible -  
21 01:05:45] Henrietta Lackes [inaudible -  
22 01:05:48]. They asked her in 1944, could they  
23 use her cells. She died from cancer. Her family  
24 said no. They took them anyway, because  
25 [inaudible - 01:06:00] medical [inaudible -  
26 01:06:04]. But anyway. So, we need to have this  
27 respect for indigenous, for culture. We are  
28 sovereign people, just like the queen said. We  
29 still are. They are occupying us all over, from  
30 our lands, our resources, the raping of our women

1 and more, so they can leave and they can take the  
2 land. They cannot take you away from your baby.

3  
4 So, what are we going to do? My question to the  
5 department of health is, do you really have  
6 permission to go to a school and ask who wasn't  
7 vaccinated? [inaudible - 01:06:46] they just did  
8 that. Now, that's a HIPAA violation. Do they  
9 really think that they should do these things?  
10 They have a lot of [inaudible - 01:06:52] who is,  
11 do you know when the [inaudible - 01:06:57] are  
12 coming [inaudible - 01:07:00] all of the schools,  
13 there's just a [inaudible - 01:07:03]. But who  
14 they'll come and they'll [inaudible - 01:07:08],  
15 you see them talking to each other and we move.  
16 But if [inaudible - 01:07:13] me and asking these  
17 questions, I hope that you will remember me and  
18 that you will tell them personally that we are  
19 demanding [inaudible - 01:07:24] that these  
20 questions get answered. Do they have permission  
21 to violate HIPAA? They are not just planning on  
22 four vaccines. This is getting ugly and ugly and  
23 ugly [inaudible - 01:07:39]. This is not how we  
24 get our kids ready.

25  
26 So, I can look at vaccines. So, this leads to  
27 [inaudible - 01:07:50], a human source, another  
28 source. Know that the definition should be  
29 mandated at all. If people want to go and do  
30 that, go do it. [inaudible - 01:08:05] try to

1 get me to [inaudible - 01:08:07] so who's picking  
2 up the pieces? How many people their  
3 tranquility, their caretakers, [inaudible -  
4 01:08:13] who will be taking care of them? When  
5 the military [inaudible - 01:08:17] they're dying  
6 from that [inaudible - 01:08:20] testing. Even  
7 the young people we send off to war, anthrax  
8 vaccine. I [inaudible - 01:08:27] that's true  
9 too. But they're literally in excruciating pain.

10  
11 So, these are the things that we have an  
12 obligation as [phrase in Native tongue] to keep  
13 [phrase in Native tongue], to take care of this.  
14 Because they can only take something if we give  
15 it. And if they say that your kid can't go to  
16 school, my question is, to the department of  
17 health and the GOE, to say, are they planning on  
18 us [inaudible - 01:08:54] around us [inaudible -  
19 01:08:57] so that we can see [inaudible -  
20 01:08:59]? Are you planning a total  
21 privatization of schools, is there some kind of  
22 thing they do [inaudible - 01:09:11]? What do  
23 they want? Those are the questions. What can  
24 they do, and do you know that I have gone to the  
25 department of health, [inaudible - 01:09:25],  
26 which we had [inaudible - 01:09:29] and asked,  
27 what about vaccines?

28  
29 These are the people that were trying to be very  
30 politically correct, but [inaudible - 01:09:36]

1 coming out [inaudible - 01:09:37] he said, what  
2 about vaccines? Like he was going to [inaudible  
3 - 01:09:41] hit me with [inaudible - 01:09:45].  
4 It was amazing to see that the brainwashing of  
5 these [inaudible - 01:09:54] medical people.  
6 Because [inaudible - 01:09:57] and I have to say  
7 this, they are the lowest on the scale of pay  
8 [inaudible - 01:10:03]. If they don't circumcise  
9 our baby and do vaccines [inaudible - 01:10:09]  
10 at one point you make [inaudible - 01:10:13] but  
11 this is too much. It's too much. And [inaudible  
12 - 01:10:17] cut off the connection that we have  
13 to the earth. So, we're not going to disconnect  
14 and we want to help them, too.

15  
16 But pediatricians, [inaudible - 01:10:27] think  
17 they're [inaudible - 01:10:29] but they are  
18 [inaudible - 01:10:35] insurance, they have to  
19 pay their own [inaudible - 01:10:36]. So, this  
20 95 percent of vaccination to get their bonus at  
21 the end of the year, and cutting the penis  
22 [inaudible - 01:10:42] leave them literally  
23 [inaudible - 01:10:46] bloody mess for the nurse  
24 to clean up after. It actually [inaudible -  
25 01:10:52]. But what's happening to them?  
26 Because I care about them? Now you care about  
27 them. And I'm thinking this morning of a  
28 pediatrician over in Hilo who spoke for us.  
29 Thank you very much. Because that's a very brave  
30 pediatrician. Because as some doctors have told

1 me, they're [inaudible - 01:11:09] as a  
2 practitioner [inaudible - 01:11:11]. But you  
3 know [inaudible - 01:11:15]. But they are used  
4 to this, and they work very hard to get to the  
5 schools and do what they do, and they do care.  
6

7 So, what happens to a baby when they get that  
8 vaccine? What happens to them is, naturally,  
9 when the baby comes out, they do this rating  
10 thing [inaudible - 01:11:35]. The only thing  
11 [inaudible - 01:11:37] want a baby crying  
12 [inaudible - 01:11:39]. Because I hit them on  
13 their tummy and I go choo, choo [inaudible -  
14 01:11:52]. It's true. [inaudible - 01:11:55]  
15 right kind of a [inaudible - 01:11:58]. But  
16 they're not crying. Who said they were not  
17 crying? So, I have to give them one point  
18 [inaudible - 01:12:10], but they're not screaming  
19 [inaudible - 01:12:13]. So, when those babies  
20 come out, and they come out here, they get the  
21 [inaudible - 01:12:19] they give love and I wash  
22 up [inaudible - 01:12:36] several hours. She's  
23 scored more if the babies are earlier [inaudible  
24 - 01:12:31] people know how to work with this.  
25

26 Now, what happens to this? They start walking,  
27 they start stepping on [inaudible - 01:12:40].  
28 When you start using colostrum, what happens?  
29 They, when they get colostrum, what happens?  
30 Immunity, they start breathing slower [inaudible

1 - 01:12:57]. Everything. Everything [inaudible  
2 - 01:13:00]. If you put a vaccine in them and  
3 you [inaudible - 01:13:09] respiratory distress  
4 syndrome happens. So, the immune system is  
5 compromised, they've gotten foreign blood. And  
6 that's [inaudible - 01:13:20] your DNA and all of  
7 a sudden, they've got [inaudible - 01:13:23]  
8 added in, with all these things in it. And that  
9 is [inaudible - 01:13:27].

10  
11 And then what happens in a few hours later?  
12 Another vaccine. And I can tell you that I know  
13 what it's like. Because [inaudible - 01:13:42]  
14 vaccines, but I told him I wanted [inaudible -  
15 01:13:47] don't need it [inaudible - 01:13:49]  
16 I'm not going to [inaudible - 01:13:51]. So, at  
17 three months, I knew not to vaccinate. So, he  
18 came along [inaudible - 01:14:00]. Twelve hours  
19 later, he's breathing quiet. I know what it's  
20 like to hold a baby crying all night long.  
21 [inaudible - 01:14:11]. Did they give me a  
22 number to call, said the physician ever check and  
23 see? Did they call? No. [inaudible -  
24 01:14:11]. And even to call a number [inaudible  
25 - 01:14:18] I know where to call. And I  
26 [inaudible - 01:14:22] I see [inaudible -  
27 01:14:24].

28  
29 So, we have a responsibility to tell the  
30 department of health that we will not [inaudible

1 - 01:14:33], that you are not going to make an  
2 [inaudible - 01:14:37], and we need to be  
3 leaders. But I'm depending on all of you to come  
4 strong. [inaudible - 01:14:45]. Okay, mahalo  
5 nui.

6  
7 [Applause.]

8  
9 SPEAKER: Is there a Martha Stephens?

10  
11 MS. STEPHENS: Hello, I'm Martha Stephens. I'm a mother and  
12 business owner. I've spent probably the last  
13 eight years looking at all the things going on in  
14 the world, after I had a child at 45, I got  
15 really interested. I used to think that if it  
16 was important, it would find me. Well, with the  
17 onset of the internet, you can find anything, and  
18 you can know everything.

19  
20 Just the other day, I went to an ethics training  
21 course. So today I'm really going to be looking  
22 at the ethics of [inaudible - 01:15:55] with all  
23 these injuries and all this education. Twenty-  
24 five percent of the funding for education in  
25 Hawai'i is [inaudible - 01:16:13]. That's crazy.  
26 I mean, the autism rates, and just everywhere.  
27 Vaccines are [inaudible - 01:16:26], I don't know  
28 who's making the decisions on this, but they need  
29 to think critically, because they've [inaudible -  
30 01:16:33] too unless they somehow have not been

1 vaccinated. I can't believe anybody here would,  
2 after hearing all the information, would go get a  
3 flu shot or anything. I mean, with the dangers,  
4 the cost and the payoff. I watched [inaudible -  
5 01:17:00] video and I was [inaudible - 01:17:02]  
6 and that was very thorough. I think that at this  
7 point in the hearing, almost everything's been  
8 said as far as that goes.

9  
10 But I was trying to look at what hasn't been  
11 said. Are you critically thinking, do you know  
12 what's really going on in the world right now?  
13 Do you know the agenda [inaudible - 01:17:24]  
14 organizations, the U.N. has huge agendas right  
15 now, Agenda 21, 23 and [inaudible - 01:17:33]?  
16 Every time I turn on hear on public radio, I hear  
17 about U.N. What is the U.N. doing in Hawai'i?  
18 Fighting all these things, these resilient cities  
19 and your sustainable living. These people at the  
20 top are making all this money. And anyway,  
21 there's so much knowledge to know, I think people  
22 should look at everything. There's a lot  
23 [inaudible - 01:18:11] so I have a lot of family  
24 and friends on the mainland in California. They  
25 don't realize what's going on with them right  
26 now. I mean, it's awfully interesting that  
27 they're pushing this right now. I mean, last  
28 year they were at it. Now they want mandatory  
29 vaccination here. And I forgot to say that I  
30 oppose, for the record, vehemently. Because if

1 mandatory vaccinations, what is it, HRE, HR or  
2 [inaudible - 01:18:48].

3

4 SPEAKER: [inaudible - 00:19:06].

5

6 MS. STEPHENS: R-157-18-07.

7

8 SPEAKER: You got the numbers right, title 11.

9

10 MS. STEPHENS: Title 11, chapter 157, examination and  
11 immunization. [inaudible - 01:19:22]  
12 requirements and immunization and examination of  
13 [inaudible - 01:19:25] schools, both secondary  
14 schools [inaudible - 01:19:27]. I mean, next it  
15 will be [inaudible - 01:19:31]. I mean, as it  
16 is, [inaudible - 01:19:33] adults taking shingles  
17 vaccines, I mean, both my parents have passed  
18 away, they both were on 10 medications each. The  
19 kids are like, bit pharma is way in for  
20 illnesses, they're making way more money.  
21 [inaudible - 01:19:52] are any better, I mean,  
22 what I don't understand how ethically doctors can  
23 collect all these kickbacks. It's illegal in my  
24 judgment. I would go to jail. I mean, every  
25 commission in Hawai'i, what do they have to say  
26 about this?

27

28 There is an ethics commission for public  
29 servants. And, you know, you realize that the  
30 United States is a corporation. It became a

1 corporation in 1871 and everything is corporate.  
2 These people are not [inaudible - 01:20:33] the  
3 United States or in Hawai'i, obviously. I mean,  
4 we're in a very critical time right now. It  
5 just, there's a crush on every single area, of  
6 course, there's the food, our air, [inaudible -  
7 01:20:48], if you're halfway awake, you know what  
8 they're doing, partially awake. I mean, nobody  
9 wants to know, but everybody wants to be  
10 [inaudible - 01:20:58].

11  
12 Vaccines, they don't even know what they do  
13 together. Both parents on ten medications? I  
14 was like, how do they know how they even interact  
15 together. My parents had Alzheimer's, I was  
16 adopted, I was watching my birth mother's husband  
17 with Alzheimer's. And all the heavy metals are  
18 depositing, all this information is known now.  
19 So, this is, I mean, like I said, ask yourself  
20 why they're pushing this. Why now? [inaudible -  
21 01:21:38], why now? Why do we want open borders?  
22 Why do we want all these people with diseases  
23 coming in with no checks, no balances? Who's  
24 funding all this? Who's got a medical degree?  
25 Who's got [inaudible - 01:22:00]? I mean, I try  
26 to [inaudible - 01:22:01] natural cures. Who's  
27 making natural cures illegal?

28  
29 I heard they're trying to make [inaudible -  
30 01:22:11] cancers. I've heard in my generation

1 the vaccines have cancer-causing agents in them.  
2 The polio vaccine, it just goes on and on. And  
3 it's got everybody brainwashed. My birth  
4 mother's a nurse. And you know, she'd go to  
5 school, drop her [inaudible - 01:22:32], they  
6 only have so much time. They learn what they  
7 learn, they think it's important. My birth  
8 mother was at my daughter's birth, and I didn't  
9 know, like I said, I was [inaudible - 01:22:44]  
10 me, I'm single, I'm free, no worries. She was  
11 like, oh, yeah, you should vaccinate. Well, now,  
12 now, after 11 years, my birth mother, she's like,  
13 well, I don't really think it's a good idea.  
14 Well, [inaudible - 01:23:06, I was like  
15 [inaudible - 01:23:05] say that [inaudible -  
16 01:23:08]. This is like way too much. What do  
17 we have now? [inaudible - 01:23:14], how many  
18 are we going to have out next year and the year  
19 after?

20  
21 It's unethical. Corporate government interest,  
22 all of it, every single piece of it. And I mean,  
23 I know you guys are going to think I'm crazy, but  
24 there's a genetic agenda for the population now.  
25 I mean, I remember being probably, oh, when my  
26 daughter [inaudible - 01:23:47], and hearing, oh,  
27 the population's [inaudible - 01:23:50 in your  
28 lifetime. And so, she's watching that, she's  
29 watching everything. And [inaudible - 01:24:03  
30 they're being tried right now or in trouble for

1 shooting people with their vaccines. And after,  
2 I mean, what, [inaudible - 01:24:15] a really  
3 good job at [inaudible - 01:24:16] population at  
4 15 percent, okay. [inaudible - 01:24:23] yeah  
5 [inaudible - 01:24:26] such a philanthropist.  
6 Oh, no way. [inaudible - 01:24:36] vaccines  
7 [inaudible - 01:24:39]. They're all coming from  
8 a corporation, for billions and trillions of  
9 dollars, for all the medical you're going to need  
10 later on.

11  
12 I don't think there's any point to them  
13 [inaudible - 01:24:55] all the way in California,  
14 I think it's already gone through in California  
15 right now. And you know, look at all the gene-  
16 gathering. We're at a very critical time right  
17 now. And I think we're all connected. If you  
18 don't think we're all connected and this isn't  
19 going to affect you and you really want that  
20 money so bad, I don't know, you're [inaudible -  
21 01:25:26]. I mean, [inaudible - 01:25:31] said  
22 everything [inaudible - 01:25:34], don't have it  
23 all together, real organized, but [inaudible -  
24 01:25:40]. Agitants cause inflammation, that's  
25 how it gets into your body. We need informed  
26 consent. And even right, I'm really pressing  
27 human rights [inaudible - 01:26:00] corporation,  
28 corporate overlord. And do you know, push into  
29 [inaudible - 01:26:05] and you must be schooled  
30 [inaudible - 01:26:12].

1  
2 So, I did write down, there's the REHAR 11-17. I  
3 can [inaudible - 01:26:21] website, there's also  
4 a lot of other things on vaccination that, with  
5 all the uncertainty surrounding the safety and  
6 efficacy of vaccines, it's crucial to protect  
7 your right to make independent health choices and  
8 exercise voluntary informed consent to  
9 vaccination. It is urgent that everyone in  
10 America stand up and fight to protect the  
11 expanding of vaccines as the most [inaudible -  
12 01:26:48] in the world, but of course, ask  
13 yourself, why does the United States have all  
14 these vaccines? And one of my grandkids who was  
15 going to come with us today, said, he was  
16 teaching in Germany, nobody had ADHD or  
17 [inaudible - 01:27:06]. It's critical that  
18 everyone in America stand up and fight to protect  
19 and demand vaccine informed consent protection in  
20 state public health and employment laws. Our  
21 leaders and legislators in our community need to  
22 be educated. And if they're not educated after  
23 all these [inaudible - 01:27:29], it's urgent  
24 [inaudible - 01:27:32]. I mean, I don't know  
25 what else to say. Thank you.

26  
27 [Applause.]

28  
29 SPEAKER: Isaiah?

30

1 MR. HALLIBURTON: So, for the record, Abraham Halliburton,  
2 middle name's Isaiah. I oppose [inaudible -  
3 01:28:05] all the ages of 14. My dad was an  
4 organic farmer and [inaudible - 01:28:09] organic  
5 for 47 years, part of being Hawai'ian on the  
6 mainland. I was born at home with a midwife,  
7 registered in Arizona. All my siblings  
8 [inaudible - 01:28:21]. Just a basic [inaudible  
9 - 01:28:22] human rights, you know, constitution,  
10 should not, this too shall not pass, this will  
11 not pass. We don't want this, we don't need it.  
12 For, I would say, one of my youngest daughters,  
13 [inaudible - 01:28:47], she had her in the  
14 hospital, it was one of the most traumatizing  
15 experiences. They held our daughter after that  
16 [inaudible - 01:28:56], after immediately  
17 [inaudible - 01:28:58] us, saying, we're going to  
18 turn you in if you don't vaccinate your daughter,  
19 as illegit parents, you know, just trying to  
20 scare us. The tension is really high during  
21 birth, after birth. For God's sakes, the doctors  
22 were fighting over who was going to get, to  
23 deliver the baby and she was crowning for hours  
24 at a time. Again, had to give the mother an  
25 epidural because of the situation.

26  
27 So just the whole process, and then the process  
28 of them holder her after shock, she was there for  
29 six hours, right after birth, took her out, boom,  
30 [inaudible - 01:29:36]. And oh, no, we don't

1 want shots, so then, okay, we won't give her, and  
2 then we found out later they gave her a shot.  
3 So, you know, she had a few problems. When you  
4 look on her mother's side and my side, we don't  
5 have any autism, don't have any [inaudible -  
6 01:29:51], we don't have any Alzheimer's. Just  
7 on and on and on. So, she, all my brothers, kids  
8 born and raised, no vaccinations, [inaudible -  
9 01:30:03] born, no vaccinations, there's a huge  
10 difference.

11

12 SPEAKER: Was that in Arizona?

13

14 MR. HALLIBURTON: That was in Arizona. [inaudible -  
15 01:30:11]. Yes. I was [inaudible - 01:30:14]  
16 Missouri [inaudible - 01:30:15]. So just in  
17 general, I oppose it. I believe it with  
18 everything in me. And you can mess with people's  
19 beliefs. When people don't want something and we  
20 believe for goodness, gracious and mercy, you're  
21 going to see it happen. So, I'll just thank you  
22 all for your time.

23

24 [Applause.]

25

26 SPEAKER: Is there a -- do you want to testify? Lori  
27 Schrock? Rachelle Taoli? State your name for  
28 the record, please.

29

30 MS. TAOLI: Yes. My last name is Taoli, T-A-O-L-I.

1 Rachelle. I'm here opposing H.R. 11-17. And I  
2 strongly oppose this legislation. I want to  
3 thank you for taking the time and letting us  
4 provide testimony to your written testimony.

5  
6 I am, however, very concerned that there are no  
7 decision makers present here. I know we're all  
8 aware of that, but I just want to point that out  
9 again.

10

11 I'm going to be reading some of my work, so  
12 forgive me for reading. But this is the written  
13 testimony that I wrote. These are my kids  
14 [inaudible - 01:31:50], I've lived on the island  
15 for three years. I'm a registered nurse, and I  
16 have a license in two states. I was working at a  
17 [inaudible - 01:31:55] community hospital until  
18 last year [inaudible - 01:31:58] out there. So,  
19 I really think it's imperative that we all keep  
20 in mind that we have the same goals, all of us  
21 want our kids to be healthy, and we want our  
22 future to be healthy, we want our planet to be  
23 healthy. But that should be the goal of the  
24 department of health.

25

26 So, this whole viciousness of how we're reducing  
27 to two sides is understandable, because the  
28 health of our children is at stake. And so, we  
29 get very fired up about that, and it's  
30 understandable. But we need to keep in mind that

1 we all have the same goals. It's impossible to  
2 make informed decisions when we're being provided  
3 with misinformation. So, I think a lot of people  
4 have already made that point. But it's very  
5 important to remember that informed decision  
6 means getting correct and accurate information  
7 provided to us, and that needs to be happening.  
8

9 My personal and professional experience has led  
10 me to a search for what the actual truth is to  
11 this debate, if you will. I vaccinated all my  
12 older kids when I was young, and that was what  
13 you do. You took your kids into the doctor, you  
14 did a well check, you got the vaccine. You go on  
15 time and that's just, it's not discussed as a  
16 choice, it's not discussed as an option. There's  
17 no alternative [inaudible - 01:33:21], it's just  
18 what you do and what you think you need to do to  
19 be a good parent, like everybody else and your  
20 own children.  
21

22 So that's what I did. And when I became pregnant  
23 with my fourth son, which is 10 years later, I'm  
24 having my [inaudible - 01:33:36], I took it upon  
25 myself to do some research and made sure I was  
26 making the right choice. When I did that  
27 research and set out to do that, I went and got  
28 the literature that I could get on the [inaudible  
29 - 01:33:38] of vaccines. I looked and I could  
30 tell immediately which things and which

1 politicians were biased in one way or the other.  
2 It was very clear which were trying to push you  
3 in one direction and which ones are doing an  
4 analysis with an open mind or who would actually  
5 give you good information. So, it was clearly  
6 [inaudible - 01:34:02] consider it in the first  
7 place.

8  
9 And when I delved into that research, it became  
10 clearer and clearer to me that that was not  
11 something that I wanted to do with my fourth  
12 child, something I wish I hadn't done with my  
13 older children. So this is happening -- okay, so  
14 the fact that you have a lot of, we talked about  
15 [inaudible - 01:34:32] statute [inaudible -  
16 01:34:33] decree, that is the law here in Hawai'i  
17 [inaudible - 01:34:37] but we as health care  
18 providers have a responsibility to provide  
19 [inaudible - 01:34:41] to our patients when  
20 they're deciding on whether they would like  
21 [inaudible - 01:34:47] or not. There's no reason  
22 that doesn't apply to vaccines. There is no  
23 reason why that doesn't apply.

24  
25 So, we need to go through the entire informed  
26 consent process with them, when we're suggesting  
27 any procedure. And I've seen that first-hand,  
28 and that doesn't happen when it comes to  
29 vaccines. And I'll even say, most medical  
30 procedures that a provider has a certain bias

1 about, so if they say it's what needs to happen  
2 or what you need, then that's kind of the way  
3 it's presented and it's not submitted to you as a  
4 choice. And that's not okay.

5  
6 So, we're assured that vaccines are safe and  
7 effective and that we need them, and that the  
8 diseases that they protect against are dangerous  
9 and deadly. And that if we don't vaccinate, that  
10 we're going to be compromising current immunity  
11 and endangering others. So, I found this all to  
12 be lies throughout my research. We don't receive  
13 a comprehensive list of potential risks, we don't  
14 receive an honest explanation of the efficacy,  
15 and we don't receive alternative options as  
16 parents when we vaccinate our children and our  
17 teens.

18  
19 A patient should be able to trust a doctor to  
20 guide them to make choices. And there's no  
21 current choice given. [inaudible - 01:36:01] as  
22 a matter of course. And if you've educated  
23 yourself, even with my daughter, I had heard  
24 about aluminum, and I [inaudible - 01:36:07] that  
25 you [inaudible - 01:36:08] the vaccine, so you  
26 would give two at a time instead of four. And I  
27 was treated like some kind of a radical because I  
28 wanted to just take her vaccines out, I didn't  
29 want to give them four at a time, I wanted to  
30 give them two. And we did that, and we had to go

1 through a lot of [inaudible - 01:36:25] to be  
2 able to do that within the medical system and the  
3 wellness center designed to meet certain set  
4 routines.

5  
6 So as a nurse, I've definitely witnessed first-  
7 hand that kind of attitude with a medical  
8 professional, where we think, we know better, we  
9 think we know what's best, we think we know  
10 what's best for our patients. We think that we  
11 shouldn't take what they feel into consideration.  
12 And I have done research into vaccines  
13 particularly, I have come across more of that  
14 attitude from my nursing colleagues who know  
15 [inaudible - 01:36:55] they really can't handle  
16 even the questioning of, you know, just negative  
17 [inaudible - 01:37:00] anti-vaxxers who  
18 [inaudible - 01:37:02] that the medical system is  
19 using to try to force people into compliance is  
20 religion. But that is not science. And they do  
21 try and [inaudible - 01:37:10] invasive for  
22 [inaudible - 01:37:13], the science is settled.  
23 Well, guess what? If you know anything about  
24 science, science is never settled. Science is  
25 meant to be tested and tested and tested and  
26 science refutes other science all the time.  
27 That's how it should be.

28  
29 So, you can [inaudible - 01:37:27] with the term  
30 anti-vaxxers and [inaudible - 01:37:30]

1 demonizing them and blame them for all the  
2 outbreaks of these diseases. If there's a  
3 vaccine preventable to use, the media is going to  
4 blame that on the anti-vaxers, although all the  
5 tests later, that is not the actual fact of  
6 what's going on. And it is also, this  
7 information is also being found by the practice  
8 of physicians to bar patients from their practice  
9 who refuse to vaccinate. And this is [inaudible  
10 - 01:38:00] for tetanus or having high-vaccine  
11 compliance rates. So that's the real reason why  
12 they're doing that [inaudible - 01:38:07].

13  
14 Vaccines, it's [inaudible - 01:38:11] in public  
15 health, and of course those behaviors might be  
16 considered justified. And in corporate America  
17 we're told that, carry [inaudible - 01:38:21], as  
18 I know very well, they believe that they're doing  
19 the right thing, they're protecting the public  
20 good, right? They're protecting everybody. And  
21 anyone who would go against that is endangering  
22 society. So, we think we have a right to  
23 infringe on their rights.

24  
25 But we can never neglect to [inaudible -  
26 01:38:37] that the facts and interests [inaudible  
27 - 01:38:39] controlling the public thought  
28 [inaudible - 01:38:44] financial. As you can  
29 remember, some of you can remember, there have  
30 been many things that the medical system has

1           refuted later on, drugs that have come out that  
2           have killed people, and it's after the fact, some  
3           of these drugs 30 years have been out on the  
4           market, they're pulled due to many people dying,  
5           not just, you know, some [inaudible - 01:39:03].  
6           Tobacco was one claimed to be safe, and was  
7           backed up by science. You had scientists touting  
8           this.

9  
10          So, anyone who's saying science said it and is  
11          looking at all this mainstream science, you need  
12          to look at the funding of that science and not  
13          only that, you need to look at who is  
14          participating in the science and who they are  
15          employed by and who they have association with.  
16          And you also need to look at, like Dr. Renee  
17          said, you need to look at all the factors going  
18          into that experiment. So, if you don't have a  
19          [inaudible - 01:39:34] placebo and you don't have  
20          a true unvaccinated population, that is not  
21          accurate science at all. So, they always  
22          [inaudible - 01:39:44], they will put out  
23          whatever the need to do to say what they want to  
24          say and make their point. So, everyone needs to  
25          be alert and more diligent, especially the  
26          department of health.

27  
28          And vaccines are [inaudible - 01:39:54] and  
29          without [inaudible - 01:39:55] and why would we  
30          all be lining up to get them? Why are we being

1 forced to do something that's for our own good?  
2 That would [inaudible - 01:40:06], why are people  
3 objecting? [inaudible - 01:40:08] love to talk  
4 this up to the funds created by fraudulent  
5 scientists, birth control [inaudible - 01:40:15]  
6 and misinformed parents. There is no coincidence  
7 that any scientist who has had anything to say  
8 opposing vaccines has then been discredited and  
9 caregivers had their practice removed. Some of  
10 these doctors have experienced that. So, on a  
11 [inaudible - 01:40:30] second most populated  
12 country in the world, and vaccines are [inaudible  
13 - 01:40:35] it would be [inaudible - 01:40:37]  
14 into overload how this affects public information  
15 and therefore decision making. If you can't see  
16 that, then we all need to sit down and have a  
17 PowerPoint presentation on how that affects us  
18 all.

19  
20 Corporate interests own 90 percent or more of the  
21 [inaudible - 01:40:50] and it has also crept into  
22 our university systems which train our medical  
23 professionals and publish most of our "research."  
24 Medical doctors receive an average of two hours  
25 [inaudible - 01:41:02 on diet throughout their  
26 medical career, training career. So that should  
27 tell you something. Good diet is the foundation  
28 of health, and anyone who's studied true health  
29 understands that. The medical community credits  
30 vaccines with eliminating polio and smallpox.

1 And as you saw, most of the vaccines that are  
2 credited with the eradication of diseases were  
3 actually introduced at the end of the, when  
4 sanitation and other efforts had already brought  
5 those numbers way down.

6  
7 I urge you all to do your own research, so you  
8 can see and think for yourself. But if a health  
9 professional tells you that vaccines are proven,  
10 safe and effective, and that the science is  
11 settled, well, he or she may indeed believe that  
12 [inaudible - 01:41:44] it's just not. It's mis-  
13 education. So, anyone who understands the  
14 science, like I already said, I already went over  
15 some of this stuff, but in order to provide truly  
16 informed consent the medical professionals should  
17 review with the patient the informational insert  
18 that comes with the vaccine. And instead, they  
19 hand out a little flyer that tells you a couple  
20 of the side effects and just [inaudible -  
21 01:42:07] the whole thing. So that is not  
22 informed consent. There is, again, no choice  
23 given in what the alternatives would be. These  
24 are all things that are required under informed  
25 consent that we know about alternatives, that we  
26 know about true efficacy of the vaccine.

27  
28 So, when all these things are corrupted by  
29 financial interests, we're not getting the  
30 informed consent that we need to be getting.

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And just the varying frequency of vaccine injury is simply not disclosed to parents. That is something that is not right in any way. Much of the reason for this is, like Dr. Joe said, that the specifics are completely unknown, because according to the FDA now, only 1 percent of the adverse events associated with vaccines are reported [inaudible - 01:43:51] in the vaccine adverse events reporting system. So, the reason for that is that most doctors aren't even aware [inaudible - 01:42:00]. And even if they do, many of them do their training, don't use that system. And of course, if they don't know about it, then probably the patients don't know about that, too.

So, it's also important to note here that there is actually [inaudible - 01:43:15] the 1986 National Pilot Vaccine Injury Act, when it was passed after the vaccine makers threatened to remove the DPT from the market because of the lawsuit [inaudible - 01:43:25] and serious injuries because of that vaccine. And that took away the liability from the vaccine companies, leading to the government assuming responsibility for those vaccine injuries.

So that conduct is not heard of, it's unheard of with any other medication in the pharmaceutical

1 industry. If you have a problem, if you have an  
2 adverse event associated with a medication, you  
3 should be able to file a lawsuit against that  
4 company that makes that medication. With  
5 vaccines, that is not the case. So that's a  
6 problem, and that's scary.

7  
8 And so, those companies having zero liability  
9 when people get hurt by their products, it's  
10 something that we really need to pay attention  
11 to. And out of the cases reported to them, very  
12 few of those actually reach the vaccine court,  
13 which is where they actually get compensation.  
14 And parents who have been through this process  
15 can testify to the fact that that court is  
16 corrupt and is not for them, it's not working for  
17 them. It's a very cruel system. It's not one  
18 that's built to support the grieving families.

19  
20 But even so, \$3.9 billion has been [inaudible -  
21 00:44:35] up to vaccine injuries since the court  
22 development. And this is all information that  
23 parents don't find out when they're making  
24 informed decisions. So, I think we should know  
25 this, as we make our decision.

26  
27 Parents who, [inaudible - 01:44:47] parents are  
28 routinely told that vaccines are safe and  
29 effective. This open letter to the [inaudible -  
30 01:44:50] that I have here sums up the safety

1 concerns of the global community, and these  
2 concerns need to be addressed. I personally have  
3 spoken with many parents who have, as you can  
4 understand, have specific concerns as parents,  
5 many parents who have vaccine injured children,  
6 and as all of the ones I have spoken to, none of  
7 them have been to vaccine court, even had their  
8 vaccine injuries reported. So that's just, if  
9 you start talking to people in the community,  
10 you'll see that none of the people that you talk  
11 to, and while their stories are all so similar,  
12 they did not make it to vaccine court. So, it's  
13 just the idea of [inaudible - 01:45:29] injuries  
14 that are out there.

15  
16 And so why aren't these parents' voices being  
17 heard, and why aren't their children being  
18 [inaudible - 01:45:36]? Why would the DOH  
19 blanket-adopt a recommendation from the advisory  
20 committee on mandating processes, and that's an  
21 organization which we've all seen has no regard  
22 for the rational and justified public outcry  
23 against mandatory vaccination projects. Should  
24 you feel [inaudible - 01:45:53] justify to  
25 people.

26  
27 In response to safety concerns, many responding  
28 [inaudible - 01:45:58] that although there it  
29 carries some risk, the benefits of mass  
30 compulsory vaccination outweighs the risk both

1 for the individual and the community. This is  
2 based on the assumption that vaccines are  
3 effective, and the [inaudible - 01:46:08 of the  
4 actual [inaudible - 01:46:09] type immunity.  
5 Thankfully, some independent researchers are  
6 continuing to put out non-biased information  
7 which we can find for now, but it becomes more  
8 and more difficult to find decent information.

9  
10 So, we now know, based on the independent  
11 research, that vaccines, some vaccines are not  
12 defective from the beginning, they are low  
13 responders. And I did cite a lot of the work  
14 here, [inaudible - 01:46:35]. There is currently  
15 no way to determine if [inaudible - 01:46:39] is  
16 going to a low responder when they receive that  
17 vaccine. So, you don't know if that vaccine is  
18 going to be effective from the moment you get it.  
19 So that's something that we need to look into.

20  
21 And most other vaccines, the ones that you have  
22 are effective [inaudible - 01:46:55] efficacy  
23 that wanes over time, but few of our vaccines  
24 [inaudible - 01:46:59] ten years, which is one of  
25 the reasons why you are [inaudible - 01:47:02].

26  
27 At what point will we say, enough is enough?  
28 We're requiring our children to get vaccines that  
29 we don't even have and claiming that if they  
30 don't, they endanger the herd. So, what about

1 us? So, our kids are getting these vaccines,  
2 there's [inaudible - 01:47:17] third MMRs out,  
3 and we only have one. So, if our kids don't get  
4 these MMRs, they're a danger to society, but we  
5 don't have it. None of the adults have it, and  
6 they're a danger [inaudible - 01:47:26]. So, it  
7 doesn't make any sense.

8  
9 On the concept of herd immunity, which is a term  
10 coined by Ketrick in the 1930s, which pertained  
11 to natural immunity and [inaudible - 01:47:37],  
12 has been redefined by the medical community to  
13 [inaudible - 01:47:41] vaccines based on the  
14 assumption that they provide immunity in terms of  
15 the [inaudible - 01:47:46]. If you talk to  
16 anyone about vaccines, they will cite herd  
17 immunity as the reason why we all need to be  
18 vaccinated and [inaudible - 01:47:51] each other,  
19 and it's a completely misuse of the term.

20  
21 The medical community and media community play  
22 into that, too [inaudible - 01:47:58]. There's a  
23 hyper focus on those 15 vaccine-preventable  
24 diseases, even though [inaudible - 01:48:06].  
25 For example, if there was an outbreak of another  
26 non-vaccine preventable disease, we wouldn't have  
27 any vaccine to blame. But when we have them to  
28 blame, then they will be blamed. They became  
29 pretty common in rarely complicated childhood  
30 diseases, life-threatening, and [inaudible -

1 01:48:26] tangential to this, immune to the  
2 routine childhood illness varicella. When I was  
3 a kid, my mom tried to bring me around kids with  
4 chicken pox, so I could get chicken pox immunity.  
5 And now, it's a terrifying, life-threatening  
6 thing, and if there's an outbreak, we're all  
7 going to -- it's just not accurate.

8  
9 The medical community continues to up the  
10 percentage of vaccinated people who must obtain  
11 in order to achieve their version of [inaudible -  
12 01:48:47]. The problem is, it's an illusion.  
13 Even in countries with 95 to 99 percent  
14 vaccination [inaudible - 01:48:54], which is in  
15 Quebec, Canada, and China, measles outbreaks can  
16 still occur, even vaccinated people can contract  
17 them peri-natal, as we have seen when vaccinated  
18 individuals have been the carriers that brought  
19 the disease back into the United States, and when  
20 vaccinated people are the ones that get sick in  
21 an outbreak.

22  
23 This is because even in [inaudible - 01:49:14]  
24 can wane over time. Whereas natural [inaudible -  
25 01:49:18] and a lifelong immunity, which up until  
26 1989, when the second MMR was added to the  
27 schedule, doctors were taught that one dose of  
28 MMR would provide lifetime immunity. We can  
29 vaccinate everyone and there will still be  
30 measles and other diseases. The use of the term

1 herd immunity and continuing to refer to vaccine  
2 coverage is misinformed and misleading. The use  
3 of these terms to pressure patients into  
4 vaccinating their own children is manipulative  
5 and unprofessional.

6  
7 I have other concerns on the measles/MMR. Like I  
8 said, 55 percent of Americans are not in  
9 compliance with the schedule. So, our kids are  
10 going to be required to be in compliance if we  
11 have them in school, to make them be in  
12 compliance. I think [inaudible - 01:49:59]  
13 quickly by explaining why only 13 percent have  
14 measles, anybody, that's after two doses of MMR.  
15 The second [inaudible - 01:50:06] is only six  
16 [inaudible - 01:50:08]. So, what's the  
17 [inaudible - 01:50:09].

18  
19 The vaccination effort will push measles into  
20 more vulnerable populations, young infants and  
21 older adults [inaudible - 01:50:17]. For the  
22 vaccine, when we had a natural wild immunity and  
23 the mothers carried as well the immunity, they  
24 were able to breast feed their babies, the babies  
25 got the immunity, they were protected in that  
26 really vulnerable period. Now, the moms don't  
27 have that to pass on, so who's getting sick? The  
28 infants under one year, and older people. And  
29 most of those populations don't handle it well.  
30 So, we really need to think about these things,

1                   these interventions that we're putting out and  
2                   whether they're really worth it. Because it's  
3                   better when we just had it [inaudible -  
4                   01:50:46].

5  
6                   So, mumps was also another recent childhood  
7                   disease with rare complications, and the  
8                   community has also put at [inaudible - 01:50:59]  
9                   as we can see with outbreaks in fully vaccinated  
10                  15-year-olds.

11  
12   SPEAKER:        [Inaudible - 01:51:07]. You can continue later  
13                   on. We have to be out of here. We can send a  
14                   link of this taping to the department of health  
15                   as part of your testimony. Thanks everybody.

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I, Mo Vanderwater, do hereby certify that I have listened to the recording of the foregoing; further that the foregoing transcript, Pages 1 through 73, was reduced to typewritten form from the digital recording; and that the foregoing is an accurate record of the recording as above transcribed in this matter.

DATED this 20<sup>th</sup> Day of March, 2019.



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