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February 21, 2019

The Honourable John Horgan, Premier of British Columbia  
West Annex Parliament Buildings  
Victoria, BC V8V 1X4

The Honourable Adrian Dix, Minister of Health  
Government of British Columbia  
Room 337 Parliament Buildings  
Victoria, BC V8V 1X4

Dear Premier Horgan and Health Minister Dix

As parents of children who have been injured and killed by vaccines, we can no longer sit passively as efforts are being put forward to eliminate informed consent in British Columbia. The efforts to undermine informed consent and therapeutic choice results from the biased and distorted reporting on the perceived risks posed by those who choose not to vaccinate or who vaccinate selectively.

This letter and attachments is to inform you of the impact of current vaccine policies and practices. It is our expectation that armed with this information you will act in ways to safeguard and secure our rights and freedoms rather than erode them.

### **Vaccines Are Voluntary**

Currently all vaccines in Canada are voluntary. It is imperative they remain voluntary as vaccination is an invasive medical treatment with known unintended adverse effects including permanent disability and death. In Canada we uphold the medical ethic that *"where there is risk, there must be choice"*.

Any effort to make vaccinations mandatory in BC would be a violation of the **Canadian Charter of Rights and Freedoms**. The Charter protects us from government actions that violate our rights and freedoms including the freedom of conscience and religion and the legal right to security of the person. Mandating vaccines is a clear and serious violation of these rights and freedoms.

Mandating vaccines would also violate the medical ethic of informed consent, the **Nuremberg Code**, developed in response to the medical experimentation by the Nazi

government in Germany, and the **Universal Declaration of Bioethics and Human Rights** - Article 6 - Consent, to which Canada is a signatory.

*“Any preventive, diagnostic and therapeutic medical intervention is only to be carried out with **the prior, free and informed consent** of the person concerned, based on adequate information. The consent should, where appropriate, be expressed and **may be withdrawn by the person concerned at any time and for any reason** without disadvantage or prejudice.”*

The medical industry ought to be able to win the argument for universal vaccination on its own merits without resorting to removing our ethical right to informed consent. The vaccine policy being actively lobbied for represents an all-out assault on the basic human right to defend our bodily integrity and the right to refuse unwanted medical treatments. It is endeavouring to make citizens compliant with a fundamental violation of our most basic liberties.

Further, Canada is the only G7 Nation *without* a national vaccine injury compensation program. To consider imposing vaccinations by coercion, without any fair and accessible system of compensation for vaccine injury and death, is unacceptable by any standard of a modern and ethical society.

### **The Measles Crisis Is Manufactured**

There is **no medical justification** to advocate for the elimination of informed consent and basic human rights in British Columbia. The alarm around the few incidents of measles or mumps is a manufactured crisis and is not based on sound science.

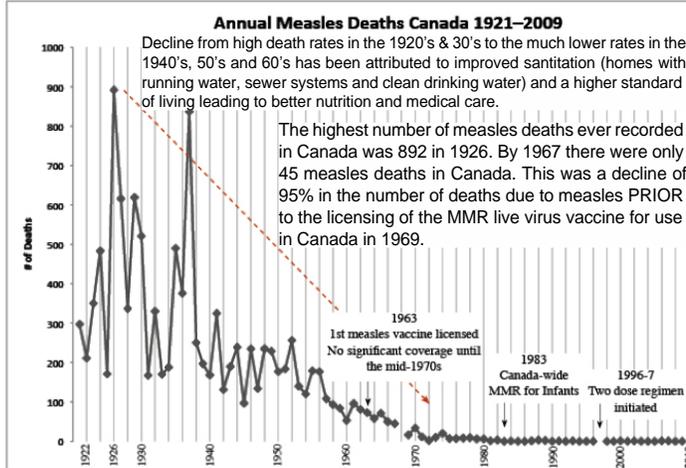
The problem with measles outbreaks in British Columbia is not low vaccination rates. It is the failure of public health, the public, and the media to understand how herd immunity works. Herd immunity will still result in isolated outbreaks. When there is herd immunity it simply means that the infection cannot spread in a sustained way. To treat every case of measles as a medical crisis is fear mongering and fraudulent.

Neil Rau, an infectious disease specialist, and Richard Schabas, MD, Ontario's former Chief Medical Officer, stated in their October 2018 article in the Globe and Mail – **Stop the Hysteria Over Measles Outbreaks** - *“The borderline hysteria fueled by the media and public health that greets a few cases is unwarranted . . . Our current levels are more than adequate to achieve herd immunity.”* They also stated, *“At current rates, Canada can expect to see a death from acute measles about **once every hundred years or so.**”*

In developed nations such as Canada, measles is a benign illness except in rare circumstances where there is inadequate nutrition, specifically vitamin A. Prior to the introduction of the measles vaccine in the 1960's, measles was a routine part of childhood. Measles exposure provides lifelong immunity and protects infants due to maternal immunity transfer. The death rate in Canada due to measles, prior to the introduction of the measles vaccine, was exceedingly rare as can be seen in the chart below.

**Measles Deaths in Canada** graph from [VCC Response to the 2017 Ontario Vaccination Exemption Form](#)

Mortality rates for measles are found in Statistics Canada tables. VCC created the graphic below from that data. It can be seen that mortality rates declined steadily prior to vaccines having an effect on these rates, just as shown above in the USA and the UK. We have described the reasons for this decline on the chart.



**Calculating Risk**

For the last 20 years shown on the chart (1990–2009) for the entire population of Canada the number of deaths from measles has been either 0 or 1. This is very unlikely to change.

This means the chances of death by measles for any Canadian is either zero or 1 chance in 33.6 million (the 2009 population). In other words, the risk is infinitesimal. And actually much lower than the risk of serious damage from MMR vaccines.

Quotes from [Oct 2018, Globe and Mail](#) article: **Stop the hysteria over measles outbreaks** by Neil Rau and Richard Schabas

Neil Rau is an infectious-diseases specialist and medical microbiologist based in Oakville, Ont., and an assistant professor at the University of Toronto. Richard Schabas is a former public-health physician and was Ontario's chief medical officer of health 1987-97.

“At current rates, **Canada can expect to see a death from acute measles about once every hundred years or so.** The borderline hysteria, fuelled by the media and public health, that greets a few cases is unwarranted...In Ontario, for example, all exemptions (both medical and philosophical) under the school-immunization law have hovered around 2 per cent since legislation was introduced 35 years ago – a small and stable number. Our current levels of immunization are more than adequate to achieve herd immunity, which means that measles cannot spread in a sustained way. This protects everyone, even those who have not been immunized.”

Produced for Vaccine Choice Canada by Maximum Graphics, February 2019

Were the measles vaccine able to provide lifelong immunity with less injury and mortality than natural exposure, its universal use might be worth considering. The scientific evidence, however, is that the risk of permanent injury and mortality is significantly higher with the measles vaccine than natural exposure to measles. A large three-year Ontario study found that following their 12 months MMR, 1 in 168 children sought emergency medical care because of serious vaccine reactions.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3236196/?tool=pmcentrez>

I repeat. In a free and moral society, where there is risk, there must be choice.

To paraphrase John F Kennedy:

*There is little value in insuring the survival of our children if our rights and freedoms do not survive with them.*

**A Failing State of Children’s Health**

The undisputed fact is we are experiencing “*a failing state of children’s health*”. This is not my opinion; rather it is the conclusion of **A Report for Children First Canada** – August 2018. There is an explosion of allergic/anaphylactic diseases, autoimmune

diseases, mental illness, and cancers that now afflict infants and children on a scale never before seen. This is especially evident in the epidemic increase in neurological disorders including autism, learning disabilities, ADHD, and seizure disorders.

- 1 in 6 children has a learning disability
- 1 in 8 children has asthma
- 1 in 10 children has Attention Deficit Hyperactivity Disorder
- 1 in 20 children has a seizure disorder
- 1 in 30 children has a mental disorder

There is compelling evidence, much of it developed in the last ten years, that the injection of vaccine ingredients is contributing to the significant and permanent injury, even death of our infants and children. The level of public concern with the current vaccination practice has reached a crisis and the amount of scientific evidence of serious injury from vaccine policies and practices is now so compelling, that to continue ignoring it **is morally unacceptable, even criminal**, and can no longer be tolerated.

### **The Current Status of Vaccine Safety**

The demonstrable truth is that what the vaccine industry, government regulators and mainstream media *say* science says about vaccine safety and effectiveness and *what science actually tells us* are two completely different and contradictory things. Included with this letter is information and published scientific research that reveals the current state of vaccine safety. It explains the recognized ability of vaccine ingredients to cause neurological and immunological harm.

What is painfully evident by reviewing the scientific literature is that **no vaccine** on the childhood vaccination schedule **has undergone safety testing against a neutral placebo**. This fact is documented thoroughly in the ICAN statement to HHS in the United States in the attachments. You cannot determine if a medical product is safe unless it is tested against a neutral placebo.

Needless-to-say, to accelerate the current vaccine practice by eliminating the right of parents to make informed decisions for their children, and to impose the injection of these complex biochemical ingredients with known risks of neuroimmune injuries and autoimmune disorders into healthy individuals would only add to the injuries and deaths of our children. We believe children have a right to be healthy, and that includes those who would be injured by vaccines.

*The “greatest risk to humanity” is not the unvaccinated,  
but failure to acknowledge the potential harmful effects of vaccination.*

We need an advocate who will do real oversight, ask the questions, dig into the new and emerging scientific literature, and demand the kind of accountability that will

help safeguard our children. Will the BC Government be this advocate for truth? Will the BC Government hold vaccine manufacturers and our government regulators accountable? Will the BC Government safeguard our basic human right to voluntary, informed consent and the sovereignty of the human body? Will the BC Government honour the 'precautionary principle'?

An indisputable principle of life is:

When you undermine choice, it will cause your own choices to be undermined. When you undermine freedom, it will cause your own freedom to be undermined. When you undermine informed consent, it will undermine your own right to informed consent. Whatever you cause another to experience, you will one day experience.

We await your considered response.

Sincerely,

Ted Kuntz, Parent of a Vaccine Injured Child now deceased  
Vice President - Vaccine Choice Canada  
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## Enclosures

1. **Overview of Concerns - pdf**
2. **ICAN Letter to HHS – December 31, 2018**  
<https://childrenshealthdefense.org/wp-content/uploads/ican-reply-december-31-2018.pdf>
3. **Open Letter from International Organizations to the WHO on the Issue of Vaccine Safety (September 2018)**  
<https://www.efvv.eu/open-letter-to-the-who-from-international-organisations/>

4. **Response to Raising Canada Report – VCC**  
<https://vaccinechoiccanada.com/in-the-news/children-first-canada-report-ignores-vaccine-injury>
5. **Questions for Canada’s Chief Medical Officer – VVC**  
<https://vaccinechoiccanada.com/in-the-news/questions-for-canadas-chief-medical-officer>
6. **Vaccine Safety Report(s) – Overview and critique of Canada’s vaccine adverse events reporting systems:**  
<https://vaccinechoiccanada.com/in-the-news/review-of-the-2018-caefiss-summary-report/>
7. **Measles Deaths In Canada – graph**  
<https://vaccinechoiccanada.com/resources/reported-measles-cases-and-deaths-in-canada/>
8. **Measles Cases in Canada**  
<https://vaccinechoiccanada.com/wp-content/uploads/vcc-number-measles-cases-canada.pdf>