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28 April 2017

Committee Secretary  
Joint Standing Committee on Foreign Affairs, Defence and Trade  
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### 1.0 Introduction

The Australian Vaccination-skeptics Network Incorporated (AVN) welcomes this opportunity to inform the committee on the status of freedom of religion and belief in Australia as it applies to the issue of vaccination, and in the event public hearings are conducted, request that two nominated representatives of the AVN be invited to appear as witnesses.

We are deeply concerned about the recent direction of public health policy regarding vaccination, the disturbing trend to strip away the freedom to object to vaccination on the grounds of religious belief, secular belief, or conscience without adequate rationale, and the increasing tendency of public health officials and politicians to scapegoat the unvaccinated as being responsible for disease outbreaks when vaccine failure provides a more plausible explanation.

The abolition of belief exemptions for the purpose of eligibility to Commonwealth childcare subsidies, as well as the abolition of belief exemptions for the purpose of enrolment in Victorian childcare and kindergarten services has had a severe impact on many of our members, some of whom are no longer able to access the paid workforce or study.

## 2.0 Scope and Interpretation

Our submission addresses Terms of Reference 3 and 4 as these pertain to the issue of vaccination in Australia. Conventional acronyms have been adopted throughout the submission. For example, the acronym ICCPR is used to refer to the International Covenant on Civil and Political Rights.

## 3.0 Recommendations

#	Recommendation
1	The Australian Constitution <sup>1</sup> should be amended to include Article 18 of the ICCPR.
2	A Royal Commission into the effectiveness and safety of vaccination, including herd immunity theory, with broad terms of reference, should be convened immediately.
3	Pending a Royal Commission into Vaccination, A New Tax System (Family Assistance) Act 2009 (Cth) <sup>2</sup> should be amended immediately, to reinstate the right to conscientiously object to vaccinations on religious and secular belief, or conscience grounds.
4	Pending a Royal Commission into vaccination, The Australian Immunisation Act 2015 (Cth) <sup>3</sup> should be amended immediately to include a provision to opt-out of being listed on the Australian Immunisation Register on the grounds of religious or secular belief against vaccination.
5	<p>The Human Rights (Parliamentary Scrutiny) Act 2011 (Cth)<sup>4</sup> (HRPSA) should be amended to include the following.</p> <p>(1) a provision requiring that all enactments of the parliament are compatible with human rights protected under the international instruments listed in section (3) subsection (1) of the HRPS Act, unless there is a legitimate rationale to limit such rights informed by the highest standards of evidence.</p> <p>(2) a judicial power to invalidate an enactment (or section of an enactment) which is incompatible with human rights protected under the international instruments listed in section (3) subsection (1) of the HRPS Act, unless there is a legitimate rationale to limit such rights informed by the highest standards of evidence.</p>

<sup>1</sup> Commonwealth of Australia Constitution Act  
[http://www.austlii.edu.au/au/legis/cth/consol\\_act/coaca430/](http://www.austlii.edu.au/au/legis/cth/consol_act/coaca430/)

<sup>2</sup> A New Tax System (Family Assistance) Act 1999  
<https://www.legislation.gov.au/Details/C2017C00014>

<sup>3</sup> Australian Immunisation Act 2015 (Cth)  
<https://www.legislation.gov.au/Details/C2017C00012>

<sup>4</sup> Human Rights (Parliamentary Scrutiny) Act 2011 (Cth)  
<https://www.legislation.gov.au/Details/C2016C00195>

#### 4.0 About the AVN

The AVN is a not-for-profit, incorporated association, founded in 1994 in New South Wales by a group of parents and health professionals who were concerned about the quality of scientific evidence purporting to support the effectiveness and safety of vaccination as a means to preventing disease and achieving good health.

We believe that the promotion and management of children's health is, first and foremost, the responsibility of parents, and not the state or medical profession. It is only on occasions when parents neglect their responsibilities to promote and protect their children's health should the state be authorised to enter the private sphere of child-rearing. Non-vaccination of perfectly healthy and well-cared for children is not one of those occasions.

We acknowledge and promote the existence of a scientific controversy pertaining to the effectiveness and safety of vaccines, and to this end, support every individual's right to exercise choices about vaccination for themselves or their children which have been informed by the highest standards of evidence, and free from coercion, compulsion or sanctions by the state.

We believe broadly in the concept of a social contract, but consider that no such contract arises in the case of mass vaccination, and the alleged need to achieve threshold vaccination rates under herd immunity theory, which we assert is a pseudoscience.

Although many of our members are sceptical about the purported effectiveness of vaccines, with some even questioning the veracity of the germ theory of disease entirely, other members were once wholesale supporters of vaccination, realising specific safety concerns, only after witnessing serious adverse side-effects in their children or other loved ones, many of which side-effects are routinely denied by government and medical authorities as having arisen from vaccination, despite there being no other trigger to which to plausibly ascribe them.

However, one belief all members share, is that in the absence of rigorous and compelling evidence to support the effectiveness and safety of vaccination, the right to decline vaccination is an inalienable one.

#### 5.0 Understanding the controversy surrounding vaccination

Vaccine scepticism, and debate about the effectiveness and safety of vaccines, is as old as the practice itself, yet in recent years, there has been a concerted effort by medical groups and mainstream media, to frame the vaccination debate as being non-existent, by employing simplistic marketing slogans such as 'the science is settled' or 'vaccines save lives', and casting vaccine sceptics as dangerous disease carriers, for the dual purpose of providing a locus of blame when vaccines are observed to fail, and expanding market penetration of vaccination. To these ends, government officials are also employing propaganda methods to promote vaccination using nothing

more than personal anecdote<sup>5</sup>.

Alternatively, it is framed as a debate only about the existence and frequency of minor side-effects, not about how often vaccines cause chronic disease, disability or death, or whether vaccines actually work in the first place.

This wasn't always the case. There was a time, not so long ago that doctors and our elected representatives were able to freely express concerns about vaccination and the need to preserve freedom of choice over what is an invasive medical procedure carrying the risk of chronic disease, disability or death.

Former Australian Greens leader and pro-vaccination GP, Bob Brown, stated in the Senate in 1997<sup>6</sup>, that *"there is very much contradictory evidence and debate, even in scientific and medical circles, about vaccination."*

The controversy can be understood under the following headings.

Controversy
Vaccines did not save us from high rates of death due to infectious disease
The alleged eradication of smallpox and near-eradication of poliomyelitis was achieved through improvements in living standards and diagnostic substitution.
Conflicts of interest are ubiquitous in medical science and don't always involve money
Vaccination is at best a zero-sum game: it does not reduce the net burden of all-cause infectious disease
Vaccine-induced herd immunity is disputed
Diagnostic bias in relation to disease notifications in high exemption areas results in invalid conclusions.
Healthy unvaccinated children do not pose a greater risk than other children merely by virtue of their vaccination status.
Recipients of live attenuated virus vaccines have been documented to transmit vaccine- strain viruses to close contacts.
Vaccines have not reduced the overall burden of disability and chronic disease and have possibly contributed to its increase.

<sup>5</sup> 2017, Time for a wide-ranging & independent inquiry into the effectiveness and safety of vaccination, AVN Inc.  
<https://avn.org.au/2017/03/time-wide-ranging-independent-inquiry-effectiveness-safety-vaccination/>

<sup>6</sup> 11 November 1997, Senate, Official Hansard, p. 8725  
<http://www.apf.gov.au/binaries/hansard/senate/dailys/ds111197.pdf>

Controversy
Vaccines provide a plausible explanation for Australia's high rates of immune system mediated diseases.
There is a case for a plausible link between rising autoimmune disease and vaccination.
The health effects of multiple vaccines given simultaneously as part of the schedule have not been tested rigorously.
Repeated vaccination with an antigen has been shown to trigger autoimmunity in mice without a genetic susceptibility.
Testing causation between vaccination and autoimmunity is problematic using conventional epidemiological methods.
Sub-populations believed to be susceptible to autoimmune conditions following vaccination have been Identified.
Autoimmune diseases associated with or following vaccination.

Although it is beyond the scope of this submission, overviews of each of the above topics are available on our website for the benefit of those members of the committee seeking to acquire a deeper understanding of the relevant issues.

## 6.0 Beliefs or conscience underlying vaccine opposition and/or scepticism

Apart from general scepticism about the purported effectiveness and safety of vaccines, some of the reasons our members have a deeply held belief against vaccination are provided below.

### 6.1 First-hand experience of vaccine injury

Many parents, who have personally witnessed severe, adverse vaccine reactions in their own children, would never, ever consider vaccinating their child again. They hold a strong and intense conviction that vaccines are harmful and dangerous to their child's health. For this reason, it is the height of cruelty to require them to continue vaccinating their children.

Parents should never be forced to do something that goes against their instinctive drive to protect their own child from harm. There is no stronger bond than that between a parent and their child, and no government should ever try to interfere with this bond unless there is some compelling reason. There is no scientific evidence to show that unvaccinated children pose a risk to others or the public health generally.

Parental rights seem to be under attack in Australia, if not worldwide. It is our strongly held belief that we as parents have the right, and duty, to make the important life and death choices during our child's life, until such time as they are able to make these for themselves.

The Therapeutic Goods Administration (TGA) acknowledges significant under-reporting<sup>7</sup>.

*It is generally acknowledged that adverse events are under-reported around the world, with estimates that 90-95% of adverse events are not reported to regulators.*

Despite this admission, there is a culture of vaccine injury denialism operating in Australia.

## 6.2 Proceeds of abortion are utilised in some vaccines licensed in Australia

Several vaccines licensed in Australia utilise human diploid cells derived from aborted foetal tissue (WI-38, MRC-5)<sup>8</sup>.

*Winstar Institute 38 (WI-38), human diploid lung fibroblasts were derived from the lung tissues of a female fetus aborted because the family felt they had too many children in 1964 in the United States.<sup>9</sup>*

*Medical Research Council 5 (MRC-5), human diploid cells (cells containing two sets of chromosomes) were derived from the normal lung tissues of a 14-week-old male fetus aborted for "psychiatric reasons" in 1966 in the United Kingdom, Eagle's Basal Medium in Earle's balanced salt solution with bovine serum.<sup>10</sup>*

Brand & Manufacturer	Vaccine Type	Aborted Foetal Cell Line
Pro-Quad CSL Limited/Merck & Co Inc	Live attenuated Measles Mumps Rubella Varicella Viruses (MMRV)	WI 38 MRC 5
Varivax Refrigerated CSL Limited/Merck & Co Inc	Live attenuated Varicella Virus	WI 38 MRC 5
Zostavax bioCSL/Merck Sharp & Dohme (Australia) Pty Ltd	Live attenuated Varicella-Zoster Virus	WI 38 MRC 5

<sup>7</sup> <https://www.tga.gov.au/media-release/new-web-service-helps-consumer-reporting-side-effects>

<sup>8</sup> Australian Immunisation Handbook, 10<sup>th</sup> Edition, p 497  
[http://www.health.gov.au/internet/immunise/publishing.nsf/content/7B28E87511E08905CA257D4D001DB1F8/\\$File/Aus-Imm-Handbook.pdf](http://www.health.gov.au/internet/immunise/publishing.nsf/content/7B28E87511E08905CA257D4D001DB1F8/$File/Aus-Imm-Handbook.pdf)

<sup>9</sup> [http://vaccines.procon.org/view.resource.php?resourceID=005206#wi\\_38](http://vaccines.procon.org/view.resource.php?resourceID=005206#wi_38)

<sup>10</sup> <http://vaccines.procon.org/view.resource.php?resourceID=005206#mrc>

Brand & Manufacturer	Vaccine Type	Aborted Foetal Cell Line
Quadracel Sanofi Pasteur Pty Ltd	Diphtheria-Tetanus acellular Pertussis-inactivated poliovirus (DTPa-IPV)	MRC 5
Havrix Junior GlaxoSmithKline	Formaldehyde-inactivated Hepatitis A Virus	MRC 5
Havrix 1440 GlaxoSmithKline	Formaldehyde-inactivated Hepatitis A Virus	MRC 5

McCullagh (1987) reported on one of the methods used in harvesting foetal tissue in Sweden<sup>11</sup>.

*They would puncture the sac of a pregnant woman at 14 to 16 weeks, put a clamp on the head of the baby, pull the head down into the neck of the womb, drill a hole into the baby's head and attach a suction machine to remove the brain cells... At 16 to 21 weeks, they would do prostaglandin abortions where a chemical is injected into the womb causing the woman to go into a mini-labor and pass the baby. Fifty percent of the time, the baby would be born alive, but that didn't stop them. They would simply open up the abdomen of the baby with no anaesthesia, and take out the liver and kidneys, etc.*

Make no mistake. The abortions were done this way to ensure intact organs and tissue for research.

## 6.2 Use of vaccines containing the proceeds of abortion violates the teachings of pro-life religions

To use vaccines prepared with the products of abortion is a moral evil, and a direct violation of the teachings of pro-life religions, which include Christianity, Judaism, Islam, and Buddhism.

Christian teachings require observance of the the 10 commandments, the sixth being "Thou shalt not kill" (Exodus 20:13 & Deuteronomy 5:13). Abortion is considered a sin, as it is the killing of an unborn baby. It follows that using vaccines containing human diploid cells derived from aborted fetuses, would also be a sin and would put the devout Christian in danger of breaking this commandment of God.

Children are recognized from God at the point of conception (Genesis 4:1, 17, and Jeremiah 1:5), are knit together by God in the womb (Psalm 139:13-16; Psalm 22:10-11; & Galatians 1:15), are blessings from God (Genesis 1:28; Genesis 4:1; and Psalms 127:3 and 113:7-9), are valued and loved

<sup>11</sup> 1987, McCullagh P, The foetus as transplant donor : scientific, social, and ethical perspectives  
<http://catalogue.nla.gov.au/Record/2609854>

(Matthew 18:1-14 and 19:13-15), are created in His image (Genesis 1:27), and their killing is condemned (Psalm 106:35, 37-38). The prophet Amos condemns the Ammonites because they “ripped open expectant mothers in Gilead” (Amos 1:13) and child killing was one of the major reasons that God’s anger burned against the Kingdom of Israel bringing about their destruction and exile (2 Kings 17:17-18).

### 6.3 Personal divine revelation

In the Mormon religion, individual members of the Church may receive personal revelation by the power of the Holy Ghost. Every person has the privilege and the right to exercise these gifts and in their own affairs, in the raising of their children in the way they should go, in the management of their own business, every individual within his own area of responsibility has the right to receive revelation by the Holy Ghost.<sup>12</sup> So, those who believe that they have received personal revelation not to vaccinate have a duty to obey that message or prompting from God. They also believe that abortion is a reprehensible sin as well.

Their own founder, Joseph Smith, also stated: "Trust in God when sick, and live by faith and not by medicine or poison."

### 6.4 Animal Rights and Veganism

Animal products are employed in the manufacturing process, and end product of most, if not all vaccines. For example, the Measles Mumps Rubella vaccine manufactured by CSL/Merck (MMR II) utilises chick embryo cell culture, human albumin, and foetal bovine serum.<sup>13</sup> For this reason, many vegans and advocates of animal rights have a deeply-held belief against the use of all vaccines.

*Vaccine testing in particular consumes an estimated 2.5 million animals every year because vaccines are often produced by weakening, inactivating, or detoxifying a virulent microorganism or toxin. Each batch of the finished product is then tested on animals, causing them pain, suffering, and death.*

*Safety testing is carried out to try to make sure that a safe immune response is observed and that people who are inoculated with the vaccine are not infected by the pathogen. A common study is the “abnormal toxicity test,” in which guinea pigs and mice are injected with a biological product and observed for one week. The test may be repeated multiple times for the same product until all of the following criteria are met:*

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<sup>12</sup> 1980, Articles of Faith: Your Right to Revelation By President Harold B. Lee (1899–1973)  
Eleventh President of the Church

<https://www.lds.org/new-era/2006/03/articles-of-faith-your-right-to-revelation?lang=eng>

<sup>13</sup> <http://vaccines.procon.org/view.resource.php?resourceID=005206#mmr>



- *All the animals survive the observation period.*
- *None of the animals show any weight loss at the end of the observation period.*
- *None of the animals show toxic signs.*

*Numerous other disease-specific animal safety tests have also been developed, such as the “mouse weight-gain test,” which is used for the whole-cell pertussis vaccine. In this test, mice injected with the vaccine are observed for weight gain and to see whether they are alive or dead after 72 hours and again after one week.*

*Another test, for the oral polio vaccine, called the “neurovirulence test,” is also devastating to animals. In this test, rhesus or cynomolgus monkeys receive an injection of the vaccine in their spines, are observed for up to three weeks for signs of paralysis, and are then killed and examined.*

*“Potency testing” is carried out to determine the effectiveness of inactivated (nonliving) vaccines in protecting the recipient against bacterial or viral infections. These studies use “challenge” tests, in which large numbers of animals—usually mice, rats, guinea pigs, rabbits, and/or chickens—are inoculated with a vaccine and then “challenged” through purposeful infection with the disease that the vaccine is designed to protect against.*

*To test the potency of a single batch of rabies vaccine, for example, live rabies virus is injected through the skulls and directly into the brains of 160 mice. Some of these mice are given the protective vaccine first, but some are not. These cranial injections are extremely painful and completely irrelevant to the normal route of infection. Approximately half of the animals develop and/or die of rabies, a painful neurological disease involving tremors, loss of control over one’s body, the inability to swallow, and severe weight loss. Analytical methods have been developed by rabies vaccine manufacturers, but they are not yet validated or accepted for regulatory use. Until validation, countless animals will continue to die painful deaths<sup>14</sup>.*

## 7.0 Article 18 of the International Covenant on Civil and Political Rights

The right to freedom of thought, conscience and religion along with the right to freedom of expression are fundamental to a free and open society. As an inclusive organisation, we welcome members with diverse backgrounds, religions and beliefs. We approve of the wording of Article 18, which is sufficiently broad to protect all belief systems, including those not derived from conventional religious doctrine.

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<sup>14</sup> People for the Ethical Treatment of Animals (PETA)  
<http://www.peta.org/issues/animals-used-for-experimentation/us-government-animal-testing-programs/food-drug-administration/>

## Recommendation 1

The Australian Constitution<sup>15</sup> should be amended to include Article 18 of the ICCPR.

### 8.0 Freedom of religion, belief and conscience is being violated in Australia without adequate rationale

Public health policy took a sinister turn during 2015, when, for the first time, the federal parliament, and two state parliaments, enacted intrusive vaccination laws which limited the right to freedom of belief, religion or conscience, the right to not be subjected to arbitrary or unlawful interference with one's privacy, family, home or correspondence (Article 17), the right to not be subjected without one's free consent to medical or scientific experimentation (Article 7), as well as economic rights protected under the ICESR, for example, the right to social security, and the right to work<sup>16</sup>.

As vaccination is not compulsory in Australia, the question arises about the underlying rationale for conditioning means-tested subsidies and benefits on a requirement for children to be vaccinated.

All three laws were enacted without adequate rationale to limit these rights, and all three laws were justified on spurious public health grounds including the claim that diseases were re-emerging due to plummeting vaccination rates, and that the rate of vaccine objection was increasing exponentially. In fact, Australia's vaccination rate was at an historic high when those laws were enacted, and a recently published study found that the overall rate of vaccine objection was stable between 2002 and 2013<sup>17</sup>.

Amendments to A New Tax System (Family Assistance) Act 1999 (Cth)<sup>18</sup> abolished the right conscientiously object to vaccination on the grounds of religion, belief and conscience for the purpose of eligibility to Commonwealth childcare subsidies and family tax benefits.

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<sup>15</sup> Commonwealth of Australia Constitution Act  
[http://www.austlii.edu.au/au/legis/cth/consol\\_act/coaca430/](http://www.austlii.edu.au/au/legis/cth/consol_act/coaca430/)

<sup>16</sup> International Covenant on Economic, Social and Cultural Rights, Articles 6 and 9  
<http://www.ohchr.org/EN/ProfessionalInterest/Pages/CESCR.aspx>

<sup>17</sup> 2016, Beard et al, Trends and patterns in vaccination objection, Australia, 2002–2013, Medical Journal of Australia  
<https://www.mja.com.au/journal/2016/204/7/trends-and-patterns-vaccination-objection-australia-2002-2013>

<sup>18</sup> 2015, Social Services Legislation Amendment (No Jab, No Pay) Bill 2015  
<https://avn.org.au/wp-content/uploads/2016/03/No-Jab-No-Pay-Bill-as-passed-by-both-houses.pdf>

In addition, no provision was made in the Australian Immunisation Register Act 2015 (Cth)<sup>19</sup>, also enacted by the federal parliament during 2015, to opt out of being included in the cradle-to-grave Australian Immunisation Register, on the grounds of religion, belief or conscience,.

There is no rigorous evidence to show that healthy unvaccinated people pose a risk to others. Any evidence purporting to show this has been derived from studies tainted by diagnostic bias, lack of randomisation, blinding and placebo controls.

It was incumbent on our elected leaders to convene a Royal Commission into the effectiveness and safety of vaccination, and the fallacious herd immunity theory in particular, before going down the path of curtailing the freedom of belief against vaccination, under the guise of protecting the public health. Such intrusive, draconian legislation needs to be informed by evidence not rhetoric. Drastic measures call for extraordinary evidence.

### **Recommendation 2**

A Royal Commission into the effectiveness and safety of vaccination, including herd immunity theory, with broad terms of reference, should be convened immediately.

### **Recommendation 3**

Pending a Royal Commission into Vaccination, A New Tax System (Family Assistance) Act 2009 (Cth)<sup>20</sup> should be amended immediately, to reinstate the right to conscientiously object to vaccinations on religious and secular belief, or conscience grounds.

### **Recommendation 4**

Pending a Royal Commission into vaccination, The Australian Immunisation Act 2015 (Cth) should be amended immediately to include a provision to opt-out of being listed on the Australian Immunisation Register on the grounds of religious or secular belief against vaccination.

## **9.0 Legislation designed to protect citizens from legislative excess is inadequate**

The principle of parliamentary supremacy provides that members of parliament have the ultimate authority – duly vested in them by democratic processes - to enact laws as they see fit. Supporters of this principle argue that because it is representative, the parliament's decisions will reflect the collective wisdom of the community. Therein resides the problem for unpopular minorities such as

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<sup>19</sup> Australian Immunisation Act 2015 (Cth)  
<https://www.legislation.gov.au/Details/C2017C00012>

<sup>20</sup> A New Tax System (Family Assistance) Act 1999  
<https://www.legislation.gov.au/Details/C2017C00014>

vaccine sceptics: majoritarian democracy does not serve or protect well the interests of unpopular minorities.

It is our view, that it is the legislature itself, and not minorities or bureaucrats (as is popularly believed), which poses the greatest threat to our democratic freedoms under authority of populist appeal or 'mob rule', and that there is usually zero political consequences arising from the enactment of laws which breach the human rights of minorities. As it currently stands in Australia, parliaments may tyrannise over unpopular minorities with impunity because there are virtually no enforceable constraints on the power of parliaments to enact laws that breach human rights.

The requirement, under section 7 of the Human Rights (Parliamentary Scrutiny) Act 2011<sup>21</sup> (HRPSA), for the Joint Parliamentary Committee on Human Rights to scrutinise Bills for their compatibility with human rights, is demonstrably worthless for protecting minorities, when the parliament may ignore any committee recommendations with impunity.

During 2015, the Joint Parliamentary Committee on Human Rights committee considered the abolition of the right to conscientiously object to vaccination on belief and conscience grounds and concluded that this intrusion was not justified<sup>22</sup>.

*The committee's assessment of the removal of the conscientious objector exemption against article 18 of the International Covenant on Civil and Political Rights (right to freedom of thought, conscience and religion) raises questions as to whether the limitation is justifiable. As set out above, the removal of the conscientious objector exemption engages and limits the right to freedom of thought, conscience and religion. The statement of compatibility does not sufficiently justify that limitation for the purposes of international human rights law. The committee therefore seeks the advice of the Minister for Social Services as to: whether there is a rational connection between the limitation and the stated objective; and whether the limitation is a reasonable and proportionate measure for the achievement of that objective, in particular that it is the least rights restrictive approach to achieving that objective.*

The committee requested that the Minister respond to these concerns but at the time of the bill's passing in the Senate, the Minister had not issued a response. We are left to wonder why the charade of scrutinising enactments for compatibility with human rights is permitted to continue.

We generally support the intent of the HRPSA as a means of guiding the parliament in protecting

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<sup>21</sup> Human Rights (Parliamentary Scrutiny) Act 2011 (Cth)  
<https://www.legislation.gov.au/Details/C2016C00195>

<sup>22</sup> Human rights scrutiny report Twenty-ninth report of the 44th Parliament 13 October 2015, p 33  
<https://avn.org.au/wp-content/uploads/2016/03/Joint-Parliamentary-Committee-into-Human-Rights-Report-on-No-Jab-No-Pay-and-AIR-Bills-13-October-2015.pdf>

the human rights of minority groups, particularly unpopular ones such as non-vaccinators. However, because the Act does not prohibit the legislature from enacting laws which violate protected human rights without adequate rationale or justification, or provide for a judicial power to invalidate an enactment, it is mere window-dressing. Any Human Rights Act should therefore provide for a judicial power to invalidate laws found to be inconsistent with human rights protected under the Act, it can only be seen as paying lip-service to the protection of human rights.

### **Recommendation 5**

The Human Rights (Parliamentary Scrutiny) Act 2011 (Cth)<sup>23</sup> (HRPS) should be amended to include the following.

- (1) a provision requiring that all enactments of the parliament are compatible with human rights protected under the international instruments listed in section (3) subsection (1) of the HRPS Act, unless there is a legitimate rationale to limit such rights, informed by the highest standards of evidence; and
- (2) a judicial power to invalidate an enactment (or section of an enactment) which is incompatible with human rights protected under the international instruments listed in section (3) subsection (1) of the HRPS Act, unless there is a legitimate rationale to limit such rights, informed by the highest standards of evidence.

Yours faithfully

Tasha Dāvid  
President  
Australian Vaccination-skeptics Network Incorporated  
On behalf of the committee and members

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<sup>23</sup> Human Rights (Parliamentary Scrutiny) Act 2011 (Cth)  
<https://www.legislation.gov.au/Details/C2016C00195>