

Covid-19 Vaccination for Children Flyer* – SOURCES AND FURTHER INFORMATION

This document provides all the sources for the information in the accompanying flyer – indicated by small numbers in the text (such as ³ or ¹²). The final section ‘Sources’ lists each number with its relevant link. Further elaboration and data are written in blue. The original text remains in black, for ease of reference.

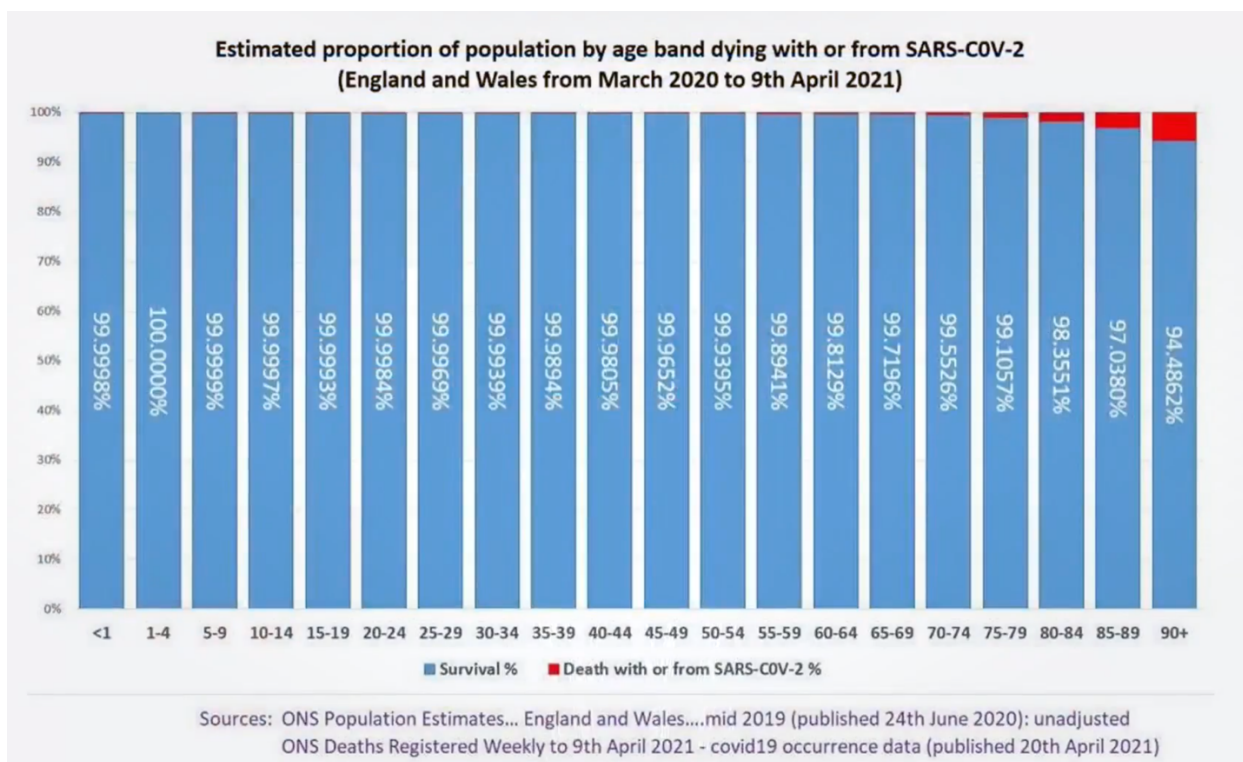
Hundreds of doctors and scientists, many of whom strongly support the adult vaccine, are calling for a stop to vaccinating all children for Covid-19.¹

There are at least eight different groups of medical professionals writing open letters to health agencies and governments, publishing in the *British Medical Journal*, issuing Notices for Liability for Harm and Death and filing motions for temporary restraining orders against the use of the Covid-19 (C19) vaccines for children. Their message is consistent:

They say there are no benefits and considerable risks.

40 UK doctors, medics and scientists described the rollout as “irresponsible, unethical and indeed, unnecessary”. America’s Frontline Doctors said: “the injections are dangerous biological agents that have the potential to cause substantially greater harm than the C19 disease”. Links to documents outlining the evidence and the cases made by eight groups can be found in the Source section, number 1.

1. No previously healthy children have died of Covid-19 (C19) in the UK²



This graph shows the proportion of the population dying by age band “with or from” C19 in the UK as well as survival rates. Many argue that counting of deaths “with” C19 has inflated the figures – yet even so, it is clear that the risk to children is negligible as they have survival rates higher than 99.999%. Most healthy children contracting the disease have zero or very mild symptoms...

... and the chances of a child dying of C19 have been shown in the UK and USA to be statistically zero. In fact, two research papers found paediatric hospitalisations for C19 in California were over-counted by at least 40%.³ Children are far more likely to die from car accidents, drowning, cancer, suicide and influenza, amongst other things.⁴

* Available at: <https://tinyurl.com/child-vax-flyer>

2. There is no need to mass vaccinate children to protect others

- Vulnerable children can already access vaccination.
- Healthy children passing coronaviruses to each other will simply boost their naturally acquired immunity. (Many experts agree that naturally acquired immunity will give broader and better-lasting immunity than vaccination.)
- Adults get protection from vaccination or their own natural immunity.⁵
- ‘Long Covid’ has been cited as a reason for vaccinating children; however, there is little hard data. It appears less common and much shorter-lived than in adults, and none of the vaccine trials have studied this outcome.
- Children do not transmit SARS-COV-2 as readily as adults; moreover, adults living or working with young children are at lower risk of severe C19.
- Schools have not been shown to be the focus of spread to the community, and teachers have a lower risk of C19 than other working-age adults.
- Recent modelling suggests that the UK has reached herd immunity.⁶

‘Protecting others’ is the most cited reason for the mass vaccination of children, but the evidence indicates that this argument is simply erroneous. Any risk to vulnerable adults and children of developing C19 can be mitigated, and they are at no raised risk from children. Children catching the disease and allowing their immune systems to cope with it (as they do very well) builds future individual and herd immunity. Also, even if children’s vaccination could protect others, from an ethical viewpoint, would we allow potential harm to children in order to protect others? What level of harm would be considered acceptable?

3. Young people are already suffering C19 vaccine injuries and deaths:

- 80% of 12–15 year olds in the Pfizer trials suffered side-effects such as fever, fatigue, headache, vomiting, diarrhoea and muscle pain. At least 866 out of 1,097 children developed some sort of unpleasant side-effect. In 466 they were “mild”, in 393 they were “moderate” and in 7 they were described as “severe”. Over the long term, these side-effects may increase.⁷ Mass vaccination would immediately lead to enormous numbers of ill children, many severely.
- 4 deaths and 4,740 adverse events (117 rated “serious”) were reported for 12–17 year olds between 14th December 2020 and 28th May 2021 in the USA.
- There were 635 reports of anaphylaxis and 16 reports of blood clotting, amongst other injuries.
- These figures included 40 reports of heart inflammation attributed to the Pfizer vaccine. While the US injuries are still to be investigated, health officials found a probable link between the Pfizer vaccine and dozens of cases of heart inflammation in young men in Israel.⁸
- Also in Israel, it was discovered that the Pfizer shots caused mortality 260 times greater in young people compared to mortality from coronavirus without the vaccine.⁹

The evidence above strongly suggests that the C19 vaccinations are more dangerous to children than the disease. Yet these figures are for only a few months’ data, after one or two shots, for a relatively small number of children. Injuries and deaths will increase as more children are vaccinated, and booster shots are already being developed. Rarer injuries will only become visible when more individuals have received the shot, and crucially, there is no information on the medium- or long-term impacts on children.

4. There is no medium- or long-term safety data on the C19 vaccines for adults or children, despite the fact that it can take years for vaccine injuries to manifest. None of the C19 vaccine clinical trials are even completed¹⁰ and deaths associated with C19 vaccinations continue to rise: 1,253 in the UK,¹¹ 5,165 in the USA,¹² and 10,570 in Europe,¹³ with hundreds of thousands of injuries (as of May 2021).

The breakdown for the UK adverse events is as follows:¹⁴

COVID-19 Vaccine Analysis Overview

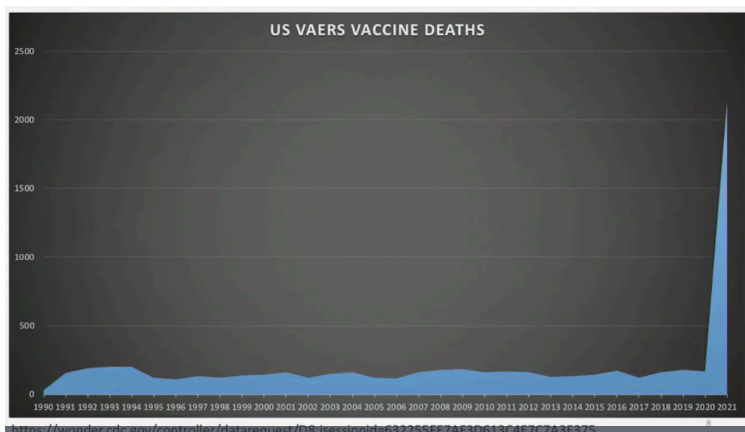
Report run date: 26/05/2021

Manufacturer	Total reports	Total reactions	Total fatalities
AstraZeneca	188,589	695,214	831
Moderna	2,469	7,014	4
Pfizer	64,450	183,752	396
Unspecified	716	2,216	22
Totals	256,224	888,196	1,253

Under-Reporting of Vaccine Injuries

Research shows that even these figures are likely to be a gross underestimate.

- Global vaccine experts (at a World Health Organisation meeting in December 2019) stated that vaccine safety science and safety monitoring are flawed and utterly inadequate.¹⁵
- Harvard research in 2010 funded by the US Agency for Healthcare Research and Quality found that the American Vaccine Adverse Event Reporting System (VAERS) captures **only 1% of vaccine adverse events**.¹⁶
- The VAERS data (which includes all adverse reactions for all vaccines) spiked going into 2021 with the C19 vaccines rollout in the USA – per the graph below.



- In this C19 era, is VAERS still capturing only 1% of adverse events? In April 2021, the Informed Consent Action Network did an analysis using comparison data to find that **VAERS continues to capture only 1% of the injuries and deaths**.¹⁷ If this is true, it would mean that total adverse events in the USA between 14th December 2020 and 28th May 2021 would stand, not at 294,801,¹⁸ but at 29,480,100 adverse events.

This is important because **it is not just adult injuries being under-reported**. If the 1% official reporting rate is accurate, it would mean that the true number of C19 vaccine injuries for 12–17 year olds in the USA would total 474,000 (between 14th December 2020 and 28th May 2021). It is possible that more care is given to reporting children's illnesses and these figures are too high; however, the evidence suggests there is significant under-reporting.

Like the USA, the UK has a passive reporting system (the Yellow Card programme), which relies on voluntary reporting of suspected adverse drug reactions by medical professionals and members of the public. In 2018, the Medicines and Healthcare products Regulatory Agency (MHRA) estimated that only 10% of serious reactions and 2–4% of non-serious reactions were being reported. The MHRA claims that the situation is different with the C19 vaccines – however they have not been promoting awareness of the Yellow Card system to the public, and reports indicate that NHS staff are failing to report vaccine adverse effects.¹⁹ Given this, it is likely that the UK system is capturing only a fraction of the true injuries. This is particularly worrying when it comes to questions of fertility.

Female and Male Infertility Risk

5. Infertility is a possible risk after C19 vaccines, with thousands of reports of reproductive disorders, such as menstrual irregularities, miscarriages, still births, vaginal haemorrhaging, erectile dysfunction and testicular pain.

As of 5th April 2021, the UK Yellow Card system reported 2,233 reports of “reproductive and breast disorders”: 1,465 for the AstraZeneca C19 vaccine and 768 for the Pfizer C19 vaccine. While male reproductive disorders are fewer, 97 were logged to 5th April: 75 for AstraZeneca, 22 for Pfizer.²⁰

In December 2020, former Pfizer immunologist and VP Michael Yeadon and lung specialist Wolfgang Wodarg wrote a petition to the European Medicines Agency in which they suggested that if the C19 vaccine were to cross-react with a particular protein in placental tissue, it could result in loss of pregnancy.²¹

Pregnant and breast-feeding women were excluded from vaccine trials so there is literally no clinical trial data on the impacts of the vaccine on this group. Yet pregnant and breast-feeding women are now being given the C19 vaccines and, in addition to the 768 “reproductive and breast disorders” cited above, there were also 42 “spontaneous abortions” (miscarriages), 5 premature labour onsets, and 2 still births associated with the Pfizer vaccine alone in the UK (data up to 5th April 2021).²²

Yeadon and Wodarg also warned that the same mechanism could result in continued sterility in women. Since women of child-bearing age were included in the trials only if they were using pharmaceutical contraception – they said: “it could take a relatively long time before a noticeable number of cases of postvaccination infertility could be observed.” **No investigation of long-term effects on fertility is required for licensing or emergency-use authorisation of vaccines.**

Dr Simone Gould of America’s Frontline Doctors notes that “We know that the survivability rate [from C19] for women of child-bearing age, as well as children, is exceedingly high at over 99.98% per the CDC even without treatment... it’s lunacy to get this experimental vaccine if you’re a young female... and it’s very unethical for any physician to offer this to any young female.”²³

Given that sperm counts have already dropped by 40% over the last 10 or 20 years, UK pathologist Dr Roger Hodkinson is seriously concerned that the C19 vaccinations may reduce male fertility, or even “spell the end of having children altogether”.²⁴

Pfizer Data Reveals Potential Cause of C19 Vaccine Injuries

New information is now pointing to a possible explanation for the myriad reported adverse events from C19 vaccines, from blood clots and heart disease to brain damage and reproductive issues. The spike protein of the coronavirus has now been revealed as pathogenic. (One analysis indicates that it was already known, before the C19 vaccines were rolled out, that spike proteins would cause significant damage, including brain clots and death.)²⁵ The vaccinations increase spike protein levels through various mechanisms in order for the body to create an immune response, so vaccinating people is thus inoculating them with a toxin.

Furthermore, the assumption had been that the vaccine material would remain mostly in the vaccination site at the shoulder muscle. Instead, secret Pfizer data released by the Japanese regulatory agency reveals that the material gets into the bloodstream, where it circulates for several days and then accumulates in organs and tissues including the spleen, bone marrow, the liver, adrenal glands and in “high concentrations” in the ovaries and testes. This is further reason to be concerned about fertility.

“We made a big mistake. We didn’t realise it until now”, said Bryam Bridle, a viral immunologist, vaccine researcher and associate professor at University of Guelph, Ontario. “The implications are terrifying”, according to Stephanie Seneff, a senior researcher at the Massachusetts Institute of Technology as “the released spike protein... eventually reaches the bloodstream causing systemic damage”.

At particular risk are youths, children and nursing babies.²⁶

General Objections to the C19 Vaccines

While not the focus of this document, the fact that there are tens of thousands of medical experts challenging the C19 vaccine rollout for adults provides context for the issue of childhood C19 vaccinations. A flyer outlines the key issues as of December 2020, including:

- Lack of medium- or long-term safety data and the need for longer clinical trials;
- That the vaccine technologies are novel, in particular that no mRNA drugs, let alone vaccines, had previously been approved for human use;
- Any use of the C19 vaccines is by definition experimental;
- The presentation of C19 vaccine efficacy through relative risk is misleading;
- Regulators have proven conflicts of interest;
- There is suppression of science, as well as censorship in the media; and
- Informed consent is essential, yet unless the public has access to all the evidence and arguments, it cannot happen.²⁷

Issues have now moved on as significant injuries and deaths are (under)reported; as correlations appear between mortality increases and C19 vaccine programmes;²⁸ as understanding grows about what happens post-vaccination within the body; and as effective treatments for C19 come to light.²⁹ Many argue they should not be called “vaccines” as they do not provide immunity, neither do they prevent transmission – describing them instead as “gene therapies”. Below are two of the groups leading the challenges and further details can be obtained from the source documents referenced.

- A group of 57 leading scientists, doctors and policy makers has released a report questioning the safety and efficacy of the current C19 vaccines and are calling for an immediate end to all vaccine programmes.³⁰
- A team of 1,000 lawyers and 10,000 medical experts led by Dr Reiner Fuellmich have begun legal proceedings against the CDC, WHO and the Davos Group for a range of reasons, including that the “vaccine” fails to meet the requirements to be considered a vaccine and is by definition a medical “experiment” and trial. This “experimental C19 vaccine” is in violation of all ten of the Nuremberg Codes, which carry the death penalty for all those who seek to violate these international laws.³¹

6. Pharmaceutical companies have no liability for C19 vaccine injuries or deaths, which has been agreed to by governments worldwide, including in the UK. If these vaccines have been sufficiently tested and are safe, why won't the companies stand by their products?

In the USA, the boards overseeing the safety and efficacy of the C19 clinical trials – officially independent of pharmaceutical influence – include individuals with strong conflicts of interest,³² and officials stand to personally earn millions from the sale of vaccines.³³ In the UK, there is a similar blurring of the lines between private and public sector, with some of the most influential members of the UK Government advisory team blatantly conflicted.³⁴

Meanwhile, the “Vaccinate the World” agenda is obscuring the many reasons why mass vaccination of children is irresponsible and unnecessary. There is a common attitude that if the vaccines posed health risks, the general public would know about it. But ask yourself how much of the data shared here did you know before reading this? Have you seen it on TV, heard it on the radio or read it in the mainstream newspapers? Every source for the information in this document has been listed below precisely because most people have not heard it, and find it hard to believe.

After all, if it were true, why isn't it front-page news?

Censorship around Covid-19

It is for you to assess the credibility of the sources provided here for yourself. Collectively these sources reveal thousands of scientists, doctors and health policy professionals, leaders in their respective fields, immensely frustrated because those in power are not listening to their expert opinions. Meanwhile, other doctors and scientists fear sharing their professional opinions for risk of being labelled “anti-vaxxers” or “coronavirus doubters”.³⁵ The executive editor of the *British Medical Journal* describes four C19-related examples of the suppression of science and scientists by politicians and government for political and financial gain, at the cost of public health.³⁶

Most media outlets, intentionally or not, are participating in censorship. Effectively they have had little choice, as guidance issued by OFCOM back in March 2020 is clear that licensed broadcasters risk regulatory action should they air content that in any way questions the advice of public health authorities or otherwise undermines people's trust in the advice of mainstream sources of information about C19.³⁷ While the intention is presented as “avoiding potential harm to audiences”, the result is a media environment restricting open discussion of emerging scientific data or any possibilities not currently endorsed by ‘official’ public health authorities.

Social media platforms are similarly constrained, and they have been removing supposed ‘misinformation’ for months. Yet these ‘protection’ processes do not necessarily get it right – for example, the Facebook ‘fact checker’ demonstrably misinforms the public.³⁸ Recent revelations are even more shocking, with two Facebook insiders coming forward with internal company documents detailing a plan to curb “vaccine hesitancy” on a global scale using a complex tier system. The stated goal is to “drastically reduce user exposure” to what are considered “vaccine hesitant” comments by demoting, burying and hiding posts – if they clash with the mainstream vaccine narrative (i.e. that C19 vaccines are safe and effective and

everyone should get one). This manipulation takes place irrespective of whether the information in the posts is true, factual or represents reality.³⁹

This means that true and accurate information is routinely being removed from the public domain before it can even be seen. All this has been happening invisibly, and not just by social media companies. GCHQ and its allied state intelligence services have launched an offensive cyberoperation, using toolkits that were designed to combat terrorism, to eliminate “anti-vaccination propaganda” from public discussion.⁴⁰

Where is our right to full disclosure of information in order to enable fully informed decision making?

Vaccine Safety in General

The question of whether the public has been given the full truth about vaccines is not limited to C19 – as illustrated by the Informed Consent Action Network/Highwire broadcast in late 2020, which tracks their four-year investigation into questions of vaccine safety. Although it begins with a very personal and ‘fun’ story, it provides a thorough overview of the key issues, the science, decision making, funding and politics around vaccines, ending with information about the C19 vaccine, which was then about to be rolled out.⁴¹

For many years the vaccine safety movement has been asking for large-scale research to assess health outcomes between vaccinated and unvaccinated children and adults. Without going into detail, the official organisations responsible for such assessments have consistently refused or ignored these requests. In 2020 there was a breakthrough. Three independent peer-reviewed studies were undertaken and their findings were consistent: vaccination is associated with higher risk of multiple diseases.⁴² A 15-minute video describes the studies and their results.⁴³

BACK TO CHILDREN AND THE CURRENT C19 VACCINATIONS

No matter your views about

- The Covid-19 vaccine for adults,
- The reality of censorship,
- The benefits or risks of vaccines in general, or
- Any of the wider issues touched on in this document...

... what has happened to the **Precautionary Principle**? The appropriateness of caution when faced with actions about which there is not full information, particularly if those actions might prove to be harmful, or even disastrous.

Given the miniscule risk to children from C19, and the negligible risk to others if children are not vaccinated, why is there any rush to vaccinate them? It would be possible to wait until more long-term data comes in from clinical trials. If we do not wait, given the many risks, some already identified and others entirely unknown, it is clear that:

This is an experiment with our children’s health.

The question we are facing is:

Are we willing to risk their well-being?

Their fertility? Even their lives?

To keep yourself informed about the progress of science and policy around the Covid-19 vaccinations, visit:

- <https://www.hartgroup.org/category/covid-19-bulletin/>
- <https://www.ukmedfreedom.org>
- <https://www.ukcolumn.org/topic/coronavirus>
- <https://childrenshealthdefense.org>
- <https://thehighwire.com>
- <https://americasfrontlinedoctors.org>

Many other relevant websites are identified in the source documents.

SOURCES

¹ *Organisations and people calling for a halt to the Covid-19 vaccination of young people:*

- Open letter from 40 UK doctors, medics and scientists to Dr June Raine, Chief Executive, MHRA, concluding that it is “irresponsible, unethical and indeed, unnecessary” to include children under 18 in the national Covid-19 vaccine rollout. <https://www.hartgroup.org/open-letter-child-vaccination/>
- Open Letter from the UK Medical Freedom Alliance (medical professionals, scientists and lawyers) to MHRA, UK Minister for Covid-19 Vaccine Deployment, Nuffield Council on Bioethics and others: “the risk v benefit calculation does NOT support administering experimental Covid-19 vaccines to healthy children”. <https://www.ukmedfreedom.org/resources/open-letters#COVID-Vaccines-Anchor> in section: COVID Vaccines 25/02/21.
- Three medical experts publish in the *British Medical Journal*: “Covid vaccines for children should not get emergency use authorisation”. <https://blogs.bmj.com/bmj/2021/05/07/covid-vaccines-for-children-should-not-get-emergency-use-authorization/>
- Open letter to key UK health officials and Boris Johnson, PM, from medics, academics, parents and members of the public calling for: “a halt to the roll out of the Covid-19 vaccination programme to children”. <https://usforthem.co.uk/notforthem/>
- Notice for Liability for Harm and Death to Children served on all Members of the European Parliament by hundreds of doctors and scientists from all corners of the globe. <https://doctors4covidethics.org/notice-of-liability-for-harm-and-death-to-children-served-on-all-members-of-the-european-parliament/>
- America’s Frontline Doctors files motion for temporary restraining order against use of Covid-19 vaccines in children: “the injections are dangerous biological agents that have the potential to cause substantially greater harm than the Covid-19 disease”. <https://americasfrontlinedoctors.org/frontlinenews/americas-frontline-doctors-files-motion-for-temporary-restraining-order-against-use-of-covid-vaccine-in-children/>
- Citizen Petition on behalf of Children’s Health Defense lodged with the US Food and Drug Administration calling for it to refrain from: allowing minors to participate in Covid-19 vaccine trials or including children in any Emergency Use Authorisations. https://childrenshealthdefense.org/wp-content/uploads/FDA-2021-P-0460-0001_attachment_1.pdf
- Canadian Covid Care Alliance of independent doctors, scientists and health-care practitioners committed to providing top-quality and balanced evidence-based information about Covid-19 calls for the Canadian government to “immediately halt the mass vaccination program of children and adolescents” until further studies are conducted. <https://www.lifesitenews.com/images/pdfs/2021-05-31 - Guide to COVID-19 vaccines for parents - FINAL.pdf>

² <https://www.hartgroup.org/6-may-2021/#children>

³ <https://childrenshealthdefense.org/defender/number-kids-hospitalized-covid-grossly-inflated/>

⁴ https://childrenshealthdefense.org/defender/warnings-vaccinating-kids-covid-dangerous-gamble/?utm_source=salsa&eType=EmailBlastContent&eld=56d56c2e-0252-4b71-b7c3-46903b8742ce

⁵ <https://www.hartgroup.org/6-may-2021/#children>

⁶ <https://www.hartgroup.org/open-letter-child-vaccination/>

⁷ <https://freewestmedia.com/2021/05/26/new-pfizer-study-four-fifths-of-all-vaccinated-children-aged-12-and-over-complain-of-side-effects/>

⁸ <https://childrenshealthdefense.org/defender/vaers-data-deaths-reported-following-covid-vaccines/>

⁹ <https://covidcalltohumanity.org/2021/05/17/israeli-peoples-committee-releases-report-of-adverse-events-relating-to-covid-injections/>

¹⁰ <https://www.ukcolumn.org/article/why-there-correlation-between-vaccine-rollout-and-increased-covid-19-mortality>

¹¹ <https://yellowcard.ukcolumn.org/yellow-card-reports> (sourced 8 June 2021)

¹² <https://childrenshealthdefense.org/defender/vaers-data-deaths-reported-following-covid-vaccines/>

¹³ <https://worldfreedomalliance.org/blog/2021/05/31/10570-deads-405259-injuries/>

¹⁴ <https://yellowcard.ukcolumn.org/yellow-card-reports> (sourced 8 June 2021)

¹⁵ <https://childrenshealthdefense.org/news/look-whos-talking-vaccine-scientists-confirm-major-safety-problems/>

¹⁶ <https://digital.ahrq.gov/sites/default/files/docs/publication/r18hs017045-lazarus-final-report-2011.pdf>

¹⁷ <https://thehighwire.com/videos/concealing-casualties/> (from 12.35 to 39.20)

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- ¹⁸ <https://childrenshealthdefense.org/defender/vaers-data-deaths-reported-following-covid-vaccines/>
- ¹⁹ <https://www.ukcolumn.org/article/greater-manchester-vaccination-centre-and-mhras-yellow-card-adr-scam-part-1>
- ²⁰ <https://www.lifesitenews.com/news/thousands-of-women-report-hemorrhaging-reproductive-dysfunction-miscarriage-after-corona-shots>
- ²¹ https://dryburgh.com/wp-content/uploads/2020/12/Wodarg_Yeadon_EMA_Petition_Pfizer_Trial_FINAL_01DEC2020_signed_with_Exhibits_geschwarz.pdf
- ²² <https://www.lifesitenews.com/news/thousands-of-women-report-hemorrhaging-reproductive-dysfunction-miscarriage-after-corona-shots>
- ²³ <https://www.lifesitenews.com/news/thousands-of-women-report-hemorrhaging-reproductive-dysfunction-miscarriage-after-corona-shots>
- ²⁴ <https://www.eutimes.net/2021/05/uk-pathologist-warns-spike-proteins-will-cause-all-men-to-lose-their-reproductive-capacity/>
- ²⁵ <https://www.ukcolumn.org/article/clotting-and-covid-science>
- ²⁶ <https://www.lifesitenews.com/news/vaccine-researcher-admits-big-mistake-says-spike-protein-is-dangerous-toxin>
- ²⁷ <https://ln4.sync.com/dl/354ec7660/9ugsiutv-p6wqtqei-xe5fm7rq-usmajk7/view/doc/6419470550011>
- ²⁸ <https://www.ukcolumn.org/article/why-there-correlation-between-vaccine-rollout-and-increased-covid-19-mortality>
- ²⁹ <https://americasfrontlinedoctors.org/treatments/> This page has links for three treatments (Hydroxychloroquine, Ivermectin and Budesonide) where information can be found on the evidence for their efficacy in treating C19.
- ³⁰ <https://covidcalltohumanity.org/2021/05/31/57-leading-scientists-doctors-and-public-policy-experts-call-for-immediate-halt-to-covid-vaccine-rollout/>
- ³¹ <https://breaking-news.ca/.the-new-nuremberg-trials-2021-please-share-this-info/>
- ³² <https://www.icandecide.org/wp-content/uploads/2020/10/Conflicted-Members-on-DSMBs-for-COVID-19-Vaccines-Final.pdf>
- ³³ https://www.icandecide.org/ican_foia/nih-officials-stand-to-earn-millions-from-moderna-vaccine/
- ³⁴ <https://www.ukcolumn.org/article/covid-19-big-pharma-players-behind-uk-government-lockdown>
- ³⁵ https://childrenshealthdefense.org/defender/slanted-sharyl-attkisson-censorship/?utm_source=salsa&eType=EmailBlastContent&eld=758d8c48-84e7-4b0d-8865-f9e67c838725
- ³⁶ <https://www.bmj.com/content/371/bmj.m4425>
- ³⁷ https://www.ofcom.org.uk/data/assets/pdf_file/0018/205713/annex-a-important-guidance-broadcast-content-on-coronavirus,-27-march-2020.pdf
- ³⁸ <https://childrenshealthdefense.org/defender/facebooks-fact-check-suppresses-truth-promotes-falsehoods-covid/>
- ³⁹ <https://www.projectveritas.com/news/breaking-facebook-whistleblowers-expose-leaked-internal-docs-detailing-new/>
- ⁴⁰ <https://articles.mercola.com/sites/articles/archive/2020/12/01/anti-vaccine-propaganda-censorship.aspx>
- ⁴¹ <https://thehighwire.com/videos/the-vaccine-safety-project/> (from 2.30)
- ⁴² The three vaccinated vs unvaccinated studies in 2020:
- “Analysis of health outcomes in vaccinated and unvaccinated children: Developmental delays, asthma, ear infections and gastrointestinal disorders” by Brian S. Hooker & Neil Z. Miller, *Sage Open Medicine*, 8, 2020, pp. 1–11. https://journals.sagepub.com/doi/pdf/10.1177/2050312120925344?utm_medium=social&utm_source=linktree&utm_campaign=analysis+of+health+outcomes+in+vaccinated+and+unvaccinated+children%3A+developmental+delays%2C+asthma%2C+ear+infections+and+gastrointestinal+disorders&
 - “Relative incidence of office visits and cumulative rates of billed diagnoses along the axis of vaccination” by James Lyons-Weiler & Paul Thomas, *International Journal of Environmental Research & Public Health*, 17 (22), 2020, 8674. <https://www.mdpi.com/1660-4601/17/22/8674/htm>
 - By Joy Garner, *Pilot Survey of Unvaccinated Americans: Statistical Evaluation of Health Outcomes in the Unvaccinated: Pilot Study. Full Report*, November 30 2020, Doc.16-7, TheControlGroup.org (85 pp). <https://informedconsentdefense.files.wordpress.com/2020/12/petitioner-garner-full-report-filed.pdf>
- ⁴³ <https://odysee.com/@DareToThink:7/Do-Vaccines-Make-Us-Healthier:0>