

## **A 1986 Law To Eliminate Liability**

After national publicity in 1982 with the broadcast of the NBC-TV documentary *DPT: Vaccine Roulette* informing the public about DPT vaccine risks, the vaccine manufacturers and physician organizations lobbied Congress for legislation to protect them from vaccine injury lawsuits. Parents of vaccine injured children, who co-founded the National Vaccine Information Center, fought to protect the rights of families and to insert vaccine safety provisions in the law such as mandatory reporting and recording of vaccine reactions by physicians. Federal health officials opposed the legislation to the very end, maintaining that vaccines have no substantial risks and that those children who are injured or die following vaccination are, in effect, genetically defective and would have died or been disabled even if no vaccinations had been given.

## **The Clinton Administration, The National ID and Electronic Tracking Systems**

Bill Clinton's election in November 1992 brought Donna Shalala, close friend of Hillary Clinton, to Washington, D.C., as the nation's new Secretary of Health and Human Services. (Founded in 1973, the Children's Defense Fund (CDF) was formerly chaired by Hillary Clinton and then by Donna Shalala and is now headed by Marian Wright Edelman. One of CDF's main goals is to register and monitor all children in a national computerized vaccination tracking system.) Within weeks of taking office in January 1993, Shalala announced "President Clinton's Immunization Initiative."

Although public opposition to the Unique Health Care Identifier Number, National ID "smartcard" and a medical records tracking system eventually scuttled Hillary's Health Care Plan, on April 1, 1993, Senators Ted Kennedy (D-MA) and Don Riegle (D-MI) and Congressman Henry Waxman (D-CA) introduced "The Comprehensive Child Immunization Act." A key provision in this bill directed Secretary Shalala to "establish a national system to track the immunization status of children." Information obtained on citizens could be used by government health officials and disclosed to other third parties without the consent of the individual or parent or guardian. The price tag to set up the electronic surveillance database, which would track citizen's movements from state to state, was \$1.1 billion.

## **Conclusion**

The government push for a national ID and national electronic medical records database originated with the desire by government and industry to find an institutional mechanism to enforce mandatory vaccination. The linking of state vaccine tracking registries to a national medical records database operated by government can be used not just to enforce vaccination but also to limit health care choices and impose economic and other sanctions on those who do not conform to any government health policy.

Children are already being denied an education and being turned down for health insurance by HMOs for failing to be vaccinated with all government recommended vaccines. Vaccination status is being linked to government entitlement programs, and there have been suggestions by legislators at both the state and federal levels to make the obtaining of a child tax deduction dependent upon compliance with vaccination laws.

Being tagged and tracked in a government-operated electronic surveillance database could lead to severe economic and other government-sanctioned punishments at the hands of health officials assigned police powers to "protect the public health." Citizens who do not, for example, comply with government mandates to use an AIDS vaccine when it is brought to market in the future could effectively be prevented from functioning in society by being denied an education, health insurance, a driver's license, employment or even admission to a hospital, hotel or airplane.

The erosion of medical freedom, privacy and the right to self determination under the guise of protecting the public health is a threat to individual liberty and the very foundation of freedom as we have known it since the Constitution was ratified in 1787 and amended by the Bill of Rights in 1791. A de facto medical dictatorship, which has been set up by government health officials using police powers assigned by state legislatures, affirmed by the Supreme Court in Jacobsen v Massachusetts, fueled by federal funds, and aided by politicians eager to control the people "for the greater good," is destroying the most sacred of all individual freedoms: the human right to choose what one is willing to die for or, in the case of a parent, what one is willing to risk a child's life for.

If the state can tag, track down and force citizens against their will to be injected with biologicals of unknown toxicity today, then there will be no limit on what individual freedoms the state can take away in the name of the greater good tomorrow. It is time for Americans to call a halt to the immoral use of utilitarianism by government officials to justify and enforce public policy and to reclaim our right to freely and privately choose the kind of health care we want for ourselves and our families.

