

From: mailinglist@capitol.hawaii.gov
To: [WAM Testimony](#)
Cc: annsfreed@gmail.com
Subject: Submitted testimony for SCR30 on Mar 24, 2016 09:00AM
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SCR30

Submitted on: 3/24/2016

Testimony for WAM on Mar 24, 2016 09:00AM in Conference Room 211

Submitted By	Organization	Testifier Position	Present at Hearing
Ann S Freed	Hawaii Women's Coalition	Support	No

Comments: Aloha Chair Tokuda, Vice Chair Dela Cruz and members, As in previous testimony we are in strong support of a measure that would at the very least education children and their parents about this life-saving vaccine. Please pass this measure. Mahalo, Ann S. Freed, Co-Chair Hawaii Women's Coalition.

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March 23, 2016

To: Senator Jill Tokuda, Chair of the Senate Ways & Means Committee, Senator Donovan Dela Cruz, Vice Chair of the Senate Ways & Means Committee and Members of the Senate Ways & Means Committee

From: Cheryl Toyofuku

RE: Strong Opposition to SCR 30 and SR 12 relating to the Human Papilloma Virus (HPV) Vaccine

Hearing: Thursday, March 24, 2016 at 9:00 am, State Capitol Room 211

I am a mother, grandmother, registered nurse and health advocate. I strongly oppose SCR 30 and SR 12. These “educational” resolutions are obviously preparing unsuspecting parents and children of public middle schools for the re-introduction of the recently deferred SB 2316 bill that will “REQUIRE a child to receive at least one dosage of the HPV vaccine prior to attending 7th grade.” The fast-tracked agenda for HPV vaccine promotion and eventually mandating it is very obvious and here are valid reasons why this agenda must NOT proceed:

- **VACCINE DECISION:** Medical information and counsel on the sexually transmitted Human Papilloma Virus, the HPV vaccine and cervical cancer is already widely disseminated by doctor’s offices to parents. Decisions to vaccinate or not to vaccinate against the virus are a PRIVATE medical matter that DOES NOT need the involvement and promotion from the Department of Education. The “educational information” from the Department of Health will no doubt be flawed with biased material from the vaccine manufacturers and national/international health authorities. Unfortunately, there is increasing evidence that vaccine policies developed by these “health authorities” are compromised by conflicts of interest and profit gain, thereby violating the public’s confidence and trust in them.
- **VACCINE INGREDIENTS:** The HPV vaccine contains 3 horrific ingredients with potential for serious health consequences: polysorbate 80 (known to cause infertility in mice and anaphylactic reactions & immune system problems in humans), aluminum (neuro-brain toxin), and sodium borate (also found in rat poison, pesticides & flame retardants, and interferes with sperm production & male fertility when given to animals at high doses).
- **VACCINE RISKS:** The HPV vaccines, Gardasil and Cervarix have generated evidence of historic proportions of damage from these vaccines globally. Japan suspended recommending this vaccine in their country due to mounting adverse reactions from the shot. The United States, India, France, the United Kingdom, Australia, New Zealand, Ireland, Scotland, Denmark, Spain, Norway, Italy, Brazil, Columbia, The Czech Republic, Israel South Africa and others have all sounded the alarm about serious, widespread adverse reactions from the HPV vaccine. In our country, the HPV Vaccine’s Adverse Events Reporting System has listed 42,165 total adverse events, including disabilities (1,394), deaths (236), did not recover (8,051), abnormal pap smear (606), cervical dysplasia (268), cervical cancer (104), life threatening (713), emergency room (12,995), hospitalized (4,131), extended hospital stay (278), serious events (5,618), including seizures, Guillan Barre Syndrome, facial paralysis, brain inflammation, rheumatoid arthritis, lupus, blood clots, optic neuritis, multiple sclerosis, strokes, heart and other serious health problems following the HPV vaccine shot.
- **VACCINE INEFFECTIVENESS:** The necessity and effectiveness of the HPV vaccine are also grossly misrepresented. There are over 150 strains of the HPV virus and the vaccine addresses only 2 strains (HPV 16 & 18) that can lead to cervical cancer. Gardasil has not been proven to prevent cervical cancer. Studies confirm that most women who contract HPV do NOT develop cervical cancer and approximately 90% of HPV infections clear up on their own within 2 years. Cervical cancer is most prevalent at age 40, so why is a toxic vaccine being given to eleven year old children when it is unknown how long the vaccine protection lasts? The prescribing information for Gardasil states, “*the duration of immunity following a complete schedule of immunization with Gardasil has not been established.*”

The HPV vaccine is completely unnecessary, unsafe and ineffective and should NOT be promoted through the DOH and DOE to our parents and children. Will the State be liable for the care of vaccine-injured children? As our lawmakers, you are encouraged to promote and provide resources to parents and children on healthy lifestyles (including abstinence) and health care that build up our natural immunity, instead of promoting and mandating toxic vaccinations.