

TOP 5

Epidemiologists, Doctors & Medical Experts with concerns about COVID strategies for children

It may be reassuring for parents to hear there are many other top, world-renowned experts with very different opinions than what is currently available. This PDF may provide information that's helpful to parents in making a decision on whether or not to vaccinate their children.

Note: Before receiving information from any experts, please consider reviewing their conflicts of interest including where they receive funding, grants and consultancy contracts for government agencies, pharmaceutical companies or corporations (including holding stock shares)



The Groups and Doctors/Medical Experts below believe children are statistically at a zero-risk and have concerns about current COVID 19 strategies for children:

[Great Barrington Declaration](#) (GBD) Authored in 2020 by Harvard Epidemiologist Dr. Martin Kulldorff, Dr. Sunetra Gupta of Oxford University and Dr. Jay Bhattacharya of Stanford University (alongside 43 top medical and public health scientists and medical practitioners who co-authored). Written from a global public health and humanitarian perspective, with special concerns about how the current COVID-19 strategies are forcing our children, the working class and the poor to carry the heaviest burden.

[The Unity Project](#) (TUP) Led by a strategic advisory council of physicians, scientist, entrepreneurs, business and community leaders. They are against forcing K-12 students to take the Covid-19 vaccine, assuming vaccine-injury-risk despite having statistically zero risk of COVID-19, stripping risk/benefit discretion from parents and one-size-fits-all carte blanche mandates for healthy children that directly contradict the current body of evidence and data.

"The scientific process is about debate. If you don't allow the debate, there is no such thing as science" - Dr. Scott Atlas

1. **Harvard Epidemiologist Martin Kulldorff** ([GBD](#)) a renowned professor of medicine at Harvard Medical School and a biostatistician and epidemiologist at Brigham and Women's Hospital. Co-author of the [Great Barrington Declaration](#). Along with Dr. Bhattacharya, he has expressed views in [Newsweek](#) that contrast with Fauci's. In this [interview](#), Kulldorff states that:

- "Children are at a miniscule risk from this disease in terms of mortality", "schools and children are one of the drivers of the spread of influenza but the opposite is true about Covid. Most children who are infected get it from some adult. Children are not very good at infecting others" and "the best approach is to make sure that our old people get vaccinated to protect them".
- "[Passports or schools requiring vaccines for students] is a very coercive way to get people to vaccinate", "Why do you coerce people who are immune or people who are young, who have very small risk, when the vaccines are much more needed in for older people in other places? So that's an ethical aspect of it. I think it is very unethical to do so."
- "We now know that in young people, including children, Pfizer and similar vaccines can cause myocarditis, which is an inflammation of the heart. That's something we would like to avoid. So it's not at all clear for children, what is the

balance of the pros and the cons of these vaccines? So, there could, of course, be another adverse reaction that we don't know about yet. So to vaccinate children at this point doesn't make sense. "

2. **Yale Epidemiologist Dr. Harvey Risch**, ([TUP](#)) is a world-renowned professor of epidemiology in the Department of Epidemiology and Public Health at the Yale School of Public Health and Yale School of Medicine. He is former member of the board of editors for the American Journal of Epidemiology. Risch advises parents in an [interview](#) to remove their children from any public school that forces students to get the shots:

- "Children with serious chronic conditions "should be considered for vaccination. Other than that, if it were my child, I would homeschool them," he told Fox News host Mark Levin. "Honestly, I would organize with other parents to take them out of the school and create homeschooling environments,"
- "There's no choice. Your child's life is on the line."
- He acknowledged vaccination "is not a high risk that's going to kill every child. However, it's enough of a risk, that on the average the benefit is higher for homeschooling than it is for vaccination and being in school."

3. **Dr. Robert Malone MD** ([TUP](#)) Original Inventor of the mRNA vaccine platform used in the Pfizer and Moderna Covid-19 vaccines as well as the DNA vaccine platform used by Inovio; Northwestern School of Medicine, MS, UC San Diego and Salk Institute Molecular Biology and Virology Laboratories, Giannini Postdoctoral Research Fellow, UC Davis, Harvard Medical School fellow - Global Clinical Research Scholar (2016) In a [Washington Times article](#) with Peter Navarro, Dr. Malone states:

- “Scientists, physicians, and public health officials now recognize risks that are rare but by no means trivial. Known side effects include serious cardiac and thrombotic conditions, menstrual cycle disruptions, Bell’s Palsy, Guillain-Barre syndrome, and anaphylaxis. Unknown side effects which virologists fear may emerge include existential reproductive risks, additional autoimmune conditions, and various forms of disease enhancement, i.e., the vaccines can make people more vulnerable to reinfection by SARS-CoV-2 or reactivation of latent viral infections and associated diseases such as shingles. **With good reason, the FDA has yet to approve the vaccines now administered under Emergency Use Authorization.**”
- “A far more optimal strategy [than vaccinating everyone] is to vaccinate only the most vulnerable. This will limit the amount of vaccine-resistant mutations...”
- “We are not “anti-vax.” One of us (Dr. Malone) invented the core mRNA technology being used by Pfizer and Moderna to produce their vaccines and has spent his entire professional career developing and advancing novel vaccine technologies, vaccines, and other medical countermeasures. The other (Mr. Navarro) played a key role at the Trump White House in jumpstarting Operation Warp Speed and ensuring timely delivery of the vaccines. We are simply saying that **just because you have a big vaccine hammer, it is not necessarily wise to use it for every nail.** The American people deserve better than a universal vaccination strategy under the flag of bad science and enforced through authoritarian measures.”

4. **Dr. Paul Alexander** ([TUP](#)), MSc, MHSc, PhD, Oxford University, University of Toronto, McMaster University, Former WHO/PAHO Washington DC Consultant and Senior Advisor to the US government in 2020 reporting to the Department of Health and Human Services. An expert in evidence-based medicine and clinical epidemiology, **believes mandating COVID vaccines for children is unethical, unscientific, and dangerous.** In an [interview](#) Dr Alexander states:

- “Children [are] not at risk. Let them live normal lives. You’re masking them, you’re weakening their immune systems. They’re going to have all sorts of medical conditions in the future because the immunity, the immune system doesn’t work that way. It must be tuned and taxed up daily.
- “Dr. Marty Makary, Johns Hopkins...one of the top epidemiologists... want[ed] to see whether COVID was

incidental or causal [in children], the CDC refused to provide the detail. His team, and it’s been published, his team looked at the deaths, and he has reported that they can’t find one instance of a child that was ... severely ill that CDC says died due to COVID.”

- The vaccine is ... not working against the Delta. We already know the harms in terms of the teens with myocarditis, et cetera....myocarditis damages the myocardium, ...scars the heart muscle. Heart muscle doesn’t rejuvenate....They’re going to have a problem most likely in the future...data suggests that for severe cases of myocarditis, a five year outlook to 10 years, about 50% death. **The bottom line is this, they cannot, they have not prosecuted the case as to why children must be vaccinated.**
- **When was it in history that we used children to protect adults?** We use adults to protect children always. Children were never to be in this equation. And if you go ahead to vaccinate children where we have already seen the risk due to myocarditis, we run the risk of tuning children, because what we are seeing now in Israel and UK, inter-asymptomatic super spreaders also.
- We run the risk of harming children. .. My argument is children have a natural protection because of the fact that we found out that they have limited ACE2 to receptors in their nostrils. We understand that, that is a fact by Patel et al. That was a research group published in JAMA.
- Leave the children alone – All the vaccine developers and all of these alphabet agencies have liability protection...under the..PREP act, these people have been absolved from liability.

5. **Dr. Scott Atlas**, is a Senior fellow at Stanford University’s Hoover Institution, Public health policy expert, Former White House Coronavirus Response team member Sept – Dec 2020, Ad hoc member of the Nominating Committee for the Nobel Prize in Medicine and Physiology for several years, Named by his peers in “The Best Doctors in America” every year since its initial publication, as well as in “The Best Doctors in New York” and “Silicon Valley’s Best Doctors”. In an [interview](#) Dr. Atlas states:

- “To me, it’s unconscionable that a society uses its children as shields for adults. Children do not have a significant risk from this illness... Are we [as] a society, a civilization ... going to inject our children with an experimental drug that they don’t have a significant benefit from, to shield ourselves?”

**See next page for more detailed
Information from Dr. Atlas’ interview**



The Science:

- “Anyone who knows anything about medical science, first-year, second-year medical student, as a virus evolves, it typically becomes less lethal, not more lethal.”
- “Getting a positive PCR test is not being sick. They’re very different things. ...there’s this very bizarre focus on stopping all cases of COVID when the real focus should be stopping the death, the serious damage from COVID...”
- “High-risk people, the elderly people [should get] the vaccine. That’s called targeted protection....It’s not high risk for most people. And particularly not for children..”
- “Frankly, I’m to the point where I’m skeptical about data coming out of the CDC. I don’t just blindly accept CDC data. They’ve been erratic in what they’ve said ...”

Efficacy and Risks

- “We don’t know the long-term efficacy of these vaccines. ... we don’t know the long-term side effects ... unless you’re severely immunocompromised or have a disease like leukemia, a child does not have significant risks from this virus... The risk is extremely small.”
- “There’s the concerning risk of myocarditis—heart inflammation from the vaccine in young people, in teenagers. And so this is concerning to everyone, including people advising the FDA. It should be concerning to everyone. And **every parent should be thinking as a critical thinker, what’s the risk of the illness we’re trying to protect their child from, versus what’s the risk of the vaccine.**”
- “This is an experimental technology. We did not have long-term tallies of side-effects ... there’s a lot of deaths from the vaccine that are reported...it’s concerning...”
- “If you’re 70-years old and you’re taking a vaccine, your life expectancy is about 15 years... a child who’s 10 taking an experimental vaccine, with or without boosters, you’re ... living with that vaccine for decades. We don’t know the long-term impact of these vaccines.”

Trust in Experts

- “Trust in experts has been damaged ...[so] individuals are really now responsible for making their own critical assessments ... So we know, credentials are not the magic end game here. It’s being a critical thinker.”
- “[Re: two FDA officials quitting around the issue of boosters is] a sliver of hope to me that actually someone had the guts to say no, and to actually look at the data who is in a position of FDA advisory committees. These two people quit, and it’s obvious they quit because the FDA was going to come out with some sort of a booster recommendation for everyone, because they immediately wrote a piece in The Lancet...that said that there is no compelling case to use boosters universally in people.”
- “[There are attempts] to intimidate others by declaring some sort of false consensus and demonizing anybody who would speak against it. Of course it’s very effective that kind of censorship, because people are afraid. Their whole careers are tied to those people. ... They’re tied to

the funding stream that allows people to advance in their academic careers. And it takes a lot of guts to step up and say, “No, that’s not true.”

- “We all have the dilemma, who do we trust now? Because a lot of the institutions, [and] experts, have failed. They revealed their political leanings instead of relying on data. They’re not objective. They wrote really opinionated pieces instead of talking about actual science, etc.”
- “[Who can you trust?] look at people who are consistent, not erratic; You cannot trust people with a conflict of interest. [when they] pontificate about the need for vaccines when they’re on the board of the vaccine company. You have to be a thinking person now.”

Medical Ethics and Morality

- “It’s unconscionable that a society uses its children as shields for adults. Children do not have significant risk from this illness...My role as a parent is to protect my children. My role is not, and I will never use my children as shields to somehow protect me. And that’s really just a heinous violation of all moral principles in my view.”
- “The idea of forcing people to get vaccinated is particularly troubling because A) we live in a free society, B) this is a new vaccine, it’s a new technology [with no] long-term safety data C) we never did a large clinical trial on these vaccines because after the initial emergency use authorization, the control/placebo group was injected with the real vaccine (So we got rid of the placebo group) D) we see complications arising from the vaccines - It’s not clear how many, but they’re concerning.”
- “Forced vaccines, particularly for children, violate several codes outlined in the Declaration of Helsinki from 1964 (sort of a standard for medical ethics and morality). I think when you start having a society that violates some of the most basic codes of ethics; I think we’re in trouble.”

Discriminatory Policies

- “This is another example of discriminatory policy harmful on minorities... the lowest uptake from my reading the data of vaccines is by African-Americans, roughly 50% less from, instead of 50%, maybe 35%. And they have their own reasons. It’s an individual decision, there’s a history of drug experimentation [Tuskegee], and it’s not irrational to say they’re not gonna take a mandated vaccine.”
- “You have minorities and lower income people exposed because they were the essential workers. While the rich and affluent sat in their home. ... Now we’re gonna force them to get a vaccine without excusing them for having antibodies and protection, better protection by the way than the vaccines themselves. Somehow their movement is restricted all of a sudden.” - Dr. Scott Atlas

Information Credit

This page is an excerpt from an interview with Dr. Scott Atlas on The Epoch Times TV show “American Thought Leaders”. Here’s a link to entire [video](#) and [transcript](#).