

TEACH Bulletin

Thorough Education Achieved in a Caring Home

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More Irons in the Fire than a Texas Roundup

We thought the past three Labour-flavoured Parliaments running the ship of state were intrusive: this National crowd is working hard, it seems, to be even more intrusive than Helen. They are a-fixin' to brand us all with their mark of ownership in a number of ways.

The Court of Appeal has determined in a lengthy ruling that "there is no basis ... from the ... abortion law to derive generally an express right to life in the unborn child." A Parliamentary Health Committee issued a report on "how to improve completion rates of childhood immunisations." The emphasis in both of these documents is emphatically *not* on how the state will help you protect the interests of either yourself or your child, but on how the state can ensure its political determinations are fully enforced upon you.

Paula Bennett, Minister of Social Development and Employment, is working on a Green Paper "to kick off a national conversation on how we value, nurture and protect children," with a special focus on under five-year olds. That is, the state has decided it wants to see what it can do about "its" pre-school children (after all, they are, as we are told, the nation's number one natural resource), so they have initiated this Green Paper, where parents are vaguely invited to have an input. The whole idea is that it will lead to some further state intervention into families.

Te Kura, also known as the NZ Correspondence School, is offering free early childhood education (ECE) lessons to those who are too far from an ECE institution (and to many who

don't want to attend). This is on top of the 20 free hours a week each family gets at an ECE institution. Why the big push to get state-approved propaganda (ECE) into our children earlier and earlier?

And of course the Welfare Working Group's report, "Reducing Long-Term Benefit Dependency" is having a major impact of solo parents and others wanting to carry on educating their children at home.

No Express Right to Life

This Judgment¹ came down to us on 1 June 2011. It started when the High Court ruled against the Abortion Supervisory Committee (ASC)

"that there was reason to doubt the lawfulness of many abortions authorised by certifying consultants and that it was likely that the law was being applied more liberally than Parliament intended." This ruling came because Right to Life New Zealand, Inc. (RTL), brought charges against the ASC. The ASC appealed against this ruling.

This action caused the legal eagles to stand back and have a good look at the bigger picture. Here is part of what they determined:

In NZ, "abortion law" specifically means Sections 10 to 46 of the CSA (Contraception, Sterilization and Abortion) Act of 1977 and Sections 182 to 187A of the Crimes Act of 1961.² RTL maintained that the Long Title of the CSA Act and Section 182 of the Crimes Act extended some degree of right to life to all unborn children.

(Continued on page 2: Roundup)

Canadians Win Homework Exemption

A Canadian couple won a legal battle to exempt their offspring from homework after successfully arguing there is no clear evidence it improves academic performance. Shelli and Tom Milley, two lawyers from Calgary, Alberta, launched their case after years of struggling with their eldest son, Jay, now 18, over his homework. They decided to do things differently with their youngest two, Spencer, 11, and Brittany, 10.

It took two years to negotiate an agreement which ensures their youngest two children will never have to do homework again. The

official document stipulates that "homework will not be used as a form of evaluation for the children." In return, the pupils promise to get their work done in class, to come to school prepared, to revise for tests and read daily at home. "It was a constant homework battle every night," Shelli said. "It's hard to get a weeping child to take in math problems. They are tired. They shouldn't be working a second shift."

Home education accomplishes this and much more without all the legal fees and hassle. (From <http://www.guardian.co.uk/world/2009/nov/18/canada-homework-milley>.)

(Continued from page 1: **Roundup**)

The Long Title of the CSA Act reads, in part: “An Act ... to provide for the circumstances and procedures under which abortions may be authorised after having full regard to the rights of the unborn child.” Section 182 reads: “*Killing unborn child: (1) Every one is liable to imprisonment for a term not exceeding 14 years who causes the death of any child that has not become a human being in such a manner that he would have been guilty of murder if the child had become a human being. (2) No one is guilty of any crime who before or during the birth of any child causes its death by means employed in good faith for the preservation of the life of the mother.*”

Note the key concept of Section 182: “child that has not become a human being.” So not all children are human beings. Section 159 of the Crimes Act makes it clear that unborn children are not, legally speaking, human beings: “(1) A child be-

comes a human being within the meaning of this Act when it has completely proceeded in a living state from the body of its mother, whether it has breathed or not, whether it has an independent circulation or not, and whether the navel string is severed or not. (2) The killing of such child is homicide if it dies in consequence of injuries received before, during, or after birth.”

Subsection (2) appears to extend some kind of understood right to life to the unborn child. But this is not necessarily so. One reason is because of the apparently well-settled understanding among authorities that in “common law” (British and NZ legal precedents extending back hundreds of years), a fetus has no legal rights prior to birth. In relation to this, the final written judgment says: “*Legal complexities and difficult moral judgments would arise if the Courts were to alter the common law to treat the fetus as a legal person. The rule according legal rights only at birth is founded on convenience rather than medical or moral principle ... I prefer the view that the abortion law creates no legal rights in the unborn child, nor any mechanism by which rights found elsewhere may be enforced on its behalf. The abortion law exists to regulate and authorise abortions. Under it not only the life but also the health of the mother take precedence over the life of the unborn child. That is a compelling indication that the legal status of an unborn child differs profoundly from that of a born person.*”³

There is a very significant sentence in this quote: “*The abortion law exists to regulate and authorise abortions.*” It was the CSA Act of 1977 that legalised abortions. The Crimes Act of 1961 (pre-dating the CSA Act) did, in fact, protect unborn children, until the CSA Act came along in 1977. Remember, the Crimes Act Section 159(2) was pretty strong: “*The killing of such child is homicide if it dies in consequence of injuries received before, during, or after birth.*” Turns out

that this Section was not changed by the CSA Act, but other bits were. For example, Section 183 of the Crimes Act was re-worded by the CSA Act. It now says that it is a crime **unlawfully** to use on a woman or girl any means (such as drugs or instruments) with the intent to procure a miscarriage. Ah! So what does “unlawfully” mean? Section 187A, created in 1977 by the CSA Act, says it is unlawful unless: (a) the continuance of the pregnancy would result in serious danger to the woman or girl (physical or mental); (b) the child would be born physically or mentally handicapped; (c) the pregnancy is a result of incest; or (d) the female is sub-normal. The mental health defence against doing “unlawful” abortions is there under (a), and today accounts for over 95% of all abortions.

Now the Judge made a point of quoting another case, *Wall v Livingston*, in which that Judge said: “*It is important not to lose sight of what must have been a deliberate Parliamentary decision: the avoidance of any attempt to spell out what were to be regarded as the legal rights of an unborn child; with the consequential absence of any statutory means by which rights could be enforced.*”

Taking all this and a number of other points together, in order to make the summary decision, the Judge asked himself the rhetorical question, “Does the abortion law confer or recognise a right to life, and if so, what sort of right is it?” Here is his answer:

“*This question leads immediately to the point that the CSA Act creates no express rights for the unborn child. Indeed, it does not mention the unborn child at all in its operative provisions. As the Court of Appeal held in Wall v Livingston, the legislature must have chosen to refrain from spelling out any legal rights in the unborn child. There is, as that Court also noted, a limited number of persons who may have any association with the certifying process. **They do not include anyone representing the unborn child.** So there is no mechanism to enforce a right to life, whether such right be found in the*

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Hear, my son, your father's instruction,
and reject not your mother's teaching.
— Proverbs 1:8

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abortion law or elsewhere. Indeed, the CSA Act does not require that any of the decision-makers involved (the mother, her own doctor, the consultants, or the doctor who performs the abortion) should have regard to the interests of the unborn child. [Emphasis added — Ed.]

And so, the Appeal Judge made his decision: “*We are satisfied that there is no basis either from the Long Title to the CSA Act or the abortion law to derive generally an express right to life in the unborn child.*”

This is pretty grim reading. And we see what the Judge has done: he has followed the previous rulings (as he interprets them) and has himself avoided any attempt to spell out the legal rights of an unborn child. In the absence of any statutory mechanism by which rights could be enforced, he has chosen to leave the void unfilled.

Worst of all is that the CSA Act simply leaves fathers out and does not require any of the abortion decision-makers involved to have regard to the interests of the unborn child.

So who will protect unborn children? You must protect yours and do what you can for any you become personally involved with. Changing the law is clearly not going to work...until

the hearts and minds of the population, including Judges and lawyers, have been turned against this gross injustice. Once again, it is home educators who will be most effective in passing on properly compassionate views of children and of right and wrong. State schools, being wed to politically mandated curricula, will only ever shape children in the mould of the state; that is, pro abortion.

Notes:

1. Read the Judgment for yourself at: http://www.courtsofnz.govt.nz/cases/abortion-supervisory-committee-v-right-to-life-new-zealand-inc/at_download/fileDecision
2. It is always very instructive and illuminating to go to www.legislation.govt.nz to look up these bits of legislation and read them for yourself. I have found NZ Legislation (Acts of Parliament) to be comparatively uncomplicated and easy to read and comprehend.
3. Note that the personal opinion of the Judge (“*I prefer*”) establishes how the law is interpreted. Note also that in the re-write of Section 59 of the Crimes Act (the smacking law), an appeal to common law was specifically forbidden (which would have allowed smacking to continue), while in this case, common law understanding is key in ruling that unborn children have few if any rights. It appears that the side with the sharpest lawyers wins the day.

How to Improve Immunisation Rates

Well, let’s first ask the question, “Does the immunisation rate need to be improved?”

The NZ central government (Parliament) has determined that “Immunisation against infections is one of the most effective evidence-based ways to prevent a variety of infectious diseases that in the past have caused severe morbidity and mortality in the New Zealand populace.”¹ Consequently, the Report is solidly on the side of immunising everyone.

All the same, the Report does take a brief (extremely brief) look at benefits and disadvantages of immunisation, community concerns, informed consent and conscientious objection issues. But it really hammers the implementation of the National Immunisation Register and Dr Turner’s “Six Star” plan for improving New Zealand’s immunisation rates. Dr Turner is the Director of the Immunisation Advisory Centre.²

Being a Committee composed mostly of politicians, they are quick to say in the Report’s Introduction: “*We wish to make it clear that we did not initiate this inquiry in order to seek to make immunisation compulsory. There are rare but significant reactions to immunisation, and there must be room for exempting those who object to it.*” The rest of

the Report does not mention any kind of compulsion, although there are plans to mount plenty of pressure; and yet, conscientious objectors' rights to abstain from immunisations are recognised at every step.

The Report stated plainly that there are about 5% of New Zealand parents who actually oppose immunisation. Consequently, the Ministry of Health set immunisation targets for 95% coverage. To accomplish this, they intend to make more efficient use of the already-existing National Immunisation Register (NIR). Privacy concerns may or may not be mollified by this statement from page 14 of the Report: "The NIR receives and sends information to other information systems, including the multiple maternity systems used to register babies, the five practice management systems used in general practices, the payments system used by all health providers and the school-based vaccination system. Transferring data between the systems is complicated by the security measures that protect the private medical records."

The Report mentioned how the Committee had "received many submissions expressing fear of immunisation, distrust of the agencies that provide vaccinations and scepticism about the information provided by the Government about immunisation." They also heard lots of horror stories. Five audiences were identified within the New Zealand populace: Those who accept immunisation; those who are willing but have barriers such as transport problems; the unmotivated; the distrustful; and a group of about four to six percent who are actively opposed to immunisation. "The ministry told us that this group is unlikely to be convinced of the benefits of immunisation, and that it needs to leave this group alone, support its members' efforts to keep their children healthy and give the group information about how to prevent diseases spreading to others." The stated strategy with all groups is to target them with tailor-made information campaigns and less "hard sell."

Professor Sir Peter Gluckman sug-

gested to the Committee "the value of having readily accessible data available to the public that demonstrates clearly the incidence and prevalence of the disease immunised against on the schedule, what the morbidity or mortality of the disease might be, and the statistics on adverse effects from immunisation." This sounds great! The Report said this information was provided on pages 27-28. When I got there, only four diseases were described in this way: measles, rubella, pertussis (whooping cough) and polio. And yet the most up-to-date Immunisation Schedule I could find on the IMAC website (2008) listed 10 immunisations for children under two years of age: diphtheria, tetanus, pertussis, polio, pneumococcal, hepatitis B, measles, mumps, rubella and *haemophilus influenzae* type b.

I read up on a number of these diseases on US and UK websites (all pro-vaccination) and was surprised at how generally harmless some are. Mumps, for example, even in adult males, rarely causes sterility, although it is very unpleasant. Rubella is only dangerous to an unborn child, so it seems completely irrelevant to males. Facts such as these, my own personal experience with most of these diseases and others back in the 1950s (yes, over 50 years ago), the simple contagious-prevention strategy of staying home when you or your little child are not well (we all did this in the 1950s) and practising basic hygiene all contribute to my personal scepticism as to how necessary most (not all) vaccines are.

I'd encourage everyone to do their own reading. Two books I highly recommend are written by a New Zealand home educator, Hilary Butler, who has made it a life mission to understand vaccinations. *Just a Little Prick* and *From One Prick to Another* (each about 500 pages) will rattle your cage for sure and give you many lines of further enquiry. Copies can be obtained by donation. Contact Peter & Hilary at:

(09) 236-8990 or
reisingertrust@gmail.com
www.beyondconformity.co.nz

The Report had a small section commenting on the safety of vaccinations: they outlined the Ministry of Health's trial and introduction procedures plus talked of the briefings they'd had with Dr Michael Tatley from the Centre for Adverse Reactions Monitoring (CARM, based at the University of Otago) and with the Chief Coroner. There is a weakness in the Adverse Reaction Monitoring in that reporting is purely voluntary.

Finally, let's have a look at Dr Turner's Six Star Plan for improving completion rates of childhood immunisation and the pressures the system is likely to put on us parents to fall into line. Dr Turner's plan was only one of some 30 recommendations put forward to the central government. There were a number of recommendations in relation to revving up the National Immunisation Register. The Report talked about Australian strategies of paying bonuses to Doctors who get more patients immunised, payments for parents who get their children immunised, welfare payments and enrolments at schools being tied to whether the child is immunised or not, although they could still get these things if they produced proof of a formal conscientious objector status.

The Six Star Plan

Component One:

Get all "significant" political parties committed to the national immunisation programme, which includes a target of 95% immunisations (so much for political dissention); increase the number of immunisation providers; get the schools to take up the propaganda of pro-immunisation; and target ante-natal groups.

Component Two:

"All health care professionals to be under a legal obligation to neither promote nor disseminate immunisation information that is not evidence-based and not supported by the national programme." So much for freedom of thought or speech for Doctors and nurses.

Component Three:

Medical professionals will be given

financial incentives and bonuses for getting more people on the programme. All infants at six week check are to either be immunised or the parents taken through a formal decision-making protocol at the end of which they can decide to have the child immunised or they can sign a “declination form” (stating that they have formally decided against immunisations). Such signers are to be contacted regularly and given opportunity to reconsider. That almost sounds like harassment.

Component Four:

To enrol a child at an ECE or school, it is suggested legislation be strengthened to require parents to produce proof of vaccination or a completed declination form; that is, a formal declaration stating you’ve made a conscientious, informed decision against vaccination. Child benefits will be tied to having either the vaccination certificates or a declination form. Parents will be paid \$20 (it is suggested) if they procure one or other of the forms.

Component Five:

Rev up propaganda campaigns to make use of all modern media and to specifically target identifiable groups.

Component Six:

This one is the best: they want to develop an Independent Vaccine Monitoring Programme (IVMP) because “New Zealand parents remain appropriately concerned that a passive system does not guarantee that all safety signals are always noticed and responded to.”

Notes:

1. From the Introduction of a Report of the Health Committee presented to Parliament in March 2011 entitled: *Inquiry into how to improve completion rates of childhood immunisation, and Briefings from the Chief Coroner on the coronial process, from Dr Michael Tatley on the adverse reaction process, and from Professor Sir Peter Gluckman on how to improve completion rates of childhood immunisation.* The Committee was composed of 12 members of Parliament. The full Report may be seen at: <http://www.parliament.nz/NR/rdonlyres/BADCF722-D377-4451-8602-1E00938BFC74/>

[188894/DBSCH_SCR_5060
Inquiryintohowtoimprovecompletionra.pdf](http://www.immac.org.nz/188894/DBSCH_SCR_5060_Inquiryintohowtoimprovecompletionra.pdf)

2. The Immunisation Advisory Centre (IMAC) is a nationwide organisation based at the School of Population Health at The University of Auckland. They have a large website filled with information at www.immac.org.nz. However, one must read more widely in order to become familiar with the many arguments and issues IMAC may not fully address. So a visit to New Zealand’s Immunisation Awareness Society at www.ias.org.nz is strongly advised.

The Green Paper

Paula Bennett, Minister of Social Development and Employment, has announced the paper, but she has not yet actually produced the paper! Perhaps there will be something in the next issue of *TEACH Bulletin*.

Free ECE

The NZ Correspondence School is offering free ECE (Early Childhood Education) materials to many folks who cannot already take advantage of the state’s 20 hours of subsidy a week for you to institutionalise your under-fives. The Home Education Foundation received a packet of brochures and posters promoting all this and a cover letter plus very extensive enrolment forms. There wasn’t much about the curriculum except that it is called “Te Whariki” and produced by the Ministry of Education.

So I managed to track down a copy on the internet and print off the 99 pages (well, except for the eight pages in Te Reo, which I cannot read).

The document is full of politically correct language with a noted stress on group co-operation, equitable distribution of resources and care of the environment. A key phrase from the Introduction is: “The curriculum emphasises the critical role of socially and culturally mediated learning and of reciprocal and responsive relationships for children with people, places and things.”

Please note this stress on learning that is “socially and culturally mediated.” The social group and the culture mediate (interpret, give meaning to) the learning. The culture is presumably the culture of the pre-school institution, which, if it is going to be following this State-approved Pre-school curriculum, is going to be secular, relativistic, non-judgmental and pluralistic; that is, everyone’s values and standards and ideas are equally as valid and good as everyone else’s.

The document also gives insights into the thinking behind it: “Families and early childhood education services are now jointly involved in the socialisation, care and learning of young children,” (page 17). These ECE institutions are hereby staking a claim in the lives of our children. “The growth of full-day early childhood education services reflects social and economic changes in society as women increasingly move into employment while their children are young,” (page 18). Despite the vast majority of the research in this area shows that this has negative impacts on children and society as a whole, the ECE industry does not want to see itself shrink, but rather to grow. And this growth objective can be helped along by re-enforcing the idea that women are all moving out of home (away from the responsibilities of motherhood, home and hearth) and into employment.

The Curriculum has Five Strands (Well-being, Belonging, Contribution, Communication and Exploration) with a list of goals under each strand. It is almost all simple page-filling rhetoric. Some is common sense dressed up in overly-fancy language; some is hopelessly impossible idealism; some is obviously a special interest group’s agenda.

Common Sense:

The Goals of the first two strands of Well-being and Belonging, listed below, are clearly fostered in virtually every home that takes half an interest in its children. Who needs an institution to do these things? In fact, one can argue that some of these are positively harmed, endangered and worked against in an ECE institutional setting (from page 15):

- their health is promoted;
- their emotional well-being is nurtured;
- they are kept safe from harm;
- connecting links with the family and the wider world are affirmed and extended;
- they know that they have a place;
- they feel comfortable with the routines, customs and regular events;
- they know the limits and boundaries of acceptable behaviour.

But even here, under the Goal of Belonging, there suddenly develops what may easily become sinister motives as this particular Goal is expanded on (page 57): “For infants: Adults talk to infants about family members.” “For toddlers: Conversations with adults about family members and happenings are a natural part of the programme.” “For young children: There is time for young children to talk about home to interested adults and to share special news.” “How is knowledge about children collected and shared among adults who work with them, and does this provide sufficient information for those who need it?” (page 58).

Hopelessly Impossible Idealism:

Under the Strand of Communication (page 81), “For infants: Adults respect and enjoy the variety of ways that infants sense and interact with the environment.” Under the Strand of Exploration (page 16), “they learn strategies for active exploration, thinking and reasoning; they develop working theories for making sense of the natural, social, physical and material worlds.” (These are under-fives, remember!) Some Goals under the Strand of Contribution are (page 70): “Children develop strategies and skills for initiating, maintaining and enjoying a relationship with other children — including taking turns, problem solving, negotiating, taking another’s point of view, supporting others and understanding other people’s attitudes and feelings — in a variety of contexts; positive and constructive attitudes to competition; a sense of responsibility and respect

for the needs and well-being of the group, including taking responsibility for group decisions.” This last one I find very problematic. Why on earth should little children aged five and under take on responsibility for the group’s well-being and especially for group decisions? I mean, this is just an *ad hoc* group of children dropped off at the ECE for who knows what reason. This is way too heavy for toddlers.

Special Interest Group Agenda:

Under the Strand of Contribution on pages 66-67 we find:

Children develop:

- An understanding of their own rights and those of others;
- The ability to recognise discriminatory practices and behaviour and to respond appropriately;
- Some early concepts of the value of appreciating diversity and fairness;
- The self-confidence to stand up for themselves and others against biased ideas and discriminatory behaviour.

“How are books and pictures selected, and do these procedures ensure that books and pictures show children of different gender, ethnicity, age, and ability in a range of roles?”

“For infants: Picture books are selected which show girls, boys, men and women in a range of roles. For toddlers: Adults expect and encourage boys and girls to take similar parts in caring and domestic duties. In talking with toddlers, adults do not link occupations to gender, for example, by assuming that doctors are men or that nurses are women.”

Unnecessary and Expensive

Under Curriculum Implementation on page 27 we read: “Adults working in early childhood education need to be knowledgeable about children’s development and ECE curriculum, skilled at implementing curriculum, thoughtful about what they do, aware of their role as models for learning, willing to try

alternatives and well-supported by management. Management must ensure that staffing meets requirements and is sufficient to ensure the safety of children at all times and in all situations. Management must also ensure that training is available to enable the adults who work with children to have the knowledge and skills necessary to support the children’s learning and development and to implement the curriculum in every day practice.” You can see the successive layers of bureaucracy and then training racking up ever greater expenditures, much of which is passed on to the tax payer. And what for? To attempt to do in an institution what mum can do, has routinely done for centuries, brilliantly on her own with great results and with no special subsidies.

Home educators are continuing to demonstrate the silliness of these ECE institutions, even while they are being pushed upon our populace with ever greater enthusiasm.

Welfare Working Group’s Report

This Report, “Reducing Long-Term Benefit Dependency”, is 180 pages long, so hopefully we’ll have a review of it and the Green Paper in the next issue of *TEACH Bulletin*.

Sex Education Produces Pregnancies

A UK Government-backed scheme tried to persuade teenage girls not to get pregnant by handing out condoms and teaching them about sex. But research shows that young women who attended the programme, at a cost of £2,500 each, were “significantly” more likely to become pregnant (16% as compared to 6%) than those on other youth programmes who were not given contraception and sex advice.

The programme was based on a “successful” American programme, demonstrating how promoters routinely cook their books.

(From <http://www.dailymail.co.uk/news/article-1198228/6m-drive-cut-teen-pregnancies-sees-DOUBLE.html#>, 8 July 2009.)