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December 9, 2019 | General Maddox | 3 Comments

Samoan Measles Outbreak. What's Really Going On?



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Fear, propaganda, misinformation, omission of facts and the Hegelian Dialectic are very powerful tools of control often deployed to serve an agenda. We are seeing their use right now on the people of Samoa.

By General Maddox.

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The Samoan landscape is as beautiful as its people. I had spent nearly two weeks on the island nation a few years ago. In particular the island of Savai'i. The less developed of the two main islands.

Beautiful beaches and lush green hills as far as the eye can see. A similar view here in Australia would set you back a small fortune. But in Samoa the coastal villages are full of people who still live a very simple life. They're not wealthy and many still live in traditional fales ("Far-lays" = homes).

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Many of the islanders have improperly balanced diets and suffer from obesity and other diseases caused by malnourishment and nutritional deficiencies. Poverty is high with the average median salary approximately \$3529 Tala. To give it some perspective \$1WST will buy you \$0.55AUD at today's exchange rate.

A timeline of coincidence?

In 2018 in Samoa there was a horrible tragedy when two infants died after receiving an MMR vaccine. It was reported that the nurses had incorrectly mixed the MMR shot with a muscle relaxant instead of water leading to their deaths. The nurses plead guilty to manslaughter and are serving jail sentences now. The Samoan government also temporarily suspended the country's vaccination program after the tragedy.

This incident, it is claimed, is the reason why Samoans became fearful of vaccines, in particular the MMR (Measles, Mumps, Rubella) vaccine which subsequently led to a decline in vaccination rates to only 31%.

Fast forward to April 2019

The MMR vaccine was officially relaunched by the Samoan Government in April 2019. Uptake was understandably very low due to the infant deaths the year prior and parents were largely unwilling to subject their children to the risk of the same medical errors harming or killing their children.

Fast forward to October 2019

UNICEF delivered a total of 115,500 doses of measles vaccines to Samoa on October 1st. The same shipment contained syringes and safety boxes as well as supplies of Vitamin A.



TOTTNEWS BY ETHAN NASH



THE CRAZZ FILES BY ADAM CRABB



GENERAL KNOWLEDGE PODCAST



Samoa declares state of emergency due to outbreak.

Fast forward to November 2019

As of November 28, 2019 SAMOA has now confirmed 42 measles-related fatalities. Since the launch of the measles re-vaccination campaign in mid-November, the Samoan Ministry of Health has vaccinated more than 50,000 individuals in both Upolu and Savai'i. New Zealand responded to earlier requests from Samoa for medical supplies, and for pharmaceutical refrigerators which are essential to preserving the efficacy of vaccines.

- Beginning of July 2018 two infants die after MMR vaccination.
- Shortly after, the Samoan government halts the country's immunization program.
- September 3rd 2019, Samoan Ministry of Health goes on the record to declare there are no measles outbreaks in Samoa.
- Next to no measles cases reported across the country despite the low vaccination rates.
- October 1st sees UNICEF delivers 115,500 doses of the measles vaccine to Samoa.
- The Measles incubation period is from 7-21 days.
- The Samoan Ministry of Health launched its MMR campaign shortly after the vaccines arrived.



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- Mid-late October measles outbreak begins.
- On November 15 the acting Prime Minister of the Samoan government declares a state of emergency for a measles outbreak.

Are we to believe that there is zero correlation between the massive vaccination campaign and the outbreak of the measles? Anyone with a shred of common sense can see the connection. It's simply not just a coincidence and the timeline fits.

A combination of poor nutrition and lack of vitamin A and C in many of the nations poor communities has lead to the death of approximately 62 children under 15 years of age. These deaths are simply labeled "Measles Related". The government of Samoa refuses to release information as to whether the children died before or after vaccination. As well as refuses to release the serotype of the virus to see whether it's being caused by the vaccine or of its a wild measles virus.

Why? What have they got to hide by not releasing these crucial pieces of information?

Could it be because the Samoan government is engaged in a cover-up? Quite possibly. Is also feasible that the vaccine manufacturers don't want it known that their product is harming and killing people. Especially since they just got their revenue stream up and running again after the nations immunization program was halted last year. Imagine the loss in sales.

Tracking the outbreak

The Samoan government has been kind enough to release a track record of statistics of the outbreak daily. And if we are to believe those figures they paint quite a telling picture. A picture that no mainstream media outlet is showing. No, they'd simply rather blame anti-vaxxers for the outbreak.

Here's a few of spreadsheets available on the Government of Samoa Facebook page starting at their first one. And remember, as the days go by hundreds and thousands of people are vaccinated across the nation. What's also interesting to note is the omission of data. Notably three figures:

1. How many of the deceased were vaccinated
2. How many of the stated measles cases were also vaccinated.
3. What strain of the virus do these people have? Vaccine strain or wild measles strains?

Again it would paint this so-called outbreak in a much different light if those figures were displayed.

1. November 22nd, 2019. 1 week after the declared outbreak. Also note that the Samoan Government stated that routine laboratory measles testing is no longer recommended! Why? Because the numbers might show a much lower number.

July 2019

May 2019

April 2019

March 2019

February 2019

December 2018

November 2018

October 2018

September 2018

August 2018

July 2018

June 2018

May 2018

July 2017

March 2017

February 2017

January 2017

December 2016

November 2016

October 2016

September 2016

August 2016

July 2016

June 2016

May 2016

April 2016

March 2016

February 2016

January 2016

November 2015

September 2015

August 2015

July 2015

Age group	Total measles cases *	Total measles-related deaths
0-5 months	145	5
6-11 months	231	4
01-4 years	517	10
05-9 years	146	0
10-14 years	42	0
15-19 years	156	0
20-29 years	233	0
30-39 years	97	1
40-49 years	41	0
50+ years	7	0
missing age	29	0
Total	1644	20

2. November 23rd, 2019. They now add another column showing cases presented in last 24 hour period.

June 2015
 May 2015
 April 2015
 March 2015
 February 2015
 January 2015
 December 2014
 November 2014
 October 2014
 September 2014
 August 2014
 July 2014
 June 2014
 May 2014
 April 2014
 March 2014
 February 2014
 January 2014
 December 2013
 November 2013
 October 2013
 September 2013
 August 2013
 July 2013
 June 2013
 May 2013
 April 2013
 March 2013
 February 2013
 January 2013
 December 2012
 November 2012
 October 2012

Age group	Measles cases last 24 hours	Total measles cases *	Total measles-related deaths
0-5 months	5	150	5
6-11 months	15	245	5
01-4 years	53	570	11
05-9 years	15	161	0
10-14 years	3	45	0
15-19 years	13	169	0
20-29 years	26	260	0
30-39 years	12	109	1
40-49 years	8	49	0
50+ years	0	7	0
missing age	3	32	0
Total	153	1797	22

**Includes 122 laboratory confirmed measles cases; routine measles testing is no longer recommended.*

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3. November 25th, 2019. No reason as to why they didn't post the data from the day before.

Age group	Measles cases last 24 hours	Total measles cases (n)	Total measles-related deaths (d)
0-5 months	11	172	6
6-11 months	22	289	5
01-4 years	57	719	13
05-9 years	12	200	0
10-14 years	2	54	0
15-19 years	13	206	0
20-29 years	16	308	0
30-39 years	6	135	1
40-49 years	2	56	0
50+ years	2	9	0
missing age	1	46	0
Total	144	2194	25

** Table subject to update as new data becomes available*

4. November 26th, 2019.

Age group	Measles cases last 24 hours	Total measles cases	Total measles-related deaths
0-5 months	19	191	6
6-11 months	25	314	7
01-4 years	74	793	15
05-9 years	26	226	0
10-14 years	6	60	1
15-19 years	33	239	2
20-29 years	31	339	0
30-39 years	14	149	1
40-49 years	4	60	0
50+ years	1	10	0
missing age	10	56	0
Total	243	2437	32

** Table subject to update as new data becomes available*

5. November 27th, 2019.

Age group	Measles cases last 24 hours	Total measles cases	Total measles-related deaths
0.5 months	12	204	6
6-11 months	24	338	7
01-4 years	85	877	16
05-9 years	25	251	0
10-14 years	8	68	1
15-19 years	25	264	2
20-29 years	40	379	0
30-39 years	14	164	1
40-49 years	10	70	0
50+ years	0	10	0
missing age	6	61	0
Total	249	2686	33

** Table subject to update as new data becomes available*

6. November 28th, 2019.

Age group	Measles cases last 24 hours	Total measles cases	Total measles-related deaths
0-5 months	9	214	6
6-11 months	30	369	9
01-4 years	67	945	20
05-9 years	28	279	0
10-14 years	16	85	1
15-19 years	29	296	2
20-29 years	46	427	0
30-39 years	19	183	1
40-49 years	4	76	0
50+ years	2	12	0
missing age	0	50**	0
Total	250	2936	39

** Table subject to update as new data becomes available*

7. November 29th, 2019.

Age group	Measles cases last 24 hours	Total measles cases	Total measles-related deaths
0-5 months	11	225	6
6-11 months	22	391	12
01-4 years	40	985	20
05-9 years	21	300	0
10-14 years	11	96	1
15-19 years	29	325	2
20-29 years	48	475	0
30-39 years	16	199	1
40-49 years	14	90	0
50+ years	1	13	0
missing age	0	50	0
Total	213	3149	42

** Table subject to update as new data becomes available*

8. November 30th, 2019. Keep in mind now that it was stated over 80,000 people out of Samoa's total population of just under 200,000 have been vaccinated at this point.

Age group	Measles cases last 24 hours	Total measles cases	Total measles-related deaths
0-5 months	12	238	7
6-11 months	24	415	13
01-4 years	62	1046	20
05-9 years	21	321	0
10-14 years	6	102	1
15-19 years	23	348	2
20-29 years	43	518	0
30-39 years	11	210	1
40-49 years	4	94	0
50+ years	1	14	0
missing age	1	51	0
Total	208	3357	44

** Table subject to update as new data becomes available*

9. December 1st, 2019. UNICEF delivers an additional 50,000 vaccines to Samoa.

Age group	Measles cases last 24 hours	Total measles cases	Total measles-related deaths
0-5 months	10	249	8
6-11 months	20	434	14
01-4 years	66	1112	22
05-9 years	15	336	0
10-14 years	9	111	1
15-19 years	13	361	2
20-29 years	22	540	0
30-39 years	12	222	1
40-49 years	0	94	0
50+ years	2	16	0
missing age	4	55	0
Total	173	3530	48

** Table subject to update as new data becomes available*

10. December 2nd, 2019. Over 90,000 Samoans have been vaccinated. Of that, 58,150 since the mass vaccination campaign started.

Age group	Measles cases last 24 hours	Total measles cases	Total measles-related deaths
0-5 months	11	261	8
6-11 months	18	452	15
01-4 years	67	1181	25
05-9 years	23	359	1
10-14 years	5	116	1
15-19 years	19	381	2
20-29 years	30	571	0
30-39 years	14	236	1
40-49 years	8	102	0
50+ years	0	16	0
missing age	3	53	0
Total	198	3728	53

** Table subject to update as new data becomes available*

11. December 3rd, 2019.

Age group	Measles cases last 24 hours	Total measles cases	Total measles-related deaths
0-5 months	8	270	8
6-11 months	20	472	15
01-4 years	51	1236	27
05-9 years	13	372	1
10-14 years	7	124	1
15-19 years	12	393	2
20-29 years	30	602	0
30-39 years	9	245	1
40-49 years	3	105	0
50+ years	0	16	0
missing age	0	46	0
Total	153	3881	55

** Table subject to update as new data becomes available*

12. December 4th, 2019. Prime Minister Tuilaepa Sailele Malielegaoi does media stunt to show he too is getting vaccinated despite already having gone to villages a week ago to visit the sick people in the hardest hit epidemic areas.

Age group	Measles cases last 24 hours	Total measles cases	Total measles-related deaths
0-5 months	19	289	9
6-11 months	18	491	16
01-4 years	53	1289	27
05-9 years	24	396	1
10-14 years	5	128	1
15-19 years	17	410	3
20-29 years	22	624	1
30-39 years	7	252	2
40-49 years	5	110	0
50+ years	0	16	0
missing age	1	47	0
Total	171	4052	60

** Table subject to update as new data becomes available*

13. December 5th, 2019. Mass Door-to-Door Vaccination two day campaign begins.

Age group	Measles cases last 24 hours	Total measles cases	Total measles-related deaths
0-5 months	13	302	9
6-11 months	22	514	17
01-4 years	68	1363	28
05-9 years	14	416	1
10-14 years	4	134	1
15-19 years	19	429	3
20-29 years	12	638	1
30-39 years	8	260	2
40-49 years	1	112	0
50+ years	0	17	0
missing age	4	32	0
Total	165	4217	62

** Table subject to update as new data becomes available*

14. December 6th, 2019. Day two of the Door-to-Door campaign where villages are encouraged to display a red flag out the front of their home if they're not yet vaccinated and anti-vaxxers are continued to be blamed for the outbreak.

Age group	Measles cases last 24 hours	Total measles cases	Total measles-related deaths
0-5 months	13	315	9
6-11 months	20	534	18
01-4 years	49	1414	28
05-9 years	9	425	1
10-14 years	1	135	1
15-19 years	8	437	3
20-29 years	21	659	1
30-39 years	11	271	2
40-49 years	6	118	0
50+ years	2	19	0
missing age	0	30	0
Total	140	4357	63

** Table subject to update as new data becomes available*

15. December 7th, 2019. Approximately 89% of population who can be vaccinated is now vaccinated.

Age group	Measles cases last 24 hours	Total measles cases	Total measles-related deaths
0-5 months	8	322	9
6-11 months	10	544	18
1-4 years	41	1455	30
5-9 years	12	437	1
10-14 years	1	136	1
15-19 years	6	444	3
20-29 years	18	677	1
30-39 years	5	276	2
40-49 years	2	120	0
50+ years	0	19	0
missing age	0	30	0
Total	103	4460	65

** Table subject to update as new data becomes available*

16. December 8th, 2019.

Age group	Measles cases last 24 hours	Total measles cases	Total measles-related deaths
0-5 months	10	333	9
6-11 months	16	560	19
1-4 years	35	1490	32
5-9 years	11	448	1
10-14 years	0	136	1
15-19 years	12	455	3
20-29 years	29	706	1
30-39 years	4	280	2
40-49 years	3	123	0
50+ years	0	19	0
missing age	1	31	0
Total	121	4581	68

** Table subject to update as new data becomes available*

17. December 9th, 2019. Approximately 90% of all eligible people in Samoa have been vaccinated against measles. The estimated vaccination coverage in both Upolu and Savai'i are:

- 85% of the targeted infants and children aged 6 months to 4 years old
- 96% of the targeted children aged 5 to 19 years old
- 105% of the targeted women aged 20 to 35 years old
- 86% of the targeted remaining population in Samoa

*Above stats as per Government of Samoa press release.

What can we expect to come?

Of course there's no way to see the future but we can hypothesize as to what we can expect in the coming days and months.

Given what we've seen from all of the data above the total number of measles cases is approximately 2.5% of the total population of Samoa since the relaunch of the nations immunization program. A figure that has been steadily climbing and by all accounts will continue to rise.

During the period of the cessation of the immunization program there was NO measles outbreak. The Samoan Ministry of Health's Director General also went on the record to state that fact back in September this year.

As we have demonstrated above, the recommencement of the immunization program in the early weeks of October this year appears to have lead to the current outbreak. We will only know for sure if the vaccine serotype is released

and laboratory testing is resumed on the infected to see if it matches the D8 Strain genotype of the measles virus.

Next year it appear will the Samoan people have some of their rights taken away with the introduction of mandatory vaccination for all children across the nation in order to attend any school.

According to Press Secretary Nanai Taofiga Laveitiga Tuiletufuga;

By January 2020, there should be a legislative mandate in place requiring all children to be vaccinated before they are allowed to attend school. And the compulsory requirement will apply to all schools which include public, church and private schools.

The directive was approved by Cabinet this week with the Office of the Attorney General tasked to draft legislations to this effect to be tabled in the next Parliament session scheduled for December.

It appears we're also seeing the Hegelian Dialectic of Problem-Reaction-Solution in play as well. But was it the Samoan Government or Big Pharma making the play all along?

My money is on Big Pharma.

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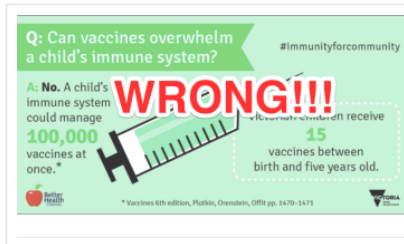
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AUTHOR:

General Maddox

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3 Comments on "Samoa Measles Outbreak. What's Really Going On?"



HealthActivist1

December 10, 2019 at 12:19 pm #

Spot on! Big Pharma without a doubt!

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Every time I hear about this outbreak on the news, I complain to my husband that they NEVER say whether those who have measles, or those who have died, had been vaccinated. My bet is that most of them had been, and the evidence provided above suggests I'm right.

Pure evil at play!



Reply

General Maddox

December 10, 2019 at 4:48 pm #

Recently saw this post on Facebook. Very share worthy.

Okay, my friends. The time has come. MEASLES IN SAMOA. Buckle your seatbelts.

For those that don't know, I have personal connections to Samoa. I spent 3 weeks there this August and September with my grandfather, who founded the first English speaking LDS congregation in Apia, Western Samoa, in 1956. He's been going back there regularly since that time, for over 60 years now, and is fluent in Samoan and is well versed in the Fa'a Samoa, the Samoan Way.

I fell in love with Samoa. Those weeks were so precious. I love the people and the language and the Samoan Way. If you go back on my Facebook timeline to August and September you can find many of my stories and thoughts and experiences there and you will see: I love Samoa so much.

So this measles event has been something I have been following very closely.

~~~

When I was out there with my grandpa not 12 weeks ago, the measles fearmongering was already going on in earnest in every newspaper.

Last year, two Samoan babies died on the table immediately during their MMR shot. This led to a widespread panic and people understandably stopped jabbing their infants. Compliance dropped from about 70% to about 30% in about a year.

So for several days while I was there, the newspaper had front page stories about how decreasing rates of measles vaccination were going to lead to a major outbreak and everyone was at high risk of dying, etc. Of people over the age of 2, compliance was still 70%+, so they were really talking about the under-2 cohort that was considered undervaccinated.

As of today, those numbers are obviously no longer true, since they are going door to door and force-vaccinating literally everyone regardless of age or previous vaccination status (meaning: already got the MMR? Well now you get it again). So the vaccination rate now is much, much higher—which should theoretically be lowering the death rate. But instead the death rate is rising.

The official story line of the two shots that instantly killed kids on the table, by the way, was that the nurses administering the vaccine had mixed the vaccine with some sort of anesthetic or something before injecting it and THAT was what killed the kids.

A reader commented: "MMR is a vaccine that must be diluted, can you edit your post accordingly? There should be 2 ppl at all times overseeing & administering vaccines. All goals

are to be checked prior to drawing up the vaccine and again before administering the vaccine.

MMR administration instructions:

Single Dose Vial — First withdraw the entire volume of diluent into the syringe to be used for reconstitution. Inject all the diluent in the syringe into the vial of lyophilized vaccine, and agitate to mix thoroughly. If the lyophilized vaccine cannot be dissolved, discard.”

~~~

The official storyline on those nurses was that it was an accident that they mixed the wrong thing, I believe.

Anyway, if you're following the news there, you know that now over 50 people have died of “unconfirmed” measles cases. They are not lab testing the presenting infections. They have lab tested a few but by and large they are not testing: they are assuming.

When I checked a few nights ago, it was up to 1700+ measles cases, which again they are no longer lab-testing. And they did not ever say if this was a wild strain of measles—and when it comes to vaccine propaganda, if they don't gleefully clarify that it was the nasty horrid wild strain of measles, you can be pretty sure they are just omitting the fact that it is vaccine-strain measles. But regardless, they are no longer lab testing.

Here are my major thoughts about this situation.

1. GIVING MEASLES TO PREVENT MEASLES The MMR is what is called a “live virus” vaccine. This means that the virus inside the shot is currently alive. The point of the shot is to actually intentionally INFECT the recipient with the living measles virus, on purpose, with the idea being that the subsequent measles infection it will cause will be gentler than a wild measles infection, so you can become immune to the measles with a milder infection than normal.

The recently revised package insert for the MMR no longer includes a warning for people to stay away from the immunocompromised after injection due to the possibility of shedding.

But shedding is real. I love this case study: <https://www.ncbi.nlm.nih.gov/pubmed/23543773>

Here we see that a recently vaccinated child ended up shedding vaccine-strain measles virus in his urine, and having a “measles-like” rash. hilariously, the authors note how hard it can be to differentiate measles from “measles-like rashes” post-vaccination.

Newsflash: your contagious “measles-like rash” post-live virus measles vaccination IS MEASLES.

In the package insert, you can see that “atypical measles” is listed as a side effect (right above, yes, DIABETES! Awesome!!). Atypical measles = vaccine strain measles, aka “measles like” symptoms which are transmissible through things like urine.

They are injecting all the people there with live measles viruses, and for some of those people, that live measles virus is going to lead to a remarkably “measles-like” rash which is contagious. So this is just going to perpetuate measles cases.

2. HYGIENE IN SAMOA

As we toured Samoa, my grandpa would only ever stop to let us use the restroom in Westerner-approved resorts. Sometimes he would say, “If only Samoa took as much pride in its bathrooms as Japan.”

I spent my time in the Independent State of Samoa, not American Samoa. The consensus among the Samoans I asked about this was that American Samoa was WAY behind the Independent State of Samoa in terms of development.

At the government tourism building, the main cultural center for all of Samoa, they obviously have a bathroom there for all the visiting tourists who have come to learn about the culture of Samoa.

In this bathroom, here is what there was NOT:

- toilet paper
- soap of any kind
- paper towels or anything to dry your hands on.

So basically in the number one government-sponsored tourist attraction in the capital city of the Independent State of Samoa, if you want to go to the bathroom, you are going to have some residues from that activity on some part of you because there is no way to wipe and your hands are NOT going to be clean after that, unless you bring your own hand sanitizer, which fortunately I did. But still: yuck.

I never wrote a major post about menstruation in Samoa, but I was going to because I had the privilege of experiencing just that experience. Fortunately I personally use a silicon cup and cloth pads and I came prepared so I was fine, but Western style menstrual pads and tampons are expensive and if you don't live in a city, you're not going to find them. I actually only found pads in one single store out of all the ones I went to in all of Samoa.

My grandma says that most women just use coconut fibers. I cannot imagine that is very hygienic. I have no idea what they do with the waste from that (Burn it? Compost it? Throw it in the ocean? Leave it as litter? Drop it in an outhouse?).

But here is the deal: in the government building there was no soap in the bathrooms.

In the international airport: same story.

In the remote villages we visited, the outhouses were outside and I did NOT see sinks.

So I'm not thinking that hand washing is a really big thing among much of the population.

This is one reason why infectious disease would be both more contagious there and more deadly there than in other places: people aren't washing their hands to the same extent that a typical American might hope for or expect.

So we are injecting people with live measles viruses that are creating "measles like symptoms" which are contagious through urine and fecal matter in a population that at least in some of the rural villages are still using sinkless outhouses for their personal hygiene needs. It should be clear that this is a recipe for disaster.

3. NUTRITIONAL COMPONENTS

There have been zero measles deaths in the US in decades (although dozens of reported MMR-related deaths according to VAERS).

Measles is just not deadly in populations where there is proper nutrition and sanitation.

We hopefully already established that sanitation is perhaps not Samoa's strongest suit, but let's talk about nutrition.

Malnutrition is still a serious problem in Samoa and children can and do die from it still.

Diabetes is a huge problem there: it is the second leading cause of death.

The basic diet, as my grandpa explained it to me and as I personally observed, is high in coconut, breadfruit, banana (basically: starchy tropical fruits) and now it is getting higher in cheap processed foods from China.

At the average grocery store, at least among the maybe dozen we went to on Upolu, there are lots of breads and ramen noodles, and very few fresh vegetables.

Measles is particularly nasty for people who are deficient in vitamin A. I was going to delve deep with this but this post is already getting way too long. So here is a recap:

<https://www.facebook.com/ashleyeverlyvax/posts/2154810247873933>

Measles can be deadly if you are low in vitamin A, and measles is easily treatable with vitamin A. Here is the World Health Organization's conclusions on vitamin A treatment for measles. Just TWO DAYS of administering water-based vitamin A to measles sufferers leads to an 82% reduction in mortality: <https://www.ncbi.nlm.nih.gov/pubmed/11869601>

Here is a list of the best food-based sources of vitamin A:

<https://www.healthline.com/nutrition/foods-high-in-vitamin-a#section4>

Please notice how most of those foods are not really part of the Samoan diet at all. Papaya, guava, and mango are, but you'd have to eat a LOT of them every day to get the kind of vitamin A sufficiency you'd need for a really successful battle with measles.

In societies where we eat foods high in vitamin A, measles is not a big deal, as shown in these clips from the Brady Bunch and the Flintstones and the Donna Reed Show, in which getting measles is the punchline of the jokes: <https://www.youtube.com/watch?v=mDb0ZS3vB9g> In the developed world, measles is “kid stuff,” as the measles guy in the Donna Reed show laments, embarrassed.

In societies where vitamin A is not regularly consumed, measles can be a much bigger deal and can be deadly.

Right now, in Samoa, those using vitamin A to treat measles are being actively demonized and even reported to the police. And actually, I wrote that sentence a few days ago while working on this post. Today, this very day, those using vitamin A to treat measles have been arrested.

There is a huge social and now governmental push AGAINST proven, World Health Organization-approved measles treatments.

EDIT: here is the newspaper article where the PM said that the MMR is the “only cure” for measles: <https://www.npr.org/2019/12/02/784179707/samoan-government-to-close-its-offices-amid-measles-crisis-that-has-left-53-dead>

4. TECHNOLOGY AND REFRIGERATION

Maybe you have read about how they had to throw out 26,000 vaccines intended for use in Samoa due to improper refrigeration.

This news did not surprise me one bit.

And what would REALLY not surprise me is if many, many of those being force-vaccinated right now are being force-vaccinated with similarly improperly stored and unsafe shots that nobody bothered to throw out.

Refrigeration is hard to come by in Samoa. It is really just a whole different world out there. If you are thinking Samoa is kind of similar to any neighborhood you’ve been to America, you’re just wrong. It is not the same at all. It is not surprising to me that there is trouble there storing vaccines properly. I do wonder how many of the deaths of the “partially vaccinated” are actually due in part to being injected with unsafe cocktails of aborted baby DNA, formaldehyde, and aluminum that wasn’t even stored properly.

5. NEED FOR SEROTYPING AND LAB TESTING

There are reports of people getting vaccinated, and then within days coming down with SEVERE measles. Because they have ceased all lab testing, they cannot say it is not the vaccine-strain (<https://www.facebook.com/edwin.tamasese/posts/3166084326751624>). It is my opinion that they must start serotyping the measles strains because if they are suffering from the vaccine-strain, that should be a huge hint that this nationwide campaign is creating the opposite of its alleged intent.

I have read posts from people currently in Samoa dealing with this crisis where they express confusion at the deadliness of this strain of measles, which seems unlike previous measles infections they have seen before. An interesting note from those on the ground.

Here are some thoughts on that from Dr. Jim Meehan:

<https://www.facebook.com/docmeehan/posts/10220598532010601>

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Here are my TL;DR thoughts on the Samoa measles outbreak:

1. These people need vitamins and sanitation and hand washing encouragement, not toxic shots.
2. We need to be doing the lab tests to confirm if this is or is not the vaccine strain of measles. If it is the vaccine strain, maybe someone should rethink force-vaccinating the entire population at the point of a gun.

## Trackbacks/Pingbacks

1. **Samoan Measles Outbreak. What's Really Going On? | The Crazz Files** - *December 10, 2019*

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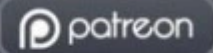
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