THE STORMRIDER ISSUE 18



Freedom, Country Living and Prepping

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Hello my dear readers. This is The Stormrider Issue 18. Here I will be discussing withstanding natural disasters. Then we will pivot to, in my opinion, one of the greatest disasters there is (not Natural), and that is vaccines!



Any thoughts? Give me some feedback. God bless you! Shawn Stevens

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Shawn Stevens

WITHSTANDING NATURAL DISASTERS

What if the wind outside of your home started moving at three hundred miles an hour? You would be experiencing a tornado. You had better have done something in advance to prepare or you may be swept out that window. Tornados, fires, floods, hurricanes, droughts, earthquakes, tsunamis and volcanos are all natural disasters which occur in our world and which displace people around the world. Many preppers are preparing for these natural disasters.

Many have thought, "Oh, but that sort of thing only happens to other people." That's what the other people thought. Just because something hasn't happened to yourself or your family yet, or hasn't happened in your life-time yet, does not mean that it can't happen. Every year our news is filled with multiple instances of catastrophic natural disasters around the world. Most people in the disaster areas did not prepare. They had a rude awakening and that is because natural disasters strike quickly.

Many preppers are preparing for natural disasters. One good place to start preparing in is getting an emergency kit put together. Your emergency kit may include first-aid supplies, short-term food and water supplies and communication equipment. Have a pet carrier for your pet. Purchase extra insurance to cover your home and belongings. Pack a "go bag". Your go bag may, again, include food and water but also duct tape, blankets and extra clothing. You may need an extra supply of prescription medicine. Most governments provide an "emergency preparedness" guide which you can read. The Canadian government supplies one on their web-site which you can download. For the long term, you may even invest in making your home stronger by implementing seismic design upgrades, flood proofing and wind design upgrades. Have a "bug in" and "bug out" plan.

Hopefully, they won't be needed but, if natural disaster comes knocking at your home, take the steps ahead of time so that you are ready for it. God bless you.

Shawn Stevens

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VACCINATIONS



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Shawn Stevens

VACCINATIONS

A vaccination is the applying of a vaccine or antigenic material to provoke the immune system of a person into developing adaptive immunity to a pathogen. Most people within society receive vaccinations and allow their children to receive vaccinations without giving it a second thought. Some would be surprised to hear that there is controversy surrounding vaccination and that there has been for many years. There is a community of people within the medical profession and outside of it who have expressed serious concerns about the use of vaccines today.

Vaccines are immune-suppressing, meaning that they diminish a person's natural immune system, relying instead on the supposed merits of the vaccine itself. Not only are vaccines immune-suppressing, they are not free from side effects. Even the Institution Of Medicine has conceded that vaccines are not free from adverse effects or side effects. They concede that there is inadequate evidence to either accept or reject that vaccines may cause serious side effects.1 However, despite this uncertainty, vaccines are heavily used by the medical profession. In many places vaccinations are mandatory and this has further fuelled the controversy.

Opponents of vaccination argue, firstly, that vaccinations, at best, only provide temporary protection from the diseases they were made to protect against. Secondly, on some occasions vaccinations have been contaminated by other bacteria or live viruses. Thirdly, in some cases vaccines are believed to actually have caused the disease that they were supposed to protect against. Fourthly, some vaccines have contained poisonous toxins and chemical compounds. For these reasons many people do no use vaccines. Many people would be surprised to learn that the disease rates of many diseases have

declined on their own without the use of vaccines and, in some cases, have actually increased after vaccines were introduced to the public. For example, the death rate of polio declined on its own by 47% in America between the years of 1923 to 1953. In 1955 the polio vaccine, Salk vaccine, was made available in the U.S. In 1959, the Sabin vaccine for polio was made available. From the time period one year prior to the Salk vaccine until one year after its introduction, polio increased in Connecticut by 92%, in New Hampshire to 239%, in Vermont by 266%, in Rhode Island by 454% and in Massachusetts by 642%. In 1976, Dr Salk conceded that his vaccine was the main, if nor sole, cause of all reported polio in America since 1961. The Sabin vaccine also had dismal results and even The Centers for Disease Control has conceded that the Sabin vaccine is the largest cause for polio since 1983. Initially, attempts were made to make polio vaccinations appear like a success. The disease aseptic meningitis is similar to polio and it is often difficult to

distinguish the two. In July of 1955, in Los Angeles county, before the Salk vaccine, there were a reported 273 cases of polio and 50 cases of aseptic meningitis. In September of 1966 in that same area, after the Sabin oral vaccine was made available, there were reported five polio cases and 256 aseptic meningitis cases. It appears that polio cases may have been referred to as aseptic meningitis cases, perhaps to make the polio vaccine look effective.2

In America, from 1900 to 1930, many years before a vaccine for diphtheria had become available America was experiencing a 90% decline in reported diphtheria deaths. Both then and now diphtheria can usually be controlled by simple applications of sanitary measures. However, in 1939 Germany made diphtheria vaccinations compulsory. Following the vaccinations a diphtheria epidemic broke out totalling 150,000 thousand cases. When France came under German occupation during World War II, it was also forced to receive diphtheria vaccinations. Following the vaccination program, France experience a diphtheria epidemic of 47,000 cases.3

In Australia, it was discovered that an outbreak of Rubella among army recruits had occurred despite the fact that 80% of those infected had been vaccinated for Rubella.4

Whooping cough, also known as pertussis, is a respiratory system disease. From 1900 to 1935 the death rate from whooping cough in the U.S. had declined by 79%. However, a vaccine was made available in 1936. Several epidemics of whooping cough broke out, one in 1978, even though 54% of the cases had already received vaccinations beforehand. In 1984 it was reported that 46% of whooping cough cases in America had occurred among those already vaccinated for the disease.5 Smallpox is another disease that was on the decline before vaccination for it, in many countries, was mandated. Nutritional teachings and sanitation reforms in the mid-1800s may be credited for the decrease of smallpox. However, in England, in 1853, a law was passed for compulsory smallpox vaccinations. Prior to this, no more than 2,000 deaths in a two-year period had ever been recorded in England's history. However, between 1870 and 1871 (after the vaccinations) over 23,000 died from smallpox. During that same epidemic period of time, 124,000 people in Germany died of smallpox. It is reported that they had all been vaccinated for the disease. In Japan, despite a seven-year compulsory vaccination program, 29,000 people died from smallpox. In Australia the government actually discontinued compulsory smallpox vaccination after two children apparently died after taking the vaccine.6

If many people have suffered adverse effects after receiving vaccines, what are some examples of these adverse effects? It is reported that the measles vaccine may cause learning disabilities, aseptic meningitis, paralysis, seizure disorders and even death. Some researchers believe that it is a possible cause or co-factor for multiple sclerosis, blood clotting disorders and juvenile onset diabetes.7

As serious as the concerns over the measles vaccine are, the DPT vaccine is perhaps even more dangerous. DPT is a vaccine combination intended to protect against diphtheria, pertussis and tetanus. It is commonly given to infants and, yet, the list of side effects associated with it is long. It may be the cause for 106 degree fevers, swelling, pain, excessive sleepiness, diarrhea, highpitch screaming, convulsions, shock, seizures, breathing problems, brain damage and even sudden infant death syndrome. At least one study has shown a death rate for children eight times higher than normal within three days of receiving a DPT vaccination. A study conducted by Dr. William Torch, of the Nevada School of Medicine, found that of 103 children who died of sudden infant death syndrome

over two-thirds had received a DPT vaccination before death. Out of these 6.5% died before twelve hours after receiving their DPT shot, 13% within twenty-four hours and 26% within three days.8

There has been much suspicion and investigation into the cause for the dramatic increase of autism in children. Many believe that it may be linked to vaccines, yet this has not been officially proven. Part of the suspicion has arisen because the vaccine is administered at twelve to fifteen months of age and autism symptoms usually become apparent around fifteen to eighteen months of age. 9

Vaccinations today continue to arouse concern among many in our society. They diminish a person's natural immune system and are not free from side effects. In many cases, they have not prevented people from contracting diseases. If you are considering receiving vaccination or having your children receive vaccination, investigate this topic more deeply, weigh the pros and cons and come to your own conclusion on whether you or your family should use vaccinations.

Shawn Stevens

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