

The conclusion of Kennedy's anti-vaccine ACIP meeting: The death knell of scientific inquiry

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19 September 2025

Health Secretary Robert F. Kennedy Jr.'s handpicked Advisory Committee on Immunization Practices (ACIP) concluded its two-day meeting in Atlanta on Friday by voting to further restrict COVID-19 vaccine access and delay critical childhood immunizations.

The proceedings represent the next stage in the Trump administration's war on science and public health. What was once a globally respected, science-driven advisory body has now become a stage for the promotion of ideology and demagoguery, rather than scientific inquiry and consensus. Expert voices were dismissed, replaced by individuals with little relevant expertise and a record of anti-vaccine disinformation, upending decades of vaccine policy built on careful data review and diverse professional input.

The panel's most devastating decision involved COVID-19 vaccines, with members voting to abandon universal recommendations in favor of "shared clinical decision-making," a euphemistic term that places further barriers between Americans and lifesaving vaccines.

The committee recommended COVID-19 vaccination only for adults 65 and older, while younger Americans must now consult healthcare providers about "risks and benefits," effectively transforming a public health imperative into an individual choice. This represents the latest in a long line of restrictions on COVID vaccine access that began under Biden but have dramatically intensified under Kennedy's watch.

The real-world ramifications are severe. Millions of Americans who rely on Medicaid, Medicare and private insurance will face new barriers to vaccination, as insurers typically only cover vaccines recommended by the ACIP. The committee's weakened language signals a preference for personalized consultation that could result in individuals being told they should avoid vaccination based on perceived rather than actual risk.

These restrictions come as devastating new data confirms the deadly consequences of limiting vaccine access. A study

published Thursday in JAMA Network Open projected that COVID-19 will cause 814,000 hospitalizations and 54,000 deaths nationally over the next 12 months. Universal COVID-19 vaccination recommendations, compared to restricting vaccination only to high-risk groups, would prevent thousands of additional hospitalizations and deaths. Specifically, expanding recommendations to all ages would prevent an additional 28,000 hospitalizations and 2,000 deaths beyond what restricting to high-risk groups would achieve.

The committee's assault on childhood immunizations proved equally destructive. On Thursday, the panel voted to no longer recommend the MMRV combination vaccine for children under four, replacing it with separate MMR and varicella shots. Public health experts warn this change will result in reduced vaccine uptake, greater inconvenience for families, and dangerous gaps in immunization that will allow previously controlled pathogens to reemerge among vulnerable children.

The panel canceled its planned vote on delaying the hepatitis B vaccine from birth to one month of age, though only after pressure from within the Trump administration to avoid negative publicity. The universal birth dose has nearly eliminated perinatal hepatitis B transmission, dropping cases from up to 90 percent of infants born to infected mothers to just 13-17 cases annually nationwide. Delaying this protection would expose thousands of newborns to preventable lifelong infection and liver cancer.

The committee's anti-science agenda was embodied by several notorious new ACIP members who already have more than 1 million deaths on their hands from spreading anti-vaccine disinformation throughout the COVID-19 pandemic. Committee chair Martin Kulldorff, co-author of the deadly "Great Barrington Declaration" that advocated letting COVID spread freely, opened the meeting by challenging nine former CDC directors to "a live public debate with me concerning vaccines," declaring that

scientists who refuse such theatrical confrontations cannot be trusted.

Retsef Levi, who leads the committee's COVID vaccine working group despite being an MIT professor of operations management with no immunology expertise, has called mRNA vaccines "the most failing product in history of products" and advocates for their complete withdrawal from the market. During Friday's proceedings, Levi declared that vaccine assessments should avoid describing vaccines as "safe and effective," calling such language "inappropriate or scientific." At one point during Levi's presentation, a microphone caught someone muttering "idiot," reflecting the scientific community's exasperation with the committee's pseudoscientific theatrics.

Other committee members, including Dr. Wafik El-Deiry and Dr. Charlotte Kuperwasser, promoted debunked theories about mRNA vaccines causing cancer and birth defects, despite billions of doses administered globally with no evidence supporting these claims. Committee member Robert Malone, a notorious anti-mRNA vaccine fanatic, at one point shouted at pediatrician Cody Meissner: "There is no established correlate of protection for COVID. Period. Full stop. Don't say otherwise."

While El-Deiry and Kuperwasser raise a hue and cry over purely *theoretical* risks of COVID vaccines, such as the long-term persistence of spike proteins or impact on the immune system—repeating debunked arguments found in anti-mRNA and COVID-19 vaccine circles—they said nothing about the "mass disabling event" of Long COVID and its monumental impact on the planet's population and long-term well-being.

The committee systematically excluded CDC scientists from presenting data, replaced traditional liaison groups with ideological allies, and elevated unvetted anti-vaccine propaganda over peer-reviewed research. Dr. Sandra Fryhofer of the American Medical Association condemned the proceedings, stating: "We're concerned about how vaccine recommendations are being developed by this new panel, with selective data being utilized to support specific conclusions."

The committee's actions stand in stark contrast to overwhelming scientific evidence. Billions of mRNA vaccine doses have been administered globally, with safety profiles rigorously monitored by multiple systems. Serious adverse effects are extremely rare and manageable, with the risk of COVID-19 far exceeding that of vaccination. The international consensus from the CDC, WHO, and numerous peer-reviewed studies has consistently confirmed the remarkable safety and efficacy of mRNA vaccines.

Yet Kennedy's panel chose ideology over evidence. CDC data presented at the meeting confirmed that febrile seizure risk after measles-containing vaccines is less than one per

1,000 doses, and that these are transient events that cause no lasting harm. Despite this, the committee voted to restrict access to combination vaccines that have protected children for decades.

Perhaps more critical than these votes were the gross misrepresentations of the scientific process that has gone into making these vaccines available to the public over more than a century. In particular, Retsef Levi's assertion that childhood and other vaccines have not undergone long-term placebo-controlled trials grossly distorts the realities of vaccine research and public health oversight.

Decades of rigorous trials and extensive real-world monitoring support the safety and efficacy of routine vaccines, including multiple large-scale randomized placebo-controlled studies for vaccines against polio, measles, mumps, rubella and others. Ignoring this evidence, Levi has repeatedly advanced unfounded claims, particularly against mRNA vaccines, despite the scientific consensus that vaccination dramatically reduces hospitalization and death from preventable diseases.

In a further departure from precedent, the ACIP board has even actively limited external critiques and participation during meetings. CDC scientists have been blocked from informing or reviewing committee recommendations, while traditional liaison groups and voting members have been replaced or removed.

The proceedings exposed a committee guided not by evidence but by the personal ideologies of Kennedy's handpicked appointees. By blocking external critique, limiting scientific input, and replacing transparent deliberation with anti-vaccine propaganda, Kennedy's ACIP represents a fascistic departure from evidence-based public health.

These policy shifts will disproportionately harm working families who depend on public health programs and insurance coverage for vaccine access. In making vaccines harder to obtain and more expensive, Kennedy's agenda constitutes a class attack that will leave the most vulnerable Americans exposed to preventable disease and death.



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