

Censorship and free speech in scientific controversies

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Many publicly debated issues have implications for health, including smoking, pesticides, food additives, seat belts, fluoridation, vaccination and climate change. Campaigners on such issues use a variety of methods, including presenting evidence and arguments, denigrating opponents, lobbying and organising protests. In some cases, campaigners seek to censor opponents, most commonly on the grounds that their views are false and dangerous. To probe rationales for censorship, recent events in the Australian public debate over vaccination are examined. A citizens' group critical of vaccination has come under heavy attack, with pro-vaccination campaigners and politicians trying to shut down the group and restrict its speech. This case study provides a window into arguments about free speech on scientific controversies with implications for public health. It highlights the tension between the alleged dangers of expressing ideas and the value of open debate in a free society.

Keywords: scientific controversies; public debate; free speech; censorship; vaccination.

1 Introduction

There are numerous public controversies on topics concerning health and medicine, such as: asbestos, cancer therapies, fluoridation, food additives, genetic modification, HIV/AIDS, microwaves, pesticides, seat-belt legislation, smoking and vaccination (Chapman 2007; Freeze and Lehr 2009; Proctor 1995; Richards 1991). Some debates on what are seen as environmental topics, such as nuclear power and climate change, have significant health implications, as do debates on topics in the realm of peace and war, such as land mines and nuclear weapons.

Participants in scientific controversies use a variety of methods to advance their cause, including: talking to friends, writing letters, circulating information, advertising, lobbying, giving talks and attending rallies (Martin 2014). The basic approach in much campaigning is to present information supporting one's own view in an effort to win people over, especially those who make policy. In principle, anyone can contribute to public debates, though groups with more money and power have greater access to the 'marketplace of ideas'.

Some public debates are highly acrimonious, with partisans seeking to discredit the information provided by opponents. This can be considered part of public debate. A line is crossed, however, when the opponents themselves

become the target for condemnation, abuse, ridicule and censorship, all of which can operate to discourage participation in the debate or to block some people from speaking.

Periodically, calls are made to restrict the speech of one side or the other on controversial public issues. A few recent examples from Australia illustrate this. In 2011, climate sceptic Christopher Monckton was invited to give a talk at Notre Dame University in Perth, Western Australia. Many climate scientists signed a petition opposing the university's decision. Nevertheless, the talk went ahead (Arup 2011; Burrell 2011; Latter 2011).

In October 2013, the Australian Broadcasting Corporation (ABC) radio show 'Catalyst' ran a two-part series critical of the widespread use of cholesterol-lowering drugs. A leading scientist asked that the second part not be broadcast because it would endanger people's health. The ABC defended the broadcast (Corderoy 2013; Media Watch 2013).

In November 2013, politicians in the Green Party called for an investigation of the Waubra Foundation, which campaigns against wind turbines on the grounds that they cause health problems among people living nearby. A news report characterised the move by the Greens as:

... a bid to muzzle one of Australia's most prominent anti-wind farm lobbies. (Sturmer and Clark 2013)

Each of these episodes displays a different configuration of health risks and expert opinion, as well as raising other issues such as the roles and responsibilities of universities and the media. What they have in common is an expressed concern about the danger of speech by some participants in a public debate with health dimensions. Providing misleading information in such controversies can affect not only public understanding but also cause some people to act in ways detrimental to their health. A central issue in such cases is whether campaigners or journalists should be allowed to make statements challenging medical orthodoxy or, to look at this in another way, whether it is justified to censor dissident views or penalise those who express them. This issue can also be assessed in pragmatic terms: will censorship be effective in protecting public health, or does it run the risk of creating more interest in the censored information (Jansen and Martin 2003)?

Corporations and governments sometimes act to restrict public comments on health issues. McDonald's famously sued activists over a leaflet that questioned the health impacts of the company's food, among other criticisms. The defamation action was a public relations disaster for McDonald's, resulting in vastly more attention to the leaflet and its criticisms than if it had just been ignored (Donson 2000; Vidal 1997). Governments in some US states have passed 'food disparagement laws' to prevent public comment critical of particular foods, such as broccoli and beef (Jones 2000). These laws have not often been used or with any success, perhaps because their constitutionality is questionable (Kohen 2011).

The advantages of preventing expression of misleading ideas about health might seem obvious, but they need to be considered in conjunction with arguments for free speech. According to legal scholars, the most common arguments in favour of free speech are that it is a defence against tyranny, that open debate allows beliefs to be tested and error rectified, that free speech enables citizens to participate in the democratic process, and that free speech allows citizens to develop their capacities (Barendt 2005; Hare and Weinstein 2009; Sadurski 1999). Much of the writing on free speech deals with protection of political speech from government control, focusing on legal dimensions:

The free speech principle forbids government from punishing people for publicly rejecting widely held opinions. (Sunstein 2003: 97)

However, censorship also can be instigated by corporations (Jansen 1988) and other groups. Here, because the focus is on controversies with health implications, the principles rather than the legalities of free speech are relevant, and the ambit is broadened to cover any of a range of threats to expression.

Studies of scientific controversies (Kleinman et al. 2005, 2008, 2010; Nelkin 1979) highlight the additional specific points that research can never remove all uncertainties, that scientific claims should always be open to challenge

and revision, and that controversial public issues are never entirely scientific. Research on public participation (Goggin 1986; Jones 1997; Joss and Durant 1995; Kleinman 2000; Sclove 1995) can be used to argue that citizens are capable of understanding and contributing to controversial scientific issues and that an informed public that hears and understands both sides of a debate is a stronger protection against error than one that is expected to follow the advice of authorities without question. Curtis (1995) argues that, because of the importance of open debate in scientific inquiry, speech in contested complex scientific matters should be afforded extra protection compared to speech in other arenas.

To stimulate an assessment of the arguments and methods concerning censorship and free speech in health controversies involving the public, recent events in the Australian debate over vaccination are examined in which pro-vaccinationists have sought to curtail the speech of a vaccine-critical group. This dispute is especially illuminating because of the sustained and multi-faceted nature of the efforts to restrict speech and because campaigners have articulated several different justifications for restricting the speech of opponents. Because of the exceptional intensity of this particular campaign to restrict speech, it highlights features that seldom receive an airing in the episodic incidents of attempted speech-restriction more commonly encountered in disputes involving public health.

Section 2 gives the background to these events. Sections 3 and 4 give details of the methods used to restrict speech and the rationales offered for doing so, with special attention to efforts to oppose a vaccination critic speaking at a public event. After this, the arguments raised in defence of restricting speech are scrutinised in Section 5. Section 6 draws conclusions and addresses some of the implications of this examination.

2. The Australian vaccination debate: Background

Regarding speech, Australia has no bill of rights or other explicit constitutional protection for free expression, though the High Court has inferred a limited right for certain forms of political speech. Laws against defamation are draconian—for example, the public figure defence available in the US seldom applies—and often used for purposes of censorship (Pullan 1994). The speech of government employees is restricted by what can be described as official secrets acts. Despite lack of legal protections, speech in many areas is vigorous, with censorship combated through actions by free speech campaigners, trade unions, peace activists and others, depending on the issue. For example, environmentalists have campaigned against legal actions designed to muzzle them (Ogle 2009). Among the issues publicly debated are many

with significant health implications, including: smoking, nuclear power, pesticides, HIV/AIDS, cholesterol, cancer therapies, fluoridation, repetition strain injury, climate change, microwave radiation, genetically modified organisms—and vaccination.

Nearly all health authorities worldwide support vaccination. The principal critics are citizens' organisations, supported by a small number of doctors and researchers (Hobson-West 2007). Proponents say that vaccination is a safe and effective way to reduce the risks of infectious disease (Andre et al. 2008; Offit and Bell 2003). Critics say the benefits of vaccination are not as great as claimed, while the risks are greater (Habakus and Holland 2011; Halvorsen 2007). However, the debate is only partly about the science concerning benefits and risks. Proponents argue that with high vaccination rates, viruses cannot easily spread, resulting in a community protection process known as herd immunity. Thus, vaccination is a moral imperative because of the collective benefits obtained. Critics argue for parental choice in children's vaccination, citing the principle of individual freedom. Thus the two sides differ in their assessments of both the scientific evidence and the significance of collective benefits (herd immunity) versus individual decision-making (parental choice).

By world standards, Australian government health departments recommend a large number of vaccines and, to increase childhood vaccination rates, have provided various incentives to parents and doctors. For example, vaccines on the government schedule are provided at no cost to recipients, and until 2013 general practitioners received payments to:

... monitor, promote and provide age appropriate immunisation services to children under the age of seven years. (Immunise Australia Program, Australian Government, Department of Health 2013)

Parents can obtain exemptions from vaccination for their children on medical, religious or principled objection grounds. Unless they have exemptions, parents are ineligible for certain government welfare payments (Department of Human Services, Australian Government 2014). On the other hand, vaccination is not mandated except for certain health workers. Beginning in 2014, the New South Wales state government requires childcare centres to obtain evidence of each child's vaccination status (NSW Health 2014).

The result of these measures, in combination with government endorsement of vaccination, has been quite a high rate of vaccination across most of the country. This high rate has been stable for years (Leask and Willaby 2013).

In the face of overwhelming official support for vaccination, a few individuals and groups have raised criticisms. Viera Scheibner, a retired geoscientist, was an influential early critic (Scheibner 1993). Most other prominent critics do not have medical or scientific credentials. The

Australian Vaccination Network (AVN),¹ set up in 1994 by Meryl Dorey, is a typical vaccine-critical group. It grew to become the largest and most active citizens' group of its type in Australia, running a website and publishing a magazine with some 2,000 member-subscribers. Dorey has given many talks and media interviews. For example, as well as giving talks at special events, she has gone on speaking tours, travelling to small towns to give talks organised by local residents, with attendance usually in the dozens. The AVN, operating nationally, was set up as an incorporated body in the state of New South Wales. For the first 15 years of its existence, the AVN was pretty much left alone to promote its message.

3. The campaign against the AVN

In 2009, pro-vaccination citizens, with links to the Australian Skeptics, a group supportive of mainstream medicine and hostile to alternative therapies, set up Stop the Australian Vaccination Network (SAVN).² From the beginning, the stated goal of SAVN has been to shut down the AVN. In practice, this means forcing the organisation to close (including closing its website and stopping publication of its magazine), preventing its members from speaking in public venues, and discouraging media coverage of the AVN or its leading figures.

It should be noted that the analysis here does not require endorsing the views or methods of the AVN or its critics, nor passing judgement on the substantive issues concerning vaccination. It is also worth noting that all parties involved have the same goal, namely improving children's health, but differ about how best to achieve this goal. It is reasonable to presume that participants are sincere in their beliefs about vaccination and about the legitimacy of the methods they use to promote their beliefs.

I personally do not hold strong views about vaccination, pro or con, but am more interested in the dynamics of the debate and the exercise of power to suppress dissent (Martin 1999). Nevertheless, I am aware that by giving serious consideration to the marginal view, I may be seen as supporting it or may have my work used to support it. This is an ongoing dilemma for social analysts of polarised controversies (Scott et al. 1990).

SAVN's principal presence is a Facebook page with dozens of regular contributors and thousands of friends, supplemented by blogs run by individuals. Some AVN opponents have operated separately from SAVN.

Some associated with SAVN (called here SAVNers) are nurses, doctors or science students, but relatively few SAVNers reveal much about themselves publicly, such as their ages, qualifications or occupations. Many use pseudonyms. They claim to raise money for activities through donations from their ranks, but there is neither public accounting for these funds, nor public knowledge of the sources of income for individuals, so it is unknown

whether any support for SAVNers or their activities comes directly or indirectly from pharmaceutical companies or other pro-vaccination groups.

From the inception of SAVN in 2009, SAVNers have used a range of methods in their attempts to discredit and close down the AVN (Martin 2011, 2012). First, SAVN, as part of its self-description on its Facebook page, claimed that the AVN believes in a global conspiracy to implant mind control chips via vaccination, though without providing any convincing evidence for this seemingly absurd allegation. (This claim by SAVN was subsequently modified.) Secondly, SAVNers have made numerous derogatory online comments about the AVN and about AVN members who post public comments, especially Dorey. For example, Dorey has been called ‘a one woman bullshit band’ (Mooselet 2011), a ‘misinformation lunatic’ (Askegg 2011) and a ‘cunt’ (reproduced in Dorey 2011), among hundreds of other epithets. Thirdly, SAVNers and others have made numerous formal complaints about the AVN to government agencies. Agencies sometimes requested responses from the AVN. The large volume of complaints has served as a form of harassment, requiring time and expense to address them. Fourthly, an anti-AVN group called Vaccination Awareness and Information Service posted a ‘hall of shame’ with names and contact details of advertisers in the AVN’s magazine, inviting harassment. This led Dorey to refuse any new advertisements because of the risk to advertisers. Fifthly, some individuals have sent pornography and made threats to Dorey and others. For example, a message left on Dorey’s answering machine—‘Die in a fire’ repeated over and over—was traced to the home of a leading figure in SAVN (Dorey 2012).

The methods described here, and others, have been effective in hindering the operations of the AVN—for example, it has laid off its paid office assistants and ceased publishing its magazine—and discouraging participation by AVN members in public debate. Efforts by SAVNers to discredit the AVN, portraying it as a danger to the public, were eventually taken up by others, outside SAVN, including government agencies, politicians and medical authorities, some of whom have issued calls to shut down the AVN or restrict its speech.

The net effect of SAVN’s ongoing campaign has been to hinder the AVN’s usual activities and thus could be considered a threat to its ability to present its views. For the present purposes, it is useful to focus on just one of SAVN’s methods: attempting to block Dorey from giving public talks. This is a clearer and more traditional form of censorship. Furthermore, some SAVNers have tried to justify their actions, thereby providing useful material for an assessment in terms of free speech arguments.

A typical sequence involving a public talk goes like this: the AVN announces a talk by Dorey and SAVNers then post messages on the SAVN Facebook page encouraging

the sending of letters to the organisation hosting the talk or providing the venue. Such letters might say Dorey is a liar and that her views are dangerous, and include other statements intended to encourage cancelling the talk or withdrawing the venue. As a result of such messages, some organisations have required the AVN to hire security guards because of the possibility of disruption. However, SAVNers seem not to have physically disrupted Dorey’s actual talks. Nearly all their operations are online.

Compared to struggles in other scientific controversies, SAVN’s campaign has been exceptional in its duration, persistence and range of methods used. So far as can be determined from public accounts, there is no other example anywhere in the world in which a citizens’ organisation, engaged primarily in providing information on vaccination or indeed any other controversial scientific issue, has come under such a sustained and virulent attack from another group of citizens. There is no obvious explanation about why this has occurred in Australia on the vaccination issue. Whatever the reason, the attack has led to free speech arguments being articulated in a more open way than most other controversies.

When the AVN protested against SAVN’s tactics, arguing that free speech was being curtailed, some SAVNers felt the need to justify their methods. To illustrate the arguments involved, it is convenient to focus here on a particular event, the 2011 folk festival held at Woodford in Queensland. At several prior Woodford festivals, Dorey had given talks on vaccination. In 2011, SAVN mounted a campaign to stop Dorey’s talk. SAVNers wrote letters to the festival organiser, to local politicians and to the media attacking Dorey and the AVN, and calling on the festival director to cancel her talk. As well as comment on SAVN’s Facebook page, at least 17 individuals wrote about the Woodford events in personal blogs, many of them addressing free speech issues. These blogs provide a window into the range of arguments on this issue.

Methodologically, an advantage of examining these particular blogs is that they provide comparable data about rhetorical techniques used by discrete AVN opponents. An alternative would be to analyse postings on SAVN’s Facebook page, but given that there are hundreds of thousands of posts on diverse topics, many having nothing directly to do with the AVN, and that many Facebook posts are brief and must be evaluated in the context of ongoing exchanges, the difficulties in undertaking such an analysis are enormous. The Woodford blogs are by comparison well defined and all on the same topic. I read each of the 17 Woodford blogs listed by SAVN (2011)—most of them are relatively short—and noted the presence or absence of abusive or devaluing comments about Dorey, descriptions of SAVN’s methods of censorship, and commentary about debating and free speech. Table 1 gives a tally of the frequency of these three features. In the following discussion, key themes, especially

Table 1. Numbers and percentages of 17 SAVNer blogs about Dorey’s 2011 Woodford talk displaying particular features

Feature of blog	Number of blogs	% of blogs
Abusive or devaluing language	10	59
Methods of censorship described	7	41
Debating and free speech discussed	11	65

rationales for censorship, are extracted and illustrated using quotes from the blogs.

The premise of the bloggers was that Dorey should not be allowed to speak. For example, Raffaele (2011) commented:

They are giving a stage and a microphone to someone who’s [*sic*] facile ranting should not be heard outside her own nut farm. (Dorey’s husband is a macadamia nut farmer.)

Seven bloggers described SAVN’s efforts to stop Dorey’s talk. For example, Bastard Sheep (2011) wrote:

StopAVN first approached WoodfordFF [Woodford Folk Festival] to let them know just what/who they were providing a platform to, and they didn’t care. If anything, their response yet again showed they supported the unhealthy and dangerous stance Meryl promotes. StopAVN then went to the media contacts. This second approach has proven more successful, with numerous sponsors pulling out due to the misinformation claims not only of Meryl and the AVN, but also of other stalls and speakers at WoodfordFF. Numerous organisations including council/governments who support but don’t sponsor the festival requested their names and logos be removed from sponsor lists.

3.1 Argument 1: The AVN provides misleading information

The most common argument against Dorey being allowed to speak was that she is a purveyor of false statements and lies about vaccination. The implication, only occasionally spelled out, is that members of the public should not be exposed to such statements, because they might believe them and decide against vaccination. Dave the Happy Singer (2011) in his blog wrote:

The more people think Dorey’s viewpoints are a legitimate alternative to well established science, the more caring parents will misjudge the benefits of vaccinations versus the risk. That *informed choice* mad Meryl so worships will become a *badly informed* choice. It’s not about censorship, and it’s not about free speech. (emphasis in the original)

Eggrings (2011) wrote:

... we’d rather the mis-information and nonsense spouted by the Australian Vaccination Network was given no platform at all! This is because we expect Meryl Dorey to lie.

3.2 Argument 2: Dorey lacks expertise

Some bloggers stated that Dorey was not an expert, with the implication that only credentialed experts are allowed to speak. A media release by SAVN in relation to the 2011 Woodford Festival stated:

Despite her claims to the contrary, Ms Dorey is *not* an expert, nor does she hold any qualification, in medicine, science, statistics or immunology. There is no debate about the safety or efficacy of vaccines within the mainstream medical and scientific communities — that is, among *experts* in the field. (reasonablehank, 2011; emphasis in the original)

3.3 Argument 3: The AVN practises censorship

Many of the bloggers said that Dorey was a censor. The AVN runs a blog, and many SAVNers had posted comments challenging AVN claims. Some of the SAVN postings had been removed and the authors blocked from posting. The unstated assumption underlying this argument is that if Dorey practises censorship, then censoring her is justified. For example, Bastard Sheep (2011) wrote:

They regularly cry oppression, censorship and demand free speech, despite blocking/banning anyone who dares counter president Meryl Dorey with information that is nothing more than factual.

3.4 Argument 4: Dorey can speak somewhere else

Several of the bloggers stated that they were not restricting Dorey’s free speech, because she was free to speak elsewhere: she just should not be allowed to speak at the Woodford Festival. For example, Sullivan (2011) wrote:

You can’t say that Meryl’s free speech matters, but the free speech of everyone that wants her gone does not. Once she’s off the list of speakers, she’s free to voice herself against these people in the same manner that they did.

4. Other opponents of the AVN

From the beginning, SAVN’s goal has been to force the AVN to close. Along the way, SAVNers have tried to discourage mass media coverage of the AVN. When a news outlet reports on Dorey or the AVN, SAVNers bombard the editor with complaints. The result has been that some media outlets now avoid mentioning the AVN, at least not in neutral or favourable terms. In 2013, the Sydney newspaper *The Daily Telegraph* launched a campaign for stronger measures to promote vaccination, supplemented by articles critical of Dorey and the AVN (Hansen 2013).

After several years of campaigning by SAVN, some politicians joined in the attack on the AVN. Their basic argument is that the AVN is providing incorrect information that may affect vaccination rates and thus is

dangerous to the public—and hence the AVN should not be allowed to speak.

In 2013, politicians in the state of New South Wales united to change the law so a watchdog body, the Health Care Complaints Commission (HCCC)—set up to handle complaints about health care providers such as doctors and nurses — would have more power, in particular to investigate the AVN (for background, see Vines and Faunce 2012). In the course of the debate in the state parliament over the proposed increase in the HCCC's power, many politicians from different parties made strong statements against the AVN. For example, concerning the legislative changes, the Honourable Catherine Cusack stated, on 8 May 2013:

They will close the loopholes that allowed the Australian Vaccination Network to continue issuing its misleading and deceptive information. Countering the dissemination of dangerous information by any non-health care provider is the highest priority. . . . I call on the Health Care Complaints Commission immediately to stop the Australian Vaccination Network spreading misleading information. . . . (Cusack 2013: 20156)

This quote illustrates a standard argument: the AVN is 'spreading misleading information' and hence should be stopped.

In the Australian Senate, a member of the Australian Greens, Senator Richard Di Natale, moved a motion that noted low vaccination rates in some parts of Australia, referred to:

. . . the irresponsible campaign run by the Australian Vaccination Network, which is spreading misinformation about the risks of vaccination and discouraging parents from vaccinating their children.

He also called:

. . . on the AVN to immediately disband and cease their harmful and unscientific scare campaign against vaccines. (Di Natale 2013)

This was passed unanimously on 25 June 2013. It was a statement of sentiment only, having no power over the AVN. The motion exemplifies the most common argument against the AVN: 'misinformation' causing danger to the public. There was no mention of free speech or the value of public debate.

A few figures from the Australian Medical Association (AMA) and other professional bodies have made public comments relating to the AVN. A news story in April 2013 reported views expressed by Steve Hambleton, president of the AMA.

He said some form of sanctions should be imposed against those who spread misinformation about vaccines, but did not elaborate what form these should take.

'We need to look at the groups providing those anti-vaccination messages and we need to make sure we stop them'. (Swan and Corderoy 2013)

The examples here show a concern to promote children's health by preventing the speech and other activities of vaccination critics.

5. Examination of arguments for censorship

Each of the main justifications for censoring or shutting down the AVN raised by the group's opponents can be challenged on various grounds. These include that the justifications are based on unsupported assumptions, that open debate has social value, and a double standard is involved, namely that the justifications for censorship concerning vaccination are not applied to public debates on topics other than vaccination.

5.1 Argument 1: The AVN provides misleading information

Politicians and citizens who oppose the AVN claim that the organisation should be censored or shut down because it provides misinformation dangerous to public health. Several assumptions underlying this argument require examination. The first is that the truths about vaccination are definitively established. However, not all conclusions supporting vaccination are scientifically unquestionable: critiques continue to be published in scientific journals (Goldman and King 2013; Tomljenovic and Shaw 2013). AVN's opponents have not gone so far as to say that such critiques be censored, but they do say the AVN should be shut down, which would mean it would not be able to disseminate scientific criticisms.

A second assumption is that vaccination is a unified whole, meaning that support for vaccination requires unquestioning support for every vaccine on the government schedule. This implies that criticism of even a single vaccine, for example flu or human papillomavirus, makes one 'anti-vaccination'. This assumption is not logical, given that many vaccines can be taken singly and that different numbers of vaccines are mandated or recommended in different countries.

A third assumption is that statements critical of vaccination are hazardous to public health. This may be true, but no evidence has been provided that Australian vaccination rates have been affected by the AVN. That vaccination rates in Australia are high and stable (Leask and Willaby 2013) casts doubt on claims that the AVN's activities have been harmful to public health.

A 2012 survey of AVN members showed that contact with the AVN was only rarely the factor that led them to initially question vaccination and study the issue further (Wilson 2013). This finding is compatible with the view that vaccine-critical groups such as the AVN are largely a consequence of concerns about vaccination that develop independently, for example when parents observe their children's adverse reactions to vaccines or experience arrogant treatment by doctors (Blume 2006).

The lack of justification for these three assumptions weakens the argument for shutting down the AVN solely because it allegedly provides misinformation. To this may be added arguments for free speech noted earlier, including the value of open debate and an informed public (Vines and Faunce 2012: 54).

A modified argument against the AVN is that some of its statements are wrong or misleading, and hence all its speech should be curtailed. However, this argument, if applied elsewhere, might require closing down speech even by vaccination proponents who make mistakes or misleading statements, for example equating vaccination and immunisation.

A pragmatic argument for free speech on vaccination is that challenges to dominant scientific views are widespread on numerous issues, for example HIV/AIDS, climate change, fluoridation and cancer therapies. If groups critical of vaccination are so dangerous that they should be shut down, one implication might be that critics of medical or scientific orthodoxy in other areas should also be silenced.

5.2 Argument 2: Dorey lacks expertise

This argument is a spin-off of the argument in Section 5.1, that the AVN provides misleading information. To say someone lacks expertise on a topic, though, does not offer any new justification for preventing them from speaking. Furthermore, it begs the question of who decides whether a person has sufficient expertise to make a public comment. If implemented more generally, the application of this argument more generally would shut down most public speech on public controversies. Ironically, it would also disallow speech on vaccination by most SAVNers.

5.3 Argument 3: The AVN practises censorship

The claim by some SAVNers that the AVN censors its opponents and therefore, by implication, deserves to be censored lacks a logical justification. There is no law or rule that a group that practises censorship thereby forfeits its own claim to free speech. Furthermore, SAVNers are inconsistent in their application of their claim. The AVN has blocked many SAVNers and others from its blog, but few defenders of free speech argue that an organisation's own blog must necessarily be open to opponents. This expectation is not applied to pharmaceutical companies or government health departments. SAVN itself has blocked critics of vaccination from its Facebook page. It is reasonable to conclude that complaints about AVN censorship are a pretext for SAVN's much greater censorship of the AVN.

5.4 Argument 4: Dorey can speak somewhere else

For SAVNers to say 'she can speak somewhere else' is not an argument at all. Given that SAVNers have attempted to block many other talks by Dorey, and have complained to media companies, attempting to discourage giving her any coverage, referring to 'somewhere else' is a distraction from SAVN's efforts at censorship. Furthermore, for SAVNers to refer to their own freedom of expression, namely to criticise Dorey, does not negate that their goal is censorship.

6. Conclusions

Citizen campaigners on controversial issues make many claims and counter-claims, commonly treated as a normal part of public debate. However, in some cases one or both sides seek to restrict the speech of their opponents, for example using laws, defamation actions and threats. This raises the question of whether justifications for restricting speech are sufficient to counter the usual arguments for allowing public comment on contested issues affecting health.

Many individuals and groups have argued that the speech by a vaccine-critical group, the AVN, should be curtailed, and indeed that the group should be shut down entirely. The opponents of the AVN could be said to be engaged in 'boundary work' (Gieryn 1999; Swedlow 2007), namely a set of rhetorical and practical methods to demarcate 'science' from 'non-science' or 'good science' from 'bad science'. The AVN's opponents can be thought of as seeking to build and police two different boundaries: one that ordains and preserves orthodox science as the dominant and conclusive voice in public policy and one that stigmatises or excludes dissenting voices.

One of the goals of the AVN's opponents is to discourage or prevent media coverage of the AVN and its views. This meshes with concerns in other debates, such as climate change, that when journalists report on both sides of a controversial issue, this can give unwarranted credibility to those with little or no scientific credibility (Boykoff 2013). Setting aside the point that controversial issues involve more than science, a key question arises: how would one induce the media to change its coverage? One approach would be to convince journalists and editors that only one side warrants sympathetic coverage. This is different from advocating censorship, for example by threatening venue hosts with withdrawal of patronage, bombarding media and media-watchdog agencies with complaints after unwelcome stories, and using abuse to discourage expression of dissenting views. The issue addressed here is censorship, not the rational persuasion of journalists about the appropriate balance in reporting on an issue.

Several authors have documented how corporations ‘manufacture doubt’ as a means of protecting their interests (Michaels 2008; Oreskes and Conway 2010). For example, tobacco companies sought to create doubt about the conclusiveness of research linking smoking with lung cancer and other diseases. Opponents of the AVN might be thought of as seeking to prevent the manufacture of doubt about the effectiveness and safety of vaccines. Again, a key consideration is how this process operates, in particular whether or not it involves censorship. Critics of doubt manufacture have relied on careful analysis and exposure of corporate strategies. Furthermore, in the vaccination issue, the censors are on the side of vaccine manufacturers. Citizen critics of vaccination have relatively little money or connections compared to the corporations promoting doubt about the dangers of asbestos, cigarettes or climate change.

The most frequently expressed rationale for censoring the AVN is that some of its statements are false or misleading and dangerous to public health. If this rationale, applied to other public debates, were considered sufficient to curtail comment, the implications would be far-reaching.

Consider the potential ramifications of the view that the government should intervene to stop the expression of misleading information affecting public health. This raises a series of questions. First, who decides what constitutes misleading information? If there is some official body that adjudicates such matters, who decides the membership of this body? Secondly, what measures should the government be able to take against those who express information judged to be misleading? Does this mean censoring websites or preventing individuals from speaking, or perhaps having the text of talks vetted by the official body? Thirdly, would supporters of orthodoxy, such as pro-vaccinationists, be subject to the same sort of scrutiny?

The implications of this line of thinking lead down a road of control over speech on contested health issues that raises uncomfortable suggestions of an authoritarian state or scientific dogmatism (Bauer 2012). If it were sufficient to claim that someone’s speech is misleading and potentially dangerous to public health, with the key criterion of being ‘misleading’ being disagreement with prevailing scientific knowledge, then public debate on all manner of controversial issues would be in jeopardy. The mass media might not be allowed to report the views of climate sceptics; websites might not be allowed to claim that wind farms cause adverse health effects. A sizeable government apparatus would be required to assess claims, impose penalties and censor planned public comment. None of those who oppose expression of dissident citizen views on health issues, or who believe the government should have the power to penalise or prohibit statements in public controversies deemed false and misleading, has provided a detailed blueprint for either how these powers would operate or what their limits might be.

When corporations or large media organisations endorse or report dissident views, as with climate change for example, it is implausible that governments would attempt to prevent or penalise expression of these views.

Instead of seeking to prevent the expression of statements thought to be false and misleading, there is an obvious alternative: support the right of others to make statements on controversial issues—even ones judged false and misleading—while vigorously contesting their claims. In the Australian vaccination debate, an alternative to censorship is education of members of the public, especially parents, about vaccination, so that they can make well-informed decisions (Leask et al. 2012).

Whether institutional means could be used to protect free speech in the vaccination debate is an open question. Most of the methods used by SAVN are legal, but due to persistent and targeted use have the combined effect of discouraging expression of contrary views in public forums. Introducing policies to regulate the activities of campaigners might only provide new tools to be used against those with less power.

Shutting down the AVN can hardly shelter parents from views critical of vaccination, which are freely available on the Internet. Furthermore, censorship runs the risk of backfiring: some parents, seeing the extraordinary efforts to shut down a citizens’ group, might want to discover what views are considered so dangerous that their expression must be restricted, and become more interested in vaccine-critical views (Jansen and Martin 2003; Marton et al. 2010: 64–5). However, such an outcome is not guaranteed. If campaigns of abusive comment and targeted complaints against opponents become normalised, this can poison the possibilities for open and reasoned discussion of the issues. It is in this context that arguments about free speech become important: such campaigns should be understood as attempts at censorship.

The impulse to censor is often stimulated by worthy objectives, including improving public health. However, on both principled free speech grounds and pragmatic considerations, it may be better to welcome open debate and to treat audiences as capable of assessing evidence and arguments and making informed judgements.

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Notes

1. In 2014, a government department forced the AVN to change its name. The group chose the new name Australian Vaccination-skeptics Network, retaining the initials AVN as its abbreviation.

2. As of July 2014, SAVN's Facebook page gave its name as 'Stop the Australian (Anti)Vaccination Network'. The acronym SAVN still applies.

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