

## Covid-19 Response Inquiry

I am an individual, writing on behalf of my family, who have been affected, financially and mentally, by the mandates, lockdowns, and other horrible measures the Australian Government (Federal and States) implemented, and I have prepared this submission, hoping the outcome of this inquiry will help that something like this NEVER happens again.

I sincerely hope this information, which is mainly a small selection of studies, some of them a bit older, some very recent, that refer to the ineffectiveness of masks, lockdowns, tests, mandates, and the harmfulness of the covid mRNA injections, will help the Panel to make an informed decision and come to the conclusion including that

1. Mask & vaccine mandates & lockdowns have done NOTHING to help stop the spread of the virus or keep people 'safe' (quite the opposite in fact), and are inhumane and unconstitutional
2. There has been a lot of misinformation and fear-mongering in the mainstream media which could have been avoided and harmed people in many ways
3. AHPRA's lack of due diligence on safety & their action with ATAGI to silence Drs, led to many people being injured or even killed, and as a result, these harmful mRNA injections need to be taken off the market immediately.

First of all, it needs to be acknowledged that:

- Viruses are NOT diseases; your risk of illness depends on your health status.
- A pandemic does NOT mean a disease of severe illness and death.  
*"The classical definition [of pandemic] includes nothing about population immunity, virology, or disease severity."*  
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3127276/>
- Covid-19 was no more severe than seasonal flu; 99.8% of infected people survived!  
*"Seasonal flu generally kills far fewer than 1% of those infected."* World Health Organization Director General  
<https://www.who.int/director-general/speeches/detail/who-director-general-s-opening-remarks-at-the-media-briefing-on-covid-19---3-march-2020>

Risk of Covid-19 death from infections with SarsCov2:

Far fewer than 1% of those infected die of Covid-19 – median IFR 0.23% (0.05% in those under 70 years).

Those most at risk are the elderly, at the end of life with significant existing illness.

<https://www.who.int/bulletin/volumes/99/1/20-265892.pdf> (this has unfortunately been taken off the WHO website now)

### Face masks:

The World Health Organization's (WHO) guidance about masking healthy populations has changed over time; the science hasn't. March 26 2020 WHO tweet:

<https://twitter.com/whowpro/status/1243171683067777024?s=28>

Nonetheless, multiple studies, before and after the 'pandemic', provide evidence that masks don't work in the context of containing viral diseases like covid and in fact can be i.e. detrimental to people's health if worn over prolonged periods!

### **The Foegen effect: A mechanism by which facemasks contribute to the COVID-19 case fatality rate**

*"Conclusion: This study revealed that wearing facemasks might impose a great risk on individuals, which would not be mitigated by a reduction in the infection rate. The use of facemasks, therefore, might be unfit, if not contraindicated, as an epidemiologic intervention against COVID-19. Proving or disproving the "Foegen effect" using experimental studies as described above should be a priority to public health scientists."*

<https://pubmed.ncbi.nlm.nih.gov/35363218/>

### **Association between face mask use and risk of SARS-CoV-2 infection: Cross-sectional study**

*"...the crude estimates show a higher incidence of testing positive for COVID-19 in the groups that used face masks more frequently..."*

<https://www.cambridge.org/core/journals/epidemiology-and-infection/article/association-between-face-mask-use-and-risk-of-sarscov2-infection-crosssectional-study/0525AD535D10FDCDF0C52603B50E7A1E#article>

### **Mandates and lockdowns etc.**

#### **Effects of COVID-19 Mandates on College Students' Exercise Experiences and Psychosocial Health**

*"Based on the phronetic analysis, three themes emerged regarding the effects of lockdowns, heavy screen use, and mask mandates. In the first theme, most students, especially those with longer stay-at-home mandates (WU), expressed decrements in or complete cease of exercise participation. In the second theme, a few students found more time to socialize and reflect on their well-being. In the third theme, negative psychosocial experiences (especially in WU) were reported like depression, anxiety, and challenges in social relationships. Kinesiology experts and public health officials should reconsider covid-19 mitigation measures by respecting human agency."*

[https://www.sportscienceresearch.com/IJSEHR\\_202371\\_03.pdf](https://www.sportscienceresearch.com/IJSEHR_202371_03.pdf)

#### **How Did the COVID Pandemic Response Harm Society? A Global Evaluation and State of Knowledge Review (2020-21)**

*"Early in the Covid pandemic concerns were raised that lockdown and other non-pharmaceutical interventions would cause significant multidimensional harm to society. This paper comprehensively evaluates the global state of knowledge on these adverse social impacts, with an emphasis on their type and magnitude during 2020 and 2021."*

[https://papers.ssrn.com/sol3/papers.cfm?abstract\\_id=4447806](https://papers.ssrn.com/sol3/papers.cfm?abstract_id=4447806)

### **PCR tests**

A positive RT-PCR test does not diagnose illness, and it is not able to determine the infectivity of an individual.

RT-PCR detects RNA, not infectious virus; thus, its ability to determine the duration of infectivity of patients is limited. Infectivity is a critical determinant in informing public health.

<https://academic.oup.com/cid/article/71/10/2663/5842165>

<https://brownstone.org/articles/pcr-tests-and-the-rise-of-disease-panic/>

### **mRNA covid injection**

#### **N1-methylpseudouridylation of mRNA causes +1 ribosomal frameshifting**

The explosive, new, PEER-REVIEWED, GOLD-STANDARD STUDY is already making news even though it was only published on December 6<sup>th</sup> 2023. It published in the well—respected Journal Nature.

THE RESEARCHERS DISCOVERED THAT A NECESSARY INGREDIENT IN THE MRNA VACCINES (1-METHYLPSEUDOURIDINE) HAS AN UNFORTUNATE SIDE-EFFECT: IT MESSES UP RNA TRANSLATION

ONE-THIRD OF THE TIME BY PRODUCING OTHER KINDS OF PROTEINS, NEW ONES, AKA 'NONSENSE PROTEINS' INSTEAD OF THE DESIRED COVID "SPIKE".

So, trillions of one's cells randomly create BIZARRE, NOVEL PROTEINS, AND FOR AN INDETERMINATE AND POSSIBLY LONG TIME. And this is happening inside every single jab recipient.

<https://www.nature.com/articles/s41586-023-06800-3#Sec22>

### **COVID-19 Illness and Vaccination Experiences in Social Circles Affect COVID-19 Vaccination Decisions**

*"With these survey data, the total number of fatalities due to COVID-19 inoculation may be as high as 289,789 (95% CI: 229,319 – 344,319). The large difference in the possible number of fatalities due to COVID-19 vaccination that emerges from this survey and the available governmental data should be further investigated."*

[https://www.publichealthpolicyjournal.com/files/ugd/adf864\\_4c3afc4436234a96aa1f60bb6e677719.pdf](https://www.publichealthpolicyjournal.com/files/ugd/adf864_4c3afc4436234a96aa1f60bb6e677719.pdf)

### **Adverse events following COVID-19 mRNA vaccines: A systematic review of cardiovascular complication, thrombosis, and thrombocytopenia**

*"Background and objectives: Since publishing successful clinical trial results of mRNA coronavirus disease 2019 (COVID-19) vaccines in December 2020, multiple reports have arisen about cardiovascular complications following the mRNA vaccination. This study provides an in-depth account of various cardiovascular adverse events reported after the mRNA vaccines' first or second dose including pericarditis/myopericarditis, myocarditis, hypotension, hypertension, arrhythmia, cardiogenic shock, stroke, myocardial infarction/STEMI, intracranial hemorrhage, thrombosis (deep vein thrombosis, cerebral venous thrombosis, arterial or venous thrombotic events, portal vein thrombosis, coronary thrombosis, microvascular small bowel thrombosis), and pulmonary embolism."*

<https://pubmed.ncbi.nlm.nih.gov/36988252/>

***Here is an organized library of more than one thousand peer reviewed articles which show that Covid-19 "vaccines" are harmful.***

<https://drtrozzi.org/2023/09/28/1000-peer-reviewed-articles-on-vaccine-injuries/>

### **COVID-19 vaccine-associated mortality in the Southern Hemisphere"**

*"Seventeen equatorial and Southern-Hemisphere countries were studied (Argentina, Australia,... In the 17 countries, there is no evidence in all-cause mortality (ACM) by time data of any beneficial effect of COVID-19 vaccines. There is no association in time between COVID-19 vaccination and any proportionate reduction in ACM. The opposite occurs."*

<https://correlation-canada.org/wp-content/uploads/2023/09/2023-09-17-Correlation-Covid-vaccine-mortality-Southern-Hemisphere-cor.pdf>

Furthermore, the un-jabbed are NOT a risk to population health.

[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(21\)022431/fulltext?fbclid=IwAR3Pd274AVDeLGSzpx83wpovokxJmDWJZS52LVmV8OQqCmmRLA8dFrTums](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(21)022431/fulltext?fbclid=IwAR3Pd274AVDeLGSzpx83wpovokxJmDWJZS52LVmV8OQqCmmRLA8dFrTums)

And many more studies support the above points made.