

TO: <https://www.pmc.gov.au/domestic-policy/commonwealth-government-covid-19-response-inquiry>

Commonwealth Government Covid-19 Response Inquiry Submission

The Australian federal government assumed enormous powers during the Covid era, reaching into the lives of every Australian. During this time Australian citizens were the subject of relentless propaganda from both the government and the media. Right from the beginning of the Covid situation there was a distinct lack of transparency from all government departments. Australians were forced to obey illogical and unscientific orders and were not allowed to question the official narrative. Censorship was rife. The immeasurable suffering brought on by these actions needs to be thoroughly examined.

Unless addressed by governments and the people of Australia, critical lessons will be lost and there is a considerable risk that such tyrannical actions will be inflicted on Australian citizens in the future.

Terms of Reference (in italics) to be addressed:

“Governance including the role of the Commonwealth Government, responsibilities of state and territory governments, national governance mechanisms (such as National Cabinet, the National Coordination Mechanism and the Australian Health Protection Principal Committee) and advisory bodies support responses to COVID-19.”

1. Not allowing Australians to return home at a time of apparent crisis was cruel and unnecessary and a shocking breach of faith and trust in our government officials.
2. The National Cabinet combining the executive branches of State and Fed governments is a fiction, has no basis in the Constitution and completely undermines the rule of law including our emergency laws which clearly lay out the decision- making processes, and transparency measures, designed to protect Australians in times such as these.
3. The National Cabinet operating in secrecy and **still not releasing minutes to this day** only serve to further damage public confidence both in the response and in the prospect of meaningful accountability for mistakes crucial to returning public trust.
4. The Prime Minister granted himself a **plethora of Ministerial positions** with no opposition from anywhere, or anyone including the Governor General – setting a dangerous precedent for the concentration of oligarchical power and making a mockery of the democracy we supposedly live in.
5. Silent consent by the Federal Government, with no debate allowed or encouraged, to border closures and other inhumane non-medical interventions which people did not want and who were left traumatised and bereft, and in many cases, permanently injured or died. (Refer Caitlin Kennedy case) https://twitter.com/RaeleneKenned20/status/1700756324601274377?t=4eFgOICDOhR5yQ2x_bnX5w&s=19.
Also refer <https://au.jabinjuriesglobal.com/> for verified stories of injured and dead.
Many children died from lack of basic medical care because of closures and this has left an indelible stain on our government and our nation and presented as tacit approval by the Federal Government, **e.g. a Ballina mum who lost one of her twins due to being locked out of her nearest Qld hospital; another who miscarried in W.A. due to border closure**
6. The Federal Government's lack of action, indeed tacit support, when States introduced Covid 19 vaccination mandates for many industries. **These mandates violated all informed consent protocols.**

“Key health response measures (e.g. across C19 vaccinations and treatments, key medical supplies such as personal protective equipment, quarantine facilities, and public health messaging)”

7. Masks: as per <https://dailysceptic.org/2023/12/06/child-mask-mandates-have-no-clear-benefits-and-cause-harm-bmj-review-finds/>
8. The dismissal, the ridicule and consequent banning of Hydroxychloroquine and Ivermectin very early on in the so- called pandemic. These are cheap, well tested drugs with a well- known safety profile. There needs to be a complete investigation into why decisions were made to ban these drugs for the treatment of Covid 19.
9. These known safe and effective treatments being withheld call into question the purported professional independence of the regulatory bodies who declared *“there is no adequate, approved and available alternative”*.

10. AHPRA threatening to cancel the registration of any dissenting doctors if they were to prescribe such therapies or were seen to be jeopardising the rollout of the novel experimental hastily developed vaccines, **represents the weaponizing of the medical regulatory system to achieve political outcomes.** <https://caldronpool.com/the-ahpra-inquisition-against-australian-health-professionals/>
11. The Federal Government's failure to ensure that the "emergency-approved" mRNA based therapies were assessed as GMO's and failure to ensure that they complied with safety standards with regard to pollutant DNA is **a failure of duty of care.**
12. The excess mortality rates currently being observed around the world and in Australia should be attracting considerable research, but our government and health bureaucrats seemingly concerned about every single death DURING Covid, seem to be dismissive of the thousands of excess deaths still accumulating post-experimental therapy roll-out. Refer: <https://richardsonpost.com/kiwi4justice/33976/nzs-covid-vaccine-massacre-exposed>.

"Mechanisms to better target future responses to the needs of particular populations (incl across genders, age groups, socio-economic status, geographic location, people with disability, First Nations peoples and communities and people from culturally and linguistically diverse communities)"

13. Based on data received from Italy, Sweden and Israel, by April 2020 it was broadly accepted that C19 was a higher risk for the elderly and that as age dropped and with improved health, it became a negligible risk for the vast majority of the population. This was not consistent with the ensuing heavy bombardment of non-medical interventions like border closures, lockdowns, business closures, school closures etc. The RISK PROFILE should be central to the design of any future responses.
14. Authorised treatments employed in hospitals may well have also led to deaths, particularly Remdesivir, Midazolam and ventilators. Refer: <https://live.childrenshealthdefense.org/chd-tv/events/the-chd-bus-tour/covid-nurse-speak-out/>
15. Governments both State and Federal must be required to release all information from every meeting paid for by the taxpayer, especially in an emergency. This did not occur and a veil of secrecy prevailed, further denting public trust.
16. Governments both State and Federal must act in accordance with their respective Constitutions and make decisions in the best interest of the people who democratically elected them. The National Cabinet must be dismantled and minutes from all previous meetings RELEASED IN FULL.
17. No Australian government, State or Federal should be able to mandate medical procedures. It is a violation of human rights and bodily autonomy. The supposed safety, effectiveness or necessity of the intervention is irrelevant. When it comes to medical choice and bodily autonomy, the patient must not be coerced in any way to have a medical procedure. This includes any type of financial or social penalty. For this reason, the No Jab No Pay legislation enacted in 2016 must also be dismantled.

This inquiry needs to address all above issues surrounding consent, bodily autonomy, and personal choice and needs to hold accountable any respective people or leaders responsible for such direction resulting in deaths, permanent injury and violation of human rights.

The Inquiry needs to investigate the basis of decisions made by every State and Federal Government Department or Ministry to oppose legal cases brought by the AVN and any other persons who chose to oppose the measures taken by the Covid-19 Responses by Governments in Australia. The Inquiry needs to investigate whether decisions to defend such cases were lawfully and Constitutionally made.

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