

To Whom It May Concern:

As a former care worker based exclusively in late-stage dementia units, my concerns center around the clear violations of informed consent and the impact on individual autonomy within the broader context of the pandemic response.

Consent in relation to dementia care is tough but essential to gain, requiring immense skill and patience. It was vital and something I valued highly and so it was ironic that I be fired for refusing to sign a consent form stating that I agree my consent is “completely voluntary” for therapeutics that were in no way voluntary. **How does one give legal consent to something they’re being coerced to take?**

A brief introduction to who I am:

I decided to become a care worker at age 30 (2015) after witnessing the care provided to my father as he died. I felt that such work was among the noblest of ways I could spend my time and energy, working at the coal-face to assist our most vulnerable. This profession gave me the means to honor my father. I had found my calling.

I found myself working in what I consider to be the most challenging area of aged care, looking after those with late-stage dementia. The challenge brought out my very best.

I had always taken all the vaccines available without question, including yearly flu shots. It took government mandates to change my position. I’ll never take another vaccine again.

Please forgive me for likely being unable to write this according to standards. I wish to be heard as government actions during COVID19 upended my life unnecessarily... and still have a profound impact upon my income and state of mind.

Governance and the issue of transparency, informed consent and derogatory labeling:

In my opinion, the government was not honest with the Australian people from the very beginning of the pandemic. I recall how the term “conspiracy theory” was thrown around for issues like the lab-leak. To those of us who are skeptical, the most obvious place for the virus to have originated from would be the lab in which such gain-of-function research was conducted¹²³. As far as I’m aware, this is far more commonly accepted these days as probable and no longer a “conspiracy theory”. There were consistent attempts by the government to belittle anyone who had legitimate criticisms by pejoratively referring to them as “conspiracy theorists”, creating a divide between people like myself and my friends, family and colleagues. To label something a “conspiracy theory” has been so overused erroneously that when I hear one mention that something is “just a conspiracy theory” I now make sure not to dismiss whatever the claim is, as in my view, the term is employed to divert often legitimate criticism of government policy. It was also clear that the government was attempting to group valid criticisms and concerns in with questions such as “Is it true? Do Covid-19 vaccines contain a microchip or any kind of tracking technology?”⁴ and “Is it true? Can COVID-19 vaccines connect me to the internet?”⁵. This and the constant attempts to suggest “antivaxxers” think the vaccine and 5G are linked are all methods, in my opinion, to stigmatise any criticism of the novel therapeutics so that the average person will simply comply and remain silent for fear of being labeled a conspiracy theorist. Even if an individual were to disagree with government policy, the stigmatization was such that they were strongly incentivized not to speak their mind, contributing to the overall perception that most agree with the official narrative. This kind of conditioning is rather Stalinesque from my perspective.

There were also constant attempts to insult those who refused vaccination (Do I really need to provide countless references?). We were essentially made second-class citizens. I was removed from my job as a care worker, fired from my volunteer job at Meals on Wheels and I couldn’t get in-person appointments at my local GP. I was also

unable to enter my grandfathers aged care facility for 18 months. My grandmother feared hugging me. To this day, I'm not able to regain employment in my chosen profession as they still maintain, despite all evidence to the contrary, that vaccines prevent transmission. This has caused significant damage.

In relation to the issue of voluntary consent during the vaccination process: The circumstances surrounding my termination highlight the need for a thorough review of governance mechanisms, including the role of the Commonwealth Government and advisory bodies supporting responses to COVID-19. Ensuring that vaccines and therapeutics remain a voluntary choice, free from coercion, is vital for maintaining public trust.

According to the Australian Immunization Handbook⁶:

Criteria for valid consent: For consent to be legally valid, the following elements must be present: **"It must be given voluntarily in the absence of undue pressure, coercion or manipulation."** and **"It can only be given after the potential risks and benefits of the relevant vaccine, the risks of not having it, and any alternative options have been explained to the person."**

This criteria for valid consent is echoed by the Universal Declaration on Bioethics and Human Rights (Article 6.1)⁷, the Australian Commission on Safety and Quality in Health Care⁸, AHPRA⁹ and is well understood globally as a basic human right. My disgust for the Australian Government comes from the realisation that all our lofty ideals about human rights are merely virtue signaling lies, discarded at the first sign of trouble for tyrannical mandates, lockdowns and dehumanisation of dissidents.

I maintain that due to the coercive nature of my employers demand (that if I don't take it I'll be fired), it was not possible to meet the conditions required for me to give valid, legal consent.

Further, in relation to the potential risks and benefits of the vaccines, it was not possible for anyone at that time to inform me. Why? Despite all assurances that the vaccines were "safe and effective", no person who had even a cursory understanding of the ocean of missing safety data could honestly make that claim for such a novel vaccine technology. For me, I personally witnessed two residents die and another two were injured from the initial roll-out. Before you dismiss my claim as ludicrous and from someone inadequately qualified to make such a claim, consider:

1. The two clients that died were frail old ladies under 40kg. They had been in that state for the two years I'd worked with them, stable.
2. Upon the first Pfizer dose they were knocked around but recovered. Upon the second dose, both within 12 hours were unable to sit up straight or talk. It's like they had been given permanent sleeping medication. It took about a week for both of them to die. It could be just coincidence... I don't think so.
3. Consider that the second dose was famous for knocking healthy, strong, middle-aged adults around. Then consider that according to the TGA's own AusPAR, missing safety information included "Use in frail patients with co-morbidities (for example, COPD, diabetes, chronic neurological disease, cardiovascular disorders)." - page 34. There was NO DATA to support giving the vaccine to the very first people we gave it to, including the two lovely ladies (Audrey and Beryl) who I believe died from their second dose.

I know another 3 people who had either myocarditis or pericarditis. My grandmother was hospitalised with pericarditis, and a family I work for now had their 21 year old diagnosed with myocarditis as well as his grandmother with pericarditis. Whenever there is a potential for harm and/or death, in a free society the individual should have final say over their health decision. That 21 year old as well as myself were at no risk from COVID19, but on the spurious possibility that the experimental shots may prevent transmission, our right to informed consent free from coercion was violated in the most grotesque manner by the government.

According to the TGA's Comirnaty (Pfizer) [AusPAR](#) at the time at which I was being coerced:

1. Safety studies are still ongoing
2. It only has provisional approval "on the basis of short term efficacy and safety data"
3. "There is limited information on the use of mRNA vaccine in humans" (page 37)
4. Data limitations include "vaccine efficacy against asymptomatic infection and viral transmission"
5. "A correlate of protection has yet to be established. The vaccine immunogenicity cannot be considered and used as the surrogate for vaccine protective efficacy at this stage"
6. A further data limitation is "long term safety data". This is clearly something to be concerned about considering #3

Clearly, given the above and plenty of other data limitations such as genotoxicity testing (unfortunate considering the DNA contamination) and carcinogenicity testing (spike protein generated inhibits p53¹⁰¹¹), it's not possible for anyone even now to advise me as to the potential risks, so I can't give legal consent.

For example, only recently was a study published which shows that the mRNA vaccines can create junk proteins in a surprising amount of recipients. There's a dispute as to whether this may result in harm. Also, in the last year it has become clear via multiple studies that those who received multiple mRNA vaccines are developing an [IgG4 response](#) (something basically unheard of, the consequences of which are yet to be determined).

More recently it has been discovered and acknowledged by some governments (Canada) that there [is DNA contamination](#) within the vaccines due to the manufacturing process, at mass scale, creating a different product than that which was injected into the trial participants. Professor Phillip Buckhaults from the University of South Carolina testified about his confirmation of the discovery, a haunting video to watch if ever there was one. Again, this is another reason for why informed consent cannot be gained legally as the shots given to the general public were different to those given in the trials (The TGA would acknowledge the difference in manufacturing but probably dismiss the relevance). To this day, I don't believe the government can [claim](#) that the vaccines do not alter our DNA, as only recently it has been discovered that the shots contain an SV40 promoter which acts as a nuclear localisation sequence, the sole purpose of which is to deliver DNA to the cell nucleus. The answer to such questions should have been "we don't know".

I would like you to consider the following:

Knowing that the shots were never tested or designed to prevent transmission, which worker would you prefer to look after your father:

1. An unvaccinated 38 year old male who practices yoga 3 times a week, doesn't smoke or drink to excess, goes to gym 5 days a week, highly values his health, is a volunteer, works in aged care to honor his late father and values the right to informed consent enough that he's prepared to lose his job or;
2. A morbidly obese, vaccinated chain smoker who can hardly keep up with the work load, is closing in on retirement, whose heart is no longer in the job, is intellectually lacking... a care worker who I would consider on the verge of neglect each and every shift (I know many care workers like this).

Of those two options, who is more likely to be sick and vulnerable to disease? I can tell you that in my experience, maybe 10-20% of care workers are dedicated to their job. I was one of the good ones and I'm still unable to return to work because of government.

Is it better for the world that I am now a cleaner due to government mandates? Is it better for the world that people like me now have utter disdain for the health bureaucracy? All the government has done is ensured that a great many

people question its motives and ability to keep us safe. Even if one were fully onboard with vaccine mandates, they likely have had COVID multiple times by now. A month after I was fired, my former facility (which only let the vaccinated enter) had a massive outbreak which made the news. They're told "Yes, the vaccine didn't really prevent infection but don't stress, we've got another drug made by the same manufacturer which leads to "Paxlovid rebound". No wonder trust has evaporated!!

I'll end this with two last points:

1. No exceptions to mandates were given for natural immunity as during COVID19, natural immunity may as well have been defined as a "conspiracy theory".
2. The government lied to us about the vaccines ability to prevent infection or transmission. They couldn't make the claim at the start of the rollout (insufficient data), and they certainly cannot make the claim now. Not only has Pfizer itself admitted they never even tested for such, but there's a basic fact in immunology which somehow the "experts" forgot. The vaccines promoted do not significantly alter mucosal IgA (the first line of defence for respiratory infections). They don't because they're injected into the arm (they alter IgG, not IgA, ensuring a systemic response). This is why there are constant attempts to develop oral vaccines. This is explained here, witnessed [here](#) and explained by Australian Professor Robert Clancy here.

All of this is to try to demonstrate that the Australian government has for a large portion of Australians destroyed any trust we might've once had by not being transparent, demonising a subset of the population for having valid concerns, failing to prevent widespread infection despite vaccine mandates and then having the nerve to claim that the unvaccinated were the problem. This stance has unnecessarily destroyed the lives of so many people who chose to remain unvaccinated. The unvaccinated need to be allowed back to work and should be given an apology, as there was never any reason to destroy their lives given that the vaccines could in no way prevent transmission or infection. This is especially true for health care workers who worked tirelessly throughout the pandemic whilst most others stayed home.

The last thing I wrote to my former employer: "As it is not possible to comply with Calvary's demand due to the coercive nature of it, to terminate my employment now would be harsh, unjust and unreasonable. As much as you've given me a "choice", I regard it as unethical.. and certainly impossible to comply with due to the fact that the conditions which attempt to force me to consent make a mockery of the meaning of consent".

Sincerely,

Thomas Webb

¹ <https://theintercept.com/2021/09/23/coronavirus-research-grant-darpa/>

² <https://www.projectveritas.com/news/military-documents-about-gain-of-function-contradict-fauci-testimony-under>

³ <https://oversight.house.gov/release/hearing-wrap-up-suppression-of-the-lab-leak-hypothesis-was-not-based-in-science/>

⁴ <https://www.health.gov.au/our-work/covid-19-vaccines/is-it-true/is-it-true-do-covid-19-vaccines-contain-a-microchip-or-any-kind-of-tracking-technology>

⁵ <https://www.health.gov.au/our-work/covid-19-vaccines/is-it-true/is-it-true-can-covid-19-vaccines-connect-me-to-the-internet>

⁶ <https://immunisationhandbook.health.gov.au/contents/vaccination-procedures/preparing-for-vaccination#valid-consent>

⁷ <https://www.unesco.org/en/legal-affairs/universal-declaration-bioethics-and-human-rights>

⁸ <https://www.safetyandquality.gov.au/our-work/partnering-consumers/informed-consent>

⁹ <https://www.medicalboard.gov.au/Codes-Guidelines-Policies/Code-of-conduct.aspx>

¹⁰ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7324311/>

¹¹ <https://pubmed.ncbi.nlm.nih.gov/34696485/> The retraction has its own story..