COVID 19 RESPONSE INQUIRY - Submission

I am a private citizen. Like most I was alarmed in early 2020, but I soon became concerned as I observed the narrative as it rolled. More and more of it just did not make sense.

The COVID inquiry must be a COMPLETE investigation, (a full royal commission).

Anything less will be a waste of taxpayers' money and time.

A propaganda fest covering up the truth will only enrage more distrust of government.

1) The Australian government must reveal the secret contracts with vaccine providers.

The South African government recently released documentation of its vaccine contract with Pfizer, which stated the "Purchaser acknowledges that the long-term effects and efficacy of the Vaccine are not currently known". So, Pfizer did not say its product was "Safe and effective".

Presumably, our government knew the long-term effects and efficacy of the so called "vaccines" were unknown, at the time it contracted to buy the vaccines.

Why did they launch their misleading "safe and effective" campaign if they already knew the safety and efficacy of these "vaccines" was unknown?

Our government must reveal the vaccine contracts unredacted. So, it can be determined if the Australian contracts included safety and efficacy clauses, (like in South Africa). If this is the case, government representatives who signed the contracts before the launch of the "safe and effective" campaign knew that the advertising was misleading and deceptive. This conduct is prohibited according to s 18 of the Australian Consumer Law. Fines can be up to \$10 million for a corporation engaging in misleading and deceptive conduct.

Breakthrough covid cases were first reported in 2021

In early October 2022, a Pfizer director testified in the European Parliament that the vaccine was never tested on preventing transmission. The "Get vaccinated for others" slogan was always a lie.

EU clip with Pfizer 2022 - https://www.news.com.au/technology/science/human-body/pfizer-did-not-know-whether-covid-vaccine-stopped-transmission-before-rollout-executive-admits/news-story/f307f28f794e173ac017a62784fec414

2) The "vaccine" mandates were illegal. They were based on many lies. They misled us saying there could be no other alternative treatments, and natural, natural immunity was inferior to their new unproven experimental "vaccine", (which has not been fully tested). Vaccines are normally trialled for 4-8 years before they can be safely released for widespread use.

Pfizer did not test their new c19 "vaccines" for safety and efficacy. Australians were not told the truth, did some in our government know at the time?

- 3) Why were "vaccine" injuries swept under the carpet?
- 4) Why did parliament vote against investigating the cause of the excessive numbers, of all cause deaths? The ABS (Australian Bureau of Statistics) reported abnormally high, all-cause excess deaths after the rollout of the experimental "vaccines".

Why have these high, all-cause deaths numbers have been ignored, by the government-media team? Far fewer deaths made the headlines every day during the first 12 months of covid, (everything was said to be a covid death). Why all the alarm back then? The ABS numbers did not show an increase in

The excess deaths must be thoroughly investigated.

all cause deaths until after the rollout.

Planning for the future is pointless, if the lessons from the past are not first understood.

5) All covid 19 injections must be halted until the excess deaths are properly investigated, and the cause of the excess is determined.

Correlation is not causation, but how can it be, that anybody can honestly say the excess deaths are not due to vaccines, prior to an investigation?

Most Australians have observed the injury or death of "vaccinated" people they know.

We've also learnt the "vaccinations" do not stop covid, no matter how many boosters you've taken.

The "vaccines" are not safe, and they don't prevent infection or transmission. Most people do not want to take another booster, (as indicated by the reduced up-take numbers).

6) Why were alternative treatments banned, not allowed?

Quite a few alternative treatments have proven to be effective against covid 19. They use repurposed drugs which have proven to be safe over decades of use. These inexpensive (i.e. off-patent) drugs are much safer than the experimental "vaccines".

For example: Billions of people have safely used Ivermectin for 50 years. Its record with humans is one of the safest drugs ever used (it has low toxicity and it's almost impossible to find reports of overdose deaths). Countries in Africa that used Ivermectin had fewer deaths. Ivermectin was found to be effective in the SARS-CoV-1 outbreak in 2002-2003.

Meta-analysis of 99 studies -lvermectin c19 - https://c19ivm.org/meta.html (has links to each study)

For covid, its recommended Ivermectin (IVM) to be taken with zinc and vitamin D, (and if needed Doxycycline). Hospitalisation is rarely needed if IVM treatment is commenced within the first week. IVM has also proven to be an effective covid preventative, (a small monthly dose is used).

Covid patients were (and still are) left to die. Why? Because they're denied the right to try a proven safe and effective inexpensive drug, which could have saved their life. Lives would have been saved in in the first 12 months before the rollout and many more could have been saved since then.

7) Why does both sides of government seem happy to recommend, promote, and spend taxpayer dollars on new, expensive "big pharma" treatments, which have dubious efficacy and safety data. Why does the health department only recommend new and expensive "big pharma" treatments (which have poor or limited trial data), such as "vaccines" Paxlovid and Molnupiravir?

However, our government has ignored and censored independent research. In lock-step like sheep we believed the wildly inaccurate modelling, and followed the advice of global elites. (They tried to hide the fudged c19 vaccine data for 75 years). Our nation is now locked into an experimental global "solution", with \$billions of extra national debt.

Who was censored for independent thinking? In 2020 an Australian was one of the first to be dismissed and slandered, (he was one in a cast of thousands). If we had not censored him, we could have saved \$billions, and probably avoided the rise in excess deaths by using Ivermectin. Ivermectin has proven to be safer & more effective than the mRNA "vaccines". (Meta-analysis above)

Sometimes, I think our heads of governments and world organisations, have no regard for us commoners.

- 8) Has TGA a conflict of interest? I quote, "The BMJ asked six leading regulators, in Australia, Canada, Europe, Japan, the UK, and US, a series of questions about their funding," and it published earlier this year, "Australia had the highest proportion of budget from industry fees (96%)". It says the TGA "firmly denies that its almost exclusive reliance on pharmaceutical industry funding is a conflict of interest (COI)."

 The conflict of interest is obvious, and it must not continue.
- 9) Why was Ivermectin vilified by the authorities and the legacy media? To mislead the public?
- 10) Why did the government suppress and ignore the mountain of results favouring IVM treatments for covid? Was it to mislead the public so that "big pharma's solutions" were seen to be the only option available? (They supported an information monopoly?)

There are now quite a few cheap alternative treatments. Hydroxychloroquine (HCQ) is another proven, safe drug which is effective against covid, (my sister has taken it for decades, for Lupus).

11) Why did AHPRA threaten to deregister doctors that did not repeat the government narrative when advising patients? Doctors who disagreed with the narrative were censored and sacked for seeking and telling truth. The trusted doctor-patient relationship was cruelled. We are now forced to do our own research to find the truth, which often is the opposite of the government propaganda narratives.

In 2020 my GP said I should get a PCR test. I asked what if my test is positive? He said, stay at home use Panadol and wait, if you become short of breath, then go to hospital. He said IVM and HCQ were both a no-no for covid, no reasons, but said he would never give me a script, despite me asking about information I'd seen on HCQ and IVM. In parting I asked, what's the use of a PCR?.....no reply.

- 12) Did proper informed consent for a c19 injection ever occur? It was impossible as the medics had been silenced by AHPRA. Patients could not be properly informed.
- 13) Why are vaccine manufacturers given indemnity? This is not in the best interests of the people (i.e. the recipients).

Australian Senate Estimates reveal our government has granted indemnity to 16 new vaccines in recent years. The new Moderna vaccine facility (under construction) has been granted immunity for all the vaccines it produces in the future. Why?This means manufacturers will "cut corners" with their trials to get product onto the market before their competitors. They don't have to worry about their vaccines being safe and effective, because they are exempted from litigation.Sound familiar?

14) The people who promote and enforce vaccine mandates, lockdowns, and any other restrictions on our nation's population, must be people who are accountable. (i.e. we can vote them out office). Our government must not hand-over control to the World Health Organisation (WHO). The WHO is unaccountable, its members are not elected and strangely have diplomatic immunity. The WHO no longer wants to remain an advisory body. It plans to take-over control. The WHO's latest amendments to the IHR (International Health Regulations), due to be adopted by Health Assembly in May 2024, clearly demonstrates this unelected body is about totalitarian world control.

Copy of the latest IHR amendments

https://apps.who.int/gb/wgihr/pdf files/wgihr1/WGIHR Compilation-en.pdf - (300 amendments – please at least read Articles 1,2 & 3, and then skip to Article 12 to get the flavour of what is in the pipeline).

The IHR in conjunction with "Treaty" will hand over control to the WHO, unless we stop the WHO.