

[REDACTED]

30th December 2023.

Dear Sirs/ Madam,

Ref: Commonwealth Government COVID-19 Inquiry, Submission – McKechnie.

I herein provide my submission as a member of the public in relation to the terms of reference issued for the inquiry. My name is James McKechnie (profession: engineer) and I reside in [REDACTED] West Australia. My middle son [REDACTED] contracted Covid 19 in April 2022 following the opening of the WA border.

[REDACTED] has not yet recovered and is diagnosed as a long covid sufferer. He never finished the last 2 terms of year 12 school in 2022, he has not left the house (aside from many doctor and medical checks) since. He was dux of his school [REDACTED] for almost every year and was a prior school champion athlete winner. (I only say this to provide context that he was a very active member of school). He is currently a lost asset to Australian society, the economy and to family life, not to mention his self-esteem and his life.

Not enough is being done for him and other fellow sufferers. It would appear from the government stance that we are over Covid and onto 'the next thing'. That is however for many, not possible.

My submission in the context of the terms of reference and making recommendations for improved management of future similar events, is as follows:

1. Governance. Advisory bodies.

Responsibilities between states and commonwealth was unclear. For example, provision of quarantine centres should have (in my opinion) been provided by the commonwealth. Other countries provided fast and effective lower cost larger detention facilities such as disused military installations. The state run hotel system was muddled and expensive. Better preparedness in this area is recommended, taking lessons from other countries.

2. Key Health Response.

The medical steps taken by the government has been shown by many experts to be seriously flawed and corrupt. There are systemic issues with our medical institutions

that need to be corrected. Commercial interests of large corporations exerted a disproportionate influence on medical journal publications (publishing what was in their interest and discrediting competing medicines), media and governments, including the Australian government. This played a large role in determining our government's response to the pandemic, which was based mainly on rushed through large scale vaccination programs that have since been shown to be unnecessary, expensive and dangerous. This response subsequently led to lockdowns, permanent business closures, significant job losses and unnecessary death and prolonged illnesses (such as long covid and long vax). On top of that we are now seeing additional evolving medical impacts such as significant reduction in female reproductive health from the mRNA vaccines.

The use of (repurposed) existing available medicines was discredited and shunned through early major public misinformation campaigns via all major media outlets (internet, tv and papers). Distinguished medical experts who bucked the trend were labelled as 'quack doctors', 'anti-vaxxers' and many lost their jobs or shut-up and carried on silenced. It was manipulation and discrimination at a criminal level and was the norm through media outlets, the third Reich would have been proud. Its more the pity since Australian researchers were some of the first to publish their findings of the effectiveness of a repurposed medicine, Ivermectin (Monash University, April 2020), however Ivermectin was later dismissed and banned as a dangerous drug.

I was one of the millions of Australians who believed the press and government advice and was one of the first to be vaccinated and ensured all my children were too. I was dismissive of those at work who were anti-vax. I considered myself better than those who had not vaccinated or were thinking about it. How wrong I was. My trust in the government (and myself) will never be the same again. Please prove me wrong by taking my submission seriously.

Within the inquiry please try and explain how a 2015 WHO 'drug of the year' and listed by WHO as an 'essential medicine' was suddenly rebranded in 2020/21 as dangerous and banned? The answer I expect you to confirm is attributed to corporate misinformation campaigns, fear mongering and pharmaceutical company influence on governments and medical institutions, including ours. These events, dates, references, and facts are well laid out in [REDACTED] best-selling novel, 'The War on Ivermectin' (ICAN Press). All panel members of the government should read this book before the inquiry starts. The book is an eye opener and demonstrates a corrupt, dishonest, and broken medical system that needs correction. The use of Ivermectin in countries that did not follow WHO recommendations fared much better. Very likely my son [REDACTED] would be living a normal life if this pre-existing medicine was allowed to be used, instead of ridiculed and, unbelievably - banned by the Australian government. These

behaviors are typical of a third world dictator not a 'freewheeling liberal democratic country' we call Australia.

The use of masks and Ivermectin, together with quarantining was all that was needed to control the virus. This would have not only been a lot less expensive, but also resulted in less loss of life and normal lives for many who are still struggling post the virus.

3. **Broader health support services.**

For the many (200,000 plus in Australia) the support services for long covid patients has been very limited. In WA there was a single long covid clinic at Fiona Stanley hospital staffed by one physician to support the state! This was and continues to be clearly disproportionate to the issue.

4. **Financial support.**

We are fortunate to be financially independent and able to support our son through this trying period. However, there are many people who have been left without support. Long covid had no existing standardized test for medical diagnosis and therefore does not exist on Medicare plans. This prevents access to insurance and financial support. This aspect needs to be urgently addressed with future responses allocating greater support to follow on illnesses.

5. **Mechanisms to better target future responses.**

See above. I recommend the inquiry devotes significant time and resources reviewing the influence pharmaceutical companies exerted on our government policies that were not in our best interest and resulted in billions of dollars of unnecessary cost and suffering. If I was to single out one mechanism to better target future responses, it would be for an improved system of checks and balances of provision of government advice, ensuring greater transparency:

- Mandate conflict of interest statements on all expert advice,
- Educate government departments on bias and introduce a system of evaluation to check unhealthy bias.
- Include an independent assessment of all government advisers.
- Install a robust system for logging all perks, donations, and sponsors of research.
- Introduce a system of review of decisions made by ex-government advisers to future positions. Ensure this is a routine assessment with potential fines.

Increased transparency (including I might add all commonwealth government inquiry team members), is desperately needed to avoid similar costly mistakes.

Yours sincerely,

James McKechnie, MSc CEng MIMMM