

## **COVID INQUIRY SUBMISSION BY A CONCERNED CITIZEN**

December 15, 2023

I am a concerned Australian citizen. I am neither left wing nor right wing and neither pro-vax nor anti-vax. I have never attended a protest, and I have never had cause to write to a politician, until the Covid-19 pandemic. I am writing this submission within the limitations of its terms of reference, which is unfortunate and ironically emblematic of the erosion of due democratic process in Australia today. So, to have a voice in the process, I am requesting this panel consider three areas for investigation. Firstly, regarding governance, who was in charge, who were the responsible parties in the advisory bodies, what were their motivations in promoting the vaccines, and how are they now being held to account? Secondly, regarding key health response measures, why was there no open scientific discussion of the safety and efficacy of the experimental vaccines, why were the views of prominent and pre-eminent health professionals ignored, and why the lack of transparency? Thirdly, regarding the needs of particular populations, why was bodily autonomy stripped from the individual, and why are there *still* vaccine mandates in place for NSW Health and other populations? Below I pose some areas for debate for the panel, with the hope that they will agree on the need for a proper democratic process in the form of a full Royal Commission, as promised by the incoming Prime Minister Albanese.

### **What was the “health advice” and who was behind it?**

During the pandemic there were several organisations driving the pandemic response and narrative for Australia. The World Health Organisation (WHO), the Food and Drug Administration (FDA) in the US, the Therapeutic Goods Administration (TGA), and the Australian Technical Advisory Group on Immunisation (ATAGI), which “advises the Minister for Health and Aged Care on the National Immunisation Program (NIP)” (health.gov.au, 2023) among others. Unbeknownst to me before the pandemic, the WHO is

not an alliance of member states, but is driven by private influence. The largest contribution of funding comes from the combined contribution of the [REDACTED] and [REDACTED] another [REDACTED] organisation (WHO, 2020). 66% of the FDA's funding for human drugs comes from user fees, or the companies who are seeking regulation for the drugs they wish to sell ([REDACTED], 2023). Similarly, the TGA is a cost-recovered entity (TGA, 2021). These organisations exist to protect the populations they serve, and are supposed to be independent and impartial. However, every decision made during the pandemic was skewed toward the promotion of therapeutic goods and the commercial interests of the organisations and individuals most likely to profit from the sale of these goods. Unfortunately, the safety and efficacy of the vaccinations were irrelevant to these goals. The Australian public deserves to know what direct and indirect rewards were received by all decision-makers during the pandemic, especially if they have resigned or retired, to ascertain any and every motivation towards a commercial bias. Those who deliberately lied, must be prosecuted to uphold the principle of justice.

### **mRNA vaccine safety and efficacy**

There has never been any evidence to predict with any surety how the human body might react to experimental mRNA vaccinations in the long term. So how is it possible to claim the safety of the vaccines? All the assumptions for long-term safety were predicated on the behaviour of traditional vaccines. It is now known that the 95% vaccine efficacy rate promoted for the [REDACTED] vaccine was a relative term and the absolute risk reduction rate was just 0.84% ([REDACTED] 2022) and that the vaccines do not prevent transmission (<https://www.youtube.com/watch?v=5A2ZkW8pUWg>). However, the narrative continues: *the vaccines are safe and effective*. I have previously contested that advertising about the "safety and efficacy" of the mRNA vaccines contradicts advertising standards, and I attach my complaint in February 2022 to this submission, for your information.

There are so many anomalies surrounding the “science” of the vaccines too numerous to fit into a three page submission. However, what is critical to this inquiry is the need to expose bias and corruption at all levels. For example, the origins of the virus, the appearance of patented genetic code in the spike protein; the clinical trial process (selection of and practices at trial laboratories); the toxicity and longevity of spike protein and how it expresses in the body (liver, ovaries); vaccine batch production; false positive PCR tests and adverse events. This panel needs to objectively review the work of experts opposing the narrative including Prof. [REDACTED], Dr [REDACTED], Dr [REDACTED], Dr. [REDACTED] [REDACTED], and Dr [REDACTED] to name a few. I recommend the objective analyses by Dr [REDACTED] (<https://www.youtube.com/@Campbellteaching>) as an accessible way of reviewing data available with a view to upholding the principle of truth.

### **Vaccine mandates**

As a healthy individual without comorbidities, I have never been at risk for death or serious disease from Covid-19 with the median age of death being 86 years in 2020 (ABS, 2020). When I finally contracted Covid-19, I managed the problem as I would any other respiratory virus. Yet in 2023, Covid-19 vaccinations are still mandated at NSW health, even though I have a greater level of protection through natural immunity and the risk of an adverse event is greater for me than the risk from the virus. Excess deaths in Australia have an undeniable temporal correlation to the vaccination roll-out ([REDACTED] 2023b). Blind Freddy could see the correlation, yet no government officials are able to admit to the fact. Who determined that Australian citizens have no legitimacy over their bodily autonomy, or the ability to discern for themselves their level of risk? Censorship and autocratic and arbitrary impositions of such mandates are a gross violation of our human and democratic rights. I ask the panel to uphold this most important principle of freedom and escalate the inquiry to the level of Royal Commission.

## References

- Australian Bureau of Statistics (ABS) (2020). Causes of death, Australia: Statistics on the number of deaths, by sex, selected age groups, and cause of death classified to the International Classification of Diseases (ICD).  
<https://www.abs.gov.au/statistics/health/causes-death/causes-death-australia/2020>
- Department of Health, Therapeutic Goods Administration (2021). *Business Plan 2021-22*.  
<https://www.tga.gov.au/sites/default/files/tga-business-plan-2021-22.pdf>
- Department of Health and Aged Care (December, 2023). *Australian Technical Advisory Group on Immunisation (ATAGI)*. <https://www.health.gov.au/committees-and-groups/australian-technical-advisory-group-on-immunisation-atagi>
- Department of Health and Aged Care (December, 2023). *Therapeutic Goods Administration (TGA)*. <https://www.tga.gov.au/>
- Campbell, J. (2023a). Dr John Campbell. <https://www.youtube.com/@Campbellteaching>
- Campbell, J. (2023b). Bad Australian vaccine data.  
<https://www.youtube.com/watch?v=116Q2r5VWLo>
- Malhotra, A. (2022). Curing the pandemic of misinformation on COVID-19 mRNA vaccines through real evidence-based medicine - part 1. *Journal of Insulin Resistance*, 5(1), 1-8. <https://doi.org/10.4102/jir.v5i1.71>
- Parasrampuria, S., and Beleche, T. (2023). *FDA User fees: Examining changes in medical product development and economic benefits*. Washington, DC: Office of the Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services. March 2023.  
<https://aspe.hhs.gov/sites/default/files/documents/e4a7910607c0dd76c40aa61151d154f9/FDA-User-Fee-Issue-Brief.pdf>

Terhes, C. (2022). Pfizer representative's full hearing in the special COVID committee of the European Parliament. <https://www.youtube.com/watch?v=5A2ZkW8pUWg>

World Health Organisation. (2020). Seventy-third World Health Assembly agenda item 20:

Audited financial statements for the year ended 31 December 2019.

<https://www.who.int/publications/i/item/10665339656>