

To The COVID-19 Response Inquiry Panel

While I recognize that the submissions to this panel were due in December 2023, I am making a late submission in the hope that the Panel will accept it.

I acquired COVID-19 for the first time in January 2022, having probably been infected in [REDACTED]. At the time, I was [REDACTED] and in generally good health, though I did have an [REDACTED] problem.

Within a few days of infection, I was effectively bed-ridden, had lost my appetite and was barely able to get up and walk around. Eventually my [REDACTED] called an ambulance and I was admitted to the [REDACTED] Hospital COVID-19 ward, where I was diagnosed with [REDACTED] and given a range of medicines which very quickly restored at least part of my health. Within a few months however, I was aware that I was suffering the long term effects of fatigue and reduction in some mental capacity (what has come to be known as 'brain fog').

In the last two weeks, I have commenced some new medicine which has significantly improved my energy and restored some of what was lost by the COVID-19 illness. I mention this because it is only with the increased energy that I find the time and strength to write this submission.

I was to address the following term of reference:

- Key health response measures (for example across COVID-19 vaccinations and treatments, key medical supplies such as personal protective equipment, quarantine facilities, and public health messaging).

I will be brief in my submission, but I want to very strongly support the decisions taken by Governments in Australia to (i) bring in measures to restrict movement of peoples and thereby reduce the spread of the pandemic and (ii) to encourage and provide access to the COVID-19 vaccines.

I urge the committee to read at least some of the respected medical literature, of which I cite the following paper "*Effectiveness of COVID-19 vaccination against COVID-19 specific and all-cause mortality in older Australians: a population based study*", published in The Lancet in October 2023 ([https://www.thelancet.com/journals/lanwpc/article/PIIS2666-6065\(23\)00246-8/fulltext](https://www.thelancet.com/journals/lanwpc/article/PIIS2666-6065(23)00246-8/fulltext))

A key conclusion of this paper is:

"COVID-19 vaccination is highly effective against COVID-19 mortality among older adults although effectiveness wanes with time since the last dose. Our findings emphasise the importance of continuing to administer booster doses, particularly to those at highest risk."

Your inquiry will receive numbers of submissions from people who do not accept basic science and make the claims that the COVID-19 vaccines are not effective, or that the COVID-19 vaccines have caused huge numbers of deaths. Both of these claims are invalid and incorrect in their entirety.

The COVID-19 vaccine saved lives in significant numbers. The fact that I had been able to receive a double dose of the vaccine (Astra Zeneca) before I was infected was a factor in

reducing the severity of the disease for me, something that several of the doctors who treated me confirmed in January and February 2022. I had only just become eligible for a third dose in January 2022 when I was infected, and if I had been able to get that earlier, my hospitalisation may have been avoided. A subsequent infection of COVID-19 in August 2023 was quite minor in its effects.

Conclusion:

Australian Governments, State and Federal, were completely correct in requiring a 90% level of double vaccination before fully 'opening up' the country and the state borders.

There was a failure of the former Morrison Government to secure enough vaccines in early 2021 and this was the major factor in slowing down the opening up of the country in the last part of 2021. The inquiry should make it clear that the Morrison Government should have done a better job in acquiring vaccines.

Deaths from COVID-19

Further evidence for my conclusion that governments were completely correct in requiring a 90% level of double vaccination before fully 'opening up' the country and the state borders is provided by the following.

We will never know the number of people who died as a result of COVID-19. I personally know several, all people living outside of Australia, who lost their lives due this pandemic. What is clear however by any analysis and using any tools for measuring the death rates is the following

- i) Lives were saved because of actions by Australian governments to restrict movement in terms of border closures, lockdowns and restrictions on non-vaccinated people working in essential industries,
- ii) A comparison with the United Kingdom and the United States where the governments at the time in 2020 were run by people who did not respect science and did not care about public health show that death rates in those two countries were significantly higher than Australia.

Citing data from the World Health Organisation, the Wikipedia page of the pandemic death rates wrote that "The official count of COVID-19 deaths as of December 2021 is slightly more than 5.4 million, according to World Health Organization's report in May 2022. WHO also said that the real numbers are far higher than the official tally because of unregistered deaths in countries without adequate reporting." Even at 5.4 million, that is a huge number of people whose lives were taken before their time. Any fair assessment would list the death rate as much higher.

The same Wikipedia page helpfully lists the deaths per million in all countries (as at 24th February 2024)

United States	3,460 per million
United Kingdom	3,438 per million
Australia	938 per million
New Zealand	726 per million

Had Governments in Australia not taken action to protect the health of the community, if we had not closed borders, not had lockdowns, not provided vaccines and not prevented unvaccinated people from working in essential industries, it surely most likely that we would have had COVID-19 death rates similar to the USA and UK. That would have meant more that 60,000 additional deaths.

Some submissions to your inquiry may make unreasonable claims about large numbers of deaths due to COVID-19 vaccines. I quote this from the report of the TGA (dated March 2023)

The TGA closely reviews all deaths reported in the days and weeks after COVID-19 vaccination... Since the beginning of the vaccine rollout to 19 March 2023, over 65 million doses of COVID-19 vaccines have been given in Australia. **The TGA has identified 14 reports where the cause of death was linked to vaccination from 982 reports received and reviewed. There have been no new vaccine-related deaths identified since 2022.**

(<https://www.tga.gov.au/news/covid-19-vaccine-safety-reports/covid-19-vaccine-safety-report-23-03-2023>)

I urge the inquiry to find that there is no evidence for significant numbers of deaths from COVID-19 vaccines and that Governments were correct in promoting the use of vaccines and mandating vaccination for people working in essential industries

Stephen Morey

25th February 2024