13/12/2023

I am very disappointed that a Commonwealth Inquiry into the COVID-19 response has called for public submissions with such a short time before they are due and it is now the pre-Christmas period, a very busy time! Due to time constraints, I will not attach all of the evidence I mention herein. I believe that if I am able to find the evidence, then it is in the ability of the Inquiry panel to find the evidence. However, I am happy to be contacted if any of the facts that I refer to are required by the panel.

I question whether the Commonwealth Government is taking the Inquiry, or the input of the public to this Inquiry, seriously. The time frame is an insult. I hope that I am wrong. I will be watching very carefully.

I call for and DEMAND a Royal Commission with expanded terms of reference (allowing for the inclusion of the actions of states and territories) as the only way that we will truly address the mistakes of the Covid period, as well as admit the truths that a full Inquiry will find.

Preamble:

The Covid period, from March 2020 to the present (due to some vaccine mandates still in place) has been a time of government overreach. Our lives have forever been changed. Australia is not the same as before COVID.

The government made decisions that were basically "one size fits all". They kept talking about "public health" but how do you define that term? If my individual health is overridden for the "greater good", how am I being considered (if at all) a member of the public whose health is being protected? In order to make "public health" be good, we were being bullied/coerced/ordered to do things to our bodies, or not travel to places, or not see people who needed to be seen. If we did the things to our bodies that were ordered, we had good reason to believe that we would have long-term adverse consequences (as shown by the data from various countries). https://rumble.com/v3z3v3a-uncensored-liz-gunn-nz-government-whistleblower-explodes-worldwide-accounta.html

I object to the censorship and use of violence against those who questioned the measures taken by the government.

If we do not learn lessons from this period, then I believe that it will happen again. I believe that we will continue to lose what little freedoms remain.

Now to the relevant terms of reference:

• Governance including the role of the Commonwealth Government, responsibilities of state and territory governments, national governance mechanisms (such as National Cabinet, the National Coordination Mechanism and the Australian Health Protection Principal Committee) and advisory bodies supporting responses to COVID-19.

This is such a HUGE area. We need to learn lessons for the future. A state of fear was promoted in the media daily by representatives of the government (whether Commonwealth or state) and this led to "public health" measures taking precedence over the rule of law as per the Constitution and led to widespread violations of human rights. Our regular processes for dealing with epidemics or pandemics were thrown out and what became the new normal was a lockstep approach that copied word for word what was happening in other countries. That became more frightening than the thought of COVID to many people.

Some of the obvious issues:

- 1. Australians were not allowed to return home from overseas in a time of crisis (and panic). This was unAustralian, unnecessary (for such a long period) and represents an overreach of power, or at the least, an over-reaction. This needs to be investigated. Was it really the best action to take? Especially when it was shown that COVID "cases" were not really high. A lot of the hysteria around COVID overseas has now been shown to be the result of not treating sick people in the early stages and waiting for hospitalisation which often led to death because they were so far gone. We have not ever done that with the flu. Since when are doctors ordered to not treat sick people? Since COVID. We copied that strategy here. It was wrong. Please investigate and do not let that happen again.
- 2. The formation of a National Cabinet which did not have to report to anyone was not legal or lawful. It operated in secrecy. No minutes have ever been released. It was a means to bypass scrutiny (the Senate or other forms of debate or checks and balances). What a precedent. This has eroded public confidence in the Commonwealth Government for allowing this and continuing it. Especially

nowadays when most states are run by the same political party as the Commonwealth Government. Though called a Cabinet, the National Cabinet is technically a forum. What it decides is not to be legally binding, yet it used its powers to act as if its decisions were binding. This needs to be investigated.

- 3. We need to investigate how the Prime Minister Scott Morrison gave himself multiple Ministerial positions with no one objecting or intervening. This puts a dangerous concentration of power into one pair of hands. It makes a mockery of the Westminster system which we are supposed to have in Australia.
- 4. When the states and territories closed their borders, the Commonwealth Government was silent. The consequences of these border closures led to inhumane situations where young children could not be reunited with their families, adults could not see their children or see elderly parents who were in desperate need, etc. Some people could not travel to work across the border. Some people could not receive their usual health care. The Commonwealth Government permitted this by their silence. When the Commonwealth Government want to apply leverage to influence states and territories to change their course, they threaten to pull funding. But no, they watched the inhumane treatment, the disregard of our Constitution that says we shall have free travel across borders, and said nothing.
- 5. When the states and territories mandated the gene therapy experimental treatments, in a process that breaches the Nuremberg Code (shall be no forced medical experimentation on humans again), the Commonwealth Government implicitly allowed this to continue, by their silence. Even though the injections were emergency approved, they were still experimental. The Commonwealth Government could have stopped the state and territories from enforcing their mandates. Greg Hunt, the Minister for Health and Aged Care until May 2022, is on record/video saying that "the world is engaged in the largest clinical trial, the largest vaccination trial ever". See video attached.
- 6. Lockdowns: Locking down the whole population caused untold suffering and hardship. How many people did not get proper screening or health checks and may have developed illnesses as a result? How much family violence increased due to lockdowns? How much financial hardship could have been averted? The Commonwealth Government spent enormous amounts on handouts, on vaccines which were supposed to "flatten the curve" but yet the lockdowns continued. Would Australia be experiencing such high inflation and increasing cost of living if there had been no lockdowns? Has there been a risk/benefit profile done examining the effectiveness of lockdowns? I think the fact that we are "living with COVID" presently shows that lockdowns are not necessary. There are many more issues associated with lockdowns.
- 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).
- 7. Cheap, effective treatments for COVID-19 were ignored, made fun of and outright banned. These treatments like Ivermectin and Hydroxychloroquine when used early and with the correct protocols (in combination with vitamins or other therapies) were known then and have been proven now to be effective. The Commonwealth Government allowed this to happen. Another mistaken, misdirected response measure which resulted in worse health outcomes when it was supposed to provide improvements. It may even have directly resulted in deaths from not being treated when sick, because people were told to stay at home and go to hospital if and when you got too sick, where you could then be treated. Investigation is also needed into the hospital treatment protocols as there is evidence that being put on ventilators was improper for the secondary illnesses which resulted.
- 8. The Australian Health Practitioner Regulation Agency, AHPRA threatened to deregulate medical practioners if they used any off-label medicines like Ivermectin, or if they were caught engaging in any behaviour which did not promote the COVID-19 gene based experimental injections. AHPRA is a national regulatory body that chose to make medical decisions for the whole of the public. They dictated orders to doctors on how they must treat their patients. Again, the "one size fits all" method. This resulted in a huge section of the population losing their regard and respect for their doctors. The Commonwealth Government could have intervened and stopped this.
- 9. Mask mandates did not make sense when there is so much evidence that if you wear masks you are more likely to contract some illness due to the effect on your immune system plus the breathing in of one's expelled air. They compromise a person's health.

- 10. Many people experienced discrimination and financial hardship as a result of mandates. How many people took their own lives rather than be forced to comply with vaccine mandates? It has now been shown that the injected are more likely to contract COVID due to their bodies continuing to manufacture the spike protein, which also leads to compromised immune systems. They are likely to be the reason that COVID is never eradicated. We were warned of this early in the beginnings of COVID. Mass vaccination in the middle of an epidemic is unwise, said many epidemiologists.
- 11. The Commonwealth Government needed to ensure that the emergency-approved mRNA based therapies were assessed as Genetically Modified Organisms. They were never approved by the Office of the Gene Technology Regulator. This has led to lawsuits and there may yet be considerable compensation to be paid, due to pollutant DNA.
- 12. There may be still more compensation due to people who have been adversely affected by the emergency-approved mRNA therapies. The data around the world is showing that each country which used these therapies is experiencing a huge rise in excess mortality. It has been seen in Australia, and very recently a whistleblower from the NZ Department of Health has shown that there is a link between the excess deaths in NZ to particular batches of the mRNA injections, particularly in some Pfizer batches. The fact that the batches are all different is also something that needs to be investigated.
- 13. The fact that the injections were given contrary to ATAGI guidelines that there must be informed consent needs to be investigated. How can there be consent, when no one knows what is in the injections? The inserts in the vials were blank. The ingredients were not disclosed to anyone.
- 14. We need to investigate the Vaccine Contracts which gave the manufacturers immunity from liability. The Pfizer document drop that has come from a lawsuit in the USA has resulted in Pfizer reluctantly handing over their vaccine trial documents, etc. It seems that there were minimal clinical trials. Some were a matter of only 5-7 days. We assumed these injections were properly tested, due to the confidence of the authorities who said that they were safe and effective.*See the Greg Hunt video attached. This could not be known from such minimal testing. The truth has now come out.
- Mechanisms to better target future responses to the needs of particular populations (including across genders, age groups, socio-economic status, geographic location people with disability, First Nations peoples and communities and people from culturally and linguistically diverse communities).
- 15. In future the risk profile of a disease must be the central feature of the design of the response. By April 2020 Australia could know from the data from Italy, Sweden and Israel that COVID-19 posed very little threat to age groups below 70. It was only the elderly and infirm who were at risk, but these are similar risks as per previous flu epidemics.
- 16. Understanding that banning effective early treatments such as Ivermectin may have led to deaths should lead to the determination to never ban existing therapies that are known to be safe. The government must never again violate the sanctity of the doctor-patient relationship again.
- 17. The Commonwealth Government must never be silent when the states violate human rights.
- 18. The National Cabinet must be abandoned and the minutes from all their past meetings released in full.
- 19. No government should ever be allowed to mandate medical procedures. This is a violation of basic human rights. And it is a basic human right to work, and the right to decide what goes into our body. To say that there are exceptions that override these human rights is to risk getting things wrong again. To invoke the ethereal concept of "public health" overriding the "individual's health" is to say that some lives are worth more than others. We do that at our moral peril.

There are so many more issues that need to be addressed. People need to be held personally accountable for their decisions and the deaths and violations of human rights that resulted. I still believe this can only be achieved by a Royal Commission. However, I hope that this Inquiry can achieve some useful outcomes and ensure that we never follow the same lockstep approach that was taken in other countries as well as Australia.

To this end, to achieve useful outcomes, we need to solve our problems in our own backyard and extricate ourselves from the WHO and the UN. Many problematic decisions were taken from their guidance. This also needs to be investigated.