Lucinda van Buuren - Australian Citizen

An Individual and a Parents Perspective on Pandemic Preparedness Review

9th January 2024

Commonwealth Government COVID-19 Response Inquiry

I will be writing this submission as a member of the public and as a parent sharing my concerns, questions and suggestions on behalf of all people residing in Australia throughout the COVID-19 Response and beyond.

By way of submission to this inquiry; the Committee tasked to review the Commonwealth Government's response to the COVID-19 pandemic and make recommendations to improve response measures in the event of future pandemics;

In response to specific areas of review-

1) 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.

My first concern, questions and suggestions regarding governance is regarding the messaging from governance. The messaging could have been perceived as instigating fear? Having daily press conferences with politicians and state health officers daily, telling the public of how many deaths "from covid", later to be known predominantly as deaths "with covid" in the community.

Regardless of this information, this pandemic response seemed to be about driving fear into the pubic and this had never been a pandemic response before. It is well documented that fear which leads to stress, weakens the immune system and has the ability to put people into the sympathetic nervous system response also known as the fight, flight, freeze state.

In this response, the prefrontal cortex shuts down, which is in charge of the learning and thinking brain. The clinical governance of messaging on all levels needs to be addressed as a matter of urgency with the review of potential harm caused through this messaging impacting mental health and physical health through stress and anxiety, for everyone be it adults, children and the people delivering this messaging also.

Traditional response to emergency has always been to try to instil calm whilst taking critical response action and I was quite surprised at the opposite stance taken for the COVID-19 response and would welcome transparency as to why this particular path was taken and from who these directives were given and driven from.

The use of words in the pandemic response needs to be formally reviewed. Words and messaging are powerful. They have the power to inflict harm and they should always be used wisely with respect and the awareness of the potential risk of harm, simply though our words and messaging. They also need to be transparent, responsible, accountable and just in a fair way as per National Law for public safety.

The use of medical messaging given as constant messaging via television and social media, I found completely inappropriate and an obstruction to National Law by way of obstructing voluntary informed consent and the obstruction of the doctor – patient relationship.

I also found that businesses and schools encouraging medical procedures with no medical knowledge was completely inappropriate, reckless and contrary to National Law and this needs to be reviewed with urgency so this can never happen again.

 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.

Continuing on with clinical governance and their key health response focussed measures, the "vaccine rollout" or specifically the provisionally approved based on short term data – vaccine rollout.

Who made the decision to use these provisionally approved covid 19 vaccinations on our children and young generation and why?

It has never been acceptable to ask others to take a medical procedure on behalf of others and that is how the messaging was promoting these injections to our youth. Messaging telling children they would kill their grandparents, instils fear within a child and I sadly feel this was actually the intention of this governance messaging as governance is too intelligent not to realise or be aware of the potential harm caused mentally and physically by use of such messaging in this way?

I know that the Australian Nursing and Midwifery Federation, in their document written on 18th February 2021, knew that these covid vaccinations were not being specifically tested for transmissibility, they knew they were only provisionally approved and in different stages of trials and they knew that the mRNA platform had never been used in practice.

If this national nursing union knew this and did not see potential red flags, maybe they too were shut down through fearful messaging and this impeded transparent, responsible, accountable and just decision making and open disclosure of limitations surrounding these products for fully informed, open and voluntary informed consent.

There was no transparency and honesty from leadership bodies in healthcare at all regarding the limitations of knowledge regarding these new technology vaccines with only short term data and this is unacceptable and needs to be addressed as a matter of urgency.

On the 24th January 2021, the TGA gave Provisional Registration to Sponsor: Pfizer Australia Pty Ltd, for Product Comirnaty BNT162b2 (mRNA). https://www.tga.gov.au/covid-19-vaccine-provisional-registrations When I reviewed the Australian Public Assessment Report for BNT162b2 (mRNA) https://www.tga.gov.au/sites/default/files/auspar-bnt162b2-mrna-210125.pdf page 7 of 42 states "Approved therapeutic use: Comirnaty (BNT162b2 (mRNA)) COVID-19 vaccine has provisional approval for the indication below: Active immunisation to prevent coronavirus disease 2019 (COVID-19) caused by SARS-CoV-2, in individuals 16 years of age and older. The use of this vaccine should be in accordance with official recommendations. The decision has been made on the basis of short term efficacy and safety data. Continued approval depends on the evidence of longer term efficacy and safety from ongoing clinical trials and post-market assessment".

Comirnaty was placed on the Black Triangle Scheme. "As a provisionally registered product, this medicine will remain in the Black Triangle Scheme for the duration of its provisional registration".

Footnote 2 "The Black Triangle Scheme provides a simple means for practitioners and patients to identify certain types of new prescription medicines, including those being used in new ways and to encourage the reporting of adverse events associated with their use. The Black Triangle does not denote that there are known safety problems, just that the TGA is encouraging adverse event reporting to help us build up the full picture of a medicine's safety profile". https://www.tga.gov.au/black-triangle-scheme-information-sponsors

Ahpra and the 15 National Boards did not disclose in their messaging that these vaccines were only provisionally approved and were new technology with limited use in humans. For Pfizer at the time of the joint statement, the decision had been made on 8 weeks data of a new technology with limited use in humans. https://www.tga.gov.au/sites/default/files/auspar-bnt162b2-mrna-210125.pdf page 37"As the safety follow up is currently limited to a median of 2 months post dose 2, can the ACV comment on the likelihood of vaccine-related adverse events occurring after more than 2 months post vaccination, particularly with the new mRNA vaccine? The ACV advised that it is unlikely for the vaccine-related adverse events to occur more than 2 months after vaccination based on available data. However, there is limited information on the use of mRNA vaccine in humans, which underpins the need for post market vaccine safety surveillance".

These vaccines also had / have, potential for worsening disease VAED and VAERD?

How did Commonwealth Government, State and Territory Government and Local Council, personal serving on behalf of the people, decide to remove voluntary informed consent for medical experimental vaccinations of a new technology, for all people in Australia, through mandate and public health order, for above 16 years of age? When did it become acceptable to mandate healthcare workers and everyone to take provisionally approved new technology vaccines and who made those decisions? Please release the contracts regarding these products with transparency as a matter of urgency.

All mRNA technology needs to be halted immediately until it has been proven independently and transparently to be safe and effective for short, medium and long term safety.

Pharmaceutical industry reform and its relationship with healthcare needs to be independently investigated, reset and realigned to the National Law values of transparency, responsibility, accountability in a fair and just way for public safety. No NGO can be given indemnity from Australian governance as this is an act of putting NGO before the people and is simply not acceptable in a democratic society such as Australia. People must come before profit always.

This submission comes to you all without judgement, with the ultimate desire for optimum gold standard healthcare for all Australians and people living in this beautiful country Australia. I do believe we all want that for ourselves and our children and the future generations to come.

Clinical governance must always partner with consumers and empower the public, not dominate and disempower the public.

I hope open disclosure is urgently addressed by this committee. Three pages is not enough to address all issues in relation to this COVID-19 Response. It is a much appreciated start, so thank you. I ultimately believe that the only transparent, responsible, accountable and just, National Law for public safety way, can only truly be assessed and accomplished with an independant full Royal Commission.

Lucinda van Buuren

Yours Sincerely,