

I am presenting my submission as an individual Australian citizen that was living in [REDACTED] during the time of the pandemic response. I was, and remain, employed full time and was able to continue to work from home without interruption. However, the egregious and far-reaching impacts of the response have had far reaching impacts on my family, friends and me. I therefore want to contribute to improving future responses by addressing two specific points in the terms of reference for the inquiry.

- 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).
- 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.

In my opinion, the response was obsessively reliant on a novel and untested medical intervention, namely the COVID-19 vaccination. As master's degree qualified expert in safety and risk management, responding to an emergency must not neglect a thoughtful approach and hastily implementing a novel and uncertain risk treatment, especially when the potential risks may outweigh the benefits. In other words, a precautionary approach is essential, necessitating a thorough and wholistic evaluation of the risks and benefits associated with any decision, particularly where it is effectively mandated on the public. The assertion that individuals were being given a "choice" between undergoing a novel and uncertain medical treatment and employment suggests mandatory action or at the very least coercion. This contravenes both the guidelines outlined in the Australian Immunisation Handbook and the principles of the Nuremberg Code, representing a contemptuous abuse of human rights.

The Governments neglected to consider established conventional treatments that had proven effective indications in other countries with higher exposure to the virus. Furthermore, the response failed to take into account individual needs and outcomes, including the potential for vaccine exemptions based on reasonable medical advice discussed between the medical professional and the patient.

In my experience, the impacts have been not solely from the pandemic itself but were largely influenced by the government's response to it. Job loss, discrimination, adverse reactions, vaccine injuries, separation from loved ones, disruption to children's development and education and ongoing delays or denials of treatment were among the repercussions. Of particular concern was the suppression of any health professional who dared to question the government's public health response - a stance I believe was neither reasonable, evidence-based, nor in line with the precautionary principle, as discussed in the article "The Precautionary Principle and Medical Decision Making" published in the Journal of Medicine and Philosophy

(https://www.researchgate.net/publication/51365486_The_Precautionary_Principle_and_Medical_Decision_Making; June, 2004).

Two years on we are enduring the collateral economic, personal and social damage from policy which appears to have delayed and exacerbated the health crisis. The mandating of unjustifiable policy decisions undermined patient's care using evidence based best practice, and to first do no harm. Take for example two pandemic preparedness documents. The Australian the Australian Health Management Plan for Pandemic Influenza 2019 (the AHMPPI) and the WHO Non-pharmaceutical public health measures for mitigating the risk and impact of epidemic and pandemic influenza 2019. The AHMPPI outlined health care stakeholders have a responsibility to provide input into decision making for and to communicate pandemic information and key messages to the public such as myself and the quarantine and isolation only of sick individuals for the purpose of isolation and treatment.

Thank you for your consideration of this submission.