

Mrs Fiona Hayward

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To Whom it May Concern:

I reject the Public Health and Other Legislation (Extension of Expiring Provisions) Amendment Bill 2022.

I do not agree to having the Acts listed in this Amendment Bill amended and extended yet again.

Queensland has been through enough difficulty throughout the past two years without a needless extension of provisions that were confusing, difficult to interpret, onerous to enforce, and negatively impacted citizens livelihoods, businesses, education, healthcare & mental health (to name a few areas). For insight into the damage wrought by State (and National) emergency measures in response to Covid-19, I recommend reading **Fundamental Rights in the Age of COVID-19 -- Edited by Augusto Zimmermann & Joshua Forrester (ISBN 9781922449375 Connor Court Publishing Australia, December 2020)**
https://www.connorcourtpublishing.com.au/Fundamental-Rights-in-the-Age-of-COVID-19--Edited-by-Augusto-Zimmermann-Joshua-Forrester-_p_414.html

While there is no doubt protecting at-risk community members is important in a pandemic, it should not be done at great cost/risk to the rest of the community. As an example, vaccinating children for Covid-19 in order to (supposedly) “help protect everyone” is a great risk to the children concerned, who have negligible risk from the virus, but considerable risk from the experimental vaccines. (Source: Why are we vaccinating children against COVID-19? <https://www.sciencedirect.com/science/article/pii/S221475002100161X>)

Therefore, after over two years of living with the current regulations around the virus, it is well and truly time to look at what is really happening in Queensland regarding Covid-19, and rethink whether we actually need the outdated measures in the Amendment Bill above.

Now is the time to move on from the Covid-19 "emergency". Omicron is mild, and there have been no Variants of Concern since November 2021, and no Variants of Interest since mid-2021 (source: WHO <https://www.who.int/en/activities/tracking-SARS-CoV-2-variants/>).

Currently designated variants of concern (VOCs)*:

WHO label	Pango lineage*	GISAID clade	Nextstrain clade	Additional amino acid changes monitored ^o	Earliest documented samples	Date of designation
Alpha	B.1.1.7	GRY	20I (V1)	+S:484K +S:452R	United Kingdom, Sep-2020	18-Dec-2020
Beta	B.1.351	GH/501Y.V2	20H (V2)	+S:L18F	South Africa, May-2020	18-Dec-2020
Gamma	P.1	GR/501Y.V3	20J (V3)	+S:681H	Brazil, Nov-2020	11-Jan-2021
Delta	B.1.617.2	GK	21A, 21I, 21J	+S:417N +S:484K	India, Oct-2020	VOI: 4-Apr-2021 VOC: 11-May-2021
Omicron*	B.1.1.529	GRA	21K, 21L 21M	+S:R346K	Multiple countries, Nov-2021	VUM: 24-Nov-2021 VOC: 26-Nov-2021

Currently designated variants of interest (VOIs):

WHO label	Pango lineage*	GISAID clade	Nextstrain clade	Earliest documented samples	Date of designation
Lambda	C.37	GR/452Q.V1	21G	Peru, Dec-2020	14-Jun-2021
Mu	B.1.621	GH	21H	Colombia, Jan-2021	30-Aug-2021

*Includes all descendent lineages. See the cov-lineages.org and the [Pango network](https://pango.network) websites for further details.

Queensland at the time of writing this submission is 90% vaccinated according to official figures (source: Qld Health <https://www.qld.gov.au/health/conditions/health-alerts/coronavirus-covid-19/current-status/statistics>), so if the vaccines are working we should no longer need to rely on extending Provisions that were put in place prior to vaccines being available.

Queensland COVID-19 statistics

Last updated: Cases & tests 3 March 2022. Vaccination data 3 March 2022

6,479 New cases (last 24h)	26 Currently in ICU	10,549 Tests (last 24h)	90.9% Fully vaccinated
582,696 Total cases	315 Currently in hospital	6,853,231 Total tests	92.9% 1 st dose vaccine

- Out of 30 126 current cases (at the time of writing) only 315 have needed hospitalisation which is approx. 1%.
- Out of the 315 people in hospital, only 26 are in ICU which is 0.08% of the total active cases.

- **Further: out of a total of 582 696 cases since the virus was first identified in Qld over two years ago, 570 people have died which is only 0.09% of the total cases, and this includes all the variants that have been active in Qld since the start of the pandemic, and prior to vaccines being available.**

For context, in 2019, there had been 214,377 notifications of laboratory-confirmed influenza, and 486 deaths, which equates to 0.22% of total cases - more than twice the death rate of the current Covid-19 “pandemic”.

(Source; newsGP <https://www1.racgp.org.au/newsgp/clinical/australia-records-zero-flu-deaths-over-past-12-mon>)

Covid-19 is not an emergency.

The actual emergency that Queensland now faces is clearly due to the flooding. It is time to put the outdated measures of the Public Health and Other Legislation (Extension of Expiring Provisions) Amendment Bill 2022 aside and look at what is happening in the State right now, and act on that.

On the other hand, if Qld Government feels we do still have a Covid-19 emergency, and we do need to rely on Provisions being extended by the above Bill, then the Qld Government also needs to admit that Covid-19 vaccinations have been a failure, and immediately stop the push to vaccinate children, and ALL Covid-19 vaccine mandates need to end, and ALL workers that lost their jobs or were suspended because of not complying with mandates need to be reinstated. In that case there also needs to be a (Queensland) compensation program for sufferers of adverse effects of the Covid-19 vaccines, and an enquiry into why such a colossal and expensive waste of taxpayers money was allowed to occur, when cheaper and more effective treatments for the virus were available and had already been used effectively overseas. (Source: FLCCCA <https://covid19criticalcare.com/covid-19-protocols/>)

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Without Ill-will, Vexation, or Frivolity.

Sincerely

Fiona Hayward

3rd March 2021