

Committee Secretary
Community Support and Services Committee
Parliament House
George Street
Brisbane Qld 4000

Thursday 3rd March, 2022

To The Committee Secretary,

**RE: SUBMISSION FOR OPPOSING: PUBLIC HEALTH AND OTHER LEGISLATION
(EXTENSION OF EXPIRING PROVISIONS) AMENDMENT BILL 2022**

After reviewing the Amendment Bill 2022, I strongly oppose the amendment and extension of this bill.

The current bill is due to expire on 21st April, 2022, the statement from Hon Yvette D'Arth upon submitting her bill, that the pandemic is not over, appears to be a largely incorrect statement.

"The proposal for the this bill means:

- *further extend the operation of essential public health measures implemented to facilitate Queensland's response to the COVID-19 pandemic*
- *extend amendments to the Corrective Services Act 2006, Disaster Management Act 2003 and Mental Health Act 2016 to support the public health response.*

The extended provisions follow previous temporary extensions effected by a series of Acts of Parliament in 2020 and 2021, under which the majority of measures are due to expire on 30 April 2022. The Bill would extend this legislative expiry date for certain Acts to 31 October 2022, or the day the Minister for Health ends the declared public health emergency, whichever day is earlier."

To accurately determine a pandemic, you must consider the "pandemic of deaths", otherwise it could not possibly be categorised as anything other than an **outbreak**.

There is no justification, or evidence which supports the need to extend the emergency powers, this is nothing more than another attempt for the current government to continue its current overreach of powers.

When we review the recent data released by the Bureau of Statistics for registered deaths, the data reveals:

- There are 2,639 death registrations that have been received by the ABS where an individual is certified as having died from or with COVID-19 between the start of the pandemic and 31 January 2022. **Approximately 1% of the 273,901** death registrations received by the ABS and certified by a doctor in Australia during the pandemic period are of people who have died with or from COVID-19.
- Almost all deaths due to COVID-19 in Australia have laboratory confirmation of the virus. Of the 2,556 registered COVID-19 deaths occurring by 31 January 2022, 2,539 (99.3%) were coded to U07.1, (laboratory confirmed) COVID-19, virus identified. There were **17** (0.7%) deaths where the doctor certified that it was a **suspected case of COVID-19 with no laboratory confirmation** recorded at the time the MCCD was completed.
- There were a further **83** people who died of other causes (e.g. cancer) but were COVID-19 positive at the time of death.
- **Chronic cardiac conditions were the most common pre-existing chronic condition** for those who had COVID-19 certified as the underlying cause of death.
- The highest number of COVID-19 deaths occurred among those aged **80-89** years (934). This was true for both males and females.
- The median age for those who died from COVID-19 was **83.7 years** (81.2 years for males, 86.0 years for females).

Pre-existing chronic conditions were reported on death certificates for 1,776 (69.5%) of the 2,556 deaths due to COVID-19 deaths outlined in this report. Of these 1,776 deaths:

- Chronic cardiac conditions including coronary atherosclerosis, cardiomyopathies and atrial fibrillation were the most commonly certified comorbidities, present in 35.8% of the 1,776 deaths.
- Dementia including Alzheimer's disease was certified in over 30% of deaths due to COVID-19.
- Diabetes, a condition that weakens the immune system was certified as a pre-existing condition in 20.6% of deaths with a chronic condition mentioned.
- Cancer was a pre-existing condition in 14.1% of the 1,776 deaths. Blood and lymph cancers (e.g. leukaemia) were the most commonly certified cancer type among those deaths.
- The type of comorbidities most commonly present in Australian deaths due to COVID-19 are consistent with those reported internationally.

- **A COVID-19 related death is one where there is a disease or injury pathway to death that is not directly caused by the virus. For example, a person may have late stage cancer that has metastasised extensively causing organ damage leading to death.** This person may also have contracted COVID-19. While the virus may have negatively impacted health in an immunocompromised person, the virus itself did not cause the terminal event leading to death (e.g. organ failure caused by metastases). In this example, the underlying cause of death would be recorded as cancer and COVID-19 would be considered an associated cause of death.
- The majority of recorded **COVID-19 related-deaths** (74 deaths, 89.2%) occurred during the Delta and Omicron waves. There were 9 COVID-19 related deaths (11.8%) recorded during wave 1 and 2 of the pandemic in Australia. The number of COVID-19 related-deaths is expected to increase as additional registrations are received by the ABS.
- Of the 83 people who died **with COVID-19**, cancer was the most common underlying cause of death. Lung cancer was the most common primary site of cancer. Circulatory system diseases, encompassing chronic cardiac conditions was the second most common underlying cause of death in COVID-19 related deaths.

For the 898 people who died from COVID-19 in 2020:

- COVID-19 was the **38th leading cause of death.**
- Their median age at death was **86 years.**
- Dementia was the most common pre-existing condition (275 deaths).
- Chronic cardiac conditions, hypertension and diabetes were also commonly reported comorbidities.

When you break down the data, the number of people who died FROM Covid-19, with no underlying health issues and their death was directly related to the virus and their was below the average age of death was **736**

Total registered deaths where an individual is certified as having died from or with COVID-19	2,639
Total registered deaths where cause of death was not COVID-19, but they tested positive at time of death	83
Registered COVID-19 deaths occurring by 31 January 2022, 2,539 (99.3%) were coded to U07.1, (laboratory confirmed) COVID-19, virus identified.	2,539
Total deaths where the doctor certified that it was a suspected case of COVID-19 with no laboratory confirmation recorded	17

Total number of deaths where the individual had a pre-existing chronic condition that could have contributed to their death	1,776
Total number of death where the individual was 80-89 years of age	934

To say the death rate has been overinflated is a complete understatement, not only were deaths included where no virus was detected, deaths where 1776 individuals already had pre-existing chronic conditions which could most certainly cause death, where also included in the death rate, not to mention individuals who were past the median average life expectancy.

In order to show a clear comparison, we must look at other causes of death and the action the government has taken with regards to national health, data from 2020 data shows the median age at death was 81 years. When 934 people who died from a covid-19 related death were past the median life expectancy, these figures simply cannot be included in the COVID-19 data as there is no medical evidence to state that these people would not have died otherwise.

We must also look to compare death rates with other leading causes of death in order to establish a baseline of whether or not the death rate for COVID-19 related deaths are justified to enact the emergency powers in the first instance and label this outbreak as a pandemic.

In 2020 at the peak of the outbreak, the top five leading causes of death remained the same as in 2019 (Ischaemic heart disease, Dementia including Alzheimer's disease, Cerebrovascular diseases, Lung cancer and Chronic lower respiratory diseases) .

Deaths due to chronic lower respiratory diseases (including emphysema) had the highest proportional rate decrease from 2019 at 17.8%. The reduction in acute respiratory conditions such as pneumonia contributed to a decrease in the top five leading causes of death.

All top five leading causes of death are **non-communicable diseases** (they are not passed from person to person).

There were significantly higher deaths rates over this time, when we look at the data

- There were 3,139 deaths due to suicide
- There were 1,163 people who died from a motor vehicle accident
- There were 1,842 drug-induced deaths
- There were 1,452 people who died of an alcohol-induced death
- There were 5,148 people who died from Diabetes
- There were 3,395 people who died from accidental falls

Given that the data shows that COVID-19 is listed as the 38th cause of death, it is alarming that our State Government is using this to push to extend the emergency powers.

Below is detailed outline of the top 38 causes of death in Australia in 2020 and the amount of people who died from these causes, as shown the Australian Bureau of Statistics website.

Leading Causes of Death in 2020	2020		Median Age
	no.	Rank	years
Top 20 leading causes of death and ICD code			
Ischaemic heart diseases (I20-I25)	16,587	1	84.1
Dementia, including Alzheimer's disease (F01, F03, G30)	14,575	2	89.1
Cerebrovascular diseases (I60-I69)	9,470	3	86.1
Malignant neoplasm of trachea, bronchus and lung (C33, C34)	8,457	4	74.5
Chronic lower respiratory diseases (J40-J47)	7,102	5	80.4
Malignant neoplasm of colon, sigmoid, rectum and anus (C18-C21, C26.0)	5,483	6	77.1
Diabetes (E10-E14)	5,148	7	81.4
Malignant neoplasms of lymphoid, haematopoietic and related tissue (C81-C96)	4,754	8	78.5
Diseases of the urinary system (N00-N39)	4,019	9	87.2
Malignant neoplasm of prostate (C61)	3,568	10	82.5
Accidental falls (W00-W19)	3,395	11	87.3
Heart failure and complications and ill-defined heart disease (I50-I51)	3,249	12	88.9
Malignant neoplasm of pancreas (C25)	3,244	13	75.2
Malignant neoplasms of breast (C50)	3,144	14	72
Intentional self-harm [suicide] (X60-X84, Y87.0) (e)(f)	3,139	15	43.5
Cardiac arrhythmias (I47-I49)	2,401	16	89.1
Influenza and pneumonia (J09-J18)	2,287	17	88.8
Malignant neoplasm of liver and intrahepatic bile ducts (C22)	2,192	18	72.4
Cirrhosis and other diseases of liver (K70-K76)	2,186	19	64.7
Melanoma and other malignant neoplasms of skin (C43-C44)	2,123	20	79.1
Other selected causes not in Top 20 leading causes			
COVID-19 (U071, U072) (g)	898	38	86.9
All Causes	161,300	n/a	81.7

In addition to this we have many countries around the world who have ceased their emergency declarations and dropped all mandates as they are now learning "to live with COVID" the same way we live with influenza and the same way we live with Diabetes.

If other countries including the UK are no longer seeing this virus as a threat, then why, when significantly less people were affected in Australia, and furthermore even less in Queensland, is our government pushing to keep these powers enacted?

Summary

The data shows that there is no emergency, there is no pandemic of deaths and there is no justification to continue the emergency declaration.

If the State Government believes they have grounds to extend the declaration, then they MUST show all data that suggest we are in a pandemic and ALL Data which justified the continuation of the emergency declaration.

Queenslanders have suffered enough under the restrictions put in place under these emergency powers. There is no data to justify these cruel and divisive restrictions and mandates implemented under the guise of "health".

Businesses and individuals suffering in the past 2 years has been more at the hands of the State Government than it has been from a virus. Businesses have shut down, livelihoods lost, and families torn apart because of the cruel and unreasonable restrictions put in place for a virus that has caused 1% of all deaths in the last 2 years.

Not only do I strongly oppose the extension of the emergency declaration, I demand the State Government show all of the data and documents they used to make the decision to enact the emergency powers in the first instance and the continual extensions of them over the past 2 years.

Regards,

Nikki Civitarese

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Source: <https://www.aihw.gov.au/reports/life-expectancy-death/deaths-in-australia/contents/age-at-death>

Source: <https://www.abs.gov.au/statistics/health/causes-death/causes-death-australia/2020#2020-covid-19-mortality>