Submission Against Part 4 of the Public Health and Other Legislation (Further Extension of Expiring Provisions) Amendment Bill 2021

Submitted to:

Economics and Governance Committee egc@parliament.qld.gov.au

Submitted by:

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Introduction

This submission is specific to Part 4: Amendment of COVID-19 Emergency Response Act 2020 as presented in the Public Health and Other Legislation (Further Extension of Expiring Provisions) Amendment Bill 2021.

My Name is Vanessa Thomas. I live in Caloundra, Queensland. I have lived in this area since 2013. I have seen many negative effects of the government-imposed emergency measures related to Covid-19. I am suffering from these restrictions both mentally and physically. My friends and family are also suffering. My life is more difficult due to the business closures. I live with increased anxiety every day when pressured by business owners demanding check-ins and mask wearing. These are unlawful demands. Food and rent and other living expenses have increased dramatically while my income has not. I have witnessed many adverse effects on family and friends from the emergency measures the Australian and Queensland governments have been imposing.

I have become so concerned that, over the past 5 weeks, I have been spending all my free time researching about this "pandemic" and vaccines and government restrictions in Australia and around the world. Mainstream media is one sided and social media is censoring information. This forces me to use my free time to dig around and find out what the other side of the story is. To find others who can share information.

I have read many reports and watched over a hundred hours of videos of reputable experts in law, science, medicine, sociology and psychology presenting the other side of the pandemic story and new findings.

From my research I can see there is evidence that we no longer need to be in a state of emergency due to Covid-19. There is no justification for continued locking down, quarantining and masking healthy populations. No one has isolated SARS-CoV-2 virus. PCR tests produce a high percentage of false positives. With all the false positives being created from inappropriate test methods, numbers are inflated. Illness from SARS-CoV-2 virus within the community is generally limited to those with compromised immunity and the elderly. The same as is found with any flu virus.

Emergency powers so government can continue to impose radical restrictions and controls on the population are not necessary. The 'pandemic' is over. Stop creating fear and panic. Fear lowers immunity and negatively impacts mental health. Let's get back to the business of repairing our economy and letting people get back to work so we can try to restore financial and mental health in our communities.

Examining Some Measures Governments Have Imposed During The "Corona Pandemic"

The extensive global inquiry out of Germany has taken and made available hundreds of hours of interviews and expert testimony and information that relates to the corona pandemic.

Stiftung Corona Ausschuss - Investigative Corona Committee Germany.

Since mid-July 2020, the Corona Committee has been conducting live, multi-hour sessions to investigate why federal and state governments imposed unprecedented restrictions as part of the Coronavirus response and what the consequences have been and still are for people. On their FAQ section of the website you will find important questions related to the Coronavirus, government countermeasures and lockdown consequences and the answers provided as a result of the inquiry.

No virus has been isolated. Novel coronavirus (2019-nCoV, also referred to as SARS-CoV-2) aka "Covid-19" effectively does not exist. No scientists anywhere in the world have proven isolation of the Covid-19 virus. ¹ Even the CDC was not able to isolate the virus "Since no quantified virus isolates of the 2019-nCoV were available for CDC use at the time the test was developed and this study conducted..." ²

Lockdowns and Quarantines

Lockdown has a major negative impact on our economy. People have lost jobs and businesses have closed because of lockdowns and movement restrictions.

Lockdown has a major negative impact on mental health. They cause panic and fear. Only those who are sick should be self isolating, as you normally do when you suffer from cold or flu.

Lockdowns do not assist in keeping people healthy.

Findings from the Investigative Corona Inquiry in Germany (https://corona-ausschuss.de/en/faq/):

FAQ 23. WAS THE LOCKDOWN URGENTLY NEEDED?

No, it was harmful in many respects and, according to RKI data, the wave of infection subsided automatically before it began. Studies by the Israeli mathematician Prof. Isaac Ben-Israel have shown that with and without the lockdown, the virus had ceased to be active worldwide after about 45 days. Even the much-mentioned R-value shows this from Easter at

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¹ https://www.xandernieuws.net/algemeen/laboratoria-in-vs-kunnen-in-niet-een-van-1500-positief-getesten-covid-19-vinden/

https://www.fda.gov/media/134922/download page 39 of the 'CDC 2019-Novel Coronavirus (2019-nCoV) Real-Time RT-PCR Diagnostic Panel' (July 13)- CDC-006-00019, Revision: 06 CDC/DDID/NCIRD/ Division of Viral Diseases Effective: 12/01/2020

the latest. The R-value may also have been artificially distorted upwards by increased testing with more false positive tests.

24. HAVE MORTALITY RATES DECLINED AFTER THE LOCKDOWN?

No, on the contrary, the statistical curves show that after the imposition of the lockdown, mortality rates increased in many regions and major cities, but not in all. This can only be explained by the collateral damage of the lockdown: Postponement of surgeries, preventive care and treatment of emergencies, avoidance of doctor visits and hospitalization, loneliness and neglect of those in need of care, increase in mental illness, suicides, misadmissions of the elderly, etc.

Data on the effects of lockdowns is now emerging.

Current Data Concerning Lockdown Effects³

Let us start with the staggering statement by <u>Germany's Minister of Economic Cooperation</u> and <u>Development</u>, <u>Gerd Muller</u>, who has openly cautioned that global lockdown measures will result in the killing of more people than Covid itself. A <u>recent Lancet study</u> reported that government strategies to deal with Covid such as lockdowns, physical distancing, and school closures are worsening child malnutrition globally, whereby "strained health systems and interruptions in humanitarian response are eroding access to essential and often life-saving nutrition services."

What is the actual study-level/report evidence in terms of lockdowns? We present 31 highquality sources of evidence below for consideration that run the gamut of technical reports to scientific manuscripts (including several under peer-review, but which we have subjected to rigorous review ourselves). We set the table with this, for the evidence emphatically questions the merits of lockdowns, and shows that lockdowns have been an abject failure, do not work to prevent viral spread and in fact cause great harm. This proof includes: evidence from Northern Jutland in Denmark, country level analysis by Chaudhry, evidence from Germany on lockdown validity, UK research evidence, Flaxman research on the European experience, evidence originating from Israel, further European lockdown evidence, Western European evidence published by Meunier, European evidence from Colombo, Northern Ireland and Great British evidence published by Rice, additional Israeli data by Shlomai, evidence from Cohen and Lipsitch, Altman's research on the <u>negative effects</u>, <u>Djaparidze's</u> research on SARS-CoV-2 waves across Europe, Bjørnskov's research on the economics of lockdowns, Atkeson's global research on nonpharmaceutical interventions (NPIs), Belarusian evidence, British evidence from Forbes on spread from children to adults, Nell's <u>PANDATA</u> analysis of intercountry mortality and lockdowns, principal component analysis by De Larochelambert, McCann's research on states with lowest Covid restrictions, <u>Taiwanese</u> research, <u>Levitt's</u> research, <u>New</u> Zealand's research, Bhalla's Covid research on India and the IMF, nonpharmaceutical lockdown interventions (NPIs) research by <u>Ioannidis</u>, effects of lockdowns by <u>Herby</u>, and lockdown groupthink by Joffe. The American Institute for Economic Research (AIER) further outlines prominent public health leaders and agencies' positions on societal lockdowns, all questioning and arguing against the effectiveness of lockdowns.

A recent pivotal study from Stanford University looking at stay-at-home and business closure lockdown effects on the spread of Covid by <u>Bendavid, Bhattacharya, and Ioannidis</u> examined restrictive versus less restrictive Covid policies in 10 nations (8 countries with harsh

³ https://www.aier.org/article/the<u>-catastrophic-impact-of-covid-forced-societal-lockdowns/</u>

lockdowns versus two with light public health restrictions). They concluded that there was no clear benefit of lockdown restrictions on case growth in any of the 10 nations.

Key seminal evidence arguing against lockdowns and societal restrictions emerged from a recent quasi-natural experiment (case-controlled experimental data) that emerged in the Northern Jutland region in Denmark. Seven of the 11 municipalities (similar and comparable) in the region went into extreme lockdown that involved a travel ban across municipal borders, closing schools, the hospitality sector and other settings and venues (in early November 2020) while the four remaining municipalities employed the usual restrictions of the rest of the nation (moderate). Researchers reported that reductions in infection had occurred prior to the lockdowns and also decreased in the four municipalities without lockdowns. Conclusion: surveillance and voluntary compliance make lockdowns essentially meaningless.

Masks

Masks cause harm, create fear and anxiety and interfere with communication.

One of [Alex] Berenson's most critical points is that there is now substantial evidence that the coronavirus is very rarely, if ever, spread by asymptomatic individuals. The belief that asymptomatic transmission was one of the primary forces driving coronavirus spread propelled lockdowns and universal mask requirements in the spring.

If only symptomatic people spread the virus, then there is no justification whatsoever for quarantining and masking healthy populations: all that societies must do is ask people exhibiting symptoms to stay home.

Several large, recent studies have established that asymptomatic transmission of the coronavirus is exceedingly uncommon, if it occurs at all; the WHO has also recognized this fact. Of course, these studies have been entirely ignored by the media. Those who have staked their personal and professional reputations on the efficacy and necessity of lockdowns and mask mandates cannot now acknowledge having made such a grave, crucial error. ⁴

Findings from the Investigative Corona Inquiry in Germany:

- Visit the website and scroll down to the mask section https://corona-ausschuss.de/en/documents/
- Found in the FAQ section of the website. Five reasons speak against the use of masks: 5
 - (a) the SARS-CoV-2 viruses are smaller than the pores of "everyday masks" and are not retained;
 - b) rebreathing CO2 (hypercapnia) causes poor performance and headaches;

⁴ https://www.aier.org/article/the-question-of-masks/

⁵ https://corona-ausschuss.de/en/fag/

- c) the humidity during prolonged wearing is a breeding ground for bacteria, viruses and fungi.
- d) the frequent donning, doffing and disposal of masks leads to the spread of viruses. (e) the psychological, social, and economic consequences are significant.

No significant reduction in infection rates among mask wearers has been found in large field trials (Denmark).

Masks are useful as occupational protection for medical personnel in infection control units. However, they are less helpful against the transmission of pathogens than the usual behavioral rules (e.g., washing hands, coughing or sneezing into the crook of the elbow). Many studies to the contrary were published after January 2020 and are suspected of being interest-driven.

- Masks cause breathing difficulties and can cause hypoxia. Low oxygen saturation negatively affects thinking and cognitive function which causes dangers in the community.⁶
- Masks are breading grounds for bacteria then inhaled back into the body. 7 "Long term mask wearing also hinders the body's natural ability to detoxify wastes, creates an acidic environment, and slowly strains the organ systems throughout the body; " and "Masks cultivate and enrich microbes that infiltrate the lungs and cause immune suppression" 8
- Mask wearing causes anxiety, mental impairment, and severe distress. A personal account online "I soon discovered that, for me, even putting on a mask for a quick trip to the corner store sparks an intense panic" 9

Some challenges of wearing masks: 10

- You might feel anxious or panicky, as covering your mouth and nose might affect the air you breathe. This can cause symptoms like feeling dizzy or sick, which you may then associate with your mask.
- You might feel trapped or claustrophobic.
- o Covering your face changes the way you look, which may cause negative feelings around your identity or body image.
- Certain materials touching your skin might feel very hard to cope with (which may create sensory overload).
- o If you wear glasses, they might steam up so you can't see clearly. This might add to feeling overwhelmed.
- Seeing people with covered faces might make you feel uneasy or scared of others. They might seem threatening, sinister, or dehumanised.
- Masks are a visual reminder of the virus, so seeing masks might make you feel on edge or unable to relax. It might seem like danger is everywhere.

⁶ https://www.clairewolfe.com/blog/2020/07/06/hypoxia-from-facemasks/

⁷ https://plague.info/2021-06-18-study-masks-are-exposing-children-deadly-pathogens.html

⁸ https://truth11.com/2021/01/16/study-long-term-mask-use-breeds-microbes-that-infiltrate-the-lungs-and-contribute-toadvanced-stage-lung-cancer/

⁹ https://thebolditalic.com/mask-induced-anxiety-is-real-82a26b2dc7ec

¹⁰ https://www.mind.org.uk/information-support/coronavirus/mask-anxiety-face-coverings-and-mental-health/

- Wearing or seeing people wear masks might trigger a memory of a traumatic event.
- Covering our faces with masks disconnects humans by hiding our faces and interfering with clear communication.
- Seeing everyone wearing masks causes psychological harm to adults and children alike and spreads fear.

Numbers Are Inflated

If we tested correctly there would be less cases and therefore, less concern. Not an emergency.

PCR Tests are not appropriate tests for finding SARS-CoV-2 virus infection. The inventor of the Polymerase Chain Reaction (PCR) test, Kary Mullis himself, said the PCR test should never be used as a tool in "the diagnosis of infectious diseases."

"PCR basically takes a sample of your cells and amplifies any DNA to look for 'viral sequences', i.e. bits of non-human DNA that seem to match parts of a known viral genome. The problem is the test is known not to work. It uses 'amplification' which means taking a very very tiny amount of DNA and growing it exponentially until it can be analysed. Obviously any minute contaminations in the sample will also be amplified leading to potentially gross errors of discovery. Additionally, it's only looking for partial viral sequences, not whole genomes, so identifying a single pathogen is next to impossible even if you ignore the other issues. The idea these kits can isolate a specific virus like COVID-19 is nonsense."

For more findings about PCR tests: https://corona-ausschuss.de/en/documents/



¹¹ https://stateofthenation.co/?p=30880

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PLEASE STOP THE STATE OF EMERGENCY DECLARATIONS. THERE IS NO PANDEMIC. THERE IS NO STATE OF EMERGENCY. STOP CREATING FEAR. START REBUILDING.