

Committee Secretary,
Economics and Governance Committee
Parliament House
Brisbane QLD 4000
Email: egc@parliament.qld.gov.au

7 July 2021

Dear Committee Secretary,

Thank you for the invitation to provide a submission for the inquiry into the Queensland Health and Other Legislation (Further Extension of Expiring Provisions) Amendment Bill 2021.

I write in opposition to the proposed Queensland Health and Other Legislation (Further Extension of Expiring Provisions) Amendment Bill 2021 which was introduced and tabled in Parliament on the 16th of June 2021 by the Honourable Yvette D'Ath, Minister for Health and Ambulance Services.

The Public Health and Other Legislation (Further Extension of Expiring Provisions) Amendment Bill 2021 extends the current state of emergency in Queensland and a range of emergency measures, including the extraordinary powers of the Queensland Chief Health Officer, currently Dr Jeanette Young.

These powers include the ability to impose restrictions on the free movement of citizens:

- . their ability to travel
- . conduct a business
- . attend a school, church or sport

and to issue mandates on:

- . mask wearing
- . social distancing rules
- . the number of persons who can gather at any one time and where
- . border closures
- . area lockdowns
- . quarantine.

The bill also extends emergency measures and creates new ones for:

- . the care of mental health patients
- . persons with cognitive or intellectual disability
- . the operation of prisons and youth detention centres.

As far as I have been able to tell, no mention of the Bill, its contents or tabling on the 16th of June 2021 has received a single mention in the media or been mentioned by state legal bodies.

**By the proposed end date of the state of emergency—the 30th of April 2022—
Queenslanders will have been living under state of emergency conditions for more than
two years, with every chance the date will be extended yet again.**

We are told time and time again that the state of emergency, lockdowns and restrictions are all to keep Queenslanders safe as the vaccine is rolled out. The vaccine has been tagged as our way ‘out’ and as the way back to ‘normal’.

I am now going to reference a New Zealand doctor, Damian Wojcik, who speaks about the lack of safety data on the vaccines (being used in Australia and New Zealand) as well as the numbers of Influenza deaths in comparison to the number of Covid-19 deaths. He also touches on other forms of treatment for Covid-19.

In an open video, broadcast on the 28th of May 2021 Damian Wojcik points out:

- from the 14th of December 2020, there have been 4,434 deaths reported to VAERS [Vaccine Adverse Event Reporting System] following Covid-19 vaccinations, including from the Pfizer brand
- the CDC [Centers for Disease Control and Prevention] posted that the Covid-19 vaccine death rate to be 0.0017% on its website (16th of May 2021). These are more deaths than the total combined number for all other vaccines for the entire preceding ten years (VAERS). This death rate is also significantly higher than the annual seasonal flu vaccine death rate (also reported to VAERS – 2017 to 2019)
- the attempted roll out of the swine flu vaccine was halted after 25 deaths
- we still have no proof that the Covid-19 injection substantially prevents infection, stops transmission or saves lives. So far, the reverse seems to be true
- hospitals overseas are filling up with double vaccinated Covid-19 patients
- all treatments must be given with the free informed consent of the patient without coercion or fear. And all medical experiments likewise must be with the full consent of the patient, meet strict ethical criteria and have provision to remedy any harm caused during treatment or experimentation
- these codes of ethics trace back to the Nuremberg Code. There are no long-term human safety studies on the use of mRNA technology in humans which focuses on fertility nor scientific evidence of antibody enhanced disease following Covid-19 vaccination, evidence that the spike protein or its sub-units produced by the vaccine at the site of the injection is measurable in the blood and tissues. Is it possible that we have reached out for a remedy that is worse than the disease?
- there are other treatments available and being used around the world, such as Ivermectin and Hydroxychloroquine. Why haven't these been given at least provisional approval? Why don't the public get that choice over their health treatment options?
- we are not lab rats, unless we choose to be. And if we do not choose to participate in this experiment, we should not be penalised – penalising or discriminating against

those who choose not to participate lies strongly under the umbrella of coercion and manipulation.¹

Doctor Robert Malone, inventor of the mRNA vaccine technology, says that the spike protein that the body makes after Covid-19 mRNA vaccination is 'very dangerous':

- he has notified the FDA [Food and Drug Administration] but this has had no impact on the vaccination roll out program. Why?
- states that this particular vaccine causes these dangerous spike proteins to spread throughout the body – the brain, the heart – causing a range of adverse reactions such as paralysis and even death
- asks why is the press ignoring what is going on? Where is the freedom of information?
- says we are not being fully informed and therefore, cannot properly consent
- states that limited non-clinical studies were carried out to assess the safety and efficacy of such technology
- states now that it is known that the 'spike gets cleaved off of expressed cells and becomes free, is something that absolutely should have been known and understood well before this ever got put into humans' and
- 'something has gone wrong and we are in danger - alarming is an understatement.'

These statements can be heard in a podcast aired on the 15th June, 2021.²

In a recent Sky News presentation, Alan Jones states, 'Almost 4 million people have died from Covid-19 – that is 0.04% of the world's population.'

He also points out:

- of all the positive cases in the June outbreak in New South Wales, how many of the cases are serious? None. None of the cases were so sick they needed to go to hospital. This is usually the story for all outbreaks across Australia.
- on the 15th of March 2020, Scott Morrison told the nation, 'The truth is, that while many people will contract this virus, it's clear, just as people get the flu each year, it is a more severe condition than the flu, but for the vast majority ... around 8 in 10 is our advice. It will be a mild illness and it will pass.'

Alan Jones advised that since then, the data has changed— a mild illness for 99.3% (over 9 out of 10) of the world's population and in Australia, 99.5%.

¹ Wojcik, Dr Damian https://www.covidplanb.co.nz/data-science/an-open-video-from-nz-gp-damian-wojcik/?fbclid=IwAR3WFKZOMAW0keWWlyThz1HHhw8-ihP4FEGGU_aMKQBt1_ua_2hR22Qzs58

² Malone, Dr Robert <https://open.spotify.com/episode/3mtjaZjKCNvbi38cbeAGBP?si=f55191ea04564c96&nd=1>

At the time of Jones' presentation, only one person in all of Australia was seriously ill with Covid-19. Despite that, the whole of Australia is still under various restrictions.³

All restrictions need to stop immediately. I believe each level of Government in Australia is using fear and control to manipulate the Australian population into participating in the Covid-19 vaccine program.

Queensland, Australia is part of the current global Covid-19 vaccination program.

The roll out of the **Covid-19 vaccine program** is occurring only because of **declared states of emergency** which must end immediately, not be extended. **It is obvious that the two are undeniably tied together.**

There are some questions that I feel need answering:

1. During lockdowns, why are McDonalds, KFC, Red Rooster, Hungry Jacks and like restaurants remain open, yet the small business/private owned stores which sell organic produce and health supplements close?
2. If reducing Covid-19 in the community is because our hospital systems cannot cope, why haven't any hospitals been upgraded or new hospitals been built since the outbreak? Even before Covid-19, ramping at hospitals has always been an issue.
3. If people are walking around masked, where are the biohazard bins for mask disposal once mandatory mask wearing is over? As stated time and time again by experts, many people who have Covid-19 are asymptomatic but can still transmit. I have seen masks just dumped on the ground or falling out of overfilled bins. How is that Covid-safe?
4. If the majority of positive cases in Queensland are recovering at home, why declare a state of emergency?
5. If Covid-19 is so highly infectious and deadly, how is it that positive cases can roam the community for days before being tested, and not spread the disease to the majority of people with whom they interact?
6. A highly infectious and deadly asymptomatic disease is a contradiction in terms, isn't it?

I am in strong opposition of the proposed the extension of the state of emergency.

Any extension will continue to promote the coercion of the public to agree to being injected with the Covid-19 vaccine in order to gain their 'passport' to freedom of movement—manipulation at the highest level.

Removing the state of emergency **will prevent** the:

- Chief Health Officer dictating lockdowns, mask wearing and restrictions in movement and the associated penalties for not complying
- ruining of small businesses through forced closures

³ Jones, Alan <https://www.couriermail.com.au/news/national/out-of-all-the-casualties-of-this-coronavirus-pandemic-truth-is-the-greatest-alan-jones/video/fb952048ccca45e0499ca73dfd30f028>

- . disregard of the importance of social connection
- . mandating of the use of the Covid-19 vaccines
- . treating of us as though we have no bodily autonomy
- . threatening of employers/employees with job loss for choosing to not be part of the vaccine roll out
- . threatening of doctors with losing their job for speaking truth about possible adverse effects of Covid-19 vaccination or for wanting to use the *aforementioned treatments*
- . censoring and discrediting of health professionals who do not go along with the mainstream narrative.

Removing the state of emergency it **will promote** the:

- . honouring our democracy.
- . the freedom to debate the effects of Covid-19 infection and Covid-19 vaccines
- . opportunity of informed and free choice to receive or not receive the Covid-19 vaccine
- . choice to use well tested and highly effective pharmaceuticals such as Ivermectin and Hydroxychloroquine to assist remediation of health after infection with Covid-19.

Where there is risk, there must be choice.

**Like all Australians, Queenslanders are men and women, daughters and sons.
Queenslanders deserve better than to be governed by a fear-promoting, one-way news
narrative promulgated by a constant state of emergency.**

**Enough is enough. The Public Health and Other Legislation (Further Extension of
Expiring Provisions) Amendment Bill 2021 must not be passed, must not be assented.**

Yours sincerely,

Jaquin Faulkner

