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Submission in relation to Public Health Act Amendments

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My primary concern about the process

Public meetings held on Monday.

Submissions required by close of business on Wednesday?

It would not be far fetched to interpret that the Government has no real desire for public participation in this discussion.

There is a growing tide of discontent with the disproportionate restriction of liberties in light of the reality which we have known all along that this covid is not going away and restrictions are disproportionate to the risk.

My Primary concern about the legislation in general

My understanding is that Act is unlawful as it contradicts the Biosecurity Act 2015 and Privacy Act 1988.

The biosecurity act only allows for forced mask wearing, quarantining etc where a Biosecurity control order has been issued by a Judge.

The Privacy Act makes it illegal for force the use of contact apps

Re the proposed Ammendments

It is clear from the explanatory notes that

- 1) the presumption is that Covid is a real threat – **many would argue it is not**
- 2) the intention is that the illegal practices within these acts will continue in spite of public protest
ie restriction of movement, forced mask wearing etc as the context is the belief that covid is a threat.
- 3) the continuation of the implementation of this act and suggested amendments is based on **fluid definitions of what constitutes a large majority of people being vaccinated and of what constitutes widespread outbreaks and an assumption that vaccination using will be the fix to stop this “pandemic”**
- 4) in spite of the fact that covid is not particularly dangerous for most people, it seems like the intent of these amendments is to justify the continuation of these freedom-stealing provisions of the act, until such time as the undetermined but necessary “majority” have been vaccinated (as though vaccination is the gold bullet to heal all)

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increase powers for emergency officers and the Chief Health Officer to limit, or respond to the spread of COVID-19 In Queensland, Including by issuing directions to require physical distancing, restrict movement and gatherings, require persons to quarantine or self-isolate and implement other containment measures

Comments

- a) The insistence on forcing people to use masks is absurd. The packaging on the masks says that the masks are not anti viral. Again how much is this about disease and how much is this a control measure.
- b) As an adult I can make decisions to choose to act safely in a way proportion to my perception of risk. This is not an area for Government to mandate – outside of the legal process explained via the BioSecurity Act.
- c) The chief health officer is not an elected position to be making directives.
- d) This virus like many viruses is not going away, does not pose a threat to most people and those who have concerns for their own safety can make their own decisions about whether they isolate or not.

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authorise the sharing of confidential information for contact tracing;

I have requested information from the Qld Health Department asking how the information about the whereabouts of those found to be infected (with this virus which is not a high risk virus for most people) is accessed. If we are to believe it is through the information in the Check in App we are delusional. These apps do not time a person's presence in a place and yet minute by minute blow by blow descriptions of the whereabouts of people are made public. I did not receive an answer.

What information are you talking about?

Sharing to whom?

For what purpose?

In light of the Privacy Act 1988 the recommendation would be the Public Health Act be axed.

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encourage compliance with quarantine requirements, border restrictions and other public health directions by providing appropriate penalties for contraventions;

Encourage compliance with directives that contravene the Biosecurity Act ???? Please explain.

It seems like the intention is to criminalise adults who are not vaccinated as the end game of the act is to get everyone vaccinated.

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increase the period for which a regulation may extend a declared public health emergency from seven to 90 days;

It is arguable that there is no public health emergency – the Delta variant may be highly contagious (requests to the Health Department as to how one defines ‘highly infectious’ have gone unanswered) it is not a high risk virus. You have to get an unreliable test to see if you even have it – so clearly it is not dangerous. It is arguable that the presence of more dangerous forms of the virus do not constitute a public health emergency as for a large section of our population is has short term impacts. **The Canadian Government ended their State of Emergency in June. The UK have ended requirements for mask wearing. A growing number of medical professionals are reporting (as the pub test would already attest) that it’s a virus, it’s overall not too dangerous, it ain’t going away, let’s just learn to live with it.**

It is interesting that every time a public emergency is date is due to expire it is extended. The explanatory note indicates the intention is that ongoing extensions into 2022 will happen – or if extrapolate the uptake rate of vaccine, it could be 2029 to meet your undefined determination of what constitutes **“large number of the Queensland population”**.

“As these emergency measures were enacted through urgent Bills or as amendments during consideration in detail, sunset clauses and expiry provisions were inserted into the amending Acts to provide for the amendments to expire by early 2021 unless

extended.

On 8 March 2021, the

*Public Health and Other Legislation (Extension of Expiring Provisions)
Amendment Act 2021*

received assent and extended the expiry dates of the Public Health
Act

amendments until the end of the day on 30 September 2021” SO

**WE CAN ASSUME COME 30 SEPTEMBER THERE WILL BE ANOTHER
CASE OF SUNSET CLAUSES AND EXTENSIONS AND SURPRISE
SURPRISE SOME MORE LOCK DOWNS**

The underlying rhetoric is that Covid constitutes a public
emergency and so the government can go on enacting these
restrictions on the basis of the definition of a public emergency that
is fluid and without a requirement of proof.

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enable fees to be charged for costs associated with the mandatory quarantine of persons in government-provided accommodation.

And here is the kicker this is all underwritten by the prevailing belief that

It is expected that the need for quarantine will remain until

(1) a large number of the Queensland population has been vaccinated and

(2) the risk of widespread outbreaks has subsided

You have not defined what a large number is – so this implies you can chop and change this at will

You have not defined widespread outbreak, how this is calculated, how this is determined ONE COULD ARGUE NOW that widespread outbreak is NOT occurring now

So this is coercion –

You also indicate

The charging of quarantine fees may be considered to infringe on the rights and liberties of individuals, in particular, with regard to whether the legislation provides for the compulsory acquisition of property only with fair compensation

So this change is all about getting people to pay up front or getting some one else to pay for them or taking their assets in the midst.

I believe the heart of these proposed amendments have little to do with public health (as you can change your definition at any time of “the risk of widespread outbreaks has subsided”) and more about control of citizen’s assets, money, and freedoms.

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