

The Economics and Governance Committee is currently seeking submissions addressing any part of the Public Health and Other Legislation (Further Extension of Expiring Provisions) Amendment Bill 2021.

I would like to make a submission addressing a number of parts of this Bill.

The first issue I have with this Bill is that we are not in a health emergency in Queensland. In other words, I reject the premise of this emergency.

In January, when this Bill was being put forward by the Health and Environment Committee, the Minister for Health and Ambulance Services and Leader of the House, Yvette D'Ath, stated that:

“As at 9 November 2020, the World Health Organization reported a total of 50,266,033 confirmed positive COVID-19 cases reported globally. Australia has experienced a lesser burden from COVID-19 than other countries. However, as at 9 November 2020, the Australian Government Department of Health reported 27,668 confirmed COVID-19 cases, including 907 deaths in Australia. As at 9 November 2020, there had been 1,177 confirmed cases of COVID19 in Queensland, with six deaths relating to COVID-19 being Queensland residents.”

In other words, the need for an extension of a State of Emergency declaration in Queensland was not that we are experiencing a large number of cases and deaths here in Australia, but there was potential for an emergency based on large numbers of positive COVID-19 cases overseas.

Has there ever been a time in history when we have declared a State of Emergency based on the possibility of an emergency or a “potential” emergency? Where is the precedent for this extraordinary situation?

And now, six months later, this Bill is being put forward by the Economics and Governance Committee, and Yvette D'Ath has the following to say about the emergency:

“As at 31 May 2021, the World Health Organization reported a total of 170,051,718 confirmed positive COVID-19 cases reported globally. Australia has experienced a lesser burden from COVID-19 than other countries. However, as at 31 May 2021, the Australian Government Department of Health reported 30,106 confirmed COVID-19 cases, including 910 deaths in Australia. As at 31 May 2021, there had been 1,618 confirmed cases of COVID-19 in Queensland, including 14 active cases, with seven deaths relating to COVID-19 being Queensland residents.”

“Despite overall low numbers of COVID-19 in Queensland and few restrictions now in place on the movement and gathering of people, there is still potential for larger scale outbreaks. The current global epidemiological situation, with sustained growth in new cases and the spread of highly transmissible COVID-19 variants, continues to present a significant risk to the community.”

As you can see, Queensland is still not experiencing a health emergency, but the entire premise of the State of Emergency declaration is again based on the potential for an emergency. Queensland has experienced just one COVID-19 death this year. There is no justification for a State of Emergency.

Meanwhile, the people trying to live their lives in Queensland are suffering immense psychological and financial harms from the ramifications of the State of Emergency. These are not potential harms, but real harms, and this ever-growing list of the negative impact on society from imposing lockdowns and restrictions rarely gets mentioned. Where are the financial spreadsheets detailing the cost of these impositions on individuals and small businesses? Where are the costings in implementing COVID-19 related activities, such as tracking, tracing, and testing? How much is all this costing Queensland?

I was one of the 122 people who made a submission to the Health and Environment Committee back in January of this year. Most of the submissions were against the extension of the State of Emergency, but the valid concerns and complaints in these submissions were not given any proper consideration at the public hearing. My impression of the public hearing was that it served as no more than a formality; that the decision had already been made to proceed with extending the State of Emergency and the Chair – Mr AD Harper MP – was not interested in entertaining any discussion that didn't support that decision.

For example: When Mr SSJ Andrew MP tried to ask questions about the security of gene data from the testing procedures he received a non-answer from Dr Jeanette Young. Later in the day Mr Andrew tried to pursue the line of questioning about the security of gene data information with Mr Michael Cope from the Queensland Council of Civil Liberties, but was interrupted by Mr Harper and not allowed to continue with the question.

Mr ANDREW: We spoke to Dr Young in a previous session. She mentioned there was more than one part of Queensland Health and non-government organisations involved in taking DNA tests and testing. Given the situation that the data that is being taken could be going anywhere, do you have any concerns about that going forward?

CHAIR: Member for Mirani, I might just pull it back into context.

Mr ANDREW: Are you worried about data storage going out and people having access to it?

CHAIR: Let's keep it relevant to the bill.

Mr ANDREW: It is relevant because—

CHAIR: Please do not—

I am dismayed that this type of censorship was condoned and not called out at the time.

Mr Andrew tried to get a direct answer from Dr Jeanette Young about the health messaging from Queensland Health regarding boosting immune systems. Here is the exchange:

Mr ANDREW: Another question I have been asked by a lot of people in my area is: has Queensland Health pushed something to make sure that we are boosting our immune systems? Vaccines are relatively new to the human race. Has Queensland Health pushed minerals, vitamins and general things to keep our health and wellbeing in check to all different age groups to give us a better immune system on top of the vaccine in the early stages of this crisis so we could get on top of where we stand with that?

Dr Young: That is extremely important for everyone. My normal role as the Chief Health Officer is to promote healthy living and to promote good, basic preventative health care. We

definitely pushed not smoking early on. We knew that people who smoke potentially have worse outcomes. It is always important to have a healthy diet. We know that people who are obese have worse outcomes from COVID-19. The usual things: not smoking, a healthy diet, physical activity and decreasing your amount of alcohol will all help you—

Mr ANDREW: So we have put that out there?

Dr Young: Yes.

Mr ANDREW: The Queensland government and Queensland Health have a direct statement, 'This is the best way to combat COVID-19 as far as vitamins, minerals and your own immune system'? That is fine. I have a question here—

CHAIR: We have 10 minutes, member. I might just ask other members if they have questions. We will come back to you if you have a supplementary question.

Mr ANDREW: If there is a bit of room at the end, that is fine. Thank you, Doctor

Why is Mr Harper as Chair not allowing the pursuit of this question? The fact is that there has been zero messaging from Queensland Health regarding Vitamin D, which is surprising as it is known that vitamin D is essential in building a healthy immune system.

When the final report from the Health and Environment Committee was released on the 12/02/21 it included a Dissenting Report from Mr Stephen Andrew, MP, member for Mirani, who was obviously not happy with the overall lack of transparency from the government, as well as the failure by the government to properly consider the "application of fundamental legislative principles". Mr Andrew felt that consideration over whether the Bill had sufficient regard to the rights and liberties of individuals and to the institution of Parliament was not achieved. I wholeheartedly agree with Mr Andrew.

In my submission to the Health and Environment Committee I made the point that Queensland Health are fraudulently reporting all positive PCR test results as a confirmed case of Covid-19. This point was ignored by the committee. It is a fact that a positive PCR test result on its own is not the same as a confirmed case of Covid-19. It is also a fact that a positive PCR test result tells us nothing about whether a person is infectious with a disease. Why is there no investigation from our health authorities into the validity of using PCR tests like we are in a situation like this? After all, the entire premise for the State of Emergency is based on positive PCR test results. Surely, our health experts would want to know if the test they are touting as the "gold standard" of Covid-19 testing actually can tell us whether a person is infected with Sars-COV-2 or not? Specifically, does a positive PCR-test result mean that the person tested is infected with Covid-19, or does it mean absolutely nothing in connection with the Covid-19 infection?

Are you aware that as we speak, world-famous German lawyer, Dr Reiner Fuellmich, and more than a hundred scientists, are charging the WHO and the Davos Group with crimes against humanity? They say that the pandemic is a crime, based on flawed PCR testing, and that they have all the evidence they need to prove their case. I can see no reason why legal proceedings along the same lines against government agencies and health officers would not take place in the future here in Australia.

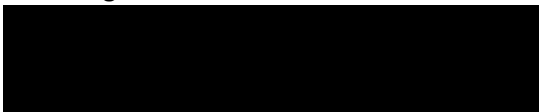
In summary, there is no justifiable reason to keep Queensland in a State of Emergency. We are not in an emergency. Basing an emergency on high overseas PCR test results is no justification, considering the mounting evidence that PCR tests tell us nothing about infection.

This submission will be proof that the Economics and Governance Committee were informed about these issues. Will the Economics and Governance Committee do the job entrusted to them by the people of Australia and take these issues seriously, or will the Committee ignore these issues like the Health and Environment Committee did six months ago?

I say, ignore this at your peril.

Yours Sincerely,

Hugh Dickson



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