

COVID-19 Response Inquiry: Alison Bevege, journalist, *Letters From Australia* (Substack), 14 December, 2023

The purpose of this inquiry is to learn and thus improve Australia's preparedness for future pandemics

The federal government and its departments cannot learn anything unless they first recognise and then acknowledge the errors that killed people, ruined lives and wasted billions. Instead, they are seeking to censor discussion.¹

Once policy gains momentum it is difficult to change because people's egos are invested. The Permanent Canberra bureaucracy ignored opinions that challenged or threatened their covid policies. The public service is populated at the top by a milieu of closely connected people who reinforce each other. It became an echo chamber tainted by corporate influence. They made every mistake detailed by Charlie Munger in *The Psychology of Human Misjudgement*,² including confirmation bias and commitment-and-consistency bias. The urge to conform and defer to authority were weaponised with propaganda and censorship to ram through stupid, unethical policies that are still killing people.

This inquiry must challenge past assumptions. The government must hold the bureaucracy to account: sack and criminally prosecute individuals where needed, regardless of seniority, and never again treat dissent with censorship.

Term of reference: Key health response measures (COVID-19 vaccinations and public health messaging).

I personally know six people injured by the covid gene-vaccines ranging from Bell's Palsy to rashes, weakened immune systems and myocarditis. My friend Phil Schultz's brother, Barry, died 18 days after the shot.³ None of these injuries were reported by doctors to the TGA for investigation. Barry is in the database only because his widow pushed hard to report it.

I now help set up the *Forest of the Fallen*, a memorial which displays the stories of more than 500 job-injured people who have been ignored and suppressed.⁴ Every time, passers-by tell their own stories of injury, of themselves or the people they know. This is an iatrogenic disaster worse than thalidomide, forced on us by the Federal Government.

We were led to believe the gene-vaccines were harmless, would stay in the injection site, protect us from covid and reduce transmission. None of this was true – and this was obvious from the start.

The gene-vaccines are an entirely new class of medication. They are nothing like conventional vaccines which deliver an exact dose of dead antigen and take 10 to 15 years to test.⁵ They had several components never before used at scale in humans such as modified mRNA and lipid nanoparticles.

It is not possible to exactly measure the dose because your own cells might produce a lot or a little of the antigen, and for an unknown amount of time. Vaccinal spikes have been found in the blood six months after injection.⁶

The design invites auto-immune problems and inflammation because it tricks your own cells into expressing a non-human spike protein on the surface. This provokes your immune system to attack your own body.

The Pfizer/Moderna synthetic lipid nanoparticle delivery system was designed to take cancer drugs across the blood-brain barrier, so of course they didn't just stay in the arm. Pfizer's own Nonclinical Evaluation Report for Comirnaty submitted to the TGA in January 2021 shows they went everywhere in the body including the brain, liver, heart, lungs, spleen and adrenal glands, and concentrated in the ovaries.⁷

Despite being high-risk and thus needing more safety testing than normal, these products were barely tested at all.

Pfizer⁸ and Moderna ended the large-scale trials that were supposed to last two years after just 2 months by destroying the control group⁹. If the mRNA causes an increased rate of cancer or heart attacks at six months, there's nobody to compare it to and you won't know.

The Phase III trials for AstraZeneca, Pfizer, Moderna and Janssen were not even designed to test if the products could interrupt transmission or reduce severe covid symptoms, as noted by BMJ editor Peter Doshi in October 2020.¹⁰

Pharmacologist Mike Yeadon, former chief scientist and vice-president of allergy and respiratory research at Pfizer, was so alarmed by the poor design of the BNT162b clinical trials that he petitioned the European Medicines Agency on 1 December 2020 asking them to halt the trials immediately pending review.¹¹

“If the vaccines are not properly tested, important public policy decisions regarding its use will be based on misleading evidence,” he wrote.

He was right, but drug-pushers demonised him as an “anti-vaxxer”, and he was never heard from on mainstream media again. He became so terrified by this that he later concluded it must be an intentional plan to hurt people.

These poorly-designed, truncated large-scale trials were not even done on the product we got.

The cheap and scaled-up manufacturing process used to make the Pfizer gene-vaccine given to the public was entirely different to the PCR process used to make the gene-vaccine in the large clinical trials. We got a product cooked up in huge vats of antibiotic resistant *e.coli* bacteria. Pfizer tested this process on just 250 participants.¹²

This process contaminated the products with endotoxins along with fragments of mRNA and DNA.¹³

Pfizer declared Comirnaty “95% effective” in November 2020 because it produced antibodies in the blood.¹⁴ But these antibodies do not protect you as they do not stimulate mucosal immunity – and you catch covid through your mucosa, as Immunology Professor Robert Clancy explains.¹⁵

The covid gene-vaccines were all given provisional registration, a category invented in 2018¹⁶ to allow products to be sold to the public for up to six years before the safety testing required for full authorisation is finished.¹⁷

The TGA’s safety monitoring system consists of voluntary reporting. If you or your doctor don’t tell the TGA or the drug company that you were injured then they don’t know and it’s not in the statistics. Because provisional registration means testing isn’t complete, this voluntary reporting makes up the safety profile of the drug.

Doctors were discouraged in March 2021 when the medical boards and AHPRA told them not to criticise the gene-vaccines on social media or face disciplinary action.¹⁸ The public had no idea how to report or even if they could.

To monitor safety, the TGA tells drug companies to scan social media for reports of injuries.¹⁹ But the Home Affairs Department and the federal Health Department both told social media platforms to censor posts by gene-vaccine injured people, as revealed by Freedom of Information requests.²⁰

This is insane.

These products have now killed an unknown number of Australians. The TGA has received 1004 reports of deaths but claims only 14 are “linked to” the gene-vaccines²¹ as of November 2. Experts estimate reports of injury and death are under-reported by up to 100 times and the death toll could be as high as 30,000 and rising.²²

The products are *still* being promoted.

Australia’s excess death rate soared by more than 10 percent since the products were distributed in 2021, which cannot be explained by covid, as has been exhaustively shown in the 470-page book *Too Many Dead* compiled by the Australian Medical Professionals Association.²³

The Health Department has refused for two years to release the definitive statistic: the all-cause mortality figures stratified by vaccinal status and age, despite the gene-vaccines satisfying the Bradford Hill criteria for causation.²⁴

These products would have been illegal in 2016 before the law was changed to allow provisional registration.

The Federal Government coerced the entire population to inject them while falsely claiming the jabs weren’t compulsory. The Federal Government encouraged the states and corporations to mandate it as a condition of employment, and refused to pass legislation to prevent vaccine discrimination such as these two proposed Bills.²⁵

Nurses, doctors, bus drivers, journalists, police officers, supermarket workers and almost everyone else were sacked if they didn’t inject. The injections are still listed as a condition of employment in many jobs, based on the long-exposed lie that they “protect others from you” by reducing transmission.

The shots suppress the immune system and increase²⁶ (not decrease) your risk of catching covid, as shown in UK data.²⁷

Permanent Canberra had decided, on zero evidence, that the jabs were “safe and effective” before November 2020.

The government's covid vaccination policy from November 2020 reveals the key messages already prepared:

" A COVID-19 vaccine is the best way to protect the Australian community*

** Our goal is early access to, and delivery, of safe and effective COVID-19 vaccines and treatments for all Australians*

** We continue to follow our rigorous regulatory procedures in Australia to ensure that vaccine candidates are effective and safe for use"²⁸*

Canberra did not ask: what if the product is unsafe and kills people. How do we stop?

They had already bought the gene-vaccine sight unseen, trusting Pfizer despite prior convictions for fraud.²⁹

The policy notes that it was "one of nine vaccines supported by the Coalition for Epidemic Preparedness Innovations (CEPI), a global partnership to accelerate vaccine development."

CEPI has long been chaired by Jane Halton, who was formerly Secretary of the Department of Health as well as the Department of Finance. Canberra trusts and defers to Professor Halton, a revered former public servant.³⁰

CEPI wants to do away with the usual 10 to 15 years of safety testing to produce vaccines for injection in just 100 days, with mRNA as the platform to ram it through.³¹ CEPI led the Bill & Melinda Gates Foundation's push to promote the covid gene-vaccines, supporting the development of Moderna, Janssen, AstraZeneca and Pfizer.³²

Professor Halton was appointed to conduct an "independent review"³³ of Australia's covid vaccine purchasing and procurement in 2022, in which she concluded Australia needed to pre-order more gene-vaccines for 2024, and should reduce regulatory burden for drug companies even further.³⁴

This is a conflict of interest.

THIS WAS OVER A VIRUS LESS DEADLY THAN FLU FOR UNDER-60s

Covid was treated by the government as if it was airborne ebola in a terrible over-reaction that led to lockdowns and a false belief that a rushed, unsafe gene-vaccine was needed to "save us".

Covid just isn't that deadly.

The infection fatality rate was only ever up to 0.03% for people under 60, as shown by Stanford University professor John Ioannidis et al,³⁵ who calculated the rate across 29 countries during the ancestral strains, before the vaccine.

The median age of death in Australia from covid as of October 2022 was 85.5 years – higher than the normal life expectancy at birth.³⁶

Australia would have done better by protected the elderly and promoting healthy eating and exercise. US data showed 78% of adults hospitalised with covid were overweight or obese.³⁷ Instead the government destroyed small businesses, careers, families and lives for two years, then mandated injections of an experimental gene-vaccine that caused horrendous injuries and deaths including in young people not at risk from covid.

STOP NOW AND GET IT RIGHT

* Repeal the 2017 legislation creating Provisional Registration and insist on proper testing for novel drugs.

* Immediately halt the distribution of gene-vaccine products pending independent testing.

* Remove the influence of pharmaceutical corporations and their "philanthropic" partners such as the Bill & Melinda Gates Foundation or the Wellcome Trust from government and universities. Halt public-private partnerships.

* Sack, and where appropriate, prosecute the public servants and corporate lobbyists responsible for this disaster.

* Exit the World Health Organisation, which is no longer an advisory organisation representing member nations. It has become a public-private partnership paid for by corporations and billionaire "philanthropists" who direct policy.

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