

Australian Senator Takes Hard Stand Against COVID Jobs

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✓ Fact Checked

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STORY AT-A-GLANCE

- › In an early-December 2022 Parliamentary speech, Gerard Rennick, senator for Queensland, Australia, reviewed some of the lies told by members of Parliament and the Department of Health about the COVID jobs
- › By September 2022 Australia had logged more than 10 million COVID-19 cases, even though 20 million of Australia's total population of 26 million had received their COVID jabs
- › In 2021, Australia had 8,706 extra deaths above norm, even though New South Wales remained in lockdown for three months, so, in theory, the death toll should have been lower, not higher
- › Australia has logged 140,000 COVID job injuries – more than all the injuries reported from vaccines since 1971 – yet the Australian Therapeutic Goods Administration (TGA) refuses to look at or acknowledge the safety signal. Chief health officers also admit not reading key science documents that detail COVID job hazards
- › Waning effectiveness is the justification for repeated boosters, but artificially inflated antibodies caused by repeated boosters signal to your body that you're chronically infected, and the resulting immune response may end up accelerating the development of autoimmune conditions such as Parkinson's, Kawasaki disease and multiple sclerosis

The Canadian Independent video¹ above features an early-December 2022 Parliamentary speech by Gerard Rennick, senator for Queensland, Australia, and a member of the Liberal National Party.

As noted by Rennick, Australia had logged more than 10 million COVID-19 cases by September 2022, at which point the Australian Health Department stopped counting – a decision made out of embarrassment, Rennick suggests, seeing how more than half the country caught COVID despite the fact that 20 million out of Australia's total population of 26 million² got their COVID jabs.

Rennick goes on to highlight the rising excess death rate. In 2021, Australia had 8,706 extra deaths above norm, even though New South Wales remained in lockdown for three whole months. "In theory, the deaths should have been lower, like they were in 2020," Rennick says.

When Will COVID Jab Injuries Be Addressed?

Then there are the job injuries, which according to Rennick now number around 140,000, "more than all the injuries reported from vaccines since 1971." Yet despite this shocking discrepancy, the Australian Therapeutic Goods Administration (TGA) – just as the Food and Drug Administration and Centers for Disease Control and Prevention in the U.S. – refuses to look at or even acknowledge the signal.

"[That's] the whole point of having a database where doctors report these injuries, where they tick the box 'Suspected [vaccine injury]' – and as the doctors say, they don't fill these forms out because they have spare time ... no, they're ticking these boxes because they believe the vaccine caused the injury they're reporting – and yet the TGA wants to pretend that there's nothing to see here." Rennick says.

"And why wouldn't they? Because professor [John] Skerritt [director of the TGA] is head of an organization that is funded by Big Pharma. If you want to talk about a conflict of interest, that's it ...

For the past 15 months, I've been contacted by people who have had their lives destroyed by the vaccine, a vaccine the government said was safe and

effective. And if that isn't bad enough ... you people in this chamber here today, didn't read the documents ...

You took control over other people's bodies because it suited your control and command narrative. You showed no humanity. There are people out there that are not only injured, they have lost their jobs and they cannot get medical support. Husbands and wives ... had to quit their jobs to stay home and look after [them] ... [They're] in an incredible amount of pain ...

The fact that the Green Party can sit in that corner over there and mock and laugh at the vaccine injured – These people aren't anti-vaxxers. They believed what the government told them, as I did when I first got here. But I tell you what, it's nothing but a cesspit of lies in this place."

Chief Health Officer Hasn't Read Key Science Reports

Rennick reviews how he asked professor Brendan Murphy, who was the chief health officer at the time, whether he'd actually read the nonclinical trial report for the Pfizer shot. As it turns out, he had not. And because he hadn't, what he told the public was complete make-believe.

"These guys have NO IDEA what they are talking about," Rennick says. "[Murphy] had been saying ... that the spike protein wasn't in the blood. Well, had he read the report he would have known that they never tested [for] the spike protein.

He would have also known that when they did the animal trials, the report said there was no difference in lung inflammation between the placebo group and the vaccinated group after nine days. There was not one [wit] of evidence that showed the vaccine was effective.

But did anyone in this chamber ... actually read that report? I bet you not. But you all went out there and said it was safe and effective, when you didn't have a clue what you were talking about.

Shame on you, because the law in this country, in the Australian Immunization Register, says you cannot be coerced into taking a vaccine, No. 1, and No. 2 is that you need to be properly informed about what is in the vaccine ...

[T]hat spike protein in the vaccine isn't even the same as in the virus. No, no, no, they've actually changed one of the nucleotides and they've got a synthetic gene in the vaccine ... which is designed to make it last longer."

Rennick points out that when it was discovered that the spike protein load doubled in the ovaries between Day 1 and Day 2 after the jab, they simply stopped the trial and continued to say that the spike protein stayed at the site of injection, which was a blatant lie.

Uninformed Politicians Are Misinformation Superspreaders

Rennick continues:

"If you want to talk about misinformation, go check out page 44 of the Pfizer nonclinical trial report. It was released on the TGA FOI disclosure log 239-6 ... You should also read the top paragraph on Page 8 that says the study suggests the spike protein can either be inserted into the membrane or secreted from the cell.

What does that tell you? ... It tells you that rather than actually killing the actual pathogen, which is what a normal vaccine would have done, this particular vaccine goes inside your cell, takes over the reproduction of the ribosome, which is what produces the protein, and then starts producing more of the toxic substance.

That is not the name of the game. You would want to actually kill the virus. You do not want to reproduce it. And of course, Murphy, the chief health officer, claims that there is nothing to worry about. He never read the document.

And then we got professor [Paul] Kelly [deputy chief medical officer for the Australian Department of Health] ... he came out and made the bold statement that it stops transmission. Well, he was LYING, because the FDA [U.S. Food and Drug Administration] came out December 20 and said there was NO evidence that the vaccine stopped transmission."

The Shots Actually Have Negative Effectiveness

We now have data showing that not only do the shots not prevent infection or transmission, but they have negative effectiveness. Their effectiveness rapidly wanes,^{3,4} and after 90 days, both Moderna's and Pfizer's shots make you MORE susceptible to COVID.

As shown in the graphic⁵ below, Danish data reveal Omicron cases among the jabbed rose dramatically after three months for both injections, giving Pfizer a negative effectiveness of 76.5% at 90 days' post-jab and Moderna a 39.3% negative effectiveness.

Table Estimated vaccine effectiveness for BNT162b2 and mRNA-1273 against infection with the SARS-CoV-2 Omicron and Delta variants during November 20 – December 12, 2021, Denmark.

Time since vaccine protection	Pfizer – BNT162b2				Moderna - mRNA-1273			
	Omicron		Delta		Omicron		Delta	
	Cases	VE, % (95% CI)	Cases	VE, % (95% CI)	Cases	VE, % (95% CI)	Cases	VE, % (95% CI)
1-30 days	14	55.2 (23.5; 73.7)	171	86.7 (84.6; 88.6)	4	36.7 (-69.9; 76.4)	29	88.2 (83.1; 91.8)
31-60 days	32	16.1 (-20.8; 41.7)	454	80.9 (79.0; 82.6)	8	30.0 (-41.3; 65.4)	116	81.5 (77.7; 84.6)
61-90 days	145	9.8 (-10.0; 26.1)	3,177	72.8 (71.7; 73.8)	48	4.2 (-30.8; 29.8)	1,037	72.2 (70.4; 74.0)
91-150 days	2,851	-76.5 (-95.3; -59.5)	34,947	53.8 (52.9; 54.6)	393	-39.3 (-61.6; -20.0)	3,459	65.0 (63.6; 66.3)

Repeated Boosters Come With Additional Cost

Waning effectiveness is the justification for repeated boosters, but artificially inflated antibodies caused by repeated boosters signal to your body that you're chronically infected, which is never a good thing.

As noted by COVID analyst Marc Girardot,⁶ the resulting immune response may end up accelerating the development of autoimmune conditions such as Parkinson's, Kawasaki disease and multiple sclerosis.

Our bodies mount an intense response to infection, which includes a high fever to damage the pathogens, T-cell elevations, and increased antibody production to rid your body of "viral debris." This is supposed to be a temporary response; after the threat is neutralized, your body tamps down its immune response.

This is by design, as a perpetual fever and high levels of antibodies keep your body in a dangerous state. Just as chronic stress (keeping your body in an extended state of "fight or flight mode") increases disease risks, so, too, do permanently elevated levels of antibodies. Girardot details three reasons why:⁷

"1. Too long a fever would end up breaking down all healthy cells, and so the remedy would be worse than the illness.

2. Perpetual specialized T-cells are also dangerous as they can start off-target attacks of healthy cells (as often occurs with immune checkpoint blockade treatments against cancer) ...

3. Finally, very high levels of antibodies with nowhere to go are also extremely dangerous. They can passively bind to receptors of healthy cells, and kickstart a cascade of autoimmune diseases ..."

Florida Petitions Grand Jury Investigation, and More

If political representatives truly cared about the people they supposedly serve, there would be scores of them speaking out and taking a stand against the COVID shots the way Rennick is doing in Australia. At present, U.S. Sen. Ron Johnson, R-Minn., stands out as a lone warrior and advocate for the COVID jab-injured in the U.S.

That said, in mid-December 2022, Florida Gov. Ron DeSantis petitioned the Florida Supreme Court for a grand jury investigation of crimes and wrongdoing committed in

relation to the COVID-19 jabs,⁸ so there's hope for justice yet. According to the governor's press release:⁹

"The pharmaceutical industry and the FDA have refused to release patient-level data for independent researchers. Meanwhile, the COVID-19 vaccines ... continue to be marketed as safe and effective, even though the vaccines do not prevent transmission and adverse events have been minimized and disregarded ...

At today's roundtable the Governor and health experts discussed data covering serious adverse events. These risks include coagulation disorders, acute cardiac injuries, Bell's palsy, encephalitis, appendicitis and shingles ...

In response, Governor DeSantis has filed a petition to impanel a statewide grand jury to investigate crimes and wrongs in Florida related to the COVID-19 vaccines ..."

DeSantis is also implementing autopsy surveillance of post-jab sudden deaths, and has established an independent Public Health Integrity Committee to assess federal health guidance "to ensure that Florida's public health policies are tailored for Florida's communities and priorities."¹⁰ As noted by Florida Surgeon General Dr. Joseph Ladapo:¹¹

"Health care professionals should always communicate the risks of a medical intervention to their patients in a manner that is clinically appropriate and meets standards of ethical practice.

President Biden and Big Pharma have completely prevented that from happening – it is wrong. With these new actions, we will shed light on the forces that have obscured truthful communication about the COVID-19 vaccines."

Sources and References

- ¹ [Eurochicago.com December 9, 2022](#)
- ² [Worldometer Australia Population](#)

- ³ MMWR February 18, 2022; 71(7): 255-263
- ⁴ BMJ October 2022; 379
- ⁵ Twitter Chris Martenson December 15, 2022
- ^{6, 7} Marc Girardot, COVID Myth Buster News January 30, 2021
- ^{8, 9, 10, 11} FLgov.org December 13, 2022