



Elizabeth Hart <elizmhart@gmail.com>

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## Who is at risk of 'getting sick and dying' with the SARS-CoV-2 virus?

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Elizabeth Hart <elizmhart@gmail.com>  
Bcc: Elizabeth Hart <elizmhart@gmail.com>

Tue, Mar 30, 2021 at 4:39 PM

On the taboo subject of questioning COVID-19 vaccination, FYI, please see below my email to Laureate Professor Peter Doherty.  
Professor Doherty is the Patron of the Peter Doherty Institute for Infection and Immunity which produced the 'modelling' which has influenced social distancing/lockdown in Australia, see COVID-19 modelling papers and press conference, which cites Neil Ferguson et al's Imperial College Report 9.  
Elizabeth Hart  
Independent person investigating the over-use of vaccine products and conflicts of interest in vaccination policy

----- Forwarded message -----

From: **Elizabeth Hart** <elizmhart@gmail.com>

Date: Tue, Mar 30, 2021 at 2:49 PM

Subject: Who is at risk of 'getting sick and dying' with the SARS-CoV-2 virus?

To: Peter Doherty

Cc: Greg Hunt, Craig Kelly, Anthony Albanese, Mark Butler, Tanya Plibersek, Steven Marshall, Stephen Wade, Peter Malinauskas, Chris Picton, Nicola Spurrier, Vicki Chapman, James Stevens, Pauline Hanson, Malcolm Roberts, Matt Canavan, Gladys Berejiklian, Michael Gunner, Daniel Andrews, Peter Collignon, Mark McGowan, Anastacia Palaszczuk, Andrew Barr, [letters@theaustralian.com.au](mailto:letters@theaustralian.com.au), [letters@smh.com.au](mailto:letters@smh.com.au), [letters@theage.com.au](mailto:letters@theage.com.au), Chris Kenny, David Penberthy, Alan Jones, Lisa Davies, David Anderson, Leigh Sales, Fran Kelly John Shine, Robert Clancy

### For the attention of:

Laureate Professor Peter Doherty  
Patron of the Peter Doherty Institute for Infection and Immunity

Again Professor Doherty, further to your response below, I ask you, **who is at risk of 'getting sick and dying' with the SARS-CoV-2 virus?**

**What is the justification for the plan to vaccinate the entire global population[1] with Covid-19 vaccine products, potentially annually, or even more frequently, over a lifetime?**

Health Secretary Brendan Murphy misled Australians[2] in his interview with Leigh Sales on the ABC's 7.30 program, when he said the Pfizer and AstraZeneca Covid-19 vaccine products have **"gone through the normal, full range of regulatory approvals for our vaccines"**, because these vaccines are only **'provisionally approved'** by the TGA.

People in the community who are being pressed to have these still experimental Covid-19 vaccine products are part of a global 'post-market assessment' vaccine trial - do they understand this? **Have they given their 'informed consent' to participate in this global experiment?[3] Will they be followed up like the participants in vaccine clinical trials, and all adverse events acknowledged and reported?**

**It's notable the TGA 'provisionally approved' vaccine products are called 'Covid-19' vaccines, not 'SARS-CoV-2' vaccines.**

So far it's not proven that the Covid-19 vaccine products prevent infection or transmission, there are many unknowns with these experimental vaccine products which are being rushed out into the global community under 'emergency authorisations'.

The Covid-19 vaccine products are being promoted on the grounds they may reduce serious symptoms of disease, i.e. 'Covid-19'.

**But if most people aren't at serious risk of 'Covid-19', why should everyone be pressed to have experimental Covid-19 vaccination, and interfere with their own potentially successful natural response to the virus? Is the plan to make the entire global population dependent upon the vaccine industry, which is set to develop a massively lucrative repeat vaccine market on the back of this virus, with the support of governments?**

People taking the experimental Covid-19 vaccine products are being subjected to two doses, and in the UK a third shot/booster[4] is being touted for the autumn, with at least annual revaccination being suggested for the future. **We have no idea of the long-term consequences of this vaccine load throughout life.**

**This is extremely concerning Professor Doherty, with literally billions of people around the world being set up for repeated revaccination with Covid vaccine products throughout life, for a virus which currently isn't a serious threat to most people.**

Not only is this a highly questionable medical intervention, but it's also taking away billions of dollars from other more appropriate health areas.

Most concerningly, **children are now being set up for repeated Covid vaccination throughout life**, for example with children in an AstraZeneca vaccine trial in the UK[5], and other vaccine trials involving children in other countries. *The BMJ* reports Covid vaccination could be rolled out for children by autumn[6].

**This is horrifying Professor Doherty.** It's unethical to impose potentially lifelong Covid-19 vaccination upon people who are not at serious risk of the virus/disease, and to deliberately interfere with their own natural response to the virus. **And the vaccine manufacturers have been given protection from liability**, see for example: Vaccine suppliers given indemnity for 'inevitable' side effects[7]. Side effects such as blood clots[8] for instance?

**People not at serious risk of Covid-19 must think very carefully before consenting to Covid-19 vaccination, we have no idea of the potentially deleterious long-term consequences.**

**There appears to have been little or no effective ethical consideration of this matter.** Goodness knows what has gone on in the ethics committees considering the vaccine trial protocols, they have failed utterly to consider the huge implications of approving these trials, which I suggest contravene the Helsinki Declaration. I'm currently seeking accountability from the Ethics Committee in the UK involved with the AstraZeneca vaccine trials.

Again Professor Doherty, I ask you, **who is at risk of 'getting sick and dying' with the SARS-CoV-2 virus? What is the justification for the plan to vaccinate the entire global population with Covid-19 vaccine products, potentially annually, or even more frequently, over a lifetime?**

I look forward to your well-considered response.

Sincerely

**Elizabeth Hart**

Independent person investigating the over-use of vaccine products and conflicts of interest in vaccination policy

References:

1. Bill Gates. What you need to know about the COVID-19 vaccine. GatesNotes, 30 April 2020.
2. I've directly challenged Health Secretary Brendan Murphy about his misleading advice to Australians, see my email **COVID-19 vaccines are NOT fully approved by the TGA**, 24 February 2021: <https://vaccinationispolitical.files.wordpress.com/2021/02/covid-19-vaccines-are-not-fully-approved-by-the-tga.pdf>
3. See for example this Participant Information Sheet and Consent Form for an AstraZeneca COVID-19 vaccine trial: <http://phntx.org/wp-content/uploads/2020/11/PHNTX-COVID-Vaccine-Consent-Form-11122020.pdf>
4. Covid-19: Booster will be needed in autumn to avoid winter surge, says government adviser. *BMJ* 2021;372:n664.
5. See my BMJ rapid response: Is it ethical to include children in the Oxford-AstraZeneca vaccine trial? on the BMJ article: How the Oxford-AstraZeneca covid-19 vaccine was made. *BMJ* 2021;372:n86.
6. Covid vaccine could be rolled out to children by autumn. *BMJ* 2021;372:n723.
7. Vaccine suppliers given indemnity for 'inevitable' side effects. *The Sydney Morning Herald*, 8 October 2020.
8. A rare clotting disorder may cloud the world's hopes for AstraZeneca's COVID-19 vaccine. *Science*, 27 March 2021.

On Tue, Mar 23, 2021 at 4:38 PM Elizabeth Hart <[elizmhart@gmail.com](mailto:elizmhart@gmail.com)> wrote:

Professor Doherty, you say: "The goal here is to stop people getting sick and dying."

Who is at risk of 'getting sick and dying' with the SARS-CoV-2 virus?

Elizabeth Hart

Independent person investigating the over-use of vaccine products and conflicts of interest in vaccination policy

On Tue, Mar 23, 2021 at 3:59 PM Peter Doherty <[pcd@unimelb.edu.au](mailto:pcd@unimelb.edu.au)> wrote:

Does any vaccine against a respiratory virus prevent infection? COVID-19 may be the first time we've looked seriously at this. They do massively reduce disease severity and lethality, they likely reduce virus production in the upper respiratory tract, and there is early evidence they reduce transmission. The goal here is to stop people getting sick and dying. <https://www.nytimes.com/2021/03/22/business/astrazeneca-covid-vaccine.html>

Peter C Doherty

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@ProfPCDoherty

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**From:** Elizabeth Hart <[elizmhart@gmail.com](mailto:elizmhart@gmail.com)>

**Date:** Tuesday, 23 March 2021 at 2:24 pm

**To:** Recipients

**Subject:** [EXT] Re: Exclusive: Care home staff to face compulsory Covid vaccination

**UoM notice:** External email. Be cautious of links, attachments, or impersonation attempts

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Here's a thread of comments I've left on the UK Telegraph article raising the spectre of compulsory Covid-19 vaccination. So far my comments have not been subjected to censorship, probably due to the time difference...

Elizabeth Hart 23 Mar 2021 12:23PM

This is diabolical.

This is part of the plan to vaccinate the entire global population with fast-tracked experimental Covid-19 vaccine products that don't prevent infection or transmission, i.e. don't provide sterilising immunity.

This is a deliberate plan to repeatedly revaccinate people throughout life, deliberately interfering with and hindering natural immunity. Stealing the natural immune response of people, most of whom are not at risk with the virus, with the goal of making them dependent upon the vaccine industry for life. The UK and other countries involved in the vaccine industry such as the US, Germany, Australia etc are in this up to their necks, part of the World Health Organisation front for the vaccine industry led by the Bill & Melinda Gates Foundation and the BMGF-founded Gavi Alliance.

This unprecedented global vaccine rollout with fast-tracked experimental vaccine products which are undermining natural immunity is a crime against humanity...

Deep  
State 23 Mar  
2021  
12:28PM

@Elizabeth Hart

I've got my head round the cabal want to use shock therapy to get the country to zero carbon. What's with the vaccinate the world thing - can't just be money - I can lend Bill Gates a couple of quid if he's a bit tight for cash at the moment.

Elizabeth Hart23 @Deep State @Elizabeth Hart

Mar 2021

12:40PM It's bizarre, but the ultimate control. Imagine you get everyone hooked on a vaccine, destroy natural immunity. Remember most people aren't even at risk with this virus! But compel everyone to be vaccinated, every year or even more often...we have no idea how this is going to turn out!

But they're trying to make everyone dependent upon the vaccine industry - imagine the power... See already they're squabbling over supplies, and they're even planning a third dose in the UK, in autumn, due to 'the variants'. It's all been done on the fly, what a mess!

That they could go ahead and do this unprecedented global vaccine rollout with fast-tracked experimental vaccine products, with no consultation with the global community, it's absolutely outrageous!

The UK is right in the middle of this with the influence of their vaccine industry, and people like Andrew Pollard, who is not only the lead investigator on the Oxford/AstraZeneca vaccine trials, but also the Chair of the UK Joint Committee on Vaccination and Immunisation - talk about conflicts of interest! And of course Neil Ferguson et al, and the infamous Imperial College Report 9, that set the way for lockdowns...'until the vaccine is ready'...

We are living in the biggest scandal in history...

Deep State23  
Mar 2021  
12:56PM

@Elizabeth Hart @Deep State

I've long thought we are being conditioned to accept vaccinations and booster shots - but to what end - can't just be money (and its not health). I'm in/ from Oxford - town and not gown - a friend of ours rates Andrew Pollard highly.

The destruction of natural immunity for sure, dependency on big pharma - Great Reset agenda and Digital IDs - but do they really need to get the ID's for children and babies by vaccinating them?

I was hoping it was just some woke eco fascism.

Elizabeth @Deep State @Elizabeth Hart

Hart23 It's been going on for years, check out the NHS vaccination

Mar schedule: <https://www.nhs.uk/conditions/vaccinations/>

2021  
1:25PM

Children are subjected to so many vaccines now, many of them combined in multi-component shots, and with repeated revaccinations. There is an ever-growing vaccine load on children, and increasingly adults, and this is occurring in a sea of conflicts of interest.

This is happening around the world, including Australia where I live. The vaccine industry has effectively colonised taxpayer-funded vaccination policy, academics involved in vaccine clinical trials are also very influential on policy, e.g. people such as Andrew Pollard.

Pollard was also involved with the meningococcal B vaccine, which was originally rejected by the JCVI, but which was added to the UK schedule after Pollard became Chair of the JCVI.

Meningococcal B is very rare...but now all babies in the UK are in the frame to be vaccinated for it. This is an aluminium-adjuvanted vaccine, one of many on the schedule now. I've been trying to raise the alarm about the growing number of aluminium-adjuvanted vaccine products for years, particularly challenging a systematic review published in The Lancet Infectious Diseases in 2004 by authors associated with the Cochrane Collaboration, see for example one of my emails to the lead author on the review paper, Tom Jefferson: <https://elizabethhart.files.wordpress.com/2018/03/call-for-retraction-of-jefferson-et-als-scientifically-unsound-review-on-aluminium-and-vaccine-safety.pdf>

In regards to meningococcal B vaccination, it's been rejected four times for the taxpayer-funded schedule in Australia, with the PBAC saying: "The PBAC did not recommend listing for a broader population of infants or for adolescents due to the remaining uncertainties regarding the magnitude of clinical effectiveness of 4CMenB, and the lack of any herd protective effects, which inform the cost effectiveness." But it's being pushed upon indigenous children and other vulnerable groups.\*

So the meningococcal B vaccine was generally rejected in Australia due to "the lack of any herd protective effects...", but approved in the UK?

And now Pollard is behind another questionable vaccine product, the Oxford/AstraZeneca Covid-19 vaccine, which doesn't appear to prevent infection or transmission...how on earth are they getting away with foisting these vaccines upon the general population, where most people are not currently at risk with the virus?

Goodness knows what they're unleashing with the global spread of these fast-tracked experimental vaccine products...

A major issue to investigate is the ethics committees, how did they approve the protocols for vaccine clinical trials in healthy people not at risk of the virus, this should never have happened, they knew from the beginning that most people weren't at serious risk of the virus.

Now all and sundry are being pressed to have these vaccine products, which have been approved under 'emergency authorisations' by so-called 'regulators' that are also conflicted by being funded by industry.

Do the people having these vaccines understand they're not fully approved? Have these people given their informed consent to participating in a global vaccine trial?

\* <https://www.pbs.gov.au/industry/listing/elements/pbac-meetings/pbac-outcomes/2019-11/positive-recommendations-11-2019.docx.pdf>

On Tue, Mar 23, 2021 at 11:50 AM Elizabeth Hart <[elizmhart@gmail.com](mailto:elizmhart@gmail.com)> wrote:

See article in the UK Telegraph below...

This is diabolical. This is part of the plan to vaccinate the entire global population with fast-tracked experimental Covid-19 vaccine products that don't prevent infection or transmission, i.e. don't provide sterilising immunity. This is a deliberate plan to repeatedly revaccinate people throughout life, deliberately interfering with and hindering natural immunity. Stealing the natural immune response of people, most of whom are not at risk with the virus, with the goal of making them dependent upon the vaccine industry for life. This is a crime against humanity...

Elizabeth Hart

Independent person investigating the over-use of vaccine products and conflicts of interest in vaccination policy

# Exclusive: Care home staff to face compulsory Covid vaccination

## Leaked Cabinet plans reveal that Prime Minister and Health Secretary have agreed to make jabs a legal requirement

By [Ben Riley-Smith](#), POLITICAL EDITOR 22 March 2021 • 10:00pm

 Image removed by sender. Leaked details of a paper submitted to the Covid-19 Operations Cabinet sub-committee last week show that Boris Johnson and Matt Hancock have requested the change in law

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Leaked details of a paper submitted to the Covid-19 Operations Cabinet sub-committee last week show that Boris Johnson and Matt Hancock have requested the change in law CREDIT: PRU/AFP via Getty Images

Care home workers will be required by law to [have a Covid-19 jab](#) under a historic legal change agreed by Boris Johnson and Matt Hancock, The Telegraph can reveal.

Leaked details of a paper submitted to the Covid-19 Operations Cabinet sub-committee last week show that the Prime Minister and Health Secretary have requested the change in law.

Ministers feel compelled to act amid alarm at the [low take-up of vaccines](#) among staff in care homes, where many of those most at risk from the virus live.

Only around a quarter of homes in London, and half in other parts of England, have reached the level of vaccination among staff and residents deemed safe by government scientists.

If the law change is voted through, it is likely that the vast majority of the 1.5 million people who work in England's adult social care sector would be legally bound to have a Covid vaccination.

The decision, in principle, is without modern precedent. One legal expert said the only comparable UK laws dated from the 1800s, when newborns had to be given smallpox jabs.

Legally forcing scores of workers to get a jab raises huge legal and moral questions. Ministers have previously called similar ideas "discriminatory".

The Cabinet sub-committee paper warns that a "large" number of social care workers may quit if the change is made, and that successful lawsuits on human rights grounds could be possible. It makes clear that a similar legal requirement is being considered for [some frontline healthcare workers](#), such as those on wards, but no decision on that has been taken.

The document, drafted by the Department of Health and Social Care, is about 15 pages long and entitled "Vaccination as a condition of deployment in adult social care and health settings".

Its key line is understood to read: "The Prime Minister and the Secretary of State [Mr Hancock] have discussed on several occasions the progress that is being made to vaccinate social care workers against Covid-19 and have agreed – in order to reach a position of much greater safety for care recipients – to put in place legislation to require vaccinations among the workforce."

The sentence makes it clear that both have decided in principle to change the law to require the vaccination of social care workers, even as the specifics are worked up. Government officials are discussing what the legislation would look like, with consultation on a final detailed proposal expected.

The legal change would be likely to affect England only, with health policy the remit of the devolved administrations in Scotland, Wales and Northern Ireland.

Care homes have been among the sectors [hit hardest by the Covid pandemic](#). In the last year, around one in 14 of the population of UK care homes has died after contracting the virus.

The paper, described to The Telegraph in detail by numerous sources, outlines the scale of the problem of Covid vaccine take-up among care home workers which has led ministers to act.

It says the Scientific Advisory Group for Emergencies (Sage) set a benchmark of 80 per cent vaccination among staff and 90 per among residents for a care home to be deemed safe. Fewer than a quarter of homes in London currently meet that benchmark, according to the document – the lowest of any region in England. Even in better performing areas, such as the South-West, it is only around half.

Care homes have a relatively high proportion of black, Asian and minority ethnic workers. Vaccine take-up [has been lower in BAME communities](#), according to government data. Many care home workers are young, meaning they may not yet have had a Covid vaccine, and the paper says other possible factors include concerns over having the job [while pregnant](#) and online [misinformation about the vaccine](#).

A senior government source justified the move by saying: "Protecting the most vulnerable in our society from a deadly virus is obviously of critical importance."

However, the legal and ethical questions posed are likely to be strongly debated in the coming months.

A key line in the paper is understood to read: "The most significant risk of a policy to require vaccination among the workforce is the potential impact on workforce numbers should social care workers choose to leave their roles in large numbers rather than be vaccinated."

There are also legal risks. The document weighs up the respective merits of making the legal change via primary legislation or secondary legislation, which is quicker to pass. It is understood to warn that there would be a "high risk" of successful legal challenges on human rights and proportionality grounds if the change was made by secondary legislation.

Nadhim Zahawi, the vaccines minister, has previously said [Covid vaccine "passports"](#), revealing people's job status, would be "discriminatory". In the same BBC interview, given last month, Mr Zahawi said of the idea of mandating people to get Covid jabs: "That's not how we do things. We do them by consent."

A Cabinet Office spokesman said: "The review into Covid status certification is considering a range of issues. No final decisions have been made."

David Sheppard, a senior associate in Capital Law's employment and immigration team, which advises employers on Covid vaccination policies at work, said no similar law had been passed in more than a century.

Mr Sheppard said the closest equivalent was the 1853 Vaccination Act, which introduced compulsory vaccination for smallpox for newborn babies, and Acts passed in 1861, 1867 and 1871 to enforce that rule with fines.