

Will fast-tracked COVID-19 vaccine products be compulsory?

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

Sat, Jul 26, 2025 at 3:13 PM

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From: Prime Minister of Australia via Prime Minister of Australia <webservices@pmc.gov.au>
Date: Tue, Mar 10, 2020 at 8:30 PM
Subject: Your message to the Prime Minister
To: <elizmhart@gmail.com>

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Submitted on Tuesday, 10 March, 2020 - 21:00

Title: Ms

First name: Elizabeth

Family name: Hart

Email address: elizmhart@gmail.com

Your address: [REDACTED]

Subject: Will fast-tracked COVID-19 vaccine products be compulsory?

Comment:

For the attention of:

The Hon Scott Morrison MP Prime Minister of Australia

Dear Prime Minister

Is it possible fast-tracked COVID-19 vaccine products could be compulsory under the Australian Biosecurity Act 2015? [1]

My reading of the Biosecurity Act 2015 indicates individuals may be under threat of 5 years imprisonment and/or a \$63,000 fine if they refuse to be vaccinated as directed by the Director of Human Biosecurity, i.e. the Commonwealth Chief Medical Officer, currently Brendan Murphy. [2] (That is, if an individual fails to comply with a human biosecurity control order, e.g. vaccination, the penalty could be imprisonment for 5 years or 300 penalty units or both - see endnote no. 3 for reference details in the Biosecurity Act 2015.)

Human coronavirus with pandemic potential is included as a 'Listed Human Disease' under the Biosecurity Act 2015 [4], so is it possible individuals in Australia could be compelled to have coronavirus vaccines?

Can you please clarify the legality of this Prime Minister, given that the Australian Government has announced it will "fast-track assessment and approval of a customised vaccine, should this become available..." in its report Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)? [5]

It's highly alarming that individuals in Australia may be at risk of 5 years imprisonment and/or a costly fine if they refuse to be vaccinated with a vaccine product to prevent SARS-CoV-2 infection, particularly as the World Health Organisation appears to indicate illness associated with SARS-CoV-2/COVID-19 is generally mild, especially for children and young adults. [6] Information provided by the WHO is confusing because while indicating illness is 'generally mild', the WHO also says "about 1 in every 5 people who catch it need hospital care". [7]

We need more clarification on the risks for the general population.

It's notable that a rapid response recently published on The BMJ suggests that the case fatality rate (CFR) of the virus that causes COVID-19 is likely to be over-estimated, and that "Accurate CFRs are only possible after the rates of asymptomatic infection and mild otherwise unreported cases are determined". [8]

The threat of SARS-CoV-2/COVID-19 only emerged recently, but it's now being reported 30 institutions around the world are working on a vaccine, with Robert Booy, the Chair of the vaccine industry-funded Immunisation Coalition [9], suggesting a vaccine could be ready in 5 to 6 months. [10] This means fast-tracked and still experimental vaccine products could be imposed upon populations in just a few months.

Similar to the WHO, Robert Booy is also confusing about the risks posed, saying:

"Well, this coronavirus is probably going to infect at least 10 or 20 percent of people. But if it gets out of control in Australia it could go up to 50 or more percent. It's not going to get to everybody. Some people will have some immunity. Some people will just be, spatially unlikely to contact the virus. So the great majority of people, I think, will not catch it. Furthermore, those that do catch it, a good 80 to 90 percent, will have no more symptoms than that of a common cold or a viral bronchitis. It's only the five to ten percent of people who get it more severely might need to see their GP, and then maybe a half or third of them might need to go to hospital. So it is nasty, because so many people are going to get it, but the great majority will not get it severely." [11] (My emphasis.)

Can we conclude from Robert Booy's rather erratic statement that 'this coronavirus' is no more problematic than a common cold or

viral bronchitis for the majority of those people who catch it?

Does this 'generally mild' illness justify a fast-tracked vaccine product with uncertain outcomes, which takes away valuable resources from preventing and treating serious cases right now?

Prime Minister, again, can you please clarify, are individuals in Australia potentially under threat of 5 years imprisonment and/or a \$63,000 fine if they refuse to comply with a direction from the Director of Human Biosecurity, i.e. Chief Medical Officer Brendan Murphy, to be vaccinated with fast-tracked COVID-19 vaccine products when and if they become available?

I request your early response on this important matter of public interest. This email is also being copied to The Hon Christian Porter MP, Attorney-General of Australia, and other parties.

Yours sincerely

Elizabeth Hart

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

cc: The Hon Christian Porter, Attorney-General of Australia

References: (Links below as accessed on 9 March 2020.)

1. See Biosecurity Act 2015: <https://www.legislation.gov.au/Details/C2019C00097> Latest version as registered 7 March 2019.
2. Director of Human Biosecurity, Australian Government: <https://www.directory.gov.au/portfolios/health/director-human-biosecurity>
3. See the Biosecurity Act 2015, Part 3, Division 2, Subdivision C, 74 When individual is required to comply with a biosecurity measure (1) (e) section 92 (vaccination or treatment) and (2) and Note 1: A person who fails to comply with a biosecurity measure that the person is required to comply with may commit an offence (see section 107), and Division 4, Subdivision C 107 Offence for failing to comply with a human biosecurity control order...Penalty: Imprisonment for 5 years or 300 penalty units, or both. A 'penalty unit' is \$210 under Commonwealth law, multiplied by 300 equals \$63,000, see the Crimes Act 1914, Part 1A - General, 4AA Penalty units: <https://www.legislation.gov.au/Details/C2020C00012>
4. Australian Government Department of Health - Listed Human Diseases (page last updated 31 January 2020): <https://www1.health.gov.au/internet/main/publishing.nsf/Content/ohp-biosec-list-diseases.htm>
5. 4.1.4 Implementation of public health measures. Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19). Australian Government Department of Health. Publications Number: 12723. 2020.
6. WHO Q&A on coronaviruses (COVID-19). 2 March 2020: <https://www.who.int/news-room/q-a-detail/q-a-coronaviruses>
7. Ibid.
8. Why Novel Coronavirus Fatality is Likely Overestimated. Joshua D. Niforates. 4 March 2020: <https://www.bmjjournals.org/content/368/bmj.m606/rr-5>
9. Robert Booy is Chairman of the Immunisation Coalition and is also Chair of the Immunisation Coalition's Scientific Advisory Committee: <https://www.immunisationcoalition.org.au/about-us/>
10. The 'great variety' of Australians will not catch coronavirus - Robert Booy interviewed by Peta Credlin on Sky News. Interview on Sky News Facebook, 28 February 2020.
11. Ibid.