

Club Grubbery - Raw transcript of interview:

2024-07-01 Club Grubbery - Graham and John speak with Gigi Foster after the seven spotlight...

Well, good day everyone, Monday, the 1st of July, the beginning of a new financial year and how excited are we all?

Hang on, I'll start that again.

Was I supposed to respond to that as an economist?

No, no,

we

should put that in the blooper roll, hang on.

All right. Here we go. Well, hi everybody.

You couldn't make this stuff up. Hang on. I'll get it in a minute. Thank you.

Ah, geez. This happened to me on TV once. All right. G'day, everyone. Welcome to Climbrary Monday. July.

Okay. All right. It's catching. This is catching.

I'll get it out of my system. It's all right.

I know. No, it's a giggle loop. The giggle loop has to get to the end and then it, then it, then it calms.

All right. G'day everyone. Monday, the 1st of July, the first day of the new financial year and how exciting that must be for our guest economist, Johnny Gigi Foster, professor of economics from University of New South Wales, who is a regular on our program.

Yes. And, uh, her popularity has just skyrocketed, I've got to say, Woody. After, uh,

Geez, it has. Gigi Foster, we, yeah, this is the night after your, uh, your appearance on Spotlight on Channel 7 was aired. And as I said to you pre recording, I haven't seen body language like that since, um, for 20 years, since I was with my first wife.

And, uh, I gotta say you didn't have to say much because your body language says it all, but welcome back on the Club Grubbery.

Thank you very much, Graham. Yeah. I mean, that was a very interesting experience. I'm sure we'll go over it, uh, you know, kind of blow by blow, but the body language stuff. I mean, what you saw there is the reason why I would be very bad as a politician.

I'm very bad at hiding, uh, my thoughts and my, my reactions to things. And so it just showed on my face. I had no idea that we're going to use so much of my, you know, resting bitch face, as we might say, or resting, when is the Nuremberg trial going to happen face in, you know, while, while airing other people's views.

But it was nice to at least have that because of course, a lot of what I said did get cut, as you can imagine.

Well, yeah, let's unpack some of that as we go into this, but uh, it was interesting, had quite a lot of views and I haven't checked out the comments on Channel 7 social media platform. John, did you have a look at the comments at all?

No, it was very hard to actually get hold of that on Spotlight. I looked on Twitter. It was, it's not something that was easy to access. So they've sort of buried it, I think, uh, which doesn't surprise you, does it?

Well, I, I was actually just on, um, with Russell Broadbent, uh, doing a, a little podcast right before this, and he said apparently the Facebook Page where they, the Channel 7 producers had shared the video had the comments turned off.

So that may be one of the reasons why it's hard to find. Um, you know, I mean, this is, this is censorship in another form, right? We just have, there's such high incentives now for people in mainstream who have been complicit in these COVID policy crimes to find new and ever more effective ways to censor alternative views.

And so that's just another mechanism of censorship.

It is. It is indeed. So what we saw last night was interesting. Um, there was some, there was, there was some material in the, in the, in the preview, in the promotional video they put out that wasn't actually shown on the program last night, which was interesting.

Um, I think the piece where you said in the, in the preview, That you found it very hard to find anything that the authorities did right. I think that was left out of the program, which is interesting.

Yes. Well, that was a response that I gave to the first question that went around the panel, which was, what did we get right?

Um, and you know, everybody had an answer to that, of course. And, and most people's answer was, well, we got most things right, but maybe we should have. You know, done something slightly different. And, you know, as usual, looking at the small potatoes instead of the big picture and not permitting of a different attitude about how we maybe should have handled the whole thing holistically.

And that's exactly what I said, that little clip that they used in the promo. So I was hopeful that that would work. Um, and then there were many other times that, uh, you know, as we were speaking, something came up. And sometimes I, at one point, I remember I followed on from something that Karen Phelps was saying about how we should not just have a vaccine policy.

We should sort of think of a more holistic policy for dealing with COVID. And I thought, yes, that's something I can agree with. And so I said, yes, indeed. And then I talked about early treatment, for example, and I didn't use the no go word ivermectin. But I said, you know, there were. There are plenty of cases of drugs and treatments that were being either not prescribed by doctors here in Australia or outright blocked by the TGA, and I won't say the name of it because everybody knows what I'm talking about.

And so you know this is a treatable disease, I said that, that very phrase, this is a treatable disease and that entire bit got cut. Um, and then, of course, about lockdowns, uh, and I wrote a book about the cost of lockdowns, right? So you'd think that I'd probably get a look in there, but that wasn't, I don't think I was, I was aired as having said anything about the cost of lockdowns, um, or if so, it was very small amount.

So, And then, of course, I didn't get asked at all about the vaccines, uh, or the mandates, probably because the host, who I, I know subsequently having read some of his op ed pieces and whatnot, is very anti anti vax. Uh, he probably would have thought, well, as an economist, I wouldn't be a person to consult about that or, you know, wouldn't have the right to have an opinion or something like this.

So, so that was one of the bits of my, uh, stuff that I remember saying and that were cut. I think there's probably another couple, um, bits of content as well, but much of the audience stuff was also cut. That was also interesting.

So the mood of the audience was obviously not very pro Palaszczuk or the other panelists.

No, and they, I think they were expecting more support. And I was expecting that the audience would give more support to them as well. Um, they were actually acting quite like before the show in the green room. When we were all, we were served dinner. It was very nice. The spotlight people gave us some, you know, lemon pepper chicken or something, which had not been advertised.

So I had a couple sushi rolls beforehand and fortunately we got more food because we were all there for about four hours. And they were, you know, very confident, I think, about what they were going to say. They seemed to be very comfortable. And then. Once we got onto the show and, you know, we were talking for a while, they were quite comfortable for the first part, but then at a certain point, the audience betrayed, showed his hand, essentially.

And I think it was either that they clapped for something that I said, or they sort of were booing something about the vaccines, or something was happening, you know, something happened that drew the attention of the mainstream doctors. And then Palaszczuk also looked, and it was very clear that was the moment at which they realized, Oh, oops, maybe we are not actually preaching to a captured audience here.

Um, and from that point onward, they were definitely squirming a bit more.

Michael Usher is an interesting character. I spent all day with him at my home on the Gold Coast, uh, years ago when he was working for 60 Minutes. Um, there was a story called Jessica Silver. Some people may remember it. And there's a scene where, uh, the father of a man who was stabbed to death by his estranged partner, um, actually forgave her at our place.

And he was coming to our place, participating in 12 step recovery groups and all that, and he was, uh, Uh, he was a very interesting character, this guy, he, uh, ex New Zealand Special Forces, uh, and he was awesome in his, uh, forgiveness of this, of this girl who stabbed his son to death.

And

that was the real story.

I mean, they filmed him in our dining room, talking about how he got himself to forgive the killer of, of his, uh, son. And it was incredible. There wasn't a dry eye in the room. There were about six people in the room, and it didn't take prior to mention. And, you know, observing Michael Usher during that whole process was very, very interesting.

He's, um, he's a very interesting character. He likes to, he likes to be in control. He likes to be the hero. Uh, every now and then when things started to run off the rails, he threatened to pack up and leave. And, um, you know, it was very, very interesting. So I've got a bit of insight into him, which, you know, Yeah, for what it's worth, but that's that's interesting.

I mean, I didn't know anything of him before I was on the show, which of course the recording was not this past weekend, but the previous weekend. The one thing that did strike me is that prior to all of us actually starting the recording when we were sitting there around the table, he very deliberately made eye contact with every panelist except myself.

Um, and that, that struck me because, you know, typically, you know, you'll, you'll have a kind of pre recording little, I don't know, just a courtesy eye contact and sort of a nod and it's just respectful to do that, but he didn't do that with me. So, I already sensed that probably he was going to be antagonistic towards what I was going to say, but, you know, I'm used to these situations.

So that was okay, but I did sense that, but other than that, I didn't, I hadn't even read what he had written on this op ed before we did the recording. So. You know, in a sense, it's, it's helpful not to have a preconception about the people you're going to be speaking with, because then you can kind of just keep an open mind, right?

It's easier to keep an open mind. I didn't look up the other panelists. Of course, I know Anastasia, but I didn't look up the doctors, um, and only afterwards did I, did I sort of, you know, have people sending me things. Oh, you know, here's the, yeah. The guy on the panel with you and this is what he's done and he's so horrible and everything like this.

And I'm kind of glad I didn't know that beforehand because it enables you to just treat them like an individual.

Yeah. Johnny, what were your observations of the program last night, man?

Well, I was angry, Hoodie, I've got to say. Uh, uh, there was a lot of people texting me saying they couldn't even bear to watch it, uh, which I can understand because, uh, it, it was set up, it was set up horribly to begin with.

I mean, Paul, GG handled herself, uh, absolutely magnificently. I've got to say, I mean, everything you said was a common sense. It was to the point, uh, it resonated with, with people. Uh, but you, you were sort of on your, on your, on your own there, weren't you? I mean, you, you, you're not from a medical background, uh, the two people that were on the panel, uh, essentially as medical experts were on the same side that there was really no one in your corner at all.

Uh,

Well, not on the panel, but I mean, I was very hardened about the audience's position, which I didn't realize beforehand. And I, and afterwards actually, well, in fact, I'll say, Okay. Thank you. While we were doing the recording, we've kind of recorded as live. That's what they told us. And so there were a couple of breaks of three minutes or so between segments, right?

And in one of these breaks, somebody shouted out from the audience, something like, Gigi, we love you. Right. And of course the panel was, was like, what, what, what? Right. And so I had a little exchange. Not on camera, not filmed. Um, I, well maybe it was filmed, but it wasn't, of course, ever going to be used in the broadcast with these people saying, I'll stay afterwards and, you know, we can do some selfies and I'll sign books, whatever.

And, and then I, after the show, of course, the panelists wanted to hightail it right out of there. Because they were clearly non, you know, not, not people who were, you know, going to be approved of by the audience. And I don't think the audience had any weapons, but, you know, it was going to be unpleasant for them if they encountered them face to face.

So they were kind of hustling out and the sort of people assisting with the production were assuming I would be hustling out as well. But I kind of had to swim upstream a bit as You know, trying to get back into the room after being hustled out, saying, I just want to say hi to the audience, you know, and so I eventually got back there and we took some selfies and I think one of them ended up on Facebook, on somebody's Facebook account, um, and I got to say hi to several people, including one man whom you may remember from, I think it would have been 2021, either 2020 or 2021, when we were still having these ridiculous rolling lockdowns in New South Wales, he was arrested for being, uh, taking part in an anti lockdown protest, I think it was New South Wales, or maybe Victoria, anyway, in red budgie smugglers, that was the, that was the visual that, you know, we all remember, very built guy, and, and he was from, uh, someplace in Europe, I'm so bad with names and I apologize to him if he's watching but I mean anyway he was very courageous and he spoke incredibly articulately and he had kind of

a at least a half segment on the recording where in fact the spotlight people showed the footage of him being arrested him you know protesting against the lockdowns and then cut to him and he was talking about how he had experienced Um, he was literally kept behind bars, uh, and, and he had never received an apology and anyway, he was going on a little bit.

And so I expected that they cut him a little bit, but he got zero play, right? The, the, the cutting, the editing completely axed his entire segment. So, you know, I think if I were him, I'd be more upset than, than, you know, I am at what they cut from me because he literally got nothing. No, none of his words were included.

Well, that goes hand in hand with the video clip they showed of the protests in Melbourne, where they showed a police officer being trampled underfoot and they really made a big thing about his injuries and how dreadful that was. They didn't show any of the footage from Battleground Melbourne,

uh,

you know, where police were doing unbelievably dangerous things.

The brutality of the police was, you know. Unconscionable. And, and also the fact that they fired live ammunition, rubber bullets, on protesters at the shrine. None of that rated a mention. It was surprised in that regard. And, uh, that's just one of the things I noticed, John. What else did you pick up?

Well, the thing that, uh, alarmed me was, was the, the medical professionals, uh, take on, on what had happened.

Uh, that, that, that's the thing that I just can't grip with. I mean, even Karen Phelps. Uh, I mean, can you believe, uh, she thinks that, uh, you know, two people in the one home being injured, uh, is some random event and everyone should keep going out and getting this product. I mean, that, that just beggars belief, doesn't it?

Well, but it, it shows you how deep the incentives go to protect the ego when you've been complicit in crimes. I mean, that's, and that is a really, really excellent example and such great evidence of why we have such an uphill battle now, because so many people in the society that we're living in don't have as extreme personal damage from the COVID policies as Karen Phelps and Jackie do, but they have, you know, some kind of cost maybe, and they were complicit with or sat back and let it happen, or somehow were.

And so they were caught up with this policy direction and didn't speak against it. So they have kind of identified in a sense with the covert policies having been basically the right thing. And so, the incentive for them to hold on to that come hell or high water to excuse themselves to excuse those and authorities to make to make.

You know, various justifications for why maybe there was a little mistake around the edges, but basically it was fine. And of course, to, you know, trot out the, we couldn't have known scenario or precautionary principle and all of the other nonsense that's trotted out to justify this stuff. I mean, those incentives are powerful because people need to think of themselves as good people.

Right? I mean, Karen wants to think of herself as a good person. She, she was. Right, pushing the vaccine. I mean, she was the head of the AMA. She was going along with this stuff. So yeah, arguably she was even more centrally complicit in this than many people in Australia. But even despite the horrific injuries to herself and Jackie, still pushing this stuff.

I mean, it shows you how deeply held our, our belief in ourself as a good person is and how much we just can't, we can't afford psychologically to accept information that goes against that.

Well, I was just going to say, they just don't seem to be able to accept, uh, that there's another narrative to this.

I mean, you know, the, the vaccines causing the damage that they don't want to accept it. I mean, the mortality rates go up as soon as the vaccines are introduced, but, uh, this professor boy thinks that it's nothing to do with the vaccines. I mean,

Yeah, I mean, you can, you can see the, this is why I made the point on the show about the difference between the sort of mainstream channels and the more independent media and the independent channels, because that is what I was hearing and what Professor Boyd was saying.

He was spouting the same stuff that you see in the mainstream as the kind of papering over of the reality. So for example, the excess deaths issue, which I raised very briefly. Um, and, and actually, you know, it, it, we came back to it later in the show, but that part was cut too, of course, but anyway, the, you know, that came up in the context of the possible harms of lockdowns extending beyond the lockdown period due to crowded out health care and, and mental disease and all sorts of other things.

Um, and he brought later up on, brought up this notion that yes, excess deaths had gone up in 2022 or 2023, and that it was because of COVID. Right. That's the mainstream story, right? The mainstream story is yeah, maybe they went up, you know, we opened borders in 2021, late 2021. And so then of course, you know, Omega came in or Omicron or whatever it was called, right?

Came in and it overtook the hospitals and there was a huge amount of death. What probably happened in my view, in addition to the excess, um, lockdown related deaths and the vaccine side effects. Um, and in fact, we included this in the ASF submission to the Senate inquiry on excess deaths. Is it in hospitals?

In about January, February 2022, you may have had panicked medical staff thinking that Omicron was going to, you know, just run riot and kill masses of people. And so you had more pressure in those hospitals to make quick decisions, which often would have been about how do we treat this particular patient who looks like they're not doing that well, let's put them on a protocol.

What's the protocol, lorazepam, midazolam, other nasty depressive drugs, which can actually hasten death instead of taking care of the person. Right. So we, I mean, Wilson Tsai has written about this, and he's actually used the word euthanasia, which, you know, you can see how that could be framed in that way.

I think many of those doctors and nurses certainly would not have had it consciously in their mind that they were trying to kill people but The pressure that they were under the panic they were facing may have caused those protocols to be used more. And, you know, it seems logical from a scientific standpoint that that could have caused the spikes that we see in 2022, particularly that first one.

And then there was one a little later as well. Now, what Professor Boyd was saying was, Oh, no, that was because COVID, you know, COVID came in because we opened the borders. Now that sort of, first of all, draws into question whether or not it was even worth while doing all the vaccinations. It, you know, if we were all vaccinated, then why was there the spike in the COVID deaths?

You know, like what? And then, okay, well, you have to make up some counterfactual where the deaths would have been even more without the vaccinations. Well, tell me which country has had that. You know, then, then you're starting to think, okay, well, what's the counterfactual? Well, you should look at a country that hasn't had the lockdowns, like Sweden or some of the other low restrictions countries, which is of course what I did in my cost benefit analysis of the COVID policies in Australia, right?

But again, you can't get into that kind of detail when you're on the program like this, and there's just soundbites here and there. So he's, spouting a soundbite from the mainstream press. Um, and a couple of other things he said as well, which were just totally about mainstream. And again, one could counter what he said by saying, well, the excess deaths are still high even into the beginning of 2024.

And I know this because I've basically wrote most of the ASF submission on excess deaths. They're still high. They're, they're statistically higher than the average from 2015 to 2019. And the number of with COVID deaths has declined to the single digits. So there's no way that COVID is responsible for these excess deaths.

It's just, it's not the majority explanation. But he's just spouting that sort of, you know, paper over kind of thing. And most people accept it because most people haven't done the research that, you know, they don't have the mental wherewithal, the energy. The extra spare mental effort and perseverance to devote to this sort of thing because they're too busy worrying about their financial security in today's economic environment, the cost of living, securing their children's future in a very uncertain world, the disrupted economic conditions we have generally trying to find an affordable house.

I mean, there's so much that are occupying people's minds. And, and of course, people in authority are relying on this, right? That's part of what is, what is making the nonsense propagate and, and, you know, continue for months and months is because people just don't have the ability, they're, they're so under stress, they don't have the ability to really effectively push back in large numbers.

It was interesting, Dr. Sanjeev's response to your request that they look at alternative news sources, uh, when he said the World Health Organization is working very hard to now suppress misinformation. Um, I'm sure they are. I'm sure they

are. Uh, I mean, don't even get me started on that one. That was so funny.

I attended the, um, as you know, Graham, um, I attended the Tucker Carlson show here in Sydney on Friday, and it was interesting the way he said it, you know, he framed the whole misinformation conversation. He said, look, I don't really recognize the term misinformation. And I'm, you know, very much on his side in this.

What is misinformation? It depends on your perspective in some sense, right? It doesn't really have a, you know, a clear definition that's, that kind of is objective and constant across context. And what, what does have a clear definition is truth and lies, right? That we can understand. We understand what truth is.

We understand what lies are, but there's misinformation, disinformation, dismiss infoganda, right? All the made up words that, that people are now using to try to censor speech and, and basically just denigrate anyone who, who dares to question those in authority. If people are using those terms, they're basically either on the sort of mainstream side already and trying to continue to push that narrative, or they are inadvertently using the terms of the enemy.

So I think we should get away from using that word. I, I, I don't even know what it means. Uh, it's like the word neoliberal, which is another word. I don't even know what it means. I mean, I've been called one, but I honestly don't know what it means. I, because it seems like an ideological thing, you know, and misinformation is inherently has got to be motivated.

Your definition of it has to be motivated by an ideology such as people in power are always right, you know, or something like that, which is obviously false if you are a critically thinking independent, you know, free thinker, but it's not false if you're. Your livelihood and your reputation and your income are bound up with basically ensuring that the COVID policies that were taken in Australia are seen to be the correct ones.

Share, share a clip that John just sent me. It's only a very quick one from channel seven this morning.

The research out of Queensland appears to have debunked the concept of long COVID. A team of researchers headed by the state's own chief health officer has found people suffering from other respiratory illnesses have similar.

Long term symptoms, and that includes the common flu. Dr. John Gerard has called for the medical community to stop using the term saying there's nothing unique about the effects of COVID.

There you go. That's on channel seven this morning. Very interesting. And uh, John Jarrod saying, you know, it's time to get over it.

Now, what was really interesting last night, Gigi, was that they, they brought the, uh, the heart specialist in from St. Vincent's. Yeah, I'm sure he's a lovely guy and he seemed like a really nice guy. They're talking about the effects of long COVID and he said, he basically said, we don't know what's causing it.

It did at any stage during what was filmed and eventually cut out, perhaps, Did anyone say, well, hang on, is it possible that these immune deficiencies, which is, which are bringing about the side effects of long COVID are actually side effects of the vaccine? Did anyone raise that?

Yes. Someone in the audience said something brief.

Um, I mean, they wouldn't have used immune deficiencies and whatnot, but they would have said long COVID is long vaccine or something like that. Um, there was definitely a statement of, uh, to that effect from the audience. Um, of course I didn't get asked about anything to do with the vaccines. And so unfortunately I couldn't really, uh, chime in there.

And, uh, and of course, you know, I will also say in relation, in Channel 7's defense, science does, uh, involve an updating of your best guess at truth as new information comes to light, right? And so it's quite possible that at one stage in the process of studying the, the COVID phenomenon, we may think maybe long COVID isn't a thing.

And then another stage we think, well, maybe it is a thing, right? So that's, that's kind of natural. What was interesting at, you know, on the show, first of all, that's not, you know, inconsistency like that is not easy. for a mainstream channel to admit to because the person on the street will then just think that they're flip flopping and just all over the place.

So, you know, there, there has to be more path dependence in the way that information is given to us through mainstream channels like that, then there actually, uh, needs to be for good science. Um, but I also think, you know, you're right that the long COVID symptoms that he was describing are very varied and many of them seem very much like, um, vaccine side effects that we've heard about from the vaccine injured community.

And in fact, you know, I was reminded during that conversation that he was having with, uh, with Michael Usher of a, a comment that I made on a radio station in Perth, would have been ABC Perth, um, maybe, gosh, two, three years ago, where the So, presenter was asking me about long COVID and I said, well, you know, my view of this whole long COVID thing is that first of all, it's probably somewhat overblown, but probably there is a long lived effect in some number of small number of fraction of people.

Um, just as there is from other viral infections, but also don't forget that what the vaccines do is they make your body produce a spike protein. And we know the spike protein circulating in your body is a poison. It's one of the things that may cause the long COVID. But so some of these long COVID cases may be from the vaccine.

So I basically said, That long COVID could be vaccine related and then the next day or the day after they got none other than Norman Swan to come on the show. They replayed what I had said and they said, can you please debunk this idiot economist who's totally out of our lane? And of course he said, well, there's no way that long COVID could be caused by the vaccine.

Right? So, you know, it's quite funny. It's the same kind of, you know, playbook. They just, there's no thought. I mean, you know, I was simply thinking, what does the vaccine do? It makes you make the spike protein. We know the spike protein is damaging. Ergo, maybe the vaccine causes damage, right? I mean, it's really not so hard.



You don't even have to get into immune dysregulation or anything particularly fancy pants. All you have to do is have a sniff test, right? Like, is it plausible? Yeah, it's plausible. And, you know, we're not supposed to have those kinds of critical thoughts anymore. And that's what I find most scary. You know, there were a few people after the show.

Who actually wrote me in this vitriolic hatred. A lot of people wrote me, you know, very positive emails, of course, but there were maybe five or six who wrote me all sorts of nasty things that I can't repeat in public company. Um, and a lot of them just were based, had basically been turned into apologists for the regime.

And that makes me sad because these are, you know, these are Australian citizens. It's like, it's like watching Star Trek and, you know, seeing some of your crew turned into borgs, you know, it's like, oh, geez, that's, uh, you know, it's really unfortunate.

So Dr. Uh, Swan, uh, was used to debunk you, the man who was telling everybody to get vaccinated because it would stop transmission and, um, and, uh, prevent, prevent you from catching it.

I mean, uh, that same Dr. Swan, are we talking about the same?

That's the one. That's the one. And I don't think that even now today, to this day, he has been called up on that, on those lies. I don't think so.

He wouldn't be. He wouldn't be. Um, so that was really interesting because, you know, I'm not a medical expert.

You're more of a medical expert than I am, John, but as a human factors person in aviation and medicine, good human factors demands that we investigate all probabilities and eliminate them one by one. Exactly.

Exactly.

It appeared to me on that show last night that Dr. Sanjeev and, and, uh, Professor, uh, Boy, uh, we're not the slightest bit interested in that.

They want to see an Australian CDC. I mean, what could possibly go wrong? The American CDC has been a complete failure. Haven't we learned anything from that? Your response to that was amazing. Oh, great. Just what we need. Another bureaucracy and somebody else laying down the law. And I mean, it's just going rampant in this country.

You're all going to let it today. From the Department of Lands in New South Wales, saying that I have until the 1st of January next year to have all of my sheep electronically tagged at the cost of 25 so that the few sheep we have just to keep the grass down, uh, can be monitored for, uh, potential biosecurity threats.

And if, here's the thing, in the letter it says, if I refuse to respond, they will see that a levy is applied through my council rates. As a penalty for me not responding.

Perfect example of a completely overreaching, totally out of touch bureaucracy. And this is, I've made this point actually recently when I went off to Curtin.

I think we interviewed, uh, right before I went on that, on that trip to go to Curtin University a couple weeks ago and speak about the, the evils of Today's sclerotic, entrenched bureaucracies, which are positioned so far from the coal faces at which the consequences of the decisions are felt. And that's, that's a real danger when you have a separation between the person who's making the call on something important and the person who's feeling the costs of that decision or the potentially the benefits.

Um, because, you know, you know, we like to think and we teach our students in economics that the people who are making our policies are benevolent social dictators, you know, benevolent social planners. We have that

phrase. Of course, there is no such person, but there's particularly no such person, and it's, it's, it's worse than not having such a person.

You have people who are almost the opposite of that, in positions, in bureaucracies, where they just are out of touch with the costs of the, of the decisions that they're making. And you saw a little bit of an evidence of this in some of what Anastasia was saying, actually. So, On the show, you remember when she was saying, Oh, you know, I, it was hard for me and I made these calls during the day and I'd go home and be staring at the ceiling trying to go to sleep and wondering if I made the right call.

Well, why was she wondering so much? She was wondering so much because she didn't have the information about the actual cost of the policies. She didn't bother. Doing her research or going out in the field and thinking and really examining what the impacts of those policies would be on the people she was, had been put in place to take charge of.

Right. And so she was, of course, in this kind of cocoon of lack of information and then worried that she'd made the wrong decision. It's a good clue that maybe you haven't been doing your job. If you, if you're making big calls that have the potential to have big consequences, but you're not really sure what those consequences are so much that you're not really sure whether it's the right call to make in any particular day, and it doesn't get any clearer as it, as it keeps going, maybe you should stop and think whether it's the right thing to be making these big calls in the first place, particularly when you're departing so far from the initial pre 19, 20, 20 sort of 2019 pandemic management plans that we all had in place and all the states that.

Completely excluded lockdowns as a possibility, which is one of the points that, frankly, I was very happy did get aired on the cut version of the show. So, you know, just that very, very sort of uncertainty that she was expressing spoke to me of her lack of understanding of the full consequences of her decision.

Um, and so, you know, I just think that that problem infects not just the bureaucracy in the public sector, but bureaucracies in large organizations, including the university sector. Um, bureaucracies in, in the international organizations, the UN, you know, the WEF, all of these things, even the, um, ARC thing that, that Jordan Peterson has started up, the Alliance for Responsible Citizenship.

I mean, I went to that meeting that the first meeting they had in November of 2023, I think it was. And, you know, they were trying to, um, kind of get everybody on board behind a positive message for humanity's future and all this sort of stuff. And most of us who came there already subscribed to that anyway.

But it struck me that this organization looks an awful lot like The W. E. F. In certain ways. It's a networked bunch of people who reckon they've got the golden ticket for how society should be run, and they're going to talk a lot about it and slap each other on the back and have lots of nice caviar and champagne and then go back to their countries thinking they did something good.

Is that really helping people? Right? And so I've actually had a conversation with the people who are running our Australia expressing my concerns about this because that too is an organization that can just become part of the problem. And the more we concentrate power and, and take decision making out of the communities and out of the local area, the worse we're going to get, um, you know, abused by those bureaucracies that we set up and the, the less efficient policies we have, the less in touch policies, and the more that.

Human health and human wealth and human joy suffer. And, you know, if you want to maximize those things, which is what economics is about, maximizing human welfare, maximizing human well being, then, then you've got to recognize those costs of bureaucracies.

I agree with you more. I mean, the whole, the whole concept of, you know, just replacing one dodgy organization with another one.

That's what we've been doing all along. And that's insanity. Repeating the same thing over and over again, expecting a different result. But John getting, getting back to the premiers, John, how many, have we, have we heard one premier that was involved in the last three or four years? Ever do anything other than blame their chief medical officer for their decisions.

I mean, Anastasia last night blamed Jeanette Young. I was only doing what I was told. Johnny, the leader is only doing what she's told by the bureaucrat. Um, is there something wrong there?

Well, look, I think the only sensible thing that, uh, that Jeanette Young did was, was essentially put a ban on, uh, Anyone under a certain age taking AstraZeneca, which, which turned out to be a, a, a reasonable, uh, you know, decision in the end.

But I think a lot of this can be just simplified, you know, uh, Gigi made a very good point earlier about, about the complication, um, and fear that went on. Uh, contributing, I think, to the, to the, uh, to the poor outcomes of people. Um, now look, look at that poor lady that was on last night, uh, that, that they said ended up taking a lesser job, uh, in a regional setting.

I mean, she was, she was obviously very, uh, upset and traumatized about what had gone on and that was as a result of the fear. I mean, she was shitting herself because she thought she was going to die in that unit. Uh, yeah. Lovely lady.

Lovely

lady. You can't help but feel for them. I mean, these, these guys were, were obviously fatigued.

I mean, they were, they were working in environments that they shouldn't have been, you know, like with all that PPE on, uh, you know, it would have been causing all sorts of issues, uh, hypoxia, you know, they would have been hot. Uh, you know, the fatigue involved in there, the decision making processes would have been completely flawed.

I mean, they've just thrown a whole heap of processes into, into. Decision making that didn't need to be there, uh, which would have no doubt had, uh, bearings on, on outcomes. Um, they went down the wrong regime path, protocol wise, to, to treat people. I mean, if we said this was just a normal flu, a bad, bad flu.

Which I think it was, you, you wouldn't have done this. We had this pandemic plan. It was all thrown out. Uh, they ran around, uh, basically keeping people out of hospital until they're on door desk doorstep. And then wondered why, you know, people were turning up. Uh, and taking their last breath. I mean, look at Judah Ailey.

Uh, the guy we interviewed from Melbourne that spent, uh, what was it? 45 uh, in intensive care, uh, might've been longer. I can't remember that, but I mean, they had him on every conceivable. Um, gadget, drug, therapy, they had him on lung bypass, heart bypass, I mean, just because of their incompetence. Oh, that's all you can say, I mean, it was just completely mismanaged.

Um, so, they didn't do any PCR testing, uh, you know, this, there was no, uh, uh, real Um, identification of whether this was COVID or, or, or the flu, what's this PCR test? I mean, they never spoke about that last night. I mean, these tests are flawed. So, I mean, it's all right for Professor Boyd to say all this stuff, but at the end of the day, it, it just comes back to poor management, uh, with the information they had.

They, they completely overreacted. And it costs lives. And now they're all in some panic to try and, uh, justify their own, uh, decision making processes. Well, sorry. Um, you know, this is the thing that I can't, uh, bear now. I mean, there's just no remorse from these people. They can't even accept that they've done the wrong thing.

I mean, this idiot boy, I mean, fading. I felt like, I felt like ringing him down the TV set.

But he was the one saying that the, the, uh, that, that, uh, the TGA needed more funding. If we had more funding, I bet it wasn't mentioned that 95 percent of TGA funding comes from Big Pharma.

That's right. That's a fact.

Yep. That's it. I know.

The facts don't go into that all they like, but that's true. Australia has the highest rate of Big Pharma funding of its therapeutic goods administration than any other country in the world.

And the thing that was alarming with this bloke, uh, was he's, he was really quick to throw AstraZeneca onto the bus.

Now, think of AstraZeneca what you like. I mean, I'd be of the view that it was probably the safest of the lot. Uh, the others are not turning out to be good products. Uh, now, he said that there was no risk in all this. That there was ten years of lead up that was, you know, making it safe and effective. But, he said, oh yes, well AstraZeneca, yes, well that was, that was, Uh, we knew that was bad.

We knew that was bad. Now we had the parents of a young girl that was deceased, uh, from the AstraZeneca, uh, and you could see that they were steering and channeling that, that, uh, narrative into that pathway to discredit AstraZeneca to try and, uh, take, you know, some of the impact away from the other vaccines, so called vaccines, uh, so they could keep going.

Um,

No, I mean, that that's very true. And I and I think that the reason for that is pretty clear. AstraZeneca has now been withdrawn, right? So there's no more profit to be made. So there's no there's no kind of pushback in the in the back rooms of media organizations anymore to preserve the image of AstraZeneca.

Whereas there is still that push for Pfizer. And of things I wanted to say about what you were saying before, John. First, in relation to the fear, I mean that, you're absolutely right. The fear was the propellant of so much of the nonsense that we got, both at the coal face and in the, you know, positions of authority.

And, and we still have people who are incredibly afraid, right? You still see people on the street today with, you know, masks on and, and some of them on their own.

I

mean, they've been psychologically scarred by what happened, right? And so that's one of the reasons that was the main reason I made that point initially about, you know, the, the, the first mistake we made after binning the pandemic management plans that we'd had in place that had distilled public health knowledge for decades is that we didn't tamp down the fear.

I mean, the only thing we have to fear is fear itself. That's, that's, you know, a truism for the ages. You just, you cannot make good decisions when you're possessed by fear. And when Michael Usher asked Anastasia, were you acting in fear? She basically said, yeah, everybody was afraid, right? Everybody was in a kind of state of, I'm not sure what to do.

That's, you know, recognize that, have some self awareness in the moment, right? I mean, how these people run their regular lives, I do not know. Because if you, if you make decisions in your own personal life, when you're possessed by that kind of extreme emotion, you're not going to get very good outcomes.

You know, we all have moments when we are. You know, incredibly scared or incredibly angry or incredibly something and we know that's not when you write an email, right? That's not when you pick up the phone and

call someone or that's not when you you know, lay it into your spouse You know, you just cool down you think about what's going on.

You try to be reflective Maybe you sleep on it and then you come back with a cooler head the next morning You got to do the same thing when you're making policy for a state for heaven's sake. Right. So, so that's the first thing I wanted to say that the fear was a really big part of what what wasn't addressed during this period.

And I think we would have had much better outcomes if we'd had a government that had the courage to address that fear early on. Secondly, in relation to this sort of lack of accountability. I think it goes hand in hand with the large bureaucracies and the excessive number of protocols because basically what happens when you have those bureaucracies and protocols is that they take the place of individual moral judgment.

They crowd out the need to make judgments for oneself. And so it creates this sort of cadre of essentially just monkeys. All right, rather than doctors or health professionals or anything, they're just monkeys who will follow a script because they don't need to use anything, really, that they learned in medical school.

All they have to be able to do is read the opera guidelines and apply it, right? It's sort of the mechanical process. That's a monkey's job. So we strip from individuals at the coalface, the opportunity and the. In some sense, the, the self actualization, the, the, the beauty of making their own decisions and being accountable for them, drawing on their own professional expertise, doing something that contributes to their society, making a positive change.

They don't have the capacity to make a positive change anymore. So, because all they can do is follow the protocol. So no wonder that there's this sort of rising sense of nihilism and that, that possesses people in the healthcare industry, right. And this sort of depression, kind of fatalism. I mean, I'd be, I'd be feeling that way too.

I mean, I'm so grateful to have the position that I have where I can just speak my mind because that, that is such a big part of being human. You know, part of what we sort of thrive in and flourish with is the ability to make a contribution that we feel is consistent with our virtues and our, our identity and all this and and to hope that we're doing it in the right way.

Right. But when you have this huge amount of bureaucracy, pushing down on you. You just don't have space to do that. And so that lack of accountability comes from that. And it infects not just the people at the coalface, but up at the higher levels as well. So you see the buck passing starts happening at every level where it can happen.

So, I mean, there's no, there's no place where the buck stops, but never stops. Buck is continually circulated. It's like the circular economy, right? The buck is constantly going around. You can never trace it. Um, and, and that is a bad equilibrium because then you get a whole bunch of basically. Um, actors in that space who do not need to ever be moral, all they need to be able to do is follow a protocol, or follow a script, or follow something that somebody else has written down, and that's very dangerous.

Another interesting comment from Professor Boy last night was, showed how relatively out of touch he was. He said Australia should be proud of its medical science community. We have two potential Nobel Prize winners. One of those is Professor Robert Clancy, who appeared on this program. Condemning the vaccines, condemning MRNA, and virtually demanding that the government stop pushing it until a thorough investigation is caught.

Now, Professor Boyd obviously doesn't know that Australia's leading, uh, infectious diseases expert, Professor Robert Clancy, bagged the vaccine on this program.

Yep. And I mean, I've, I've, uh, had several conversations with Dr. Clancy and he, I mean, he has this wonderful, um, research area of studying the way in which our immune system responds to particles that we swallow basically into the stomach.

And then there's a part of your stomach lining, which essentially triggers an immune response, triggers the production of, um, immune cells, which are customized to what you swallowed. Because, you know, things go into our nose all the time, and then we swallow these things, and then that is what prompts the immune system to produce these elements, T cells or, or something like this.

And then they get sent to the lungs, so that they protect the lungs, right? I mean, what a beautiful system. This is the other thing, you know, I mean, the, the, the most powerful ally and asset we have in fighting disease is the human body, right? We are amazing. I mean, the, What we have in our body to fight disease and keep us healthy is unbelievable, but it never gets promoted.

In fact, it was denigrated outright during COVID by people saying that natural immunity was sort of somehow inferior to vaccine produced immunity. When has that ever been true? It's just never true. So, I mean, it's, it's almost a, just a complete sort of sucking up of people's knowledge and just, spitting it out through the window and just feeding them something else instead.

And the fact that people would just take this and then write whole narratives around it and justify the decisions they made based on it is, it has been a sight to behold as a social scientist. How much we have forgotten of what we used to know and how much we have ignored of the, the major assets that we have, including our courage, our compassion for each other, our moral integrity, and our bodily nature and our ability to fight disease naturally.

I want to illustrate something, John, and I need your help to do this. Um, I want us to, to, um, go back through our mind, through our memory and name some of the, uh, doctors and specialists and scientists we've interviewed. Now, we had Dr. Tess Lorry just recently, Peter McCullough, Robert Malone. Uh, we've had, um, Professor Harvey Reich from Harvard, Harvard University.

Go on, John, who else have we had? Uh, Pierre Corey. Thank you. Dr. Pierre Corey, Ted Steele, Dr. Phillip Altman, Dr. Phillip Altman, cardiologist Dr. Chris Neal, Professor Angus Dalgleish, the uh, the uh, the doyen of oncology from St. George's Hospital Teaching Hospital in London, Dr. Luke McClendon, Dr. Luke McClendon, Dr.

Duncan Syme, Dr. Jayanthi Kunadarsan, Dr. Julie Sladden.

Who else? Uh, there was a doctor from the UK that was, uh, uh, working as a medical, uh, specialist on helicopters in Australia. And she was an army, um, intensive care doctor. Dr.

Mel McCann as well. Now, there is a whole bunch of others that we, I've forgotten to mention.

Please forgive me if you're watching and you're a neurologist in Queensland. Uh, Richardson was it? Yep. Uh, the reason I mentioned all those names is that I had an email today or recently from our one and only Dr. Daniel Ninio, an audiologist from Melbourne, who told me that we have a moral responsibility to interview him because we're spreading misinformation.

He said that every doctor we've had on our program is cooked. Every doctor we've had on our program is cooked. They're crazy. Now, do we need to write down that list again? Oh, Professor Robert Clancy. That's another one. Now, according to you, Dr. Daniel Ninio, they're all cooked. And you're wondering why we're not inviting you onto the program, my friend, give it up.

You know, I would love, I have to say, Hoodie, I would love to see a mainstream doctor interviewed by you on your show. Because the thing about you, you got, you guys are very unique. You're very respectful. You are incredibly compassionate and you're informed. And, and you're not pushing a particular ideological agenda, you're just looking for the truth and you're looking for justice for the Australian people.

And you haven't done so many interviews that you know so much about this situation. I think you would completely outclass him and outflank him. But in some sense, in, uh, in a gesture of, I suppose, goodwill

towards, uh, you know, people who may disagree with the, the supposed team sanity view on these things, you could consider it.

Well, we, we have considered Dr. Ninio's, uh, often, uh, requests to be on the program, but it goes hand in hand with a bunch of other things, which we won't go into, but we've been approaching Dr. Nick Coatsworth. To come on.

Very good.

And we, we have been texting him and John's had some replies from him. I haven't, but we would, we would love to interview a credible, a credible mainstream, uh, doctor to come on and talk about these issues.

And I would love to have a panel where we had. Professor Angus Dalgleish, where we had Professor Harvey Reich from Harvard University and some of these others with a panel of doctors who have a different perspective. I would love to see that. And you know what, Gigi, wouldn't the country benefit if the government called a panel like that to discuss this in a proper debrief scenario?

Absolutely. And I mean, we always can hold out hope that eventually when there is enough political will to actually examine what happened, which probably means a lot of the politicians who were in charge have to retire, that we actually get that. We get, uh, you know, proper, objective, independent analysis with different views being represented.

That is essentially what some of the organizations in the community are now trying to do. I mean, I think I've spoken to you before about the Brisbane Dialogues organization, which is just. Doing exactly that on big social issues. Why can't we do that in the public sector? Why, why can't the, you know, the department of health have a, a sort of public forum, you know, in which they, they, and they can organize different people to represent different kinds of views and then have a public audience.

And if they're, if they're putting in place policy that's vetted and approved of in some sense by a wide range of different experts, then it's much more likely to be the right policy than just one, you know, a narrow minded policy. You know, particular health professionals view who happens to be the head of the department that year.

You know, I mean, this notion that somehow you can get the best result by going to one person and and or making sure that what you are doing is consistent with the narrative that's been promulgated on the mainstream. I mean, that's the opposite of health. That's the opposite of robustness. Robustness is when you have a diversity of viewpoints represented in a discussion and everybody in that discussion can agree that a particular policy is probably a good idea.

We had that. In one of the discussions that was held by the Brisbane Dialogues on Universal Basic Income a few years ago, we had people who were totally against UBI, people who were totally pro it, and everybody in between. And at the end of that conversation, which was a very respectful conversation, held in public in the Princess Theatre up in Wollongaba in Queensland, we could all agree that one particular policy, negative income tax, was a Pretty good idea.

So, you know, that's, that's, that process seems like a viable one, to me at least, in determining, particularly when you have a little bit of time, determining what kind of policy is likely to be good for Australia. You could imagine that happening in the areas that are contentious today, like housing policy, or immigration, or energy policy, right?

Why don't we have these conversations? Because there are there are other objectives flying around in the in the back rooms that are motivating the actions of government apart from actually discovering the optimal policy to serve the Australian people.

Well, Dr. Sanjeev on that, uh, on that panel that you were on last night, summed it all up pretty well when he said the WHO is looking to, you know, get rid of misinformation because How can you be a scientist and, and, and, and be, and conduct research and rely on research your whole career when you expect that anyone with a different viewpoint is seen as a misinformer and must be cancelled?

That's not science.

No, of course not. Of course not. It's dogma. And I mean, if you were to have that conversation with him, he would, he would try to avoid, I mean, I've, I've tried this, not with him personally, but with so many people who, you know, whom I've encountered over the years, including some members of my own family, uh, extended family, thank goodness.

Um, who just, I mean, I had one cousin. Um, back in 2021, uh, mid 2021, who is a nurse and she recommended on email to the entire family. She lives in Philadelphia. She's, you know, first cousin. She said the mRNA vaccines are completely safe to my entire extended family, including my 93 year old father. her children, her grandchildren, right?

I mean, everybody. And I mean, my heart just sank because this woman has been responsible for informal health advice for the whole family for years, right? I mean, as, as happens in families, right? There's kind of a go to person, you know, if you, if anybody's got medical training, you kind of ask them and she's been very useful in the past for some of our families, you know, issues, but on this, I just thought, You know, Sally, no, no, no, because that's the moment when they commit to the narrative themselves personally.

And it becomes, it's just like the claw gets into you, into your identity, into your ego. And then it just becomes embedded and it's very difficult to extract it. And to this day, she and I don't talk about these issues because she'll just make stuff up. You know, I mean, if I challenge it, she'll either just try to ignore completely or she'll trot out some mainstream, you know, stuff.

Stupid stuff, some sort of furphy that she's heard on the, in, you know, some peer reviewed journal article, which she hasn't fully read because doing that would, you know, with a proper critical mind would show her where the flaws are in the analysis. And so, you know, we just can't talk anymore. So that psychological barrier, it's, it is not to be underestimated and we need to discover ways to help people through that.

In the, in the resistance, we have to discover those ways because there aren't very many people working on that right now. Um, and, and we need more psychologists, people with compassion, people who are good communicators, uh, to, to try to figure out how to reach these people and help them.

Yeah, I thought it was interesting last night too, Gigi, that there was a lot of build up.

Uh, to the debate last night about mandates, but there was very little spoken about, uh, during the program. In fact, I don't know if it was even mentioned really. I mean, there might have been a bit of a subtle, uh, inference to it, but, uh, generally there was no debate about it. I mean, it should have been really one of the topics spoken about.

Yeah, no, for sure. And as I recall, we did have a small discussion about it. Um, I can remember using the word offensive at some point, which of course got cut. And I think it was around the mandates. Um, and, and I, I think one of the reasons why they were playing it as a thing that was going to be discussed was also that Michael Usher was Even though he was, you know, pretty lost on the whole vaccines are effective and all that sort of thing and, um, and a few other aspects, he didn't like the violation of the human rights, the lockdowns represented.

And so I suspect he also kind of didn't like the mandates, at least part of them, maybe, um, as much as he, you know, believed in the vaccines. He also kind of saw the human rights violations that the mandates on the



lockdowns represented. And so perhaps, you know, he was kind of planning to ask more about that or they'd set the, you know, they'd sort of had the sketch in their heads of how this would go, that would cover more of that.

And certainly when I had the conversation with the, uh, the producer, I had a couple conversations before the recording happened. We covered the waterfront of stuff. I mean, it was, I think I had a 45 minute conversation with her one time. Um, and we just went through all the different angles and aspects and then you could, you know, she was writing all sorts of notes and, you know, of course, you know, 95 percent of that didn't get covered, but there was definitely a plan, I think, in her head to cover more.

And there's just no way you can. 45 minute program on primetime television, you can't do a complete comprehensive COVID policy retrospective. There's no way. So if we've learned anything from the show, hopefully it's that, We need more time, we need more depth, we need more exploration of these different issues and more angles and more, more viewpoints represented in order to really get to the bottom of it.

Because that was not a, you know, that was not a situation where you felt you had closure at the end. What you felt you had was a bunch of talking heads who were being antagonized by the audience and a moderator who was trying to hold it all together without things boiling over. Right. That's, that's not closure.

That's not peace. You know, that's friction and continued strife and people not feeling heard and, and, and a lack of full, um, putting on the table of the pain and acknowledgement and apologies. And the absence of apologies came up many times. It came up with respect to that guy from, uh, the, in the lockdown protest, the red budgie smuggler guy, it came up with respect to the parents of that poor girl who died, the lady who died from the vaccine.

Does that. AstraZeneca, um, I think it came up with at least one other audience member. They want apologies, they want recognition, they want acknowledgement that, that these were mistakes and that, and nobody will take that, that kind of accountability. Again, total lack of courage amongst people in authority.

And even, um, uh, Karen Phelps, she acknowledged that the, the, the, The representation of those injured, uh, just isn't happening, uh, at a government level. People are being missed. People aren't reporting. And people were, who initially went to hospital were not given a diagnosis of a vaccine injury because it was obviously not, not, uh, uh, Not the not the damn thing at the time, was it?

I mean, it was not

only yeah, not only that, but once it became, um, sort of a possible thing to do to indicate that it was a vaccine injury, there are only certain categories of injury that you are allowed to take, right? And again, this is a function of the bureaucratic sclerosis is, you know, people have reactions in real time.

And the fact that you don't have it, Nominated on your form as a thing that could be possible doesn't mean it doesn't exist. It just means that at the time the form was written, you didn't think it existed. Right? So you're, you're disallowing by the very existence of that stupid form, you're disallowing the discovery of scientific information, right?

Which is, oh, maybe the vaccine can also cause this thing, right? And it slows down the process of, of actually discovering what's going on in a particular area, in this case, in terms of what can actually happen to people when they have these vaccines. Um, and of course, then it also sets up this bad guy persona for anybody who pushes against that form, which is nuts, you know, that that guy is not the bad guy, he's just giving you new information that should cause you to revise that stupid form, the form is the bad guy, and the process that delivers us this this form that must be filled out.

And if it's not filled out properly, then we can't get, you know, Any progress or any traction with the agencies that are supposedly set up to help people who've been injured. That's the problem. Not the person bringing you

new information. That person should be valued. That's helping us, right? So it's just, it turns everything on its head to have these, these bureaucratic systems.

So that's why, again, I, I tried to make that point at the end, my main point, because of all the things one could say, Okay. I thought, first of all, that's something that's that's broadly applicable across many different angles of the COVID policy disaster. This notion of too much bureaucracy, people, elites being out of touch with the needs of the real people.

And secondly, it, if people thought about it, my hope was they would see, uh, maybe that explanation is part of why I've heard what I've heard on this panel today. Why all these things that these doctors and, and Anastasia and even the moderator have said, and, you know, why all that stuff is, is different from what this other woman says and what the audience is saying, why there's this divide.

Maybe because there's just sort of too much bureaucracy that's feeding these mainstream people propaganda all the time. So maybe they would be able in some sense to recognize that maybe they should Really think twice about the veracity of everything they had heard that night from these panelists.

That was my hope. I mean, God knows if it'll happen, but, but you know, that's why I chose that thing to say.

And interestingly too, there was a lady there that made a very good point about the, the people that are not vaccinated and whether they're presenting to hospital with, with the symptoms. And Professor Boyer was very quick to say, well, we've done studies.

I mean, so, uh, Where are

they? It's just nuts. I mean, what's happened? I can tell you, because I teach about this in my, in my first year economics class. As an example of externalities, I use the COVID vaccines because we were all urged to get them because there was apparently a positive externality. But then if you looked at the New South Wales health data that they were publishing for a little while, that broke out hospitalization and death by vaccination status, one dose, two dose, three dose, four dose, no dose.

you could see that it was the more highly vaccinated who were being hospitalized more, right, and dying more sometimes. And so, you know, I sort of show them the graphs without the ability to read the legend first, and then I show them with the legend and they go, that's the opposite of what we were, you know, led to believe.

But the New South Wales Health Department stopped publishing those data. How convenient. So again, we just didn't have the time to get into these things. We didn't have the space and, and really at the end of the day, no matter what data somebody trots out, you can always cherry pick your data, your statistics, right?

Lies, damn lies and statistics, right? That's like the first thing that we were told in, in grad school, right? You can always lie with statistics. What, what will win this conversation, this, this discussion about COVID policy for truth and for justice is not, you know, one person's expert winning against somebody else's expert, but just common sense and compassion and courage to sort of assess at a basic instinctive level of whether what was done seems like a reasonable thing overall, and it's a motive often.

Our sense of whether something is right or wrong is often a motive. Um, and I think that's why the Channel 7 people had some of the more emotive stories in there, like the AstraZeneca, uh, vaccine injured and, and died person. And then the, also the nurse who had to take a different job. Those are, you know, tearjerker stories.

That's how you get people's attention about the possibility that maybe some of these policy decisions were wrong. And so that's, I mean, it is a bit emotionally manipulative, but at the end of the day, it's pretty effective.

Yeah, the cornerstone of, of the whole disaster that we've lived through the last four years and we, we're going to continue to live through, there's no doubt about it, is the total lack of, uh, any regard to, uh, voluntary informed consent.

And that didn't even write a mention last night.

Yeah, I know. Again, that's something that we should have had, you know, I mean, you could easily talk for hours about that and not just about free and informed consent in relation to the jabs, but so many other policies that were happening. I mean, the lockdowns were basically pushed as a health policy.

So that's mass medical experimentation without consent because that didn't pass parliament. So there's no, there's no consent there. Right. And certainly the individuals weren't consenting through any mechanism then. So, you know, there's so many ways in which consent was violated. And, and now of course, uh, as well, like you still don't have consent to many of the ways in which the bureaucracies are trying to cover up what happened or, you know, You know, figure out whether they should pursue this that or the other kind of, you know, strategy for dealing with the health effects or whatever.

There's, there's no real Recognition or bringing into the conversation of the person on the street. So there's kind of a disrespect for the individual facing the consequences of the bureaucracy's actions that persists today. And also in our legal system. Right. I mean, I don't know if you've been following the the GMO case that Julian Gillespie is trying to run right.

I mean that the misbehavior of that judge that you know who didn't declare conflicts of interest and just brazen brazen misbehavior still not been called out as it should have been. So again, just a complete disregard for The, the viewpoints and the needs and the sort of the, even just the pillars of our society, um, that, that is in part, I think, a consequence of power abuse and getting too comfortable.

People in power sometimes can get really comfortable and that can be their downfall. So. I don't know. I'm still very hopeful. I mean, I'm a naturally hopeful person. And I do think that there is absolutely no way that we're not winning this, that the history doesn't come down on the side that we have been arguing for years.

But as you say, Hudi, I mean, it's going to be a multi year, uh, uh, endeavor. It's a marathon. Just like the marathon I ran a couple of weeks ago, you know, when I went over to Western Australia, I ran the Rottneest Marathon. And I was thinking during this, yep, This is basically what it feels like to be in the trenches with the COVID policy wars and it was it bucketed down rain for about 45 minutes during that race, and it was a hilly course, and it was not pleasant but you know I made it and it was it's a good experience to do that and I think more of our public servants should maybe expose themselves to some of that kind of real, you know, difficult situations where they have to show grit and courage and determination to get through and maybe, maybe that would help them be a little more moral.

Instead of exposing themselves in the way that our, uh, former, uh, senior analyst and advisor for the defense department did John,

what could

possibly

go wrong if we take this JJ, because you've been talking with Russell Broadbent, you've been on screen for hours now, you know what it's like being on cloud robbery. Um, we, uh, we're just so grateful that you came back on so quickly. I want to congratulate you on, on, on your courage for standing in that panel alone, pretty much last night.

And, uh, you didn't, you didn't disappoint. You were just amazing and you continue to be amazing. We just love having you on.

Well, thank you so much, Hudi. It's a great pleasure to be on and I'm, I'm full of admiration for what you and John do as well.

Thank you so much. We better close it with a prayer, shall we?

Father in heaven, we thank you for courage. We thank you for grace and mercy. We thank you for wisdom. And all those things are embodied in our guest tonight. We thank you, Lord, that she is in heaven. In her convictions and won't back down. And that's what we need because too many people are altered and persuaded to go in directions that aren't good for us.

We know now that when we are coerced, bullied, and bribed, that whoever's doing that is not acting in our best interest. So father, we ask you to keep us straight, keep us updated and keep us aware of the trips, of the, of the tricks and tricks. Sorry, the tricks and the speed bumps that are put out in front of us to have us trip over.

May you guide and lead everything that we do, say and feel, in Jesus name we pray. Amen.

Thank you.

Johnny, you've

often been heard to say, you just couldn't make this stuff up when you certainly, uh, couldn't, could you? I mean, uh, they certainly cut out a lot of what Gigi said, but, uh, body language tells a very different story, doesn't it?

Oh yeah. Yes. I, uh, that eye roll. Boy, oh boy. I don't miss it. 20 years without it. I don't miss it. Michelle doesn't do that to me unless she's joking with me. But, um, it was classic stuff. Classic Gigi Foster last night. Thank you so much to all of you, our viewers. Um, if you love somebody and you haven't told them, give them a call and tell them it may just save their life.

And what you did yesterday, got you to today. This country is beautiful because you live in it. God bless you all. Stay strong. Hold the line, as Tony Nikolic says all the time. And as Johnny always says, you couldn't make this stuff up. Stay out of the trees and bye for now.