

HB699

Favorable with Amendment

Phoebe Liou

44 Prospect Hill Road,
Windsor, CT 06095

This is a written testimony Favorable with Amendment to bill HB699. My name is Phoebe Liou and at the age of 16, I was accepted to the University of Connecticut (UConn) to study Biological Sciences on the pre-med/pre-dental track. During my freshman year, I was a 2021 Babbidge Scholar (representing top 5% of my entire college), a Mortensen Scholar, twice on the Dean's List, an Honors Program student, a Technology Incubation Program Research Fellow, a Werth Innovator, and part of the American Association of Neurosurgery Student Chapter. Due to the Covid-19 mandates, \$23,000 of the merit scholarships I earned were canceled, I was refused class registration, and forcibly separated from the university I loved.

When the COVID-19 vaccine was mandated, it caused me great psychological distress to accept such a novel treatment permanently into my body and neither my family nor I were in the risk group for Covid-19. In fact, UConn Fall 2021 Covid-19 dashboards reported a 0.00387% positivity rate on my campus. I was also a student with disabilities, so I requested an exemption on the basis of my clinical diagnosis' and was granted one stating "Surveillance testing recommended" on August 13, 2021 [Exhibit A]. On September 17, 2021, Covid-19 testing was made mandatory for unvaccinated students. The testing time conflicted with my class, so I was unable to make testing to keep my grades and my merit scholarships. But in the middle of my third semester, my University threatened to restrict my education and cancel my scholarships [Exhibit B-D]. I was just 17 years old. In sexual abuse cases, this would be concered corercion.

Without my consent, I was subjected to the search and seizure of my genetic information at the cost of losing my education. This led me to panicking and getting 2 of the tests provided by UConn on November 10 and November 17, 2021. The testing package had printed, "Innovative DNA Collection Devices. For research use only. Not for use in diagnostic procedures". [Exhibit E]. Because Covid-19 testing was not required in the exemption I was granted and it was an Emergency Use Authorization product, and because I have sincere beliefs, disabilities, and multiple concerns for the usage and privacy of my genetic information – I did not take it. I was taught and believe that my body is a temple of the Holy Spirit and I have the responsibility to protect it. I will not be used for medical experimentation. Yet, my college failed to respect my bodily autonomy, clinical disabilities, and religious beliefs.

I requested a Covid-19 testing exemption on the same basis as the vaccine, both Emergency Use Authorization products. I wrote letters to the administration from Student Health and Wellness, to the Provost, to speaking before the Board of Trustees and President twice, yet nobody could relieve me of my concerns. In fact, my last letter to the Executive Director of Student Health and Wellness was met with silence.

I felt degraded and presumptively treated as diseased, like a leper. I struggled with my mental health, on top of trying to get an accommodation to stay in school, on top of maintaining my grades and honors classes (which were all A's). I felt like I had a blinking red sign on my forehead that said, "Dirty, Contaminated, Unvaccinated". I felt so ashamed to be different. My anxiety was debilitating and I was having daily mental breakdowns. I was crying in front of my mother, it was getting close to finals, and this situation stole my focus on coursework. I contemplated the suicide hotline often. But my school did not care, and my fate was sealed.

On January 28th, 2022, I was "canceled from the University". On January 31st, 2022, \$23,000 of the merit scholarships I earned were officially canceled.

My school's motto is "Students First" and UConn was committed to values of diversity, inclusion, equal opportunities, and freedom of academic inquiry and expression. Yet I was not welcomed or included. I was forced to leave because I have disabilities and sincerely held beliefs.

As research has shown, subjecting only exempted individuals to Covid-19 testing is discriminatory because it is not based on scientific rationale. The CDC and CDC's MMWR data has confirmed that both the vaccinated and unvaccinated are at equal risk of contracting COVID-19 due to "[similarly high SARS-CoV-2 viral loads in vaccinated and unvaccinated people](#)". A MedRxiv study discovered that "[Vaccinated and unvaccinated individuals have similar viral loads](#)".

In fact, the FDA stated that they have no data on "[how long the vaccine will provide protection, nor is there evidence that the vaccine prevents transmission of SARS-CoV-2 from person to person](#)". The [NY State \(NYS\) Supreme Court deemed the NYS Dept. of Health's Covid-19 vaccine mandate for healthcare workers is "null, void, and of no effect" and "arbitrary and capricious"](#) as Covid-19 vaccines do not stop transmission, vitiating any rational basis for a mandate.

However, it's now known that Covid-19 vaccines do not merely prevent transmission, but they also may cause serious risk and injury. A risk-benefit article in the British Medical Journal also found that "[Booster mandates in young adults are expected to cause a net harm: per COVID-19 hospitalisation prevented, we anticipate at least 18.5 serious adverse events from mRNA vaccines](#)" [Exhibit F]. The [FDA reports 22 categories of adverse events](#), including myocarditis, seizures, strokes, and death [Exhibit G]. [Pfizer's safety analysis data](#) shows 42,086 case reports within 90 days between December 2020-February 2021, with 1223 fatalities. This [autopsy](#) [Exhibit H] of two teen boys from my state and this [autopsy](#) [Exhibit I] show that these are not quack studies, they demonstrate that these adverse events are real risks of the Covid-19 vaccine.

In fact, my friend [Cody Hudson](#) who is suffering from vaccine-induced pulmonary embolism took a Covid nucleocapsid test proving he had no natural Covid exposure prior injury. Medical tests showed repeated, off-the-charts, anti-cardio lipin panels, a sign that he developed antiphospholipid syndrome and anti-PEG antibodies, both components of the Pfizer mRNA lipid

shell. He used to run 5 miles a day. Now he walks with a cane and lives in pain daily. If his college mandated vaccines and boosters, he would have to leave and stop pursuing his dreams. [Exhibit J]

Due to Covid-19 vaccines and testing mandates at my college, I was forced to leave because I have disabilities and sincerely held beliefs. I was not allowed to take online classes and separated from my University, along with \$23,000 of merit scholarships being canceled. I experienced loss of academic progress, opportunities, and scholarships that would have helped me flourish as a young individual. I was not welcomed or included despite a positivity rate of 0.00387% on my campus. I sought help from a counselor after my school stopped providing me with mental health care. This segregation caused me immense psychological distress, relapses on my clinical disorders previously in partial remission, reuptake of medication, suicidal ideation, and I have had to meet weekly with my counselor for a year, even after being forced to leave my school. I felt like I had no future to live for anymore and I constantly prayed for God to give me strength to fight the voices in my head telling me I am worthless, a failure, and better off gone from this earth.

I wish that no other college student suffers what Cody and I have suffered, whether physically or psychologically, whether from vaccine injury or from discrimination. And since we now know that both vaccinated and unvaccinated individuals are at equal risk of contracting Covid-19, the Covid-19 vaccines do not prevent transmission and may inflict serious risk, [college mandates should be reassessed](#) based on updated Omicron-era data to prevent unnecessary suffering. Unfortunately, I am not the only student who has unnecessarily suffered due to mandates and thus, my testimony is Favorable with Amendment to bill HB699. I wish for more transparency on the risk and benefit of mandates. I wish for the freedom to make a choice for our body without being deprived of our education, our happiness, or our livelihoods.

Exhibit A



Phoebe Liou <phoebe.liou@uconn.edu>

Non-Medical COVID-19 Vaccination Exemption

1 message

DOS - Dean of Students <deanofstudents@uconn.edu>
To: "Liou, Phoebe" <phoebe.liou@uconn.edu>

Fri, Aug 13, 2021 at 9:51 AM

Dear Phoebe Liou:

You have been granted a non-medical COVID-19 vaccination exemption.

Individuals who are not fully vaccinated against the SARS-CoV-2 virus are at increased risk of contracting and transmitting COVID-19. The following preventive measures are required to reduce this risk:

- Pre-arrival testing 3-5 days prior to arrival on campus (student responsibility)
 - Upload your test results at myhealth.uconn.edu.
- **Modified quarantine** for the 7 days after arrival of your on campus presence with repeat testing recommended, but not required, on day 5-7
- Wearing masks or face coverings in all indoor settings
- **Surveillance testing recommended.** Any positive results should be immediately shared with your medical provider.
- Medical quarantine after contact with a suspected or confirmed case of COVID-19
- Isolation for presumed or confirmed cases of COVID-19

In the case of an outbreak of COVID-19 on any of our campuses, individuals who are not vaccinated against the SARS-CoV-2 virus may be excluded from the affected campus until the outbreak is declared over.

These preventive measures are necessary to protect individuals who are unvaccinated and the larger UConn community.

Sincerely,

Eleanor JB Daugherty, Ed.D.

Associate VP for Student Affairs & Dean of Students

Exhibit B

Hold Details ×

Enrollment Restricted

Reason Required COVID-19 Vaccination

You currently have a Covid related hold which is preventing you from accessing the Student Administration system. Please reach out to your respective campuses COVID testing team for information on how to remove your hold.

Avery Point: avptcovidtesting@uconn.edu
Hartford: Hartford.business_ops@uconn.edu
Stamford: StamfordCOVIDtesting@uconn.edu
Waterbury: Waterbury.COVIDtesting@uconn.edu

Exhibit C



Phoebe Liou <phoebe.liou@uconn.edu>

UConn Hartford - Non-Compliant Testing

2 messages

HTFD - Business Operations <hartford.Business_Ops@uconn.edu>
To: HTFD - Business Operations <hartford.Business_Ops@uconn.edu>

Thu, Oct 21, 2021 at 4:14 PM

As a student who was approved for a vaccine exemption, you have committed to complying with preventative measures deemed necessary by the University to keep your learning community healthy and safe. As an active participant in our community, these preventative measures include participation in **weekly** surveillance testing.

Students who are not in compliance with their surveillance testing will have an administrative hold placed on their account, following three missed tests. The administrative hold will prevent students from registering for courses for the spring 2022 semester.

Exhibit D



Award Year: 2021-2022

Student ID: [REDACTED]

January 3, 2022

Dear Phoebe,

Your financial aid cannot be credited (disbursed) to your UConn student account because you have not registered for classes. If you plan to enroll for the Spring 2022 semester, please do so on or before January 31, 2022. Otherwise, your financial aid for the Spring semester must be cancelled.

If there are university administrative circumstances preventing you from completing your registration on or before January 31, 2022, please contact our office immediately so that we may assist.

If you have any questions, please contact the Office of Student Financial Aid Services. A member of the Client Services staff will assist you.

Exhibit E

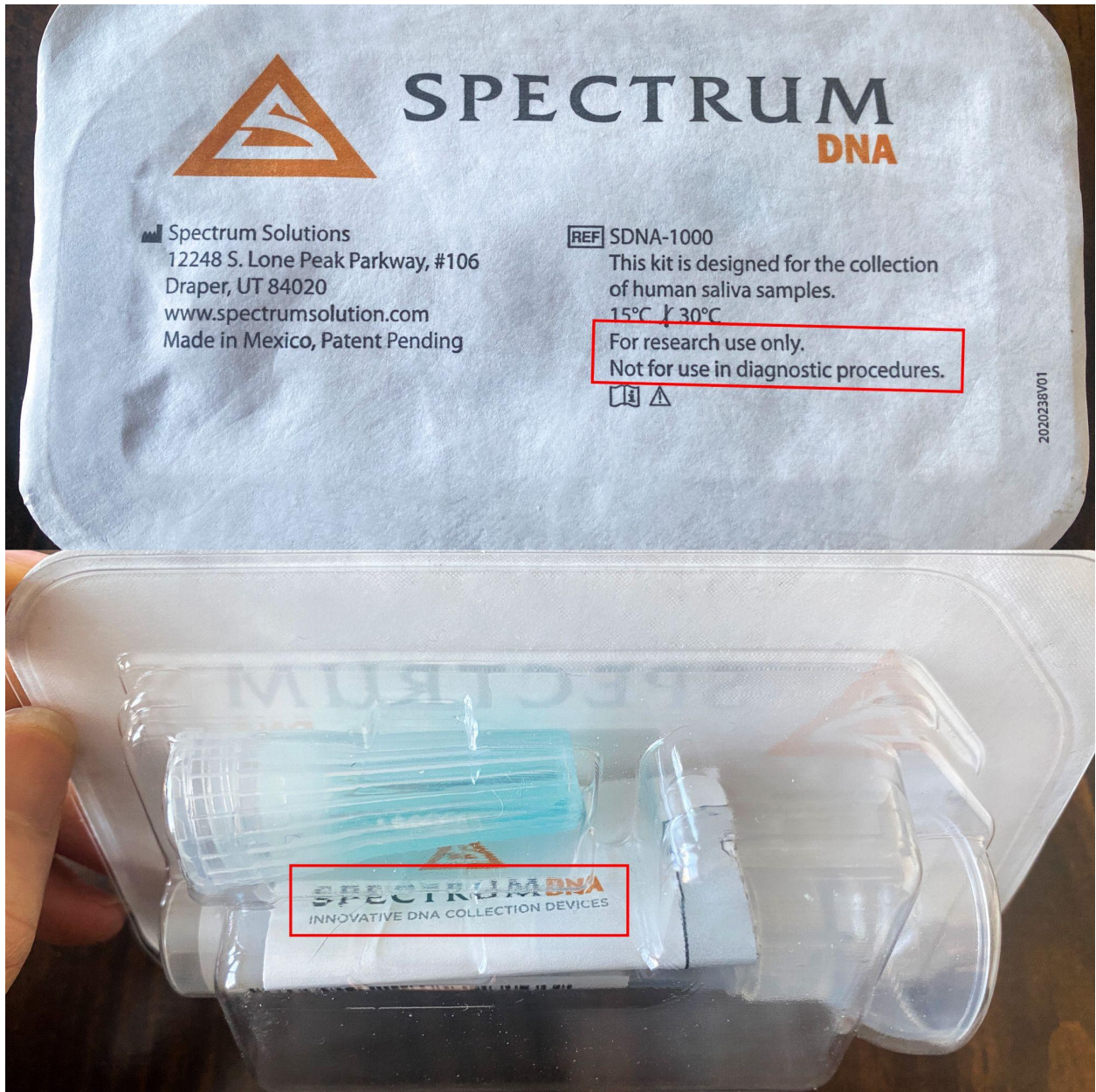


Exhibit F

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Extended essay

COVID-19 vaccine boosters for young adults: a risk benefit assessment and ethical analysis of mandate policies at universities

Kevin Bardosh^{1, 2}, Allison Krug³, Euzebiusz Jamrozik⁴, Trudo Lemmens⁵, Salmaan Keshavjee⁶, Vinay Prasad⁷, Marty A Makary⁸, Stefan Baral⁹, Tracy Beth Høeg^{10, 11}

Correspondence to Dr Euzebiusz Jamrozik, University of Oxford Wellcome Centre for Ethics and Humanities, Oxford, OX3 7LF, UK; euzebiusz.jamrozik@ethox.ox.ac.uk

PDF

Abstract

In 2022, students at North American universities with third-dose COVID-19 vaccine mandates risk disenrolment if unvaccinated. To assess the appropriateness of booster mandates in this age group, we combine empirical risk-benefit assessment and ethical analysis. To prevent one COVID-19 hospitalisation over a 6-month period, we estimate that 31 207–42 836 young adults aged 18–29 years must receive a third mRNA vaccine. **Booster mandates in young adults are expected to cause a net harm: per COVID-19 hospitalisation prevented, we anticipate at least 18.5 serious adverse events from mRNA vaccines, including 1.5–4.6 booster-associated myopericarditis cases in males (typically requiring hospitalisation).** We also anticipate 1430–4626 cases of grade ≥ 3 reactogenicity interfering with daily activities (although typically not requiring hospitalisation). University booster mandates are unethical because they: (1) are not based on an updated (Omicron era) stratified risk-benefit assessment for this age group; (2) may result in a net harm to healthy young adults; (3) are not proportionate: expected harms are not outweighed by public health benefits given modest and transient effectiveness of vaccines against transmission; (4) violate the reciprocity principle because serious vaccine-related harms are not reliably compensated due to gaps in vaccine injury schemes; and (5) may result in wider social harms. We consider counterarguments including efforts to increase safety on campus but find these are fraught with

Exhibit G

FDA Safety Surveillance of COVID-19 Vaccines : DRAFT Working list of possible adverse event outcomes ***Subject to change***



- Guillain-Barré syndrome
- Acute disseminated encephalomyelitis
- Transverse myelitis
- Encephalitis/myelitis/encephalomyelitis/meningoencephalitis/meningitis/encephalopathy
- Convulsions/seizures
- Stroke
- Narcolepsy and cataplexy
- Anaphylaxis
- Acute myocardial infarction
- Myocarditis/pericarditis
- Autoimmune disease
- Deaths
- Pregnancy and birth outcomes
- Other acute demyelinating diseases
- Non-anaphylactic allergic reactions
- Thrombocytopenia
- Disseminated intravascular coagulation
- Venous thromboembolism
- Arthritis and arthralgia/joint pain
- Kawasaki disease
- Multisystem Inflammatory Syndrome in Children
- Vaccine enhanced disease

[Case Reports](#) > [Arch Pathol Lab Med.](#) 2022 Aug 1;146(8):925-929.

doi: 10.5858/arpa.2021-0435-SA.

Autopsy Histopathologic Cardiac Findings in 2 Adolescents Following the Second COVID-19 Vaccine Dose

[James R Gill](#) ^{1 2}, [Randy Tashjian](#) ^{3 4}, [Emily Duncanson](#) ⁵

Affiliations + expand

PMID: 35157759 DOI: [10.5858/arpa.2021-0435-SA](#)

Free article

Exhibit I

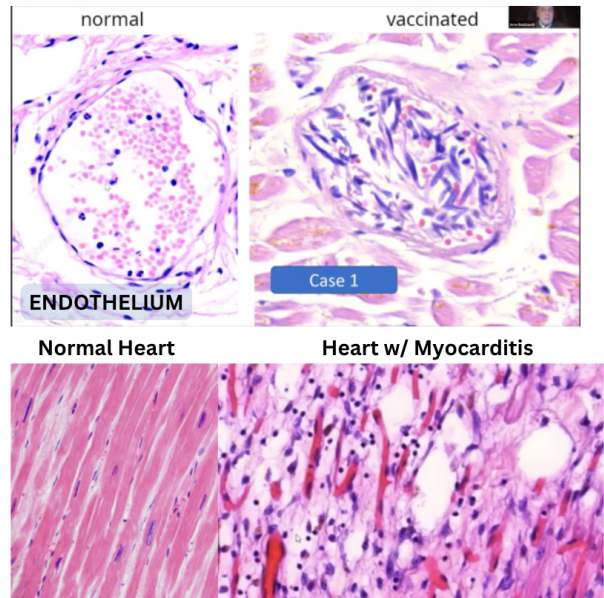
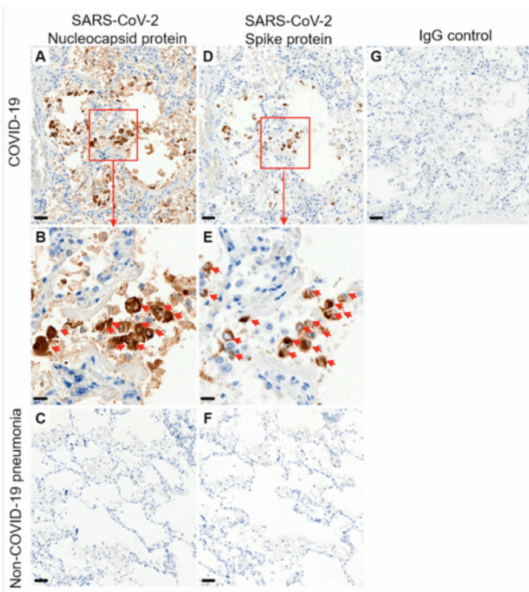


Exhibit J

I felt that I was near the end when my mother found Dr. Balbona. He took me on as a patient and spared no time ordering me lab work, including a covid nucleocapsid test that proved I had no natural covid exposure. What had happened to me did not come from covid.

In fact, I had no underlying health problems. I ran 5 miles a day before I was hospitalized in October. We proved it wasn't the virus. We proved it wasn't from poor health. So, we looked for evidence that it came from the vaccine. Repeated, off-the-charts anti-cardio lipin panels showed that I had developed antiphospholipid syndrome and anti-PEG antibodies, (Phospholipids and PEG are both components of the lipid shell in the Pfizer mRNA Vaccine) a reaction that we correlated with the covid mRNA vaccine.

I had never been tested for lipid reactions, nor have I had a reaction to another vaccine. Further still, there were no warnings about the possibility of lipid allergies for those receiving the vaccine at that time. We lacked informed consent.