



SELECT SUBCOMMITTEE ON THE
CORONAVIRUS PANDEMIC
— CHAIRMAN BRAD WENSTRUP —

March 21, 2024

“Assessing America’s Vaccine Safety Systems Part 2”

Chairman Remarks

Closing Statement

The purpose of today’s hearing was to have a frank discussion to examine vaccine safety reporting and injury compensation systems.

I want to thank our witnesses that came here today to testify.

Like Dr. Gentry testified today, words matter— which is why we should be thoughtful when we talk about vaccines and even more careful when we implement vaccine mandates.

As I’ve said many times, not all vaccines are the same. We on this Select Subcommittee are specifically focused today on the COVID-19 vaccine and how it is different than other vaccines many of us received as kids.

Because the current Administration implemented this novel vaccine, without any long-term studies available, without regard for previous infection, and without regard for personal medical history.

And I am glad to see that we have bipartisan agreement that we need to examine what we did during the pandemic and to see what we could do better going forward.

This afternoon, we were able to find bipartisan consensus that we need to improve our current safety reporting and injury compensation

systems. Both CICP and VICP need to be modernized, changed, and properly resourced.

Because we know that vaccine injuries did occur, and victims struggled to receive compensation or even recognition.

And many are still attempting to navigate an inefficient process to receive their judgment and have been fighting for far too long.

We know that the current Administration mandated the COVID-19 vaccine without sufficient systems in place to identify vaccine injuries or report them.

And as we heard today, patient safety was jeopardized by our current vaccine safety systems because they did not properly or accurately identify injuries or follow-up on serious reports made by physicians.

We must do better going forward and improve these systems so that victims are heard. So that victims can be identified. And so that victims can be compensated.

We know from our investigations, mistrust in vaccines arose because individuals were silenced when they raised questions or concerns about their experience.

The mandate only required a shot. It did not require, however, a physician consultation. Only a vaccine card.

And not only did the federal government not have the proper systems in place to monitor adverse effects and help victims when they mandated the COVID-19 vaccine, but they continued to mislead Americans that it was 100% safe.

And that is the problem with a one-size fits all approach to medicine.

We are here to say that patients should be able to consult with their doctors and make individualized medical choices based on their personal medical history.

That one-size-fits all mandates, strip Americans of their medical autonomy.

Some will try to say that vaccine mandates increased the number of individuals vaccinated, but it appears the only thing the mandates increased was mistrust.

And when we mandate vaccines and say get vaccinated “because I told you so”, we cause Americans to lose faith in public health officials and all vaccines.

We must do better going forward. And we must do differently.

One of the ways we could do differently, is that I would like our government to consider a reserve pandemic response corps, similar to what we have in the military.

During times of pandemics, and other public health crises, the government would have the ability to call up the reserve pandemic response corps to augment hospital staff and first responders.

In addition, this reserve would also be able to prepare and help staff medical reporting systems. I believe this would help prevent some of the problems that victims are currently experiencing today.

Thank you all today for participating in today’s important hearing. We look forward to continuing our work on this matter and hope you will continue to as well.