



# Liberty Fighters Network

Est. 2016 - A voluntary association without gain (*Universitas*)

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**Date:** 12 August 2025

**VERY URGENT**

**To:** Ms. Siviwe Gwarube, MP

Minister of Basic Education

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Dear Minister

**RE: DRAFT ADMISSION OF LEARNERS TO PUBLIC SCHOOLS REGULATIONS, 2025 – REGULATION 14 (“PROOF OF IMMUNISATION”) – DEMAND FOR INFORMATION IN TERMS OF THE PROMOTION OF ACCESS TO INFORMATION ACT, 2000 (“PAIA”) AND THE COMMON LAW, AND NOTICE OF INTENDED LEGAL PROCEEDINGS**

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**Introduction and Standing**

1. Liberty Fighters Network (“LFN”) is a well-known social justice organisation without gain (*universitas*) committed to, *inter alia*, defending constitutional rights, particularly the rights of children, their parents to make informed decisions over their health and otherwise, and

to ensuring administrative action by organs of state is lawful, reasonable, and procedurally fair.

2. We specifically address herein Regulation 14 of the *Draft Admission of Learners to Public Schools Regulations, 2025*, published under Notice 3415 of 2025 in Government Gazette No. 53119 of 6 August 2025. Our decision not to comment at this stage on any other draft regulation should not be construed as agreement therewith, and we expressly reserve the right to address such provisions at a later stage, should it become necessary.
3. For the record, LFN has, since June 2022, been engaged in court proceedings against the South African Health Products Regulatory Authority (“SAHPRA”) concerning its decisions to register four (4) COVID-19 vaccines. Despite repeated requests, SAHPRA has refused to provide the complete records underpinning those decisions. During the course of the pending litigation, and without any public announcement, SAHPRA quietly de-registered three (3) of the four vaccines. This development strongly suggests that the very vaccines the State compelled the public to receive during the lockdown period were subsequently determined to be non-compliant for human use.
4. LFN has also recently instituted review proceedings in the High Court against the Minister of Agriculture, Mr John Steenhuisen, for his hasty and unconsultative decision to vaccinate the country’s poultry. Mr Steenhuisen is the leader of the Democratic Alliance (“DA”), the political party you represent. The pattern emerging from these actions creates the appearance that the DA is intent on advancing a vaccination agenda not only for the human population, but for animals as well — a stance that is highly questionable and warrants public scrutiny.

## Regulation 14 – Forced Vaccination Concern

5. Draft Regulation 14(1)–(7) effectively imposes a compulsory vaccination requirement for learners as a condition of admission to public schools, subject only to a narrow and burdensome exemption process.
6. Section 5 of the *South African Schools Act, 1996* (Act No. 84 of 1996) (“the Act”), which governs the admission of learners, contains no provision imposing an obligation of the nature contemplated in draft Regulation 14. On the contrary, subsections (1) and (1A) explicitly state:

*“(1) **A public school must admit, and provide education to, learners and must serve their educational requirements for the duration of their school attendance without unfairly discriminating in any way.***

*“(1A) **Any learner whose parent or guardian has not provided any required documents, whether of the learner or such adult person acting on behalf of the learner, during the application for admission, shall nonetheless be allowed to attend school.**” [My Emphasis]*
7. While section 61(1)(aB) of the Act empowers the Minister to make regulations concerning the admission of learners to public schools, that authority does not extend to proposing a regulation which could result in the refusal of admission to a child, as contemplated in Regulation 14(7), nor to purport to regulate the admission of learners to independent schools. Any such provisions would be incompatible with the express provisions of the Act itself, and therefore invalid.
8. Furthermore, prescribing an obligatory admission policy that conditions access to public schools on proof of vaccination — under the guise of acting “*in the best interests of the*

*learner*” — would be inherently discriminatory. It would create a distinction between learners in public schools, who would be compelled to vaccinate, and learners in independent schools, who would not be subject to the same compulsion. This would either mean that the State regards the health and welfare of learners in independent schools as less important, or that the policy is aimed solely at coercing public school learners into vaccination, thereby creating an arbitrary and unjustifiable inequality.

9. In a country marked by stark socio-economic divisions, the proposed policy would operate as an instrument to deepen the divide between the poor and the wealthy. Learners from lower-income households, reliant on public schools, would in effect become test subjects for experimental vaccines and pharmaceuticals, while those from affluent families could avoid such compulsion by attending independent schools, thereby shielding their children from any comparable medical intervention. The experience of COVID-19 already provides a sobering precedent: vaccines fast-tracked under the pretext of an alleged pandemic — and subsequently de-registered by SAHPRA in secrecy — now raise serious questions about their safety and the State’s judgment in compelling their use, with possible long-term threats to the health and lives of those who received them.
10. The reality is that, should an exemption application be refused, affected parents and guardians would face limited and onerous options: either incur the substantial cost of engaging legal representatives — often untested and unaffordable — to institute review proceedings in court; or attempt to move their children to an independent school that does not impose compulsory vaccination, at fees they would, by all reasonable implication, be unable to afford; or resort to homeschooling, with all the regulatory, financial, and practical burdens that entails. In stark contrast, the State would have at its disposal virtually unlimited resources, drawn from the public purse, to sustain prolonged litigation and, in effect, drive such families into financial ruin.

11. If a parent or guardian, making a fully informed choice, decides *not* to vaccinate their child, they may become unfairly demonised, especially if the child is subsequently denied school admission. This could escalate into criminal prosecution or even lead to the State removing the child from the family. Far from protecting the child, such measures constitute a direct assault on the family unit and parental authority — both of which are protected by the *Constitution of the Republic of South Africa, 1996* (“Constitution”) and by binding international treaties.
  - 11.1. **Article 18(1)** of the *African Charter on Human and Peoples’ Rights* explicitly states that “*The family shall be the natural unit and basis of society. It shall be protected by the State...*”
  - 11.2. **Article 5** of the *UN Convention on the Rights of the Child (CRC)* requires States to “*respect the responsibilities, rights and duties of parents ... to provide ... direction and guidance in the exercise by the child of the rights recognized in the present Convention*”.
  - 11.3. The *African Charter on the Rights and Welfare of the Child (ACRWC)* likewise upholds that parents or legal guardians have a duty to guide and direct children in exercising their rights, taking into account the child’s evolving capacities.
12. Imposing a nominal medical “safe harbours” policy that undermines parental rights — and potentially leads to criminal or custodial state intervention — is incompatible with these constitutional and international protections.
13. There appears to be an ongoing crusade against conservative individuals and communities who question the efficacy and safety of vaccines, as well as the mainstream acceptance of virology as an unquestionable science. Increasingly, definitions of “virus”

are being amended to accommodate prevailing narratives rather than grounded in incontrovertible, observable evidence. In parallel, a growing number of qualified and experienced scientists are publicly challenging not only the existence of viruses but also the claimed effectiveness of medical products — such as vaccines — purported to prevent or combat conditions allegedly caused by them.

14. For the record further, in light of SAHPRA's deregistration of 75% of the COVID-19 vaccines once declared "safe", it must be noted that during the course of LFN's ongoing litigation against SAHPRA, its own Chief Executive Officer, Dr Boitumelo Semete-Makokotlela, stated under oath that SAHPRA has never been presented with a purified and isolated SARS-CoV-2 virus and, therefore even this organ of State responsible for the control of medical products, cannot confirm whether such a virus ever existed. This admission raises profound questions not only about the scientific foundation upon which those vaccines were approved, but equally about the evidentiary basis for any other virus-specific vaccination now being proposed under Regulation 14.
15. To the extent that such a policy would compel parents and guardians to submit their children to vaccination under threat of criminal sanction, imprisonment, and possible removal of their children, it represents an extreme and coercive measure wholly inconsistent with constitutional and international human rights protections. The relevant part of this affidavit by the SAHPRA CEO, dated 11 April 2023, reads as follows:-

In such circumstances, SAHPRA cannot be expected seriously to entertain these unsubstantiated allegations. That said, no “isolated” and/or “purified” sample of SARS-CoV-2 was placed before SAHPRA as part of any of the relevant companies’ applications for the registration of their vaccines, rendering the “need” for any inspection *in loco* moot. Accordingly, on this basis alone, the relief sought in prayer 3 cannot be granted.

16. This constitutes an extreme and unjustified infringement of the rights to bodily integrity (section 12(2) of the Constitution) and to make decisions concerning children’s health (section 28(1)(b) read with section 28(2) of the Constitution).
17. It is of grave concern that:
  - 17.1. There is no declared public health emergency necessitating such a measure;
  - 17.2. The SAHPRA has, without public consultation, de-registered 75% of COVID-19 vaccines previously authorised for use in the Republic, raising serious questions over the reliability and safety of vaccines promoted under government policy;
  - 17.3. There are ongoing claims of vaccine injury in relation to those products;
  - 17.4. The Minister of Basic Education is not the Minister of Health, nor a qualified medical authority, and should not be importing coercive public health measures into education policy; and
  - 17.5. In terms of existing health legislation, there already exist sufficient and well-defined processes for addressing communicable diseases, including provisions for managing outbreaks. These mechanisms can be activated should an outbreak occur in respect of any disease for which children are now being compelled to

receive vaccination, rendering Regulation 14, not only both unnecessary and duplicative, but possibly even in direct contrast to what those acceptable health measures might be.

### **Precedent and Broader Risks**

18. The promulgation of Regulation 14 in its present form would establish a dangerous precedent with consequences far beyond the education sector. It would open the door for other sectors — most notably workplaces — to impose vaccination as a condition for participation, effectively coercing individuals into undergoing medical interventions without demonstrable necessity, scientific certainty, or informed consent.
19. LFN is presently engaged in separate litigation against the Minister of Cooperative Governance and Traditional Affairs in which we contend that the National State of Disaster (COVID-19) lawfully terminated on 14 June 2020. We maintain that the State unlawfully continued to enforce restrictive measures for an additional two years beyond that date, thereby exceeding its statutory authority.
20. In relevance, this extended and unlawful continuation of the NSD created fertile ground for employers to introduce and entrench compulsory workplace vaccination policies. These policies led directly to the dismissal of thousands of employees who, based on their personal convictions and assessment of risk, refused to be vaccinated. LFN is currently assisting approximately 300 such individuals, all of whom were correct in their stance — a fact now irrefutably confirmed by SAHPRA’s deregistration of three quarters of the COVID-19 vaccines once deemed “undoubtedly” safe.

21. The same trajectory can reasonably be anticipated with Regulation 14: it may be harshly enforced in the present, only to be proven a grave and incorrect policy decision in the future. The COVID-19 experience shows that, despite the unified push from scientists, “experts”, and policymakers in South Africa to promote vaccination, the reality is that they were wrong — at least in respect of the majority of products they advocated.
22. If Regulation 14 is implemented in its current form, the same discriminatory and coercive dynamics will inevitably be replicated in the education sector. Children will be compromised — not protected — on multiple levels, facing exclusion from schooling and social participation for reasons wholly unrelated to their actual health status. This policy cannot credibly be described as serving “*the best interests of the child*” within the meaning of section 28(2) of the Constitution; rather, it reflects clear authority overreach and, in all likelihood, the influence of entrenched and potentially corrupt relationships between elements of the State and pharmaceutical corporations.
23. While you may contend that the proposed immunisation requirements relate to diseases other than COVID-19, the reality is that LFN’s experience in challenging the COVID-19 vaccines has revealed serious procedural and scientific deficiencies in the State’s approval processes. Applying the same scrutiny to other vaccines — particularly in light of how the State, supported by compromised scientific voices, led the public to believe that a “virus” would respond predictably to so-called “reliable” vaccines — raises legitimate concerns that the very vaccines promoted under these draft Regulations may themselves be susceptible to review regarding their safety and efficacy.
24. As a direct consequence of this draft Regulation 14, LFN will formally request SAHPRA to conduct a review of all currently registered vaccines covered by it, to ensure they were not approved in error too. Surely, you would not wish to risk implementing this Regulation

while the safety and registration validity of those vaccines are under formal review — a process we will now ensure is initiated.

25. LFN's objections are rooted first and foremost in the protection of children's best interests. While the safeguarding of parental rights is a critical component of our position, we note that, in practice, protecting parental authority in medical decision-making is the most effective way to ensure that children's best interests — as guaranteed by both domestic and international law — are truly upheld.

### **Experience with Government Consultation Processes**

26. From extensive prior experience, LFN knows that the State often allows a public comment process merely to create an appearance of procedural compliance, only to implement the objected regulation regardless of the objections raised.

27. This leaves members of the public and civil society organisations with no alternative but to initiate legal proceedings to set aside the regulation, a process which can take years to finalise while the impugned measure remains in force.

28. Accordingly, LFN now puts you **on terms**:

28.1. Before proceeding further, you are first to provide the underlying records and information that logically ought to already exist if Regulation 14 is rationally justified; and

28.2. In the absence of providing this information within the period stipulated in paragraph 32 *infra*, LFN will initiate a court application in the normal course for an interdict to prevent the promulgation of Regulation 14. Such application may, if the regulation

is implemented while the main matter is pending, be enrolled and prosecuted on an urgent basis.

### **Request for Records under PAIA and the Common Law**

29. In terms of section 11 of PAIA and the constitutional principle of open, transparent governance, we request access to all records, data, reports, memoranda, and correspondence, whether internal or external, that informed the decision to include Regulation 14 in the draft regulations, including but not limited to:
- 29.1. Medical and scientific evidence relied upon to justify mandatory proof of immunisation for school admission;
  - 29.2. Risk assessments, cost–benefit analyses, and modelling relating to disease prevalence and threat levels in the Republic;
  - 29.3. All correspondence with the Department of Health, SAHPRA, the National Institute for Communicable Diseases (NICD), or any other public or private entity consulted on the matter;
  - 29.4. Records of public consultation, stakeholder engagement, or socio-economic impact assessment conducted in relation to Regulation 14; and
  - 29.5. Any legal opinions obtained on the constitutional and statutory validity of Regulation 14.
30. A completed PAIA request form will be lodged separately.

31. In addition, in terms of the common law right to access information necessary to protect and exercise rights, we request the same records.

### **Timeframe for Compliance**

32. Kindly provide the above records as identified in paragraph 29 *supra* within **14 (fourteen) calendar days** from the date of this letter.
33. Should you fail to provide complete records within this period, LFN will have no alternative but to approach the High Court as set out in paragraph 28.2 *supra*.

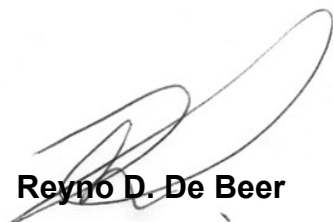
### **Conclusion**

34. Education and health policy are distinct domains, each governed by separate statutory and constitutional frameworks. Where health policy encroaches upon constitutionally protected freedoms — particularly bodily integrity (section 12(2) of the Constitution), parental authority (section 28(1)(b)), and the best interests of the child (section 28(2)) — such measures must meet the highest legal threshold: they must be demonstrably necessary, strictly proportionate, and grounded in clear, credible, and publicly verifiable evidence.
35. It must be recalled that the DA was amongst the earliest and most vocal advocates of the COVID-19 lockdown, even preceding formal State action. That lockdown, now increasingly exposed as a profound overreach of authority and a serious violation of fundamental rights, was accompanied by extensive allegations — and in some cases proof — of systemic corruption. This time, LFN is fully prepared to challenge and expose any suspicious conduct by both the DA and the State before such measures can again irreparably damage

the lives and freedoms of the people of South Africa. The political and institutional actors who once sought to impose sweeping controls on the public must now understand that the balance of scrutiny has shifted: the hunters have become the hunted, and no stone will be left unturned in holding those actors to account for any attempt to use public policy as a vehicle for coercion or control.

36. We trust that you will recognise the constitutional gravity of this matter and provide a full and transparent response within the prescribed period. Should you fail to do so, you can be assured that LFN will pursue every available legal and constitutional remedy, both domestically and — if necessary — through regional and international human rights mechanisms.
37. Our rights and those of our members, and the interests of the Public, are reserved *in toto*.

Yours Faithfully,



**Reyno D. De Beer**

President: Liberty Fighters Network

On behalf of our member, interest of the Public