Commonwealth Government COVID-19 Response Inquiry

Commonwealth Government COVID-19 Response Inquiry terms of reference
Specific areas of review may include, but are not limited to:

- Governance including the role of the Commonwealth Government, responsibilities of state and territory governments, national governance mechanisms (such as National Cabinet, the National Coordination Mechanism and the Australian Health Protection Principal Committee) and advisory bodies supporting responses to COVID-19.
- Key health response measures (for example across COVID-19 vaccinations and treatments, key medical supplies such as personal protective equipment, quarantine facilities, and public health messaging).
- Broader health supports for people impacted by COVID-19 and/or lockdowns (for example mental health and suicide prevention supports, and access to screening and other preventive health measures).
- International policies to support Australians at home and abroad (including with regard to international border closures, and securing vaccine supply deals with international partners for domestic use in Australia).
- Support for industry and businesses (for example responding to supply chain and transport issues, addressing labour shortages, and support for specific industries).
- Financial support for individuals (including income support payments).
- Community supports (across early childhood education and care, higher education, housing and homelessness measures, family and domestic violence measures in areas of Commonwealth Government responsibility).
- Mechanisms to better target future responses to the needs of particular populations (including across genders, age groups, socio-economic status, geographic location, people with disability, First Nations peoples and communities and people from culturally and linguistically diverse communities).

9 Jan 24

Dear Inquiry,

A number of excellent international studies have been undertaken to compare and consider issues with government responses to the covid pandemic. I include links to a number below that I invite you to consider:-

Suggested studies for consideration

<div align="center">

Cato:
Pandemics and Policy
What went wrong, what we've learned, and how to prepare for next time

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1. https://www.cato.org/pandemics-policy

Government and Health Care — A Dangerous Policy Cocktail
2. https://www.cato.org/events/government-health-care-dangerous-policy-cocktail

COVID-19 Pandemic Was a Catastrophe for Global Freedom
New Human Freedom Index
3. https://www.cato.org/policy-report/march/april-2023/covid-19-pandemic-was-catastrophe-global-freedom

Sweden Avoided Covid Lockdowns, and Now Reaps the Benefits
4. https://www.cato.org/commentary/sweden-avoided-covid-lockdowns-now-reaps-benefits

5. Fiscal Spending Contributed to Post-COVID-19 Inflation

Fiscal Spending Contributed to Post-COVID-19 Inflation

Information Manipulation and Repression: A Theory and Evidence from the COVID-19 Response in Russia

6. https://www.cato.org/research-briefs-economic-policy/information-manipulation-repression

7. Haug, N., Geyrhofer, L., Londei, A. et al. Ranking the effectiveness of worldwide COVID-19 government interventions. Nat Hum Behav 4, 1303–1312 (2020). https://doi.org/10.1038/s41562-020-01009-0

Dear Inquiry,

many claims have been made about the effectiveness of the government's strategies to implement effective policy in response to covid.

30 June 2023 populations : ABS: https://www.abs.gov.au/statistics/people/population/national-state-and-territory-population/latest-release#states-and-territories
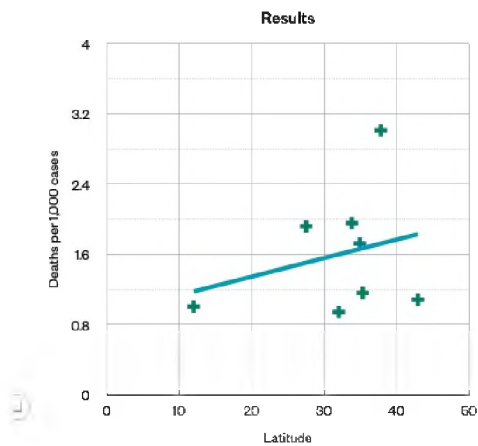
Fiscal Spending Contributed to Post-COVID-19 Inflation

	Population at 30 June 2023 ('000)
New South Wales	8339.3
Victoria	6812.5
Queensland	5459.4
South Australia	1851.7
Western Australia	2878.6
Tasmania	572.8
Northern Territory	252.5
Australian Capital Territory	466.8
Australia (a)	26638.5

covidlive data 240109

30.6.23	Population in thousands	C19 cases in thousands	Ratio case/pop	Deaths	(Deaths/pop) or per thousand population	Deaths per 1,000 cases
NSW	8339.3	3967.3	0.4757	7748	0.9291	1.9530
Vic	6812.5	3001.8	0.4406	9036	1.3264	3.0102
QLD	5459.4	1761.9	0.3227	3375	0.6182	1.9155
SA	1851.7	965.5	0.5214	1663	0.8981	1.7224
WA	2878.6	1385.0	0.4811	1304	0.4530	0.9415
Tas	572.8	316.4	0.5524	342	0.5971	1.0809
NT	252.5	110.7	0.4384	111	0.4396	1.0027
ACT	466.8	251.9	0.5396	292	0.6255	1.1592
Australia	26638.5	11760.5	0.4415	23871	0.8961	2.0298

Latitude (of territory/state capital) / Case Fatality Rate covidlive.com.au)

NT	12.0	1.003
Qld	27.5	1.916
WA	32.0	0.942
NSW	33.8	1.953
SA	34.9	1.722
ACT	35.3	1.159
Vic	37.8	3.010
Tas	42.9	1.081

Results

Australia   11,760,483 cases 23,871 deaths or 0.203%

Other Islands
Taiwan   10,241,523 cases 19,005 deaths or 0.19%
New Zealand   2,464,470 cases   4,804 deaths or   0.19%
Cuba   1,115,125 cases   8,530 deaths or   0.76%
Sri Lanka   672,587 cases   16,882 deaths or 0.25%
Reunion 486,588 cases   921 deaths or   0.19%
Iceland   209,191 cases   229 deaths or   0.11%

Australia as an island is very comparable in deaths per 1,000 cases at 0.2% with Taiwan, New Zealand, Reunion all very similar at 0.19% and Sri Lanka at 0.25% and Iceland at 0.11%.
Japan 33.8 M cases, 74.7 k deaths – 0.22%.

Remoteness and island situation is related to low case death rates when compared with continental death rates: France 39.0 M cases, 167.99 k deaths – 0.43%; USA 103.44 M Cases, 1.145 M deaths – 1.11%; UK 24.84 M cases, 232 k deaths – 0.9735% (noting the English/French channel is a water barrier but there is a rail link connecting both sides).

Remoteness and isolation early on seem significantly protective but in the Australian situation Victoria fared significantly more poorly than other states. The inquiries' terms of reference is perhaps unable to completely analyse where state factors are associated with significant differences in outcomes.

Yours Sincerely