

I am a [REDACTED] in a [REDACTED] public hospital and also have [REDACTED] children in [REDACTED] school.

My feedback regarding the role played by ATAGI and the TGA on vaccinations is that apart from the initial year of the vaccines in 2021, the vaccine programme has been terrible with respect to children. Whilst I can have boosters myself, my children who were vaccinated as soon as they could be, can no longer receive boosters and are sitting ducks at school for catching covid and bringing it home to all of us again. The lack of vaccines for under 5s is also abysmal when this is available in countries overseas, and boosters for the over 5s are available overseas but not in Australia. Parents should be given the choice to pay for booster vaccinations for their children. Children are also not immune to potential harmful effects of covid and especially given they are at school most days (everyone knows schools are petri dishes for illness? Precovid...yet somehow we were supposed to believe not for covid, one of the most contagious viruses out there after measles?). I have had my boosters on time and as advised every time, yet last year we were left facing the Christmas wave with more than 6 months since the last booster as an adult and my children were about 9 months post vaccination. One child brought covid home from school at the end of year and we all got covid, I had [REDACTED] [REDACTED] although thankfully now resolved. However, leaving those who did everything they were told to do in the form of getting boosters vulnerable last Christmas without boosters was a terrible oversight in public health policy. Australia has also been too slow to order the updated monovalent vaccines this Christmas as well, and only appeared to do so after public pressure, and will be too late for Christmas and other high risk events.

The government is now running a vaccines only strategy - with no public health mitigations, no public health messaging, no encouraging or requiring non-vaccine strategies such as masks in hospitals, masks on public transport, mitigations in schools, no ventilation in schools and no push to increase public indoor ventilation standards. Except the vaccine only strategy in Australia is one without universal up to date vaccines. This is abysmal and needs to change now and for future pandemics. The mixed messaging around vaccines for children and under 5s (by implication that the risks of the vaccine are worse than the risks of the virus) and thus contributing to vaccine hesitancy, will have a negative impact on vaccinations for other current diseases and future potential pandemic diseases as well..

The personal impact of the decisions made by the National Cabinet last year (October 22) when they decided that covid was no longer going to be treated as exceptional has been disastrous for my immediate family and wider family. [REDACTED] got covid after all the mitigations were removed and after people were allowed to spread the virus in the community. This decision by National Cabinet to no longer treat covid as exceptional was not based on the science, as increasingly the scientific literature last year was highlighting all the ways that covid is unlike other respiratory illness, and indeed covid is not just a respiratory illness, and exceptionally bad for you to get over and over. It is unlike the flu, demonstrated in multiple studies that covid's impact on the body is not just respiratory but vascular, and can impact multiple organs. Covid enters the body through a different set of cells to other respiratory viruses as well - ACE-2 receptors are spread throughout the body in important sites that can not afford to be damaged or repeatedly damaged by the virus. Recent evidence out of Canada shows that the rate of post Covid symptoms increases as the number of infections you have had increases. In any case, the sheer prevalence of covid year around is different to the flu.

It was under Albanese that the National Cabinet decided to call covid unexceptional without scientific evidence. Opposition leaders need to be held to account when they are in power if they do a sudden about turn on important health issues such as pandemic management.

Regarding PPE in the future the federal government needs to have sufficient stockpiles or at least the local manufacturing resources to ensure that all healthcare workers have access to safe and effective PPE - i.e. respirator masks. It was absolutely ridiculous that there were insufficient (surgical) masks at the start of the pandemic for HCW to safely nurse and care for covid positive patients. Thank goodness there was that initial shutdown, otherwise healthcare workers in Australia would have been in a bloodbath of covid infections and we would have seen multiple deaths of healthcare workers prevaccine, as seen overseas. The other disturbing thing is that there now seems to be a push in people's collective recollections to retrospectively rewrite the lockdown as unnecessary (because the lockdowns worked and saved Australians from the fate seen overseas). As a [REDACTED] I couldn't sleep at night in late Feb and March 2020 before lockdown, as I could see what was happening in overseas hospitals such as northern Italy, then the UK and USA, knowing that it would not be long

before this catastrophic spread of the virus started in Australia. There was also a lot of public and social pressure as a [REDACTED] to [REDACTED] when Covid was first hitting, but there was not the proper information being given to [REDACTED] about transmission so that they could protect themselves, and the PPE provided was mostly nonexistent and at worst ineffective because it wasn't the correct level. This issue with PPE continued at the end of 2021 and the start of the Omicron wave in Australia. [REDACTED]

[REDACTED] It was the stuff of bad movies come to real life. Both federal and state governments need to be ensuring this situation never happens again. We may not be so lucky next time, in terms of being able to keep the virus at bay for nearly two years. Indeed [REDACTED] in Melbourne were not so lucky in 2020.

The Federal Health department could improve Public Health messaging by treating covid like it has treated other high prevalence health issues. We need messaging and advertising re covid like the campaigns for wearing sun protection for skin cancer, wearing condoms for STD, doing the routine cancer checks, and childhood vaccinations. There is virtually a complete silence from the Federal Health department in the form of advertising or public health messaging. There needs to be messages loud and clearly presented to the public about risks of long covid, risks of organ damage (e.g. heart, brain, kidney, diabetes, autoimmune conditions), risks of repeated infections (see recent Canadian study) and what can be done to reduce risk of catching covid in the first place. It is almost as though the government wants to spread covid through the community. Covid is being treated exceptionally, and unlike messaging about cancer prevention and early detection, unlike the messaging that was so effective in Australia in our response to HIV/AIDS. We have a wonderful track record for HIV and covid during the first two years - which we have now squandered. Public Health is missing in action on covid. There is so much we could be doing to reduce transmission and reduce the number of repeat infections we are all subjected to. There is no evidence that repeated infections makes you more immune to later variants of covid. The upcoming new variant and this current wave is evidence of that. We were told last year that we were going to get hybrid immunity from various state health officers - but this year that message has morphed into how our immunity has waned. We have been sold the wrong story about covid. International data is not supporting the idea of reduced infections after 4 years, there may be less deaths but the risks of long term damage and long covid even with mild initial illness remains, and is increasing with each exposure and each variant.

The impact of the government's vaccine eligibility policy on my family has resulted in an extremely stressful situation. We are having to live with unmitigated spread and transmission of the virus in the community but we are not provided with vaccines for children. This places me as an adult carer at increased risk as well. Children have to attend compulsory school but they are not able to get boosters (unless medically at risk); children were sent back to school in 2022 during the height of the omicron disaster, so that many children got infected before they had a chance to have both, or even one, vaccine; and parents are now left thinking the vaccines don't work (because the child vaccines are not matched to the current variant - and communication around this has been abysmal leaving parents to conclude they don't work). For parents that are aware of the long term risks we face with covid infections, the lack of vaccines for children is incredibly stressful, while being simultaneously persecuted by the education department policies around attendance at school. This puts those parents in a terrible situation of being unable to protect their children from potential harms, while the government is essentially legally mandating infection of children through compulsory school attendance without making any real attempt to reduce risk. Often that risk reduction strategy could be as simple as opening classroom windows.

Schools have not been made safe. Aside from some initial half hearted attempts in NSW to assure parents that schools were safe (likely made on false premises) - there has been no real attempt to continue to try to reduce covid transmission in schools. There is a ventilation policy for natural ventilation in [REDACTED] public schools but I doubt any school is properly following it. There has been no real attempt to ensure air quality in classrooms is at safe levels to reduce the likelihood of transmission in schools. There is much evidence to indicate school classroom air quality is a health and learning hazard. There needs to be enforced indoor air quality standards for schools implemented at a federal level. School bus excursions are another place where air quality is very poor. There needs to be clear and enforced public ventilation standards for school buses. This is an issue that if addressed now for covid, will also help for future pandemics, as the infrastructure will already be in place.

2022 was the year of terrible transmission of covid in schools, while the government essentially stood by and watched, something future generations will likely condemn. 2023 has been the year of terrible transmission in healthcare and hospitals. The current approach by [REDACTED] Health merely recommending staff wear masks near patients is a terrible failure, both a failure of duty of care to patients and has failed to get staff to mask with patients during a wave. Masks should be compulsory in healthcare during waves at least. Schools need clean air standards. Public buildings and public transport need air ventilation standard guidelines to reduce airborne transmission risk. Costs of clean air enforcement and expenditure now will be repaid by reduced long term healthcare costs and lost productive time. We have world renowned experts in air quality in Australia but we are not listening to them, for example [REDACTED] aerosol physicist.

Recommendations for future pandemics - the future is now because we still have high levels of covid circulating and infecting people in the community, resulting in a current pandemic of post covid sequelae. We need to address this issue here and now.

We also need an independent Royal Commission into the Australian Pandemic Response, not an Inquiry that is being run by people who have been directing the Covid-19 Response through ongoing public commentary and submissions to government. This is not independent.