Please consider recommendations relating to:

# 1. Don't downplay how effective border closures were at protecting the WA community for such a long period of time.

- Being able to work, interact and socialise freely without the heightened risk of long term impacts to yourself or loved ones.
- We shouldn't be criticising WA for their effective policy which benefitted the vast majority.

## 2. Recognise there is an Issue:

- Let's admit there's a serious problem with covid. We need everyone to understand why it's crucial to change what we're doing.
- So much research makes it clear that every covid infection damages our bodies, even in young and healthy people. It's been obvious for a while now. Check out these examples from 2020 and 2021:
  - Link 1
  - Link 2
- The Inquiry should look at this evidence and tell us to stop being so relaxed about covid.

#### 3. Mandating Air Quality Standards:

- Since we know more about how covid spreads through the air, we can make public places safer by improving ventilation. States should upgrade schools and hospitals, and the Federal government should set standards. Belgium's got a good model for air quality laws: <u>Link</u>
- This would help with so many issues, not just covid.

### 4. Spreading Knowledge about covid transmission:

- Right now, everyone's being told to wash their hands, but that doesn't do much against an airborne virus.
- It's sad seeing people wiping down grocery carts when they're not wearing masks, which actually helps.
- Public health needs to clue everyone in on how covid really spreads, so businesses and schools that want to do the right thing can take better actions.

#### 5. Improved Access to Vaccines for All:

- Recent research shows the older vaccines aren't cutting it. Australia
  needs to hustle and get the latest vaccines out to everyone, including
  kids, every six months.
- The evidence says everyone over six months old should get the newest vaccines, looking at the long-term effects of covid, not just the immediate stuff.
- Australia's vaccine strategy, especially for kids, is just weird. Kids under five with no risk factors can't get vaccines, even though they end up in the hospital more.

- New research shows getting vaccinated cuts the risk of long covid by about 70%. We should be thinking about the long-term effects, not just how many people end up in the hospital.
- It's not cool that some of us are denied the latest vaccines even if we want to pay for them ourselves.
- I also find it strange that we mandate vaccines for conditions that pose lower or equal threats to covid on our youngest yet don't allow them to have access to a covid vaccine to help protect them

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	Hepatitis A <sup>1</sup>	Varicella <sup>2</sup> (Chickenpox)	Vaccine-type Invasive Pneumococcal Disease <sup>3</sup>	COVID-19 <sup>4</sup>	
Age	5–14 years	0–4 years	0-4 years	6 months-<18 years	
Time period	2005	1993–1995	1998–1999	2021–2022 2022–2023	
Hospitalization Burden (Annual rate per 100,000 population)	<1	29-42	40 <sup>5</sup>	≤4 years: 92–220 5–11 years: 15–47 12–17 years: 20–80	

Thanks for thinking about these ideas.

<sup>&</sup>lt;sup>1</sup>https://www.cdc.gov/mmwr/preview/mmwrhtml/ss5603a1.htm <sup>2</sup>Davis MM, Patel MS, Gebremariam A. Decline in varicella-related hospitalizations and expenditures for children and adults after introduction of varicella vaccine in the United

States. Pediatrics. 2004;13(43):786-792. doi:10.1542/pedis.2004-00912

<sup>3</sup> Centers for Disease Control and Prevention (CDC). Direct and indirect effects of routine vaccination of children with 7-valent pneumococcal conjugate vaccine on incidence of invasive pneumococcal disease—United States, 1998-2003. MMWR Morb Mortal Wkly Rep. 2005 Sep 16;54(36):893-7. PMID: 16163262.

COVID-NET data October 2021 — September 2022 and October 2021 — July 2023. COVID-19 rates have not been adjusted for reason for admission. COVID vaccine first introduced in 12-17 years in May 2021; in 5-11 years in November 2021 and in 6 months — 4 years in June 2022