

Federal Government and Advisory Body Decisions

I am a disabled person and former teacher in my early thirties. I became involved with the Cleaner Air Collective a year ago because I knew the absence of an accurate public health campaign around SARS2 was a danger to the health and wellbeing of our society. My evaluation of the pandemic response is informed by my lived experience, training and practice as a teacher and knowledge of history in times of social upheavals.

Many decisions from the federal government and advisory bodies to date have treated the pandemic as a short-term economic and public relations crisis, and not a public health crisis. Most politicians are not medically or scientifically literate.

Australia's pandemic response in the first two years of the pandemic was mostly effective, besides inconsistent decisions between states and territories across the country. From late 2021, the transition to "public health" and "living with the virus" was in play. Mass vaccination of adults was used as an excuse to [declare the "end" of the pandemic](#): "Some politicians and prominent public health and scientific figures initially told the public that vaccination turns COVID-19 into a mild seasonal illness, and celebrated a return to normal." Comments such as "at the end of the day, our own health is our own responsibility" [from the former prime minister](#) demonstrate the neglect of societal-wide measures for individualised health.

My feedback regarding the role of advisory bodies is that there has far too much secrecy around the content of discussions and key decisions that have been made. This contrasts sharply with [REDACTED] wise insight that "[p]ublic health had never been and cannot be secret health." ¹ [REDACTED] played a prominent role in the successful response to the HIV/AIDS crisis in Australia. He wisely commented: "If science is to be effective in informing public policy in time to contain or prevent the spread of a viral pandemic, the rapid, free and unimpeded flow of information, findings, facts and evidence is essential." ²

Advisory bodies appear to have been impeded by failing to consider international discussions around SARS2 or public health discussions from overseas. From research on [SARS1](#) and many other viruses, it was clear that infection could [result in long-term health conditions](#). [Research carried out](#) prior to 2020 had found that "up to 80% of cases of ME/CFS are initiated by infection." Somehow Australian experts missed or ignored evidence [in July 2020](#) that COVID was airborne. Even today many hospitals around the country only consider airborne spread in the context of aerosol-generating procedures. In June 2020 [the New York Times](#) reported how SARS2 appeared to affect the immune system in a similar way to HIV.

Our public health response should come from those who won't gain politically from the maintenance of the status quo. An economic logic has often been applied to public health decisions, where a cost-benefit analysis has been applied to the notion of saving people's lives and preventing chronic illness.

¹ "Unmasked: The Politics of Pandemics", Bill Bowtell, 2021, p 39.

² "Ibid, pp 34-5.

Advice given by Australia's Chief Medical Officer (CMO) and others on AHPPC was not always in touch with common public health policies or scientific advice. The concept of ["hybrid immunity"](#) for instance is an invention of 2021, which the CMO and state and territory Chief Health Officers (CHOs) began using in 2022.

Paul Kelly [gave evidence to National Cabinet](#) for why self-isolation could be scrapped without first consulting AHPPC. The decision to reduce and then scrap self-isolation entirely was scientifically unsound. As the [John Snow Project comments](#), isolation of sick people has been a cornerstone of public health policies for centuries.

In July 2022 Paul Kelly captured a sentiment reflected no doubt by some in government about the inevitability of some people's deaths. [He said](#) at the AMA National Conference on Friday July 22 2022: "Since then we have really had that, that reaping... it's the people that haven't died in the last two year because we had no flu- because we largely did not have COVID and for various other reasons... and that is by far the majority of people that are dying."

While it is true that oldest people are most likely to die, the public health response has done little to prevent these deaths. [One disabled journalist remarked](#): "Rather than seeing the past two years of prevented infection, death and disease as some kind of debt to society which must be repaid, I see it as an opportunity to rejoice. All life is precious surely and every death prevented a cause for celebration." The lack of regard for the ongoing outbreaks of SARS2 in aged care is a tragedy.

By incorrectly promoting the idea that getting COVID is [magically fine for most vaccinated people](#), the CMO, CHOs and federal government alike have endangered the lives of many Australians and maimed many more. It is unclear how Paul Kelly could justify [saying in October 2021](#) "when we started to look at every piece of data that we have in the Commonwealth, we're not seeing a major picture of long COVID" when there is practically no data on the number of Australians who have Long COVID.

Similarly, decisions made by ATAGI tended to consider only the short-term effects of infection. ATAGI's statements only consider vaccination in the context of "reducing severe disease and death." The [committee into Long COVID and repeated infections](#) noted that COVID-19 vaccines may "prevent long COVID by reducing community transmission and the chance of severe acute COVID-19 illness."

It is egregious that ATAGI also uses "hybrid immunity" to justify why six-monthly vaccines are only needed for a small proportion of the population. Unlike many other countries, children under five years old have never been vaccinated. Other children and teenagers have not been eligible for boosters. This limited eligibility for boosters [appears to be a cost-saving measure](#).

Recent advice on antivirals seems to be a cost-saving measure as well. The PBAC recommended that access to COVID antivirals should be further restricted. [A GP on the RACGP Expert Committee stated](#): "We never had evidence of cost efficiency, that was never part of the use of antivirals... it was always a public health decision." This advice directly contradicts the recommendation from the committee on Long COVID that antiviral

treatment access be expanded to allow more Australians to reduce the severity of their acute COVID-19 infections, and potentially reduce their risk of developing Long COVID.³

I have several suggestions for how the Commonwealth could improve Australia's preparedness for the current and future pandemics. I urge the Commonwealth to return to the cornerstones of the pre-2020 public health response, chief of which is the precautionary principle. It is logical to assume the worst and prepare for it. Public health responses for the ongoing pandemic and future pandemics should be in line with principles such as the ones [suggested by OzSage](#).

Australia cannot "move away from [COVID exceptionalism](#)" unless we admit that SARS2 is an exceptional disease, and deal with the long-term consequences of our "let it rip" pandemic approach. The government needs to [implement all recommendations](#) made by the Long COVID inquiry.

I question the selection of the experts chosen for this inquiry's panel. Catherine Bennett has been directly involved in the pandemic messaging over the past four years. She's been heavily involved in shaping public health messaging during this time.

I call for there to be a royal commission into the COVID response. Many lives have been lost or irrevocably harmed by the decisions of the federal and state government to allow uncontrolled spread of the virus. We need to prioritise thoroughly investigating how and where this response became detached from science and public health, in favour of preserving economic growth at all costs. We owe it to all the people who have been harmed to investigate and learn from the mistakes made.

Actions & Solutions:

- Publish all minutes from Nat Cab, AHPPC, ATAGI and other pandemic era committees, as well as evidence referenced in these meeting minutes
- Replace Paul Kelly as Australia's Chief Medical Officer with an expert who has a better understanding of traditional public health
- Replace all members of ATAGI with experts who are aware of the short-term and longer-term consequences of infection, and who appreciate the cumulative harm of COVID infections
- Further investigate the effect of repeated infection on the Australian population
- Hold a royal commission into the COVID response and the politicisation of public health

³ "Sick and tired: Casting a long shadow", Inquiry into Long COVID and Repeated Infections", April 24 2023, p 112

Impact of SARS-COV-2 on Teacher Shortage

I am a disabled person and former teacher in my early thirties. In the first 2.5 years of the pandemic I volunteered in hospitality, completed a Patisserie course and later briefly worked in the industry. Last year I was forced to stop working in patisserie to address [REDACTED] [REDACTED] I became involved in advocacy through the Cleaner Air Collective. My evaluation of the pandemic response is informed by my lived experience, training and practice as a teacher and knowledge of history in times of social upheavals.

Labour shortages are most obvious in industries where workers encounter many people during a single day, suggesting ongoing SARS-COV-2 is having an impact. The most affected workers include those in "the care sector and related personal services roles," as well as education, retail, and hospitality.¹ Workers in these industries and casual/gig workers need paid pandemic leave to enable them to stay home when sick or to care for sick family members.

The issue of school closures during 2020 and 2021 has been deeply politicised. We have learnt over the past four years that it is better for parents, businesses and our economy for school-aged children and teenagers to be in school while parents and/or guardians go to work. The impact of school closures on children's mental health drew plenty of media attention in the early years of the pandemic. Australian data demonstrated that suicide rates for school-aged children decreased during 2020 and 2021.^{2 3} Any mental health impact children experienced is more likely due to be from living through a pandemic, not because schools were closed.

More recent media attention has focussed the ongoing teacher shortage and students refusing school; however few journalists have investigated whether acute and/or chronic SARS-COV-2 infections could be exacerbating these issues. I believe the impact of acute and chronic SARS-COV-2 could be a significant factor in why many teachers are leaving the industry. Queensland is allowing state government schools to have four-day weeks from the start of this school year partly due to teacher shortages.⁴ One US study found that "Long COVID is one of many factors contributing to particularly painful staffing shortages plaguing

¹ "UK sees record sickness and zero productivity growth in 2022", David Milliken, April 26 2023, Reuters, <https://www.reuters.com/world/uk/uk-sees-record-sickness-zero-productivity-growth-2022-2023-04-26/>

² "Suicide Update: Australia ", twitter thread by @tylerblack32, January 4 2024, <https://x.com/tylerblack32/status/1742823508747673948?s=20>

³ "More Pandemic Suicidology Data", twitter thread by @tylerblack32, January 6 2024, <https://x.com/tylerblack32/status/1743419797810090435?s=20>

⁴ "All your questions answered: Qld school plan for four-day weeks, shorter days", November 16 2023, The Courier Mail, <https://www.couriermail.com.au/news/queensland/all-your-questions-answered-qld-school-plan-for-fourday-weeks-shorter-days/news-story/77f92b1071ae676334767b34ecf05f7f?amp&nk=48f5b7e74628ac7c5d42da72f10ac448-1704343412>

school districts nationwide this year.”⁵ More locally, the AEU has reported that teachers are leaving the industry due to unsustainable workloads.⁶

I am not considering a return to teaching unless there is a return to the times of traditional public health. As I illustrated in my recent article for Croakey:
*“It shouldn’t need to be said, but sick students won’t be able to focus on learning either. They may struggle to concentrate, and then be more likely to disrupt the class. It’s best if sick students stay home for two reasons: because they need to rest and recover, and because it stops them passing on their illness to their classmates and teachers.”*⁷

It’s important that sick students should be able to stay at home until they’re no longer infectious, as I explained in my Croakey piece.⁸ Parents and/or guardians will need to take time off work to care for them. Even children and teenagers who experience asymptomatic or mild acute infections can develop long-term health conditions later.⁹ There appears to be a link between SARS2 and children becoming susceptible to other illnesses.^{10 11}

The long-term health and wellbeing of children and teenagers must be protected through prevention of SARS-CoV-2 infection in schools. The inquiry into Long COVID and Repeated COVID Infections found that children and teenagers could be at “greater risk of repeated COVID-19 infections” due to spending extended amounts of time in classrooms, being more likely to have asymptomatic infections and lower vaccination rates than adults.¹²

One of the best ways Australia could better prepare for the current and future pandemics is if the federal government mandated and enforced indoor air quality standards (IAQ). I believe that there is a real need to provide support for communities, industries and businesses in the form of the federal government offering them grants to help to improve indoor air quality as this could help end the current pandemic. While schools are a state responsibility, there is

⁵ “1 in 5 Educators Say They’ve Experienced Long COVID”, Mark Lieberman, April 27 2022, EducationWeek, <https://www.edweek.org/leadership/1-in-5-educators-say-theyve-experienced-long-covid/2022/04>

⁶ “More than a recruitment campaign needed to fix teacher shortages”, AEU Media Release, October 31 2023, <https://www.aeuvic.asn.au/more-recruitment-campaign-needed-fix-teacher-shortages>

⁷ “An ex-teacher and disability advocate reflects on the failings of our COVID-19 response in schools”, Lewis Noonan, Sept 17 2023, Croakey, <https://www.croakey.org/an-ex-teacher-and-disability-advocate-reflects-on-the-failings-of-our-covid-19-response-in-schools/>

⁸ “An ex-teacher and disability advocate reflects on the failings of our COVID-19 response in schools”, Lewis Noonan, Sept 17 2023, Croakey, <https://www.croakey.org/an-ex-teacher-and-disability-advocate-reflects-on-the-failings-of-our-covid-19-response-in-schools/>

⁹ “COVID-19’s toll on children and young people”, Jennifer Doggett, September 14 2023, Croakey, <https://www.croakey.org/covid-19s-toll-on-children-and-young-people/>

¹⁰ “Association of COVID-19 with respiratory syncytial virus (RSV) infections in children aged 0–5 years in the USA in 2022: a multicentre retrospective cohort study”, Lindsey Wang et al, October 13 2023, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC10582888/#:~:text=This%20cohort%20study%20of%20228,0%E2%80%935%20years%20in%202021>

¹¹ “What drove the large RSV wave in 2022?”, John Snow Project, May 18 2023, <https://johnsnowproject.org/primers/what-drove-the-large-rsv-wave-in-2022/>

¹² “Inquiry into Long COVID and Repeated Infections”, April 24 2023, https://www.aph.gov.au/Parliamentary_Business/Committees/House/Health_Aged_Care_and_Sport/LongandRepeatedCOVID/

precedent for federal governments to take responsibility for schools with the Schools Upgrade Fund.¹³ We won't be fully prepared with piecemeal approach where each state sets their own IAQ standards.

Access to clean indoor air should not depend on which state or postcode a school is located in. Schools need national funding to upgrade indoor air quality as states and territories do not have enough money to pay for these upgrades. As of October last year, "only 1.3% of public schools are resourced at 100% of the Schooling Resource Standard [SRS], which is the minimum level governments agreed a decade ago was necessary to meet the needs of all students."¹⁴ School closures in future pandemics could potentially be avoided if measures to reduce airborne transmission of viruses were in place. Improved ventilation has other benefits such as improved academic performance and reduces the amount of pollens and bushfire smoke in the air.¹⁵ I understand federal parliament house has clean air and I think it is equitable for all schools, universities, businesses and indoor public spaces to have clean air too.

Actions & Solutions:

- Provide free respirators at school for students and staff to wear
- Link children's boosters to adult booster eligibility
- Extend vaccine eligibility for children aged 6 months to 5 years
- Make vaccination programs for flu and COVID available in school
- Provide pandemic leave pay for teachers who test positive for SARS2
- Provide pandemic leave pay for workers in casual or gig sectors
- Work with a wide range of stakeholders, such as, engineers, indoor air quality experts, nurses, school leaders, COVID-safe Schools to co-plan how SARS2 spread can be reduced in schools
- Fund indoor air quality upgrades across all classrooms, offices and common indoor spaces in schools across the country
- Educate students, staff and parents/guardians on how SARS2 spreads and how transmission can be reduced through improving indoor air quality
- Educate parents/guardians and staff on the long-term harms of SARS2 infection and the need for children to stay home and rest when sick
- Survey current teachers to ask how many known infections they have had, as well as whether they are experiencing or have experienced any Long COVID symptoms
- Survey former teachers who have left from 2020 onwards on why they left the industry
- Survey other workers who are in the healthcare, hospitality and retail industries on the number of infections they've had and whether they've got lasting health problems too
- Fund public schools (at 100% of SRS) to enable all students what they need to thrive
- Provide flexible schooling where students can learn from home or in-person (and allow students who are at high-risk of severe illness or whose parents/guardians are high-risk to attend school online)

¹³ Schools Upgrade Fund, <https://www.education.gov.au/schools-upgrade-fund>

¹⁴ "More than a recruitment campaign needed to fix teacher shortages ", AEU Media Release, October 31 2023, <https://www.aeuvic.asn.au/more-recruitment-campaign-needed-fix-teacher-shortages>

¹⁵ "COVID-19's toll on children and young people", Jennifer Doggett, September 14 2023, Croakey, <https://www.croakey.org/covid-19s-toll-on-children-and-young-people/>