

Submission Commonwealth Government COVID-19 Response Inquiry

Introduction

Thank you for the opportunity to make a submission to the COVID-19 Response Inquiry. The Cleaner Air Collective is an Australia-wide grassroots advocacy group with more than 350 members from diverse backgrounds and professions; our membership includes healthcare workers, teachers, lawyers, economists, engineers, creatives, academics, data specialists, disability advocates and students.

Many of our members are at high risk of poor outcomes from COVID-19 infections, some have high-risk family members, and some suffer from ongoing post-COVID health conditions.

One of our primary aims is to amplify the voices of our members, so we would be very keen to participate in further targeted stakeholder engagement in 2024. We also advocate for effective policy on COVID-19 and, to that end, we keep well informed on all matters relating to the pandemic – including the scientific literature.

As well as representing our members, we advocate on behalf of the many, many Australians who are not well enough to raise their own voices.

Overview

We will be pleased to see data collected by the Inquiry put to use to better prepare for future pandemics. At the same time, many of our members continue to be impacted by the COVID-19 pandemic so we're hopeful the Inquiry will lead to an improvement in the lives of those affected by the current pandemic. Some of Australia's responses to the COVID-19 pandemic were world-leading and, since the government expects ongoing, future waves both in

Australia and globally, the response to COVID-19 will be ongoing.

The measures our members feel should be of particular focus include...:

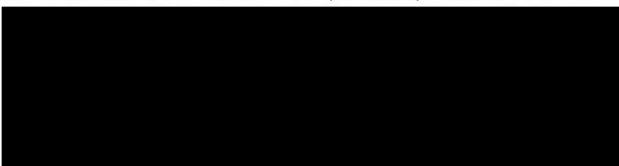
- Safe access to healthcare; this includes mask requirements in all areas of health facilities to protect both society's most vulnerable and healthcare workers
- Mask requirements in aged care facilities
- Schools made safer through improved ventilation and HEPA air purifiers in every classroom; support for children and teachers who mask
- The establishment of Indoor Air Quality standards as per the Long COVID Inquiry recommendations
- Broader access to timely, updated vaccines; Australian children under 5 should be given access to vaccination, and schoolchildren should be provided with well overdue boosters
- Easier access to PCR testing and required case reporting, enabling the publishing of reliable, weekly case data
- More comprehensive ongoing care and support for Long COVID patients
- Transparency in all aspects of public health decision making in relation to pandemics; transparency regarding data collection, vaccine procurement processes, and advice taken by government bodies
- Regular government consultation with a multi-disciplinary, independent panel of experts from diverse fields
- Public health campaign to communicate up-to-date knowledge of pandemic dangers, and best means of protection



The Importance of Public Health Communications

Cleaner Air Collective believes good public health communication early in the pandemic played an important role and there remains a need for an updated, high profile, national campaign to inform Australians about the current landscape. The general public is under-informed about the crucial concept of airborne transmission, and many do not understand that the risks of Long COVID and post-COVID conditions accumulate with each reinfection. Australia has a proud history of excellent public health education campaigns – from Slip, Slop, Slap for skin cancer, to the Grim Reaper HIV/AIDS concept, to road safety campaigns. COVID-19 and future pandemics need a similar commitment to accurate, clear messaging. Australians have proven themselves to be proactive early adopters when evidence-based health interventions are well communicated, and we feel with similar campaigns to those above, existing recommendations to test and isolate, and keep up to date with boosters would be better embraced.

Australia is fortunate to have a range of world class, multi-disciplinary, independent experts/expert bodies who have advocated for a suite of strategies since the early days of the pandemic and provided advice that has enabled individuals - including our members - to avoid infection, or onward transmission. These experts/expert bodies are:



They provide consistent, evidence-based, pragmatic advice and strategies that should be integrated into the management approach of COVID and future pandemics.

While each of these experts has their area of speciality, their COVID-19 messaging is remarkably consistent:

- Wear a well-fitted N95/P2 mask in public indoor spaces
- Improve ventilation - open windows and doors, turn on fans
- Clean the air you breathe indoors with a HEPA air purifier
- Get an updated vaccine booster whenever you are eligible
- Test and isolate if symptomatic/exposed
- If infected, isolate and seek medical care for antiviral treatment
- Do not leave isolation until two sequential negative tests 48 hours apart

Member Comments

To provide the panel with a more detailed picture of our members' views regarding the government's response to the pandemic, we asked for feedback on the Inquiry's Terms of Reference. Here is a sample of our members' comments.

The most important issues identified, in members' own words, included:

- *Lack of clear and consistent communication has led to the wide acceptance of misinformation and disinformation.*
- *There is a lack of reliable data.*
- *People "trust" that if things are bad, they would be informed, but this is not happening.*
- *Lack of clean air standards and lack of understanding that airborne transmission is the dominant mode of infection.*
- *It is impossible to take "personal responsibility" for protecting against COVID.*
- *The COVID-19 pandemic is not over yet it is now referred to in the past tense, even by government.*

Some members' thoughts on the best/worst of **Australia's COVID response** were:

- *What Australia did at the start of the pandemic was exemplary: border controls, strong approach to testing, contact tracing, isolation, precautionary principle. Protecting health was the right call.*
- *Initial response showed that with political will and leadership we can protect the population from unnecessary deaths and disability from airborne viruses like COVID-19.*
- *Early on, the worst thing was faulty quarantine: using hotels with shared air and workers without appropriate PPE.*
- *The worst thing has been telling everyone hybrid immunity/getting infected is good; this has seen an increase in chronic illness and a decrease in life expectancy.*
- *Lockdowns were an appropriate tool when there were no treatments, no vaccines, and confusion on transmission methods, but now a more moderate approach of safer public spaces is better than the polarising choice between lockdowns and 'let it rip'.*

Members also expressed opinions on specific TOR areas. Our early mass **vaccination efforts** were regarded positively but, overall, Australia's vaccine strategy was largely perceived to be poor due to: lack of transparency, lack of consideration of COVID's long term harms, restriction of vaccines for children, slow procurement (including updated vaccines), inept purchasing, and insufficient supply/endorsement of Novavax. **Public health messaging** was seen to be highly problematic due to the



continued emphasis on droplet/fomite precautions and lack of clear statements about airborne transmission. Some public health messaging prioritises handwashing over ventilation, possibly giving the public the impression this is the main method of spread. Members noted a continued emphasis on “protecting the vulnerable”, while seemingly not considering that highly vulnerable people may have children at school, have jobs that can’t be conducted from home, and cannot simply isolate themselves from their community in times of high transmission. Members viewed current COVID public health communication as either non-existent, too minimising of risks, or undermining of protective efforts (e.g., NSW Health Department’s “be kind to those who wear a mask” message). Members noticed a vast difference in the messages from state-to-state.

COVID-19 support mechanisms were also commented upon. Most were of the opinion that isolation is very important and people should be able to isolate when they or their family are COVID positive. But lack of **financial support** for those without sick leave means onward transmission of the virus: people can’t afford not to be paid so are unlikely to isolate and miss work. It was also noted that despite the government’s commitment to protect the vulnerable there has been no financial support for at-risk Australians for ongoing COVID-19 expenses such as masks, tests and air purifiers. Members observed, too, that Medicare and Centrelink are not set up to support people suffering Long COVID; this adds great stress to the lives of unwell people. Again, members noted a vast difference in support from state-to-state (e.g. free RAT programs in some states).

Reflecting upon **family/community/workplace supports**, members reported feeling abandoned and let down. Information to enable protection against COVID-19 has to be self-researched, people from higher socio-economic groups are better resourced and more able to stay safe, most Australians do not have the option of working from home, many schools have not taken steps to reduce transmission and can be resistant to parents/children trying to do so, schools have become unsafe workplaces, and members voiced that aged care and healthcare facilities and their regulators are acting with reckless disregard for the safety of the public and their employees.

In discussing **preparedness for future pandemics**, members noted the need for consistent, national data collection, full transparency, and an apolitical, multidisciplinary public health response. An independent regulatory mechanism set up to prevent the spread of misinformation through the media would be valuable. Enhanced surveillance systems were recommended (including wastewater), and it was also suggested that when a novel pathogen is detected, no mode of transmission (including airborne) should be ruled out until solid scientific evidence justifies this. Mistakenly declaring that SARS-CoV2 was not airborne turned out to

be a gross error. To facilitate early isolation, secure and high-capacity quarantine capabilities should be set up, designed to prevent transmission of pathogens by any mode. Preventing transmission was regarded as key to reducing more cumulative harm from repeated infections. Investment in treatment research as early as possible was also suggested, and members called for this to occur now in the case of long COVID (a condition that is likely to be generational), as well as a focus on additional treatments where Paxlovid is contraindicated.

Thank you

Thank you again for the opportunity to contribute to the Inquiry and represent our hundreds of members, and also the countless other at risk Australians who seek both an improvement in the government’s response to COVID-19 and better preparedness for future pandemics. We are hopeful that the evidence-based advice you provide to government will help keep us safer, healthier and more productive, both now and long into the future.

In closing, Cleaner Air Collective would be very keen to participate in further targeted stakeholder engagement in 2024, including round tables and workshops. Consumer-led, community-driven engagement on this matter, and co-design and implementation of solutions, will allow those most affected to be represented in government policy. Please contact us at cleaner.air.aus@gmail.com.

References/Links

1. [Living with COVID remains 'exceptional'](#)
2. [OzSAGE and John Snow Project join forces to call for covid disease reduction.](#)
3. [The John Snow Project](#)
4. [Omicron #3: Stuck between anger and denial](#)
5. [It Is Time to Address Airborne Transmission of Coronavirus Disease 2019 \(COVID-19\)](#)
6. [We studied how to reduce airborne COVID spread in hospitals. Here's what we learnt](#)
7. [Poor ventilation may be adding to nursing homes' COVID-19 risks](#)
8. [This professor is a global coronavirus expert. Now he has long COVID](#)
9. [COVID-19 update by CHO Dr Clare Looker](#)
10. [Cleaner Air Collective](#)



cleaneraircollective.com | cleaner.air.aus@gmail.com