

26 November 2021

AS Emet

By email: fyi-request-17144-364d376a@requests.fyi.org.nz
Ref: H202116340

Tēnā koe

Response to your request for official information

Thank you for your requests under the Official Information Act 1982 (the Act) to the Ministry of Health (the Ministry) on 12 and 15 November 2021, following up from your previous requests referenced H202114083 and H202112576. Rather than repeat your requests verbatim, they are attached as Appendix 1 and 2.

The Ministry is confident that vaccination is effective at preventing serious illness and death from COVID-19, and that it reduces transmission.

Studies carried out since initial Pfizer clinical trials, independent from Pfizer, have evaluated the effect of vaccination on transmission of the virus. Preliminary results from these studies have shown that two doses of the COVID-19 Pfizer Comirnaty vaccine can substantially reduce the transmission of the virus.

Further information, with links to the relevant studies, can be found on the Ministry's website: www.health.govt.nz/system/files/documents/pages/science_updates_7_may_2021.pdf

Information regarding the safety and effectiveness of the vaccine can also be found on the Ministry website at the following links:

- The Immunisation Handbook (chapter 5): www.health.govt.nz/our-work/immunisation-handbook-2020/5-coronavirus-disease-covid-19. This also provides references to scientific studies conducted regarding COVID-19 and the vaccine.
- The vaccine datasheet: www.medsafe.govt.nz/profs/Datasheet/c/comirnatyinj.pdf
- Ministry webpage regarding vaccine safety and efficacy: www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-vaccines/covid-19-vaccine-effectiveness-and-protection

More data is required to understand the extent of the effect that vaccination has on transmission of the Delta variant. A summary of available data can be found on the Centers for Disease Control and Prevention (CDC) science brief page: www.cdc.gov/coronavirus/2019-ncov/science/science-briefs/fully-vaccinated-people.html

The Government is acting consistently and in compliance with the New Zealand Bill of Rights Act 1990 (NZBORA) and Human Rights Act 1993. Human rights matters are considered as part of the making of legal instruments as part of the COVID-19 response, and section 5 of NZBORA provides that the rights can be subject to such reasonable limits prescribed by law as can be demonstrably justified in a free and democratic society.

Under section 28(3) of the Act, you have the right to ask the Ombudsman to review any decisions made under this request. The Ombudsman may be contacted by email at: info@ombudsman.parliament.nz or by calling 0800 802 602.

Please note that this response, with your personal details removed, may be published on the Ministry website at: www.health.govt.nz/about-ministry/information-releases/responses-official-information-act-requests.

Nāku noa, nā



Jan Torres
Acting Manager OIA Services
Office of the Director-General

Appendix 1: Copy of OIA Request received 12 November 2021

Please note that my inquiry was about “any conditions, restrictions, limitations, requirements, or any other incentives or disincentives relating to the quantity of these products administered, and/or the time-frames in which they are administered”. The request for information is not about the “quality” of these products.

Does this response from Ministry of Health mean that Ministry of Health has not considered or evaluated public health and ethical arguments for and against vaccinating people with very low risk of poor outcome from Covid-19, since both asymptomatic spread (exacerbated by vaccinated people not knowing they're contagious, and/or risk compensation of vaccinated people, among other factors) and vaccine resistant strains of SARS-Cov-2 may both likely be outcomes of wider promotion of Covid-19 vaccines, and lead to a worse public health outcome?

Has Ministry of Health considered the absence of long-term safety data for these inoculations, as it relates to the above questions? Is so, how so? If not, why not?

If The Ministry of Health has not evaluated this public health and ethical trade-off, then why were such public health and ethical considerations not accounted for?

Appendix 2: Copy of OIA Request received 15 November 2021

- * Does The Ministry of Health recognise that COVID-19 inoculations are not effective at preventing infection or transmission of COVID-19? If The Ministry of Health asserts that COVID-19 inoculations are effective at preventing infection or transmission of COVID-19, what balance of evidence, both for and against, is that assertion based on? What absolute risk reduction is claimed by such data?
- * Prior to mid November 2021, did The Ministry of Health have data/evidence that COVID-19 inoculations in use in New Zealand are not effective at preventing infection or transmission of COVID-19? What data/evidence was available prior to mid November 2021, supporting the assertion that COVID-19 inoculations in use in New Zealand are not effective at preventing infection or transmission of COVID-19?
- * What claim(s) has the manufacturer(s) of these products made to The Ministry of Health (eg, as part of any approval process) regarding prevention of COVID-19 infection or prevention of COVID-19 transmission?
- * What evidence supports the common belief/assertion (fuelled in large part by earlier statements and assertions made by The Ministry of Health) that persons not inoculated against COVID-19 are a threat to persons inoculated against COVID-19, more so than persons inoculated against COVID-19 are threats to other persons inoculated against COVID-19? (As it's commonly phrased, "the unvaccinated are a threat to the vaccinated", apparently based on a belief that uninoculated persons are a significantly higher risk of being infectious than inoculated persons)
- * Does the recent statement from The Ministry of Health, above, suggest that persons not inoculated against COVID-19 are more likely to be symptomatic if/when they are infected, and thus more inclined to self-isolate, and thus less likely to transmit COVID-19 to others?
- * Excepting specific situations (eg care of vulnerable patients {in which case they would likely be safest among people who have acquired natural immunity to COVID-19, after recovery}) what balance of evidence, both for and against, supports any segregation of any kind between inoculated and uninoculated persons?
- * On what basis were claims being made, prior to mid November 2021, that COVID-19 inoculations in use in New Zealand are effective in reducing infections and/or transmission of COVID-19? What balance of evidence, both for and against, were such claims based on? Aside from a balance of evidence, what other factors may have influenced The Ministry of Health to make claims that COVID-19 inoculations in use in New Zealand are effective in reducing infections and/or transmissions of COVID-19?
- * Has The Ministry of Health considered how this conflicting information may cause public confusion? If not, why not? If so, what has been found? What is being done to remedy any harm caused?
- * Has The Ministry of Health considered how this conflicting information may lead to public distrust in The Ministry of Health, and/or "the government"? If not, why not? If so, what has been found? What is being done to remedy any harm caused?
- * Has The Ministry of Health considered how this conflicting information has led to correct information being labelled "fake news", "conspiracy theory", or similar, and how that affects public health? If not, why not? If so, what has been found? What is being done to remedy any harm caused?

* Has The Ministry of Health considered how this conflicting information has led to incorrect information being labelled "truth", and being "verified" by "fact checkers", and similar, and how that affects public health? If not, why not? If so, what has been found? What is being done to remedy any harm caused?

* Has The Ministry of Health considered how this conflicting information has led to a hostile environment against individuals and groups who have chosen to conscientiously object and otherwise (eg by exercising their human rights) to abstain from COVID-19 inoculations? Has The Ministry of Health considered the many ways in which such a hostile environment exacerbates a public health crisis? Has The Ministry of Health considered the many ways in which such a hostile environment is likely to lead to future public health crises? If not, why not? If so, what has been found? What is being done to remedy any harm caused?

* Has The Ministry of Health used this (or other) conflicting or otherwise incorrect information, or is there any reason to believe that The Ministry of Health has been used to disseminate or otherwise spread conflicting or otherwise incorrect information, to pursue any purpose whatsoever other than public health goals as stated and generally understood?

* Has The Ministry of Health considered how this conflicting information may lead people to incorrectly calculate their risk/benefit assessment of a COVID-19 inoculation? If not, why not? If so, what has been found? What is being done to remedy any harm caused?

* Has The Ministry of Health considered how this conflicting information may lead healthcare professionals and treatment providers to not correctly understand, or explain to their patients, the risk/benefit assessment of COVID-19 inoculations? If not, why not? If so, what has been found? What is being done to remedy any harm caused?

* Has The Ministry of Health considered how this conflicting information may, both directly and via professional advice from ill-advised healthcare professionals and treatment providers, lead to breaches of healthcare providers' ethical and legal requirements to facilitate informed consent, and to empower their patients to make decisions on the basis of informed consent? If not, why not? If so, what has been found? What is being done to remedy any harm caused?