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Sent: Friday, 14 January 2022 11:59 am

To: Out of scope @dpmc govt.nz>

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Subject: ODI Feedback - Feedback on the phased opening of the borders

Kia ora Out ,

Thank you for the opportunity to provide feedback.

ODI hosted a series of 'touch-base' meetings on Thursday 13 January 2022 with members of disability stakeholder groups we have an ongoing relationship with. Their comments are summarised in the table below.

There were also a range of other comments that were raised that did not strictly fall under the proposed questions. These are listed in the bullet points here:

Communications

- There is ongoing confusion over the traffic light system and what each setting means for disabled people.
 - Messaging is unclear and this makes compliance difficult. Some people are remaining isolated as it's less stressful, especially for those with memory and other cognitive conditions.
 - Current advertisements do not capture consumer attention.
- Language is critical people need to feel that they have options and can make informed choices ie avoid terminology such as 'mandatory'.
- Communication between government and frontline workers needs to reduce confusion and ensure that the standards and rules are applied fairly and equitably to everyone (e.g., face coverings).
- Families feel that the current media focus is on business impacts and tourism, rather than the welfare of disabled people, and families with disabled children.

Future variants

- There is continuing fear of the future and potential future variants.
- Others are 'watching and waiting' to get a future vaccine. They want to understand any side-effects, and don't feel it's necessary to get a vaccine if it won't protect against future variants.

International responsibilities

• NZ is a gateway to smaller NZ islands (e.g., Chatham Islands), and the Pacific – it is important to protect these places.

Self-isolation support

 Provide ways of entertaining people in isolation/lockdown situations to make it easier (e.g., gaming consoles, free internet and devices to use).

Comments from 'touch-base' meetings

Community	What are the	What would be	Does your	What public	What changes to
focused	impacts of re-	the impact on	community feel	health measures	the existing
questions	opening in the	your community	confident that New	could you live	reopening
	proposed sequence	of the border	Zealand could	with over the	approach would
	on your	remaining closed	manage the public	longer term	you suggest if
	community?	to most	health risk if border	domestically and	New Zealand
	*			-	

	(i e opening to New Zealand citizens and residents in Australia, and then more broadly)	international visitors until after winter 2022?	restrictions were eased before winter 2022?	at the border? What measures would be more difficult to live with over the longer term? (i.e. pre- departure testing, on- arrival testing, self-isolation, vaccination requirements, travel declarations.)	needed to tighten its border settings again? (i.e due to a serious variant of concern or another pandemic).
sector engagement	NZ residents and citizens first – then others including Australians. Concern about the huge number of cases in Australia. People who are immuno compromised want to put safety first. There have been examples of NZ's rules being broken without consequences and this isn't reassuring for re-opening. Vaccinations have not reached the whole 5–12-year-old population, this age group (and younger) are still vulnerable. People are 10 times more likely to die if they have COVID-19 and a learning disability. Isolation The recent prolonged lockdown in Auckland demonstrated the impact of uncontrolled cases in the community. Blind citizens feel particularly vulnerable to isolation through lockdowns. Opening up will create opportunities to reconnecting with family, whānau and other loved ones Changing the eligibility criteria to re-enter New Zealand Appetite for stricter and/or	Across the people we spoke with, the majority favoured continued border restrictions to protect vulnerable people • For those who are immuno compromised it is preferred that any border opening is delayed. This will give time for booster shots to be provided, and people to plan for possible lock downs and/or home isolation. • A delayed reopening would be better for the already pressured health system, eg, a disabled man had his tooth operation delayed four times due to system overload. • Some disabled individuals (and migrant support and care workers) have been isolated without their family/whānau for a long time – they are vulnerable, and this is impacting their mental health.	The community members we spoke with had minimal to no confidence the risk could be managed Pressures on existing services Opening will create greater pressure on a system that is struggling to provide health and disability services (particularly in regional areas). July will see significant system change in both the health and disability systems this creates uncertainty and risk that business as usual may not be maintained while new systems and processes are stood- up. Can NZ's system support the people already here as well as visitors/returning NZers? If this is not guaranteed, people coming to NZ should be given this information so they can make an informed decision about travel. If there were further lockdowns, the closure of respite care, schools and day programmes would disproportionately impact families with disabled children. Disproportionate risk for disabled people (in particular Māori disabled and Pacific disabled) Māori, Pacific and disabled populations have	Need clear information and guidelines that can be understood by everyone. If you reach disabled people effectively, then the rest will come more easily. Easy measures to keep people safe Vaccination requirements: 2 doses + booster(s) will create greater protection. Vaccine Passports, face coverings and sanitiser. Training for border and frontline workers Those at the border need more regular training to ensure they are better equipped to manage increase of traffic through the boarder, and updated information as new strains emerge to ensure workers strictly follow guidelines and don't get complacent. Feedback regarding testing was mixed Some people were supportive of testing as frequently as possible (both in MIQ and home) – pre-	 How will disabled people get the support they need to selfisolate? In past lockdowns this was inadequate, leaving people vulnerable. There must be a clear plan. Disability inclusion must be considered initially and given higher priority or further actions will exasperate current disadvantages, vulnerability and isolation. Information is still not equitably accessible. There is a need for clearer information and more equity of access to information, and this should be built into any change processes. Digital divide for those without access to the internet information is far less accessible. Many people have an email address but can only access via a library causing significant problems. Stricter home isolation, compliance monitoring. Better define and enforce

prioritised reentry criteria.

- Too many exceptions for incoming travellers, with no clarity about outward travel.
- Border closures have meant some families do not have access to other family members who could support with respite.
- The decreased availability of migrant workers has impacted the disability and healthcare support available.
- Advocates including disabled people with international roles are not being treated equitably in accessing safe travel.

Making things easier for disabled people and their families who want to travel

- Create flexible options to complete required departure/arrival activities before the a trip to streamline and simplify what is needed to travel.
- Ensure equity of access to MIQ and the supports needed for disabled people in quarantine should be prioritised.
 Other

considerations

 Australia has opened its borders. It's important to ensure that Australia isn't used as a backdoor to enter New Zealand.

- been disproportionately affected, and are more clinically vulnerable to contracting COVID-19 due to underlying health inequities and/or inequitable vaccination rates.
- Māori and Pacific peoples also comprise a disproportionate number of NZ's COVID-19 cases.
 Disabled people
- Disabled people
 (particularly
 tāngata
 whaikaha) have
 been underserved
 by the current
 health system
 This has been
 highlighted
 through the
 Waitangi
 Tribunal.
- Deaf people report being disadvantaged by hospital triage processes.
- Inadequate disability responsiveness training has been provided to border and MIQ staff, meaning disabled people are more vulnerable.
- Home isolation options are not suitable for those living communally and in large households. It is important that alternative options are available.
- Disabled people are often considered as an afterthought when planning. Anything new has to be properly planned, with disabled people in mind eg at the border, MIQ, quarantine, testing and vaccination access.

Other

- Visitors may not comply with NZ guidelines, or may not understand them.
- People in are struggling to

- departure testing, onarrival testing and while isolating. Overseas some people receive daily tests. Others felt
- that testing was invasive, but that this could be mitigated if tests were quicker and easier to do. Rapid Antigen Testing (RAT) is quick and can be done at home, which is more accessible for some disabled people.
- RAT is not accessible for blind people.

- what is deemed essential travel.
- Cost of travel and access contributes to further disadvantage.
- More forward thinking and planning with disabled people at the centre.
- Need to have vaccine process and face coverings issues resolved before putting more pressure on our community, support and healthcare systems.

		understand the current guidelines. What will the consequences of breaches be? • With more people visiting, there will be additional challenges to socially distance. • Winter has unique challenges – seasonal respiratory and influenza infections.	
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Please let us know if you have any questions.

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