Te Tira Ārai Urutā

Royal Commission of Inquiry into COVID-19 Lessons Learned

Official interview transcript: Rt. Hon. Christopher Hipkins

4 August 2025

Present:	Judy Kavanagh	JK	*Commissioner of the Inquiry*
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	[introductory comments redacted]
CH	Sure. Chris Hipkins. I was the Minister responsible for COVID for a reasonable amount of the time.
NL	You're responsible for the response, right?
CH	That's right.
NL	Not the virus.
CH	Absolutely.
	[redaction]
CH	Yeah. It's interesting, though, isn't it? That is a distinction that gets lost on people quite often, that the government response and the virus itself were different things. Yeah.
NL	Yeah. And ...
AP	[accompanying person for Rt. Hon. Christopher Hipkins]
NL	Right.
LC	And I'm Linda Clark, Counsel.
IS1	[IS1], Chief Advisor in the Secretariat.
NL	Nicolette Levy, Counsel for the Commission.
DK	I'm Danielle Kelly, Counsel for the Commission also.

JK	And Judy Kavanagh, Commissioner.
CH	Very good.
NL	All right. Well, thank you very much for coming today. It's to answer our questions, Mr. Hipkins, about a series of answers that you provided and we got at about 4:00 PM on Friday.
	[redactions]
NL	All right. Well, hopefully some of our questions might tease out a little bit more of that nuance, but we do appreciate that a lot of time has passed. So I'll get into some of the questions that we've prepared arising out of the answers that you gave. I'm the person asking you questions, but the people with the real detail in their brain is [IS1], who's what we call a subject matter expert. So he's been one of the people reading all the 7,000-odd documents that we've received. I haven't read those. Danielle's probably read a couple more than I have. Judy has read papers summarising the information. So the true subject matter experts are [IS1] and Judy.
CH	Mm-hmm.
NL	So you'll get your question from me, but there might be follow-ups from people that know more about it.
CH	Sure.
NL	So you've talked about the alert level framework no longer becoming the best way to manage the public health restrictions, but you haven't given us any detail about the key factors that led the government to change to the Covid protection framework. Can you think of the particular ways that the alert level framework was no longer appropriate, or the particular improvements that you became aware were needed?
CH	I think the issue around the alert level framework was it was designed at the start of the pandemic and of course continued to be evolved and refined as the pandemic went along. Through that early iteration and refinement, it was very much refined to be an elimination framework. I think as we got to the point where elimination wasn't likely to be a longer-term strategy, so we were in that point where we were starting to have to shift to something that wasn't going to be elimination, I think the limitations of it became much more transparent. I know in your written questions, you focused, for example, on that October period where we moved to three steps within level three. I think that was really in recognition of the fact that the four alert levels were too blunt for the sort of nuance that we were starting to have to deal with when you get higher rates of vaccination, you get new

	variants emerging potentially more quickly than they had been previously, and the need to transition to something else. And so, I think that those three steps within level three were the first immediate response to that, recognising that the public health situation had changed and the advice was constantly changing. The initial objective of that August lockdown, which was to get back to zero, was looking less likely that we would be able to get to zero. And even if we did, that we would be able to sustain it there. But also recognising that level three was not going to be sustainable as an ongoing management tool either. So I think we got to the three steps within level three as our first iteration towards something that was more about living with COVID as normal, and that then quickly transitioned to the protection framework, which was what we colloquially call the traffic light system. That was, I think, a recognition that we needed something different for the post-elimination period compared to what ... The four levels have worked superbly for elimination, and we spent a lot of time refining exactly how they would work. So when we did them in the first place, there were ... I think the four levels, particularly levels four and three, three and four, became more accommodating of the activity we needed to be able to accommodate as we went along. So looking at areas like retail, for example, after that first period. I spent some time working with people who were affected by level three and level four, just to iron out some of the practical difficulties. So, for example, some trades like plumbers and electricians and the people who you need to keep the country functioning, they were essential trades, but retailers like Mitre 10-
NL	Who provided them ….
CH	... who provided them with what they needed, while they were able to operate at a restricted level, they had some really practical things about how they could do that better, so the click and collect stuff, which, at the beginning, you couldn't do click and collect, and we progressively made that more available. I'm using that as an illustration because a lot of that ... I think when we designed the four levels right at the beginning, we were trying to find something that might work through the pandemic. But as we found success with elimination, the four levels were refined to build on the success of elimination. Then once we got to the point where we needed to do something else, it was clear that we were going to need a different set of tools to what the four levels provided us.
NL	I think at earlier interviews, it's been a bit of a mystery where the COVID protection framework name ... And so, the beginning of that came from. Can you remember?

CH	Oh, I mean I can't remember who named it, but it was ... I mean I think the three steps within level three were the first public steps towards that. A lot of discussion had been happening about what was going to be next, but that was, I think, a recognition that we were seeing in Auckland in particular. There was increasing reluctance to follow the level three restrictions, and we weren't in a position where we could just go to level two. So we needed to do something that said to Aucklanders, "We hear you. We understand that level three is ... That's straining, but we can't go to level two yet. So here is something." I think ministers were very attuned to the fact that we didn't want to have to wait till we could get all the way to level two before we demonstrated to Aucklanders that we hear that this isn't working for you.
NL	Mm-hmm.
DK	So just earlier, you said it became clear that level three was not sustainable as an ongoing management tool. Is that what you're referring to, people not being ... Increased reluctance, sorry, for the-
CH	Yeah. I mean we were finding ... I mean the alert level system only worked because of voluntary compliance. There was no way that the alert level system would ever work if you had to police it. It only worked because there was goodwill towards it and people were willing to follow the rules. I remember ... I mean stop me if this is irrelevant to you, but I do remember those early conversations around the alert level and that very first announcement in March 2020. I remember asking Ashley Bloomfield specifically what level of compliance will we need for this to work? At the time, we were focusing on flattening the curve rather than elimination. So in order to flatten the curve, what will we need to do? He said about 80% compliance would be where we needed to get to in order to be able to flatten the curve. In reality, we got a compliance level that was far, far higher than that. It would be 98%. People were generally very, very supportive of what we were doing. That's what made elimination possible. Probably if we'd had 80% compliance, we would've flattened the curve, but not eliminated. But because of that high level of compliance, we were able to open up new options that we might not have had if people hadn't shown that goodwill towards it. And so, I guess as we went along, we were always very conscious that there was never going to be a firmly policed system that was going to work. Whatever we did, whether

	it was the alert level framework or the COVID protection framework, there would have to be a level of public support for it or it wouldn't work.
NL	Okay. Thank you. We have your response to our question 12, that the position throughout the pandemic was that a strong public health response was essential to a strong social and economic response. You give the counterfactual of what would've happened if it'd gone through in 2020. Is it fair to say that to the extent that there were trade-offs, they were more finely balanced in 2021 and 2022, or do you resist that?
CH	I resist it in the sense that there were different trade-offs involved. I've always resisted the notion that we were trading off health versus the economy and social factors, because I always saw those things as intricately linked. I think you'll find the collective view of those involved in decision-making was that they were intricately linked. One of the worst things for the economy in the early phase would've been for COVID to get into the country, tear through, and have a whole lot of people in the hospital and dying and so on. As we saw in other countries, that would've been economically disastrous. But we were also very mindful as we got to the transition from elimination to living with COVID that we didn't want that to happen, but just with a two-year delay. So we were in a different position to other countries by the end of ... And it was one of the things, I think, that we can all reflect on, added to some of the social pressure that the government was finding. There was news coverage now of other countries all declaring freedom day when we were at a different point, because while a lot of their more vulnerable members of the population had had COVID and many had died, we weren't in that position. And so, the last thing that I think anyone in the COVID response wanted to see was that we would have a big wave of COVID sweep through, have the same effect as other comparable countries had had, but just two years after them.
NL	Yeah. You'd be answering a different set of questions then-
CH	Yeah.
NL	... if that's what had happened. Yeah, okay.
CH	Sorry, just a further illustration. I was looking back over the first Royal Commission report the other day just in preparation for this. In the excess mortality graph, I think, that's referenced in the first Royal Commission report, I think illustrates one of our concerns, particularly around that 2021, 2022 transition, was that having achieved below normal levels of excess mortality, I think the last thing we wanted to see was that all of that then reversed in 2022.

	I think we can be proud as a country the fact that it didn't. Excess mortality went back to about where the long-run average had been. There could have easily been a scenario in which that skyrocketed up as we moved from elimination into a different phase.
NL	There was a spike in hospitalizations and deaths in 2022. Was that inevitable?
CH	I mean that's probably a better question for the epidemiologists than for us. I mean we were working very, very hard to try and preserve the hard-won gains that the country had had at that point. I guess there was a lot of discussion at the time about mortality being someone passing away with COVID or someone passing away from COVID. Particularly with elderly population, that's always going to be quite a difficult conversation to have because there are a lot of people who die with influenza, for example, and whether it's the cause or just the final thing. That's always a really sensitive conversation. I think in 2022, that was certainly something that we were testing in terms of the advice we were getting. I don't know that we'd ever find a satisfactory answer to that question.
NL	It's such an unhappy question that there can't be a happy answer. But is it fair to say that you were thinking more about the costs of lives in 2022 than in 2020?
CH	I'm not sure. What do you mean by that?
NL	Well, some economists ... there've been some assessments done of the value of lives saved, and they look at the average age, or the age of people that are dying and the years of life that they had ahead of them.
CH	I always rejected that analysis right from the beginning because I think if we'd put dollar costs on people's lives through COVID, you would've probably had quite a different response. I never saw it that way. Frankly, if it's you or someone you love who's dying, the dollar value doesn't matter.
NL	Is a strong public health response still the most appropriate response even when you know that the virus can't be successfully eliminated?
CH	Absolutely, because I mean the nature of the public health response changes when you move from elimination to suppression, if you like. But a weak public health response, as you move from elimination to suppression, is likely to be even more economically costly than a strong one, because one of the big issues that we had was workforce availability, and COVID ripping through the community really quickly once elimination was no longer achievable would've been a disastrous economic response. But also at a social level too, as Minister of education during that time, I would regularly talk to school principals who would say to me ... Because by then, COVID was in the

	community through 2022. They would say things like, "Every morning I get out of bed and I count. I count the number of kids who are going to be coming to school that day and I count the number of teachers that are going to be coming to school that day, and I hope that I can match those two things together." For those schools, it was a daily thing for a good year and a half. It was just every day was a battle. And so, we stopped all of the other education reform with schools during that time, because just getting from one day to the next was all that they were focused on. And so, I think it illustrates the fact that you still have to weigh all those things up because, again, had COVID spread more rapidly and schools had to close because they didn't have enough teachers, that would've been very economically costly because then all of the parents of those kids wouldn't have been able to go to work.
NL	I do remember that happening. It's the staggered days off some schools had. So there was another factor in that conversation, the children that might not be coming to school because of the fear of COVID.
CH	Mm-hmm. Right at the very beginning, that was a huge concern. So if I go back to 2020, we were trying to achieve good consensus and buy-in to what we were doing. At that point, I was focused on being minister of education. I wasn't involved in the broader public health response, although I was on that cabinet committee, so part of the collective decision-making process. But my own day-to-day was focused on schools. I remember the conversation that I had with Nikki Kaye was all about that. It was about the fact that parents were just going to stop sending their kids to school. So we were talking about at level one, two, three, and four, where do schools fit in with that? She was, if anything, more adamant than I was that schools had to close because-
NL	So is this a 2020 discussion?
CH	This is 2020.
NL	2020, yeah, yeah.
CH	So I think all the way through, we were very, very conscious of that.
NL	By 8 November, so this is 2021, the director general of health is saying that various factors are finely balanced. He says the risk of increasing case numbers is likely to be outweighed by the benefits of easing restrictions and the well-being of people living in the region, particularly as vaccination rates continue to increase. Is that your understanding of how it was beginning to look?
CH	Sorry, run that one past me again.

NL	The risk of increasing case numbers is likely to be outweighed by the benefits of easing restrictions in the well-being of people living in the region. So I think the benefits of-
LC	If you've got that on some advice, that would be better.
CH	Yeah. What was ...
LC	So this is ….
IS1	Paras 10 to 45.
CH	Oh, this is the public health advice at the time.
LC	Yeah, and the reference they're talking about is there.
CH	Yeah, I mean clearly that was the advice that cabinet accepted. Yeah.
NL	You have said in your answer to question 13 that, "All decisions were informed by imperfect evidence and information we didn't have, and couldn't have a full picture of all we needed to know." Thinking about the people that have to make the decisions next time something like this happens, are there any particular types of evidence or information that you think, looking back, would've helped you in the task?
CH	I mean the most useful information, when you look back at it now, in order to do what you are being tasked to do, identify what we could have done differently, just wouldn't have been available to any decision-makers. So the peer-reviewed analysis of the interaction between vaccines and different variants, that was never going to be available to decision-makers at the time the most critical decisions had to be made. But clearly is very useful, in retrospect, to analyse the success or otherwise of different things that we did during that time. I think one of the challenges with looking forward, and we grappled with this as a government and trying to be better prepared for a future scenario, is the future scenario is not going to look like the previous one. So it might not even be a respiratory illness that we find. I mean it's more likely than not to be a respiratory one, but it might not be. Even there was a recommendation in the first Royal Commission's report about stockpiling PPE and testing. Well, PPE I can totally agree with, but stockpiling testing for what? Again, going back to 2020, in order to ramp up our PCR testing, we had to contend with a worldwide shortage of reagent, and you can't stockpile that if you don't know what you're stockpiling it for. What are you testing for? The technology, I mean I know you're going to get onto questioning this, but the technology changed. RAT tests became available and so on. But at the beginning of any pandemic, none of that's going to be readily available straight away.

	I think what COVID showed us, though, is that the world can respond to these things now faster than it ever can before. A vaccine being available within 18 months is a remarkable advance in human history. And so, I think it may be that some of the new testing technologies, new vaccines might be even quicker next time. But who knows?
DK	I mean those sorts of things and, as you say, information or peer-reviewed analysis will never be available for a novel disease. But is there anything in the category of information that could be more readily collected ahead of time that would've been useful for you in decision-making?
CH	That's really hard because there is so much information that you're having to digest at the time you're making decisions.
DK	Yeah it's creating a written response that's very ….
CH	So for a number of us, it was ... It's actually one of the things that makes this process challenging, because for a number of us, it was just all day, every day. There was more and more information coming every day. So I mean this might be a diversion, so stop me if necessary, but on a daily basis, I would have regular agency meetings often in the morning. At 11:00 or 11:30, we would have a Zoom call with all of the different health officials where we would get more information. We would then have the 1 o'clock media conference where we would impart that information to the public. We'd then have parliamentary question time. Interspersed with all this was media interviews. Then we were also meeting reasonably frequently with the modelling teams who were trying to make sense of what limited evidence there was to model different scenarios. And so, all of those meetings were happening all of the time. So there was a lot of information, but digesting that was a full-time thing. For a number of us, that was every day, all day, every day, and it didn't stop.
NL	Yeah. Were there any sources of information that were perhaps surprisingly helpful that you hadn't perhaps been conscious of previously as coming to the fore in this type of situation?
CH	I think all of the stakeholder group feedback was good insofar as we could access it, just from that practical perspective of here's a decision you're making, here's how you can make it work.
NL	So what was happening on the ground, like what was happening in Mitre 10?
CH	Yeah, Mitre 10 was good.
NL	Concrete examples.

CH	Yeah, so Mitre 10 was a good example. Air New Zealand was another one. So we were grappling with how ... And the shipping companies. We were grappling with how ... We're not an ... As much as we might think we're isolated down here, we're not isolated down in New Zealand. We rely on people and stuff being able to come and go every day. That's a people business fundamentally. And so, we were talking to Air New Zealand, for example, about how can we make this work? Because if you think about a pilot, if a pilot had to follow the same isolation process as everybody else, no planes would fly ever. Similarly, the shipping companies would not send anything to New Zealand. No ships would port. Then we would be in trouble. So we had to work through with the shipping companies and their representatives with Air New Zealand. I got to know Greg Foran quite well because he'd just become chief executive. We were trying to figure out how do you keep an airline going in this context, because the risk for the airline staff was not in New Zealand, it was in other countries. So how could we make that as safe as possible? Bearing in mind that they didn't want to get COVID. Also, there was significant pressure on them that we had to balance. So we had pilots and airline staff talking about the difficulties of sending their kids to school, because the schools didn't want the kids if they had a parent at home who was exposed to more risks because they were travelling frequently. So we had to work through all of that to provide public reassurance. And so, I think those direct stakeholder relationships were such an invaluable source of information, because sitting at a desk, you would never map all of that out on paper and get it right. You only get it right through-
NL	You couldn’t think of it until somebody raised it.
CH	That's right. But even practical things like the ... So you transport the staff from the plane directly to an isolation in Los Angeles, and back again. There's a lot involved in that chain of events that's about keeping them ... So you've got to think about the transport. You've got to think about where they're going to eat. You're going to have to think about the hotel that they're staying at. So we had to go through every individual step of that, and I know nothing about it ... I know quite a lot about it now, but I knew nothing about how international airlines operated up until that point. We just all had to learn that so that we could make sure the rules were compatible with them being able to function.
DK	Right. Just and was taken in by yours and others' responses that this is the level of communication that you were receiving throughout this period which would be difficult. But you mentioned both Mitre 10 and Air New Zealand and being able to work with both of them. I noticed you've referred to those as people that felt comfortable calling you

	directly. What about the people that didn't have that direct access or those interests and stuff? Was that a challenge, I guess, for you in-
CH	We'd sort of tried to work through a lot of the associations, because I mean they are comfortable interacting with government ministers and they have good direct linkages. So Retail NZ, Hospitality NZ, those peak bodies we were interacting with quite a lot. The different health groups we were interacting with quite a bit as well. So there was a lot of that peak body engagement. Then there were others who made their way to direct communication just by being noisy. So people like Ian Taylor, I mean Ian Taylor probably had more access to government ministers than just about anybody else during that time. Not that he would say that. But Rob Fyfe was doing quite a lot with some of the business leaders as well. So we had emissaries out there trying to keep those communication channels open.
NL	Do you have any questions before I move on?
JK	I am interested in this. It seemed to me that the business community, their aims and objectives were very aligned with the government's objectives. And so, do you say that there was built a really high degree of trust between the government and businesses over those objectives that allowed you perhaps to let them do the best ... They knew and you knew what outcomes you wanted, but the best way of achieving that without you having to go into the detail of everything that happened?
CH	Yes and no. I mean we had some really good fruitful engagement with them. I think the objectives, no question. There was absolute alignment on objectives. But I think there was always going to be tension about the best way of achieving those objectives, and it was a healthy tension. So if I take managed isolation, I know that's not in your terms of reference, but there's a case here that illustrates the point. We had Auckland Airport and others wanting to run their own managed isolation. And so, we said to them, "Well, you come back to us with a proposal for how to do it, we're open to receiving that," and they couldn't really stack it up to the specifications that we were running it without all of the things. So one of the things I would've loved to do is get the military out of MIQ because it was very hard on them. There was a higher attrition with the military. But the private sector couldn't come up with a model that didn't still involve the military being the ones to do a lot of the logistics and a lot of the security around it.
JK	Okay. Interesting.
CH	And so, I think a lot of those ... My engagement with the chief executives, and I did quite a few of those round table conversations during that time, were the private sector can

	do more. I think it was a genuine goodwill offer, but when we actually unpacked what would that look like, it didn't quite always work out that that was a realistic option. But I think there was goodwill. There was absolutely goodwill.
NL	We've heard quite a lot about that goodwill, particularly in the vaccination space. We've had big business saying that ... Big factory or manufacturers said, "Well, we could have had a vaccination site here and we could have had a barbecue, and everybody on the block would've come along and got vaccinated." Is that an example of the sort of thing that might have failed once you unpicked it, or was there just not time or resource to look at all the ideas?
CH	The issue with vaccination, so if you take availability, it was about making sure we were getting maximum coverage with the resource that we had. So every business wanted to have an on-site vaccination clinic. The practical realities of doing that just would've actually slowed down the vaccine rollout rather than speed it up-
NL	Right, right.
CH	... where you're having to do ... When it's got a ... Certainly in the beginning where there's queues down the road of people wanting to be vaccinated, you want the fastest batch processing possible, and the bigger vaccination sites were by far the best way of doing that. As we went on, there was more of that because the demand started to ebb and the pockets of unvaccinated were getting harder to reach. And so, more of those bespoke arrangements were done further down the track. But I think early on, if we had done that, it would've meant that people potentially would've slowed it down rather than sped it up. I mean I understand what the objective was. Firms wanted to have all of their staff vaccinated so that they could avoid other measures that they needed to have. But particularly for the smaller medium-sized enterprises, and even some of the bigger ones, it didn't quite stack up. So if you take a big retailer like The Warehouse, for example, thousands of people, but coverage would've involved lots of individual smaller sites. So it wasn't the best way of reaching the people in those sites. I remember having that conversation with The Warehouse. So yeah.
JK	Interesting.
NL	This is just quite a technical question, I think, about question 16, about the alert level restrictions in Northland and parts of the Waikato, in the second half of '21, were sometimes determined by you and your ministers with the powers to act without cabinet consideration. What was the reason for that? I think you have answered that the

	decisions did go back to cabinet for validation, and then went via the regulations review committee.
CH	Yeah.
NL	Was there some division of labour there, though, between the ministers and cabinet about those decisions?
CH	There wasn't necessarily division of labour, it was just practical.
NL	Yeah.
CH	That was a practical thing. So those daily 11:30 meetings became pretty important for making those decisions. So, generally speaking, a decision to extend the status quo, for example, we wouldn't necessarily go back to cabinet with that. If it was a major decision, like we're going to go from a level three to level two, then generally if time allowed for that, we would try and do that. Stepping down the alert levels was certainly more subject to cabinet conversation than stepping up. Because the stepping up, you're often responding to something that needs to be very urgent. We would try to have a quick cabinet zoom where there were major decisions made there, but it wasn't always possible. I mean the beginning of that August lockdown, I wasn't actually at the cabinet Zoom because I was on a plane from Auckland to Wellington. So we found ... Jacinda and I were all together, and Grant, I think, was there as well. We were opening an Auckland University building or turning the SOD or doing something like that. While I was there, I got the phone call.
NL	Yeah, that someone had been found with Delta.
CH	That's right. And so, I just left and got straight on a plane to come to Wellington, and we were all on the phone. Then of course I got on the plane, turned my phone off. By the time I turned it back on again, Jacinda had already convened the cabinet meeting and the decision had been taken, because it was just, minutes matter. And so, then I went into the full speed of implementing the decision that the cabinet had taken.
NL	Thank you. You have said in relation to question 17, "As I indicated in my answers to the first Royal Commission, my personal reflection is that the Auckland lockdown could have been eased sooner". [redaction]
CH	I mean I think what I ... I may not remember the conversation. I think what I was reflecting on there is that we were straining public goodwill. That's very evident now in the public record. I think that is what we were grappling with, with the steps within level

	three, that we needed to do more to keep people on board, to keep the goodwill. I think we really were grappling with that. But I think the public first Royal Commission report reflects this as well. There was still a lot of uncertainty around vaccination, Māori and Pasifika vaccination, them being more vulnerable populations, but by lower levels of vaccine. I think there were claims, active claims, at the Waitangi Tribunal at the time that we were not doing enough to protect vulnerable populations. So all of those things were in the mix.
NL	I've got a question about that because you've said you were straining public goodwill. Was there an aspect of that public goodwill that was saying, "Get on with these mandates so we can get on with our lives"? Do you remember that as an input?
CH	I remember there was political pressure around that.
NL	From?
DK	[inaudible 00:40:38].
CH	Well, some of the people who are currently in the government who now have a different view.
NL	Yeah, well that's , yeah.
CH	Yeah, but there was certainly questions about ... So I remember, I mean David Seymour was a passionate advocate for vaccine passes and wanted businesses to be able to make their own decisions about whether to impose them or not. It was very much from that just do this and let everybody get on with it.
NL	Yes.
CH	We were a bit more cautious. So it took us a wee while to get to where we got to on that. I mean the issues around vaccination passes and vaccine mandates were, I think, of all of the decisions that we grappled with, the hardest because they were the ones that rubbed up most against people's individual rights.
NL	Well, that's why it's interesting to hear about the political pressures that there were and in which direction they were going. Can you mention David Seymour and the vaccine?
CH	Well, I mean I remember Winston Peters arguing-
CH	I mean he wasn't in government by that point, but he was arguing that prisoners should be forcibly vaccinated, and anyone on a benefit who hadn't been vaccinated should have their benefit cut. He was publicly advocating for that. So we were getting it from all directions around that. What we were trying to do there was balance the need to

	preserve public support with the need to make sure that what we did was based on health advice. So preserving public support by rejecting health advice was never something that we were going to do. We were always going to follow the health advice. But balancing the way we did that to make sure we preserved as much public goodwill as possible was a big challenge for us.
NL	Mm-hmm. Were you hearing a great deal from the 10 to 12% that weren't vaccinated and didn't want to be?
CH	No, I actually think that grew in 2022 more than in 2021. The anti-vaccination group was quite small and quite quiet in the beginning. I think a lot of that grew post fact, post events, rather. I think some of that was very much informed by a lot of that misinformation that started to flood in towards the end of 2021, didn't really start to bite until 2022. We definitely found by 2020 ... I mean I think ... I was just trying to remember. Someone has reflected on this recently. I think one of the universities has done a study about it, that New Zealanders were consuming more vaccine misinformation per capita than the Americans were. A lot of that happens below the surface before it bubbles up, and it certainly bubbled up by 2022. But in 2021, it wasn't a big noisy part of it. If anything, the noise was more about can we go faster? Can we get more vaccines quicker? There was a huge pressure on us to get more vaccines quicker. I just watched over the weekend a documentary about Australia, about Scott Morrison, that he was under the same pressure that we were under, and that the most effective vaccine was the one that was proving to be the hardest to get larger quantities of, yet we could have gotten more of AstraZeneca, for example, quicker. But actually the Pfizer vaccine was the one where the evidence was ... The best health advice was that you should do more with Pfizer. Pfizer had their international allocation model. We were lobbying as hard as we could to get them to give us more quicker, and they were sticking to their international allocation model. In the end, there was a little dip where we were potentially going to have to slow down until the next big shipment from Pfizer. It was actually Jacinda's connections with the prime ministers of Spain and Denmark, that meant that we could do a swap, because at the time the vaccines were three-month dated. And so, they had some that if they weren't used within the next month were going to expire. We had more coming.
NL	Right. We had some coming, yeah.
CH	And so, we were able to swap some of their short-dated ones for some of the ones further down the track. It helped us to smooth that. We didn't have to have a lull in the

	vaccination programme. But that was where the pressure was. The pressure was not slowing down. It was, if anything, the public demand was to go faster.
NL	Yes, and harder-
CH	Yeah.
NL	... when the mandates arrived. Well, no, you're not linking that to the mandates?
CH	Not necessarily, no. No, I wouldn't necessarily link those two things. I mean I actually think the strongest pressure was right at the beginning.
NL	Right. When the vaccines first came.
CH	Yeah.
NL	Okay. That's interesting. So your personal reflections that the Auckland lockdown could have been lifted earlier. When and why?
CH	I mean, again, that's quite a hard thing to ... I mean I think what I was reflecting in those comments was that we knew that we were losing a lot of the goodwill that was required for level three to continue to work, and I'm not sure that the... In hindsight, I'm not sure that the three steps necessarily did enough to preserve the support that we needed. I'm not sure what would have. And so, I guess that's always the difficult thing. I'm not sure if there was anything that would've.
NL	So it could have been lifted earlier, but there's not a concrete way of describing why you say that now.
CH	No, I mean I think ... And it's very difficult in hindsight too, because, again, you have evidence in hindsight that you don't have now. So things around Delta, and then subsequently the shift from Delta to Omicron, we just didn't understand all of what that meant for vaccination and for transmission. All of that's clearer now because there's lots of evidence about effectiveness on vaccination on different strains, but none of that was clear at the time we were having to make all these decisions.
NL	And it could have turned out to be different than it was, if Omicron had been a different beast.
CH	That's right. But that's the story of COVID.
NL	Yeah.
CH	You're having to ... Each new variant, everyone's left wondering, is this going to be worse or better than the previous one?

NL	Yeah. Okay. I was just curious about your statement about an answer to the question about the Public Service Commission and ...
LC	Which question are you at?
NL	Question 25.
LC	Thank you.
NL	The question is, at one stage, the Commission recommended a vaccine mandate apply across the public service, and you said you did not believe that all roles in the public service were subject to the same level of risk. So it should be case-by-case. Was there pressure coming from other places other than the Public Service Commission to oppose that?
CH	Yeah. So I mean if you look at the two that were right on the margins of our consideration, so police and defence, they were the two that subsequently we had rulings against. I think they were probably the two where the cabinet was making those decisions, pushing back quite hard on them, because we knew that they were right at the margins. The Commissioner of Police was adamant around the public safety aspect of it in the sense that he was concerned that if he had half the police force go down with COVID, he wouldn't be able to do the job that police needed to do. The defence force ... In retrospect, I mean the defence force have the ability to require vaccination for deployment anyway. So we could have actually probably left that to the defence force. So we accepted the court ruling on both of those as soon as the court... We didn't contest that once the courts had made their rulings on that. But I think those are both illustrations of the sort of pressure that we're under. So when the Commissioner of Police comes to you and says, "There's going to be a public safety risk if half the police force gets COVID. You need to do something to help me with that," it's not the sort of thing that a responsible government can say no to, but it is always, again, going to involve those really difficult weighing up factors.
NL	Yeah. Just looking at your question 26. The question 26 is, “Given the high level of vaccination at the time of coming into force at the CPF, what were the expected or intended benefits of vaccine passes and requirements for workers to be vaccinated in related settings?" You've said they were tools to support a broader health response and allow people to get back to work. You were receiving plenty of advice that businesses wanted that, but also that many people did not want to go to work if their workmates were unvaccinated, or if customers or people they need to interact with were unvaccinated. You've said there was a high level of political demand. Was there a high level of worker and employer demand as well?

CH	Oh, absolutely.
NL	Yeah.
CH	I mean I think that was reflected in the comments of people like David Seymour, because he was one of the people pushing for the vaccine passes. I think, again, it's one of those things that gets lost in retrospect, but that issue of people not wanting to be around unvaccinated people was a huge issue at the time, and it was a very difficult thing to make sure that we didn't let that dictate the decisions that we were making, but we were mindful of it as we were making the decisions.
NL	Yeah, I think that's probably the question that arises out of that, too. Without the pressure, if employers and workers have been saying, "Well, whatever you do, we'll comply with." Without that pressure, do you think the public health goals would've won the day, would it still have been mandates, vaccine passes?
CH	I think it's a very hard thing to speculate on. Yeah.
NL	Mm-hmm. Were there any particular public health benefits that you thought those later stage tools might achieve that you weren't getting?
CH	I mean I think the advice on vaccine passes at the time reflected the fact that we were still trying to suppress rapid spread of COVID-19, and that vaccination was certainly seen as a key factor in suppressing transmission. And so, things that reduced risk in places where people were gathering was certainly still something that was high on our list of public health tools. The vaccine passes were a way of doing that whilst giving people the maximum amount of day-to-day freedom.
NL	Giving vaccinated people the [inaudible 00:52:40].
CH	Yeah. I mean, but we were very mindful of the unvaccinated people, too. So as we put together the rules around the use of vaccine passes, we were also very clear that unvaccinated people still had to have a baseline of access to things to go about their day-to-day lives. So supermarkets, for example, those essential services that everyone needs to access, we were very clear that you couldn't use vaccine passes for those things.
NL	All right. So question ... Does anyone have any questions about that sort of issue before we move on?
DK	I just have one, and you can, I'm sure, anticipate if you haven't even seen it in our earlier public hearing, but we've had various pieces of evidence about people feeling ... Sort of two classes of citizens that's been appraised, but also people feeling alienated, and a division between vaccinated and unvaccinated people. We've just talked about the context of people not wanting to be around unvaccinated people, which supports that.

	I guess the way it's been expressed to us often, some of that division, the mandates and the vaccine passes is seen as a cause of some of that division. I just wondered if you had any comment on that.
CH	I'm not convinced that mandates and vaccine passes were the cause of that division. I think if you look at some of the stories that people have been telling, many of them are deeply personal, and that would've happened anyway. So family members stopping to speak to each other because a family member hadn't been vaccinated, I don't think mandates or vaccine passes was going to change that at all. I think a lot of that was going to happen anyway. In other countries around the world where they didn't have the systems that we had, they still have that issue. So I think, again, it comes back to ... And, in retrospect, it all gets lumped in together, but there's the virus and the effects of the virus, and then there's the response and the effects of the response, and they get melded together, but actually they're not. Some of the trickiest issues were going to be tricky issues regardless of the government response. Vaccination, I think there was always going to be a high degree of uptake of vaccines, because the majority of people wanted to be vaccinated, and that was always going to create a friction and a tension with the people who didn't want to be vaccinated regardless of how the government navigated that.
NL	Have you got any other particular countries in mind when you mentioned that, where they didn't have the mandates?
CH	No. I mean I read other analyses, but I can't recall them off the top of my head.
NL	Yeah, it's an interesting issue, isn't it? The extent to which the social division would've been the same with or without them.
DK	I guess, sorry, just to probe that a little bit further, some of the things we've been hearing. But for some who lost their jobs because of mandates. So I'm thinking of some of the education workers and health workers that have submitted, I am completely paraphrasing, said that meant their choice not to get vaccinated was very known and then caused them to be cast out of society and in that sense, exacerbated a social division. I'm just interested if you have any comment on that.
CH	Again, it's a very hard counterfactual because I think that social pressure would've existed anyway regardless of whether there'd been a way of verifying whether someone had been vaccinated. If anything, without a government system for that, you could have ended up with sort of almost like a lynch mob mentality around vaccination, which again was something that we wanted to avoid. But it's a hard counterfactual to even contemplate, really.

DK	Appreciate that, thank you.
NL	[redacted]. I'm up to 29. This is about the absence of data on the use and impacts of the vaccine assessment tool. The question was ... “There's an absence of data. Should more planning have gone into monitoring the impacts of the vaccine assessment tool and employer discretionary vaccine mandates and their ending?” You have said, "It was a devolved system by design. It gave employers guidance on the factors they needed to weigh up, but did not dictate to them." But given that public health goals were intended to be assisted by these processes, do you think, in hindsight, that there should have been some assessment of what was happening?
CH	I mean the vaccine assessment tool was in part driven by the fact that employers were wanting legal guarantees around the decisions that they were making around vaccination, which we could not give. And so, we were trying to create a tool that they could use that said if you follow this tool, you are less likely to get yourself into hot water than if you don't.
NL	No, we understand that. Yeah.
CH	Yeah, but it was never going to be a, "Here's a foolproof thing. You'll never get into trouble if you follow this."
NL	No, no.
CH	And so, hence, it was never a compulsory tool or something that we required employers to do. The word “toolkit” is used for a reason because it was a tool for employers.
NL	But the question is around what was the public health benefit, if any, from allowing that tool to be used? We're just wondering whether you considered or might want to consider, if it happened again, surveying businesses.
CH	Possibly. My concern around that would be that ... I mean with all things to do with COVID, there are lots of things you could do if you had an unlimited pool of resource that might have diminishing returns. If you think about the level of effort that would be required to survey all of the businesses using the tool, collate that data, and then use it to inform decision making, I'm not sure it'd be the best use of resource.
NL	No, I mean I'm not suggesting you've got to survey all of them, but some sort of a sampled survey where you could ... I don't know.

CH	I mean I think we got feedback informally through those peak bodies and others about how these things were playing out at a business level, but it wasn't a formal kind of study.
NL	What about at a health level? Could you have compared businesses that were using the vaccine assessment tool?
CH	I think that would be fraught with difficulty because controlling the environment to get a reliable outcome from that would be quite difficult. I think we were still using our macro indicators as the measures of the overall success of a variety of different tools. So daily testing results, the sampling that we were doing, the self-reporting, remembering there was a reporting tool for people who were testing positive. So I think those were still going to be better, easier to digest and respond to indicators than something that was more granular.
NL	Yeah. I think the intent of the question is to probe the public health, whether there were public health benefits to giving employers these powers, quite draconian powers, to keep other people out of their businesses where normally they wouldn't have been able to do that, and just whether there might've been something that could have been looked at as to how those powers were being exercised.
CH	I mean, but I think that's the question, isn't it? Businesses were going to be doing this anyway. The tool was designed to try and ensure that they weren't doing it, where there wasn't a justification for doing it. So a lot of employers were basically saying, "We're going to be having vaccine requirements." I think part of the tool was about saying, well, if you're going to have them, you need to make sure there's a public health-
NL	You have to do it this way.
CH	... justification for doing so.
NL	Right. And so the tool was supposed to ensure that.
CH	That's right.
NL	So it was baked in.
CH	That's right. So it was actually, if anything, was saying to employers you can't have holus-bolus power just to do what you want. You do need to still have a public health justification for doing it.
NL	Yeah. Was that ... I can look this up, but how often do they need to be reviewed for those?
CH	Oh, I'd have to go back and look.

NL	There would have been a specified…
CH	I think the tool actually had some guidance on how frequently they should be reviewed, but I can't recall it off the top of my head.
NL	Yeah. I think question 31, you've said the high ... Which I think you've probably just said now, is that the high trust approach was the right one. Heavy-handed approach to compliance would've been very difficult to enforce, cumbersome, and would likely have generated public backlash. So you are using a high trust model to allow businesses quite serious powers in respect to members of the public, aren't you? There's not ….
CH	So this is about the pass as opposed to mandates.
NL	Yeah, yeah, sorry. The passes, yeah.
CH	I think we took the same approach with vaccine passes that we did with mask requirements or face covering requirements. So face coverings were required on public transport. For example, we didn't say to bus drivers, "You have to force people off if they're not wearing them," because that would've put the bus drivers in a really unsafe position in some cases. So we were basically saying, look, again, the burdence of compliance does not fall on people who are not in a position to enforce it. We worked really closely with the police around what a practical way of monitoring and enforcing it was. The police were very good, but again if there's going to be a consequence for someone, it was relying on the more traditional means, like the police, rather than saying to businesses you can remove people from your premises or you can do other things. Yeah.
NL	Judy, do you have any questions arising?
JK	Yeah. I'm interested in a lot ... All the way through, you've talked a lot about the compliance and the trust, and that's clearly the way you have to go with these things because we can't control the behaviours of everyone. I'm interested in whether you felt that level of compliance… At what point you thought [paper shuffling noises] slip away?
CH	I think it is different in different phases of the response. So I mean I think by late October, early November, the Auckland lockdown, there was definitely less compliance with the rules there. If anything, I think once we'd set an end date for that, I think that helped. So even though the end date wasn't immediate, people could see that there was a light at the end of the tunnel and they knew what they were working towards. I think just knowing that they weren't still going to be there at Christmas I think actually helped. So that is probably a reflection actually from that Auckland experience, that just giving

	people certainty around this is when you'll start to feel life more normal, that helped with compliance. Issues around vaccination, I think ... As I said, I think more of the public anxiety seemed to happen post a lot of the restrictions being eased, so even issues around mandates. I mean the coalition agreement records that all remaining COVID-19 mandates will be removed. They were all gone. It had already been removed. So I think that some of that was post.. The thing that people were upset about had already gone by the time the goodwill had gone from it.
NL	Right.
CH	But, yeah, preserving public goodwill was a huge consideration every single day through the pandemic. As I said, none of it would've worked without public support.
JK	Yeah. I've been thinking too about not only did we have a huge reservoir of public goodwill in the beginning of 2020, we also had a very healthy financial balance as well. And so, in talking to Grant Robertson, for example, he was in a position to be able to say it's pouring. We had saved for a rainy day, and now we need to spend this money. And so, I'm thinking about the lessons for the future. I was talking the other day to Alan Bollard, and he was saying maybe the best response for a future pandemic is to have a very strong economy in order to be able to do the things that you need to do when that thing happens. Yeah.
CH	I think the big economic lesson for the world around the COVID-19 economic responses is around inflation. New Zealand was middle of the pack. There was nothing that we were doing there that exacerbated inflation in New Zealand more or less than other countries. If anything, the UK, for example, who had more lockdowns and so on, they ended up with inflation in the double digits. We topped out at ... 7.4 I think was our top number, and it was coming down steeply as well. But I think, if anything, the central banks around the world contributed to that more than central governments did, because they operate more independently. I think it was probably central bank decisions that caused more of the inflationary spike than government decisions.
JK	And so, thinking about a future pandemic then, and hopefully we don't get one soon, but if you're thinking about building a strong economy so that you've got that reservoir, if you like, for a future event, but also in terms of public trust and goodwill, I feel that maybe that's a little eroded now and that there's a job of work to be done, and not least by this Royal Commission, in the recommendations that we might make in order to build that level of public trust again.

CH	Yeah. I spent a lot of time thinking about this because it's relevant to politics outside of the COVID-19 response. I think some of that fraying of social cohesion was happening regardless of the pandemic. It was like the pandemic was a catalyst on which some of that could latch onto. But there was already a fraying of social cohesion. So the polarisation that we have seen in western democracies around the world I think has been driven by social media, by misinformation, by the tendency of people now to not interact with people who have a different worldview to their own. I get asked about this a lot in public meetings, "How do we avoid becoming like the United States where Republicans and Democrats just won't even be in the same room as each other?" and my answer is exactly that. People need to stay in the same room with people who have a different worldview to their own. That's how you avoid the polarisation that we see. And so, I don't think government's going to be able to fix that. I think that's a society-wide problem, and I don't think government's caused it. I think it's a reflection of the way humanity has evolved in the last couple of decades. I think we're all going to have work to do to rebuild social cohesion, but again I wouldn't want to blame all of that on the pandemic because I think it was happening anyway.
NL	The pandemic is a bit like a case study of it, isn't it?
CH	It is, yeah, but there were other things, too. Even ... It's getting completely off topic now, but contrast March 15 and the response to that with other terrorist events. We managed to do that in a way that preserved social cohesion, when that easily could have torn social cohesion apart in this country. I think there are always going to be things that can be a catalyst, and I think the thing we've always got to do is try and find the… navigate our way through in a way that tries to keep people together.
JK	That's an important message.
CH	Yeah. I mean there's other things now. The treaty might've reared its head as a source of division earlier on had it not been for the pandemic. It has in our country's past, before, and it is again at the moment. I think this is something all politicians need to grapple with, though, regardless of which side of the political aisle you work on, because if we continue to go down the populist route, democracy will become ungovernable. We have to get people talking to each other.
NL	Or accepting that people are allowed to talk to each other.
CH	Yeah, and they're allowed to have different opinions.
NL	Even if they don’t want to do it themselves.
CH	Yeah, they're allowed to have different opinions.

NL	Is there anything else that you want to share with us about COVID issues within our terms of reference?
CH	I mean I'll just leave you with one final thought. A lot of days during COVID, it felt like you get out of bed in the morning and they were all bad options, so you were trying to choose the least bad of them. That was very much how it felt I think a lot of the time we were responding to COVID. It's not like you get out of bed and go, "Well, the angels are on this side," because some days there just weren't any of those options available.
NL	I suppose at least you had the security of knowing you couldn't win.
CH	Yeah. I mean COVID was always going to win eventually. I guess the thing is just trying to manage that in a way that protected as many people as possible.
NL	Okay. Well, look, thank you very much. Thank you for your answers to the questions.
DK	I think despite your beginning protestation that you might not have the nuance you added a lot of nuance with this. So I really appreciate it.
CH	Yeah, a lot of the nuance ... I mean I haven't had time to do it, but there is a lot of nuance out there already in the not official records. So the post cabinet or the press conferences we did every day, the transcripts are all on the Beehive website still. I saw them the other day. But they provide a lot of the nuance of what was happening at the time, which, again, gets lost in the mists of time, but-
NL	We have just put those in our pile of things to look at.
CH	Yeah. I mean the introductory remarks are probably less valuable than the questions, because I think the questions and the answers to the questions will give you a flavour of where the public sentiment was going, because generally I found the journalists were a bit of a weather vane of where the public sentiment was.
NL	Right. Thank you very much.
CH	Thank you. Cheers. Thanks.
End of interview	