

## **Te Tira Ārai Urutā – the Royal Commission of Inquiry into COVID-19 Lessons Learned**

### **Summaries of engagements held by the Inquiry Auckland engagements – June 2025**

*These engagement summaries highlight the key points raised by a range of stakeholders to inform the Inquiry’s evidence-base.*

#### **Senior leaders from Te Kaunihera o Tāmaki Makaurau | Auckland Council and the Chairs and Co-Chairs of the Council’s Community Advisory Panels**

Council representatives told the Inquiry that communication and coordination with the central government evolved over time but remained challenging for the most part. In particular, they noted that some policy changes came with very tight turnaround times, which created implementation challenges.

Council representatives shared that, at the COVID-19 responses’ peak, over 70 Council facilities were used as vaccination or food distribution centres, with hundreds of staff redeployed from their regular duties to aid with this community service delivery.

Members of the Council’s Advisory Panels highlighted the diverse range of impacts felt across the communities. For example, some members of the disability community felt ‘abandoned’ with some vaccination centres being inaccessible.

#### **Te Whānau o Waipareira**

Representatives told the Inquiry that Te Whānau o Waipareira:

- were established as essential workers early on in the pandemic response and pioneered innovative solutions – including saliva-based PCR testing that provided faster results and was less invasive than nasal swabs.
- leveraged existing Whānau Ora systems rather than creating new structures, emphasising face-to-face interactions with trusted local messengers.
- provided comprehensive support to their communities by distributing over 40,000 kai packs and 70,000 winter wellness packs and administering over 40,000 COVID-19 tests.

They recommended that kaupapa Māori principles be embedded in the health system design, multi-skilled agile workforces be developed, and existing community infrastructures be built upon for future pandemic responses.



For future pandemic preparedness, the representatives recommended that disabled communities be involved in pandemic planning from the beginning, and that information is provided in multiple accessible formats from day one.

### **Ethnic communities and faith-based leaders forum**

Representatives at the forum shared how their respective communities faced significant challenges accessing accurate information in appropriate languages during the lockdowns. Information that would normally have been distributed through mosques and community centres was disrupted by the restrictions, requiring communities to develop alternative communication strategies through social media and direct outreach.

Representatives discussed how communities faced restrictions on religious practices, with particular challenges around funeral customs requiring burial within 24 hours. We also heard that initial vaccine hesitancy in some communities was addressed through community leaders, including ethnic doctors and religious figures.

The Ministry for Ethnic Communities was widely praised by the representatives for providing direct access to resources, while ongoing partnerships with government agencies proved valuable for holistic community support.

### **Pasifika community leaders forum**

The community leaders told the Inquiry that:

- Pacific families faced significant barriers during the lockdowns, with some families having multiple children sharing a single device to access education services. This has led to learning gaps for some children.
- overcrowded housing made lockdowns particularly stressful for multi-generational Pacific families.
- churches and community organisations became crucial vaccination sites, with Pacific-specific stations proving more effective than general vaccination centres.
- they spent a lot of time building vaccine confidence within their communities, using multi-language helplines and youth-led digital communication strategies.
- the pandemic created new inter-faith and inter-community connections, which has led to stronger ongoing relationships within the Pacific community.

### **Māori health providers forum**

Representatives from Māori health providers shared how they established comprehensive support systems during the lockdowns, including setting up testing stations at marae, fitness sessions, educational tools, and providing nutritious meal packages for families.

They described how vaccine mandates were damaging to relationships within the communities, and also between providers and the government. They said it was a breach of mana (cultural authority and dignity) that reminded communities of historical colonial trauma.

The representatives emphasised that effective vaccination efforts required trust to be built in familiar environments and with known community members present. Holistic community events combining kai (food), health checks, and optional vaccination was said to be more successful than mandate-focused approaches.

For future pandemic preparedness, the representatives suggested including Māori-led responses for Māori communities sooner in the response and to prioritise consultation over mandates.

### **The Health Forum New Zealand**

The Inquiry met with representatives from The Health Forum New Zealand and members of the community that it represents and supports. They shared with us their (and/or their loved ones) experiences of serious health issues that they attribute to the COVID-19 vaccines. This included neurological symptoms, blood clots, cardiac conditions and autoimmune disorders.

The attendees described experiences of widespread dismissal of vaccine injury claims by medical professionals, the denial of compensation claims, and the social ostracism of reporting adverse events.

They recommended for future responses that mandatory treatment provisions be included if vaccines were to be mandated again, that adverse reporting systems are made easier to access and use, and that potential risks from receiving a vaccine be communicated more transparently (alongside the benefits).

### **Auckland Regional Business Boundary Forum**

Representatives at this forum shared with the Inquiry their experiences of the economic disruption that occurred as a result of the pandemic response – particularly from the lockdowns. They also shared how centralised decision-making from officials based in Wellington failed to account for Auckland's unique geography and circumstances.

The representatives noted that workforce issues emerged, particularly among young people and skilled workers who left their professions due to the vaccine mandates. We also heard about the frustrations felt by business owners who were given delayed approval in procuring rapid antigen tests for their staff.

Praise across the Forum was given to the Ministry of Social Development for their rapid implementation of wage subsidies and the provision of dedicated case managers for issue management.