

People's Covid Inquiry February-June 2021

Professional witness statement

Professor Michael Baker

Session 3 24 March 2021

DID THE GOVERNMENT ADOPT THE RIGHT PUBLIC HEALTH STRATEGY

STATEMENT

I (name) Professor Michael Baker

Job title/ role/ occupation Professor of Public Health and Public health physician at the
University of Otago, Wellington, New Zealand

will say as follows:

1. I make this statement for the purposes of the People's Covid Inquiry, which is to be held on 24 March.
2. I am able to attend and give evidence. If unable to attend, I agree to my statement being considered by the Inquiry.
3. What is your job/ role/ occupation – how long doing this for/ brief summary of background/ experience - if possible, attach CV to statement

I have trained in medicine (MBChB), epidemiology and public health.

I am a specialist public health physician and a Fellow of the Australasian Faculty of Public Health Medicine (FAFPHM) and a Fellow of the New Zealand College of Public Health Medicine (FNZCPHM).

I have been employed by the University of Otago since 1997 and a professor since 2012.

I have a long-standing research interests in infectious diseases, environmental health, and housing and health, including biosecurity measures against emerging infectious diseases. I have published more than 300 peer-reviewed papers in these areas.

4. What is your connection/ interest/ background/ experience relevant to the pandemic in England?

Since emergence of the COVID-19 pandemic in January 2020 I have been tracking its evolution intensely. This work has included observing the response to the pandemic in England and other countries with advanced public health and research capacity.

Since January 2020 I have been a member of the New Zealand Ministry of Health's Covid-19 Technical Advisory Group (TAG) so have maintained a focus on learning lessons from international experience, including in England.

5. How are you able to assist the Inquiry – what is your expertise/ knowledge/ specialism?

I am qualified in epidemiology and public health medicine. My work during 2020-21 has been dominated by supporting New Zealand's Covid-19 response.

I have established a programme of research on the epidemiology, prevention and control of Covid-19 in New Zealand and internationally (Co-Search) with support from the Health Research Council of New Zealand. With this group I have published widely, including papers in the New England Journal of Medicine, Lancet, British Medical Journal and Emerging Infectious Diseases.

I have taken a leading role in formulating New Zealand's Covid-19 elimination strategy. My contribution to public health, and the Covid-19 response in particular, has been recognised with a Member of the New Zealand Order of Merit (MNZM) in the New Year's Honours list for 2020, the Public Health Champion award for 2020 (Public Health Association), and the Critic and Conscience of Society Award (from Universities New Zealand). I was also given the Wellingtonian of the Year Award in 2021 for my science contribution.

6. What in your view were the original vision and principles underpinning the NHS?

I have not studied operation of the NHS in detail.

The NHS has provided a model for socialised health systems across the globe, including in New Zealand. Underlying principles include ensuring equitable access to effective healthcare services including health protection and population health measures generally.

Please briefly outline your testimony below or attach or reference an article which will provide the panel with relevant information.

My evidence focusses on New Zealand's experience with responding to the Covid-19 pandemic. It also draws on my research which has included systematic comparison of Covid-19 responses from multiple jurisdictions, including the United Kingdom.

Early in the Covid-19 pandemic New Zealand adopted an elimination strategy [1, 2](**copy of paper published in Medical Journal of Australia attached**). This approach aims to reduce the incidence of Covid-19 infection to zero in the community. Disease elimination is a well-established approach to protecting populations from the effects of infectious diseases such as polio and measles.

The elimination strategy successfully eliminated SARS-CoV-2 infection in New Zealand [3](**copy of paper published in New England Journal of Medicine attached**). Border incursions and small outbreaks have occurred but these have been managed with high volume testing and contact tracing plus some limited 'lockdown' measures.

Covid-19 elimination has been sustainable and highly effective at protecting public health and supporting economic recovery in countries like New Zealand and Taiwan [4]

Covid-19 approaches are now being widely used in countries in the Asian-Pacific region. Adding up the populations of China, Taiwan, Vietnam, Australia and New Zealand, elimination is protecting more than 20% of the world's population from Covid-19.

I published an assessment of the impact of the Covid-19 elimination strategy compared with other responses in the British Medical Journal based on outcomes observed in 2020 [5] (**copy of paper published in British Medical Journal attached**). We concluded that:

- “A goal of eliminating community transmission of the pandemic virus causing Covid-19 (SARS-CoV-2) is achievable and sustainable for some jurisdictions using non-pharmaceutical interventions and will be facilitated by the introduction of effective vaccines
- Elimination of community transmission offers public health, equity, and potentially economic advantages compared with a control strategy using mitigation or suppression
- Conditions favouring successful elimination include informed input from scientists, political commitment, sufficient public health infrastructure, public engagement and trust, and a safety net to support vulnerable populations
- Elimination might be the preferred strategy for responding to new emerging infectious diseases with pandemic potential and moderate to high severity, particularly while key parameters are being estimated”

I have summarised the many advantages of elimination in a recent feature article in the [Guardian](#) (“All countries should pursue a Covid-19 elimination strategy: here are 16 reasons why”, Michael Baker and Martin McKee, published 28 January 2021):

1. Saves lives
2. Prevents morbidity from long-COVID
3. Is pro-equity
4. Benefits economies
5. Achievable in diverse settings
6. Achievable even after intense local transmission
7. Easier if more countries adopt this approach
8. Easier with effective vaccines
9. Provides an explicit “zero-COVID” goal as motivating and coordinating focus
10. Is sustainable
11. If the virus mutates, elimination still works
12. Still works if vaccines provide only limited long-term protection.
13. May reduce emergence of more dangerous virus variants
14. Reduced need for lockdowns
15. Has co-benefits, eg preventing influenza
16. Provides a good interim strategy while we identify an optimal long-term approach
17. Reduces potential emergence of animal reservoirs (**NB, this additional reason added to list after publication of the original article**).

My professional opinion is that this summary of the benefits of Covid-19 elimination is valid and consistent with available evidence.

I confirm that the opinions I have expressed represent my true and complete professional opinions on the matters to which they refer.



20 March 2021

SIGNED

DATE

Please return to Inquiry@keepournhspublic.com

Thank you
Olivia O'Sullivan
Secretary to the panel
The People's Covid Inquiry

References

1. Baker M, Kvalsvig A, Verrall AJ, Telfar-Barnard L, Wilson N: **New Zealand's elimination strategy for the COVID-19 pandemic and what is required to make it work.** *N Z Med J* 2020, **133**(1512):10-14.
2. Baker MG, Kvalsvig A, Verrall AJ: **New Zealand's COVID-19 elimination strategy.** *Med J Aust* 2020.
3. Baker MG, Wilson N, Anglemyer A: **Successful Elimination of Covid-19 Transmission in New Zealand.** *N Engl J Med* 2020:e56.
4. Summers J, Lin H, Cheng HC, Telfar Barnard L, Kvalsvig A, Wilson N, Baker MG: **Potential lessons from the Taiwan and New Zealand health responses to the COVID-19 pandemic.** *Lancet Regional Health - Western Pacific* 2020, **4**(100044).
5. Baker MG, Wilson N, Blakely T: **Elimination could be the optimal response strategy for covid-19 and other emerging pandemic diseases.** *Bmj* 2020, **371**:m4907.