



Rosalie Woodruff MP  
Tasmanian Greens' Member for Franklin

PAC/SUB#9  
Tabled 21/10/22

11 February 2022

Dr Mark Veitch  
Director of Public Health  
Department Health  
Hobart, Tasmania  
By email: [mark.veitch@health.tas.gov.au](mailto:mark.veitch@health.tas.gov.au)

Dear Dr Veitch,

**Re: Effective Covid mask wearing**

We are writing to question your reasons for the low-level emphasis that is being placed on effective mask wearing as a critical tool in protecting Tasmanians from Covid infection, and the attendant long-term health effects that can be caused.

**Most Tasmanians not fully vaccinated against Omicron**

ATAGI has stated two doses of vaccine does not provide any significant protection for young people against infection from the Omicron variant (based on data from superspreading events in NSW).<sup>1</sup> Several studies have now shown an mRNA booster, in addition to two doses of vaccination, is required to prevent symptomatic infection with Omicron, and the possibility of contracting long Covid.<sup>2</sup>

Minimum available protection for anyone at this point in the pandemic needs to be two doses of a vaccine, and a third booster dose with an mRNA vaccine.

The Health Department does not report the age group percentages of people who have had a Covid booster. This is critical information. Only people with a booster shot have a high chance of not getting symptomatic infection, and of not getting long Covid if they do become infected.

We expect – but cannot confirm because data are not publicly available – many Tasmanian adults do not yet have full Covid vaccine protection. We do know that *no*

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<sup>1</sup> ATAGI Statement on the Omicron variant and the timing of COVID-19 booster vaccination. 24 December, 2021. Available at <https://www.health.gov.au/news/atagi-statement-on-the-omicron-variant-and-the-timing-of-covid-19-booster-vaccination>

<sup>2</sup> mRNA-based COVID-19 vaccine boosters induce neutralizing immunity against SARS-CoV-2 Omicron variant. Cell, Vol 185, Issue 3, pp.457-466.3 February 2022.  
Available at [https://www.cell.com/cell/fulltext/S0092-8674\(21\)01496-3](https://www.cell.com/cell/fulltext/S0092-8674(21)01496-3)

Tasmanian children are fully vaccinated. The majority have at best paltry protection. Only 59% of children 5-11 years have had Dose 1, and 0.1% Dose 2, of vaccine.

### **Ongoing public health measures needed**

The recent data on the longevity of vaccine effectiveness from a third dose against Omicron infection is disappointing. It indicates possible waning strength within just several months, especially for people over 50 who have had Astra Zeneca for their first two doses.

The majority of Tasmanians are under-vaccinated, currently at risk of symptomatic Covid infection and potentially long Covid. It is likely everyone, particularly the high proportion with co-morbidities or compromised immune systems, will need continued protection from Sarscov2 infection as they move about the community for the foreseeable future.

### **Mask wearing**

If high efficacy 3-dose schedules and matched vaccines become available, masks may not be needed long-term, but will be needed in the medium-term with current vaccines and the majority of our population only at two-doses or less.

We are concerned best practice effective mask wearing and mandates to prevent the spread of this airborne virus are not being advocated in Tasmania.

We draw your attention to recent research into the effectiveness of mask wearing, and the relative ineffectualness of social distancing, as public health measures to prevent the spread of Sarscov2.

The research published in PNAS<sup>3</sup> shows:

- social distancing alone without masking is associated with a very high risk of infection, especially where the infected person is speaking
- when only the susceptible person wears a face mask there is very high risk of infection, even with social distancing
- universal masking with surgical masks, or better with FFP2 (N95 or similar masks), is the most effective method for limiting airborne transmission of Sarscov2
- properly fitted FFP2 (or N95) masks can reduce the risk of infection by a factor of 30 compared with loosely worn masks, and by a factor of 75 compared with fitted surgical masks, for an exposure duration of 20 min.

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<sup>3</sup> PNAS 2021 Vol. 118 No. 49, December 7, 2021.

Available at <https://www.pnas.org/content/pnas/118/49/e2110117118.full.pdf>

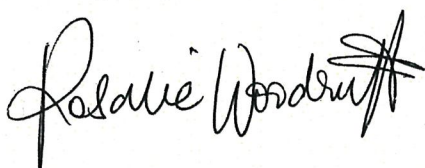
The lowest bar seems to have been set for the Tasmanian population in terms of public health interventions. As a country we are an outlier in not yet recommending or providing high-quality face coverings that provide filtration-respirators (N95/P2/KF94/FFP2) to the community. Can you please tell me why you have decided not to mandate the use of N95/P2 masks where mask wearing is required – especially in high risk environments? And recognising the superiority of effective mask wearing over social distancing as a prevention measure against Sarscov2 airborne transmission, do you agree we need to have a widespread campaign to educate people about how to fit and wear an effective (N95 or similar) mask?

Most concerningly, and in contradiction to OzSage advice,<sup>4</sup> you have not made the decision to mandate mask wearing in school classrooms. Mask wearing, in combination with safe indoor air (ventilation), is essential to protect unvaccinated children. OzSage strongly recommends effective face masks be mandated for everyone aged five years or older at school, and recommends these for 2–5 year olds where developmentally appropriate (recognising some children cannot wear a mask, due to reasons including disability). Why have you not followed their recommendations?

The school year has commenced and children are now in learning environments where teachers who are 'close contacts' are allowed to return to work if they don't show symptoms. We are very concerned at this inconsistent close contact definition. It makes no sense from an epidemiological point of view, and creates confusion among parents. This confusion manifests as a lack of trust among parents about other information that's being provided on how to keep children safe from Covid. Why have you allowed this exemption?

In light of the enhanced Covid risk for children in school classrooms, we look forward to your early response to our concerns.

Kind regards,

A handwritten signature in black ink, appearing to read 'Rosalie Woodruff', with a stylized flourish at the end.

Dr Rosalie Woodruff MP  
**Greens Health spokesperson**

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<sup>4</sup> OzSage 11 October 2021. Available at <https://ozsage.org/wp-content/uploads/2021/10/Children-and-schools-V1.2.pdf>