

**POST-CABINET PRESS CONFERENCE: MONDAY, 8 MARCH 2021  
HANSARD TRANSCRIPT**

**PM:** Kia ora koutou katoa. Good afternoon, everyone. A brief look to the week ahead. Tomorrow and Wednesday, I'm in Wellington for the House and Cabinet committees. Also on Wednesday, I'll take part in a roundtable discussion hosted by the Prime Ministers of Sweden and Spain with the UN Secretary-General. The focus will be on how to build back better together from COVID and how we can more effectively work together on issues such as climate change, human rights, and global health. On Thursday, I'm in Napier with several other Ministers meeting with the Food and Fibre Leaders' Forum and visiting some local farms, including one belonging to the 2020 Horticulturalist of the Year. Friday, I have meetings and appointments in the electorate.

And now to news today. I've previously called 2021 the year of the vaccine, and we are making good progress with this enormous task. We're nearing completion of our first tranche of vaccinations with the vast majority of our border and MIQ workers having now received their first shot of the Pfizer vaccine. In addition, we've been vaccinating the household contacts of these workers—a group of roughly 50,000 people—and we expect to begin vaccinating tranche two, non-border front-line health workers, this month. We'll be sharing information about the sequencing and wider vaccine roll-out on Wednesday.

Early evidence looks extremely promising in terms of the Pfizer vaccine's ability not only to protect individuals from the disease but also to reduce its transmission. That means it will become an important part of our front-line defence against COVID-19. But I do not underestimate the importance of this vaccine roll-out starting for our front-line workers at a personal level. One border worker who contacted me said, "I'm eternally grateful to be among the first to receive the vaccine after working in a high-risk environment. It has taken a toll on us all and having this next level of protection means everything." Eventually the goal is to have the vaccine do the bulk of the heavy lifting in terms of reducing flare-ups of COVID-19 in the community, keeping people safe, and then allowing us to eventually reopen our borders.

I know that the day-to-day threat from COVID-19 doesn't feel as pronounced in New Zealand, especially when compared to other countries. I know for many people they feel safe already. This is because of the strongest possible border controls and because the team of 5 million has done such an incredible job keeping the virus in check. But at the same time, this is a tricky virus. Even with best efforts it can evade our layers of protection. That's why the safest option to protect you and your whānau is to be vaccinated. We know we need to do all we can to make that as easy as possible and as effective as possible, and this is exactly what we'll be doing.

So I'm very pleased to announce that today we have signed an advance purchase agreement with Pfizer for an additional 8.5 million doses of the vaccine. The extra doses will be enough to vaccinate 4.25 million people. Our additional advance purchase agreement was for approximately 1.5 million doses, sufficient to vaccinate 750,000 people. The amendment to this deal means we'll be buying enough for everyone in New Zealand to be fully vaccinated with the Pfizer vaccine.

The decision to make Pfizer New Zealand's primary vaccine provider was based on the fact that the Pfizer vaccine has been shown to be about 95 percent effective at preventing symptomatic infection and the fact this means all New Zealanders will now have access to the same vaccine. Whilst the Pfizer vaccine does need to be kept at ultra-cold temperatures, this challenge is offset by only having to deal with one vaccine rather than multiple vaccines with multiple protocols. It will simplify in some respects our vaccine roll-out. It has the added bonus of being the first vaccine to have gained Medsafe's approval for use here in New Zealand as well.

The Ministry of Health is now working with Pfizer on a delivery schedule for the new vaccine that ensures a smooth roll-out and a scaling-up of our vaccination programme as we start to immunise the general public from the middle of the year. And, overall, we do not expect a general change to the completion point of our vaccine programme as a result of Pfizer being our primary vaccination.

New Zealand's approach has been to pursue a portfolio of COVID-19 vaccines to ensure we have flexibility and choice in the supply of vaccines and sufficient quantities for our population, including the Realm countries of Niue, Tokelau, and the Cook Islands, as well as our close neighbours Samoa, Tonga, and Tuvalu. We've negotiated four bilateral advance purchase arrangements with Pfizer, AstraZeneca, Janssen, and Novavax, and these remain in place. Consideration will be given to how we best use doses that are not used in New Zealand. Options include delaying delivery here for some until 2022, when we will need to update our vaccination programme. This, of course, could free up supply for other countries in the short term. We're currently working alongside our Pacific neighbours, talking with them around their vaccination preferences. That includes whether or not Pfizer will be a possibility for roll-out or whether or not they would prefer something that has slightly fewer logistical challenges.

Ultimately, though, we are committed to ensuring that any doses not needed here are put to good use elsewhere, and that includes donation of surplus vaccines to others. Because no country is safe until all countries are safe. We strongly support equitable access to the vaccine, and that's also why we've committed \$17 million through the COVID-19 vaccines global access body COVAX to help developing countries, and another \$65 million to directly support the Pacific.

Finally, the Pfizer vaccine is a crucial tool in our fight against COVID-19. The purchase of a further 8.5 million doses of that vaccine marks a significant milestone in New Zealand's fight against COVID-19. Particularly after last week when we faced another small outbreak in the community, and a subsequent alert levels shift, we can all take heart that we have now secured an incredibly effective tool in the COVID-19 tool kit. Our vaccine programme will make a difference, but it will take the efforts of everyone to make this part of our fight against COVID-19 a success.

Before I open for questions, I'd just like to acknowledge it's also International Women's Day, and I want to take the opportunity to acknowledge, in particular, the women who have been central to our COVID-19 response and recovery: our scientists, our healthcare professionals, our essential workers, everyone who has worked in MIQ and beyond. Thank you for the role you've played this critical time in our history. OK, happy to take questions.

**Media:** Prime Minister, with the vaccine roll-out, just having Pfizer, will that make it slower or faster for us to get vaccinated?

**PM:** It's not going to slow our timetable at all. In some ways, though, it will overcome some potential challenges of managing multiple different vaccination programmes, with different vaccines across the country. This means we'll have a highly effective vaccine available to all New Zealanders.

**Media:** Is it smart to have all our eggs in one basket?

**PM:** Well, technically, we won't. We still have purchase arrangements in place for other vaccines. So in some cases, we'll be talking about whether or not we can delay the purchase and delivery of some of those vaccines into 2022, because, of course, we need to think about this programme like the flu. It will be something we'll be doing each year. In other cases, it's likely that we'll still take on some vaccines from some of those other portfolios just in case we have issues with more rural or isolated areas, or we just need a few options available for certain individuals. So it does give us still a bit of option as well.

**Media:** Australia is using AstraZeneca and Pfizer. Why are we only opting for Pfizer?

**PM:** Well, keeping in mind—I'll give the Minister a chance to respond to this as well. But, look, every country is going to take their own approach. We've always wanted to make sure that we had a range of options just in case we saw that one of those advance purchase arrangements didn't come all the way through every process of vaccine development. We're now well beyond that. We've seen the vaccines that had performed really successfully and have been approved by the likes of Medsafe—in case for us, that's been Pfizer. Australia have also invested heavily in production capacity for AstroZeneca. So they're obviously invested at a different level for some of those vaccines as well. Minister, do you want to speak to that too?

**Hon Chris Hipkins:** We looked very, very closely at this. Up until a couple of weeks ago, we were planning for a multiple vaccine roll-out, which would include a number of different vaccines coming on stream through the year. We looked at where they're at with their—when we thought we could get these additional Pfizer vaccines, we looked at where we were at with the approvals for the other vaccines and how long they may take, whether they were likely to be done in a timely manner. There is the Janssen vaccine, which is getting closer to approval. The AstroZeneca vaccine is still a way away in terms of New Zealand's approval process, so that certainly was a factor that we considered in making this decision. But, ultimately, where we landed was that we've got a vaccine that we know is incredibly effective—you know, very, very high rates of effectiveness, around 95 percent—and that, actually, doing one vaccine would certainly streamline that process. So we now know that in that second half of the year, rather than dealing with multiple different vaccines and having to sequence who gets which vaccine and how do we make sure they're getting the same vaccine for their second dose as they got for their first dose, and so on, we will be able to minimise the amount of that we have to deal with, and just focus on getting people vaccinated in the second half of the year.

**Media:** I understand you can't give us specific details because of commercial sensitivity, but it's understood, or it's been reported, that Pfizer is much more expensive than some of the other vaccines.

**PM:** Yeah, some of that's in the public domain.

**Media:** How much more are we paying, and is it worth it?

**PM:** Look, we've seen as a nation just how far we're willing to go to look after one another, and so I think it's fair to say, no matter what vaccination you're talking about, it all comes at a much lower price than the price of the loss of life or what we've seen, which is the ongoing hit that many businesses take if we have outbreaks. So in our minds, this is money very well spent, and spending it here on what is a highly effective vaccine, where we won't have a situation of some New Zealanders getting one and some getting the other.

**Media:** What conversations have you had with the Black Caps about getting vaccinated first?

**PM:** I haven't had any direct conversations. One thing I would say is we are aware that there will be a range of different groups looking to represent New Zealand over the coming 12 months where in some cases it might be a requirement that they be vaccinated beforehand or at least it's going to be strongly encouraged. So whilst we haven't made decisions on how that will be dealt with, we know it's an issue. It's an issue for our Olympians. That's something we'll look to work through as we deal with our sequencing framework.

**Media:** Would it be fair for them to skip the queue ahead of some of our most vulnerable?

**PM:** And so, look, this is where—and this isn't just down to one sporting code. We have a number of different groups that may have the job of representing New Zealand abroad who will be asking for advice on how to manage vaccine in amongst that. So that's something we need to give consideration to. We haven't made decisions yet. You can be sure that we will be weighing up all of the factors, including at-risk groups and how many we have managed to vaccinate at that time and whether we've prioritised people we need to prioritise. These are all the tricky things we have to weigh up in our vaccine roll-out.

**Media:** So when New Zealand cricket says that there's a scheme for people who have to work and go overseas that the New Zealand Government has, they're just mistaken?

**PM:** No, one of the things that's been put to us is the need to resolve just this issue of people representing New Zealand abroad, and that's something that we have not made a final decision around how that will operate, but it's something that we are actively considering how we'll manage.

**Media:** Why has this not been spelt out previously? Is it time to get on with actually publicising the—

**PM:** So on Wednesday, you can imagine that what's been a major focus for us has been aligning the delivery schedule for our vaccination programme and how many we can anticipate receiving and when with our sequencing framework, which is: which cohorts of our population will be vaccinated first. Now, what we wanted to do is not advertise that, for instance, we'll be doing all, say, for instance, older New Zealanders at a certain point, unless we knew at that time we would have the vaccines to be able to deliver on that. Now that we've locked in this agreement, our sequencing framework will be out on Wednesday. You'll see broadly the order in which people will be vaccinated, but there's a few groups, for instance, Olympians, doesn't affect the rest of New Zealand, that we still need to have some resolution around.

**Media:** What other equipment do we need for the Pfizer roll-out?

**Hon Chris Hipkins:** One of the advantages of moving to a single vaccine is that there is actually quite a bit of efficiency that can be gained through only dealing with one vaccine. You only need one stock of equipment, if you like, and, actually, one set of training for the vaccinators, whereas we could've been dealing with four lots of different competing needs in terms of vaccination programme. So, yes, whilst there is some additional cost in purchasing those extra vaccines, there will also be some savings in the simplicity of the campaign. One of the things that we're very mindful of is that the international environment around what you'd call health consumables is very, very tight, so we've been working really hard to make sure that we have the right syringes and enough of them, that we've got the right gear that our vaccinators will need. That's a work in progress. We've got enough for the first part of the campaign. Now that we've locked down the supply for the second half of the year, we're already out there in the market making sure that we can secure the consumables to be able to deliver that.

**PM:** Freezers, for instance, we've been told that that shouldn't be an issue. We have a capacity at the moment, and where we're looking to scale up by the end of the year, if there are any issues or concerns there, there's time to backfill that. One of the things we've been doing is canvassing across, for instance, the Pacific to see what capability sits there, and it's fair to say, in some countries they're able to access dry ice for when you're dispatching out to smaller cohorts, but in other places they don't have that capacity. And so that's where we're having a conversation around what vaccine will best meet their needs depending on the requirements for storage.

**Hon Chris Hipkins:** Part of those conversations with Pfizer have also been about spreading the delivery so that we don't end up with huge chunks of vaccine arriving and sitting in the freezer. Actually, spreading the delivery is better for them and it's better for us, because it means that they can be shipping it to us as they're producing it and we can be getting it out there and not having it all sitting in one place.

**Media:** Are you, sort of, planning or expecting for the Pfizer vaccine to be used for people in rural areas, or are you going to be relying on other vaccines?

**PM:** So, at this stage, it would be our preference to offer the Pfizer vaccine as widely as we can across New Zealand. However, there is still the possibility of having a single-dose vaccine. It is still part of one of our advance purchase agreements, and so that option still exists if it's needed. But what we'd like to do is to take an equitable approach, where New Zealanders are accessing the same vaccine. It means that they won't feel like they've missed

out on something that other New Zealanders have had offered to them, but, if needs be, we have a backup option if it's required.

**Media:** And was the, sort of, pressure to have that roll-out plan made public—was that a factor on all this going to this single vaccine, more expensive option?

**PM:** No, not at all. Look, we understand people's interest in the sequencing framework, absolutely, but what we've really been focused on is making sure that, even in this really uncertain environment, where—to be clear—we're not dealing with a situation where we have an advance purchase arrangement and then we get sent a docket that tells us exactly how many vaccines we'll be receiving and when; that is not the environment we've been working in. What we want to do is communicate as much as possible what we expect will happen. That has meant that when we've been working on setting out which particular New Zealanders based on their age or their profile can expect to be vaccinated, we want to broadly be able to stick to that, which is why we may not have taken the approach of some other countries.

**Media:** Last year, Megan Woods said you had an option on 5 million Johnson & Johnson single-dose injections.

**PM:** Yup.

**Media:** They've just been approved by the FDA. Why, then, did you prefer Pfizer, with all its complications, over the ordinary temperature, single-shot, Johnson & Johnson?

**PM:** It wasn't an mRNA. So, because what we did from the very beginning, keeping in mind there's been over, I believe, 200 vaccines in development at any given time—and what we strategically sat down and decided was that of the different types of vaccines that were being developed, we wanted a selection from each for our portfolio. So one mRNA vaccine, others that were more the traditional form of vaccine, to give us an assurance that if for any reason Medsafe approval wasn't successful, or third clinical trials weren't successful, we weren't left without any options. So that's what we've done. In some cases where we've opted for one over another, it's been because we already had a vaccine within our portfolio that fitted that criteria.

**Media:** Isn't this really being driven by Medsafe approval, and are you frustrated at all with the—

**PM:** No.

**Media:** —slowness of us approving vaccines compared to other countries?

**PM:** No, not at all. It just has the added advantage.

**Hon Chris Hipkins:** Look, I've been getting regular updates from Medsafe. The feedback I've had is that the next vaccine that's furthest advanced along through the approvals process is the Janssen vaccine. The Medsafe approval process, and I'm happy for anybody who really wants to understand this in detail to get more information on it—they look at a variety of different things. So they're looking at the safety of the vaccine, they're looking at the efficacy of the vaccine, but they also look at the manufacture of the vaccine, and my understanding, with regard to the AstraZeneca approval process, is that that's the area where there has been the least information and that's still a big gap in the information that's been supplied by AstraZeneca.

**PM:** So two things I'd say did weigh heavily for us. Firstly, the very specific training for our vaccinators on administering this vaccine—very specific requirements around making sure the dispatch works well. And then the issue of having an individual being told that they're getting one vaccine over another. There is a simplicity for dealing with one, and it just so happens that this a highly effective vaccine, 95 percent effectiveness, which, relative to even the flu vaccine, is incredibly high. So all of those things have factored into our thinking. Ben?

**Media:** Prime Minister, Mike Hosking appears angry this morning—

**PM:** Oh, I was actually going to give ZB the chance to ask that question first. Look, do you know what, I'm going to take a liberty. Barry, would you like to ask about that? Ben, you get to ask a separate question if you would like.

**Media:** Of all the regular radio and television slots that you do weekly, why have you singled out Newstalk ZB as the one that you won't be doing?

**PM:** Well, the first thing I'd say is, actually, this decision was taken and communicated—I think—roughly four weeks ago. The reason it hasn't been noticed perhaps till now is because I have appeared on two occasions since then, and that's because we've said, look, where there are issues of national significance I will still be on Mike's show, on the ZB show. But no one can do everything. No one could do every single slot that's available. What I have tried to do is make sure that I get as much spread as I can. People get their news from multiple sources and when I look around at whether or not I'm trying to reach people where they are, I think I could do a better job. And so that's factored into some of my thinking.

**Media:** But then when you look at Newstalk ZB commercially, it's the top-rating station in the country at that time frame. What are you saying to the listeners of that show?

**PM:** Oh, and look, I think the listeners of that show will also still hear me. They have done twice in the last four weeks even though we made that decision four weeks ago. So they will still hear me. And they will still see me in, for instance, the Herald or any other place that is reported from the multiple stand-ups that I do in any given week. I don't think anyone would argue that I'm not available, I'm not able to be questioned on issues of the day, but I do want to do a better job of reaching into some other corners where people might not get information from sources like ZB or even the Herald.

**Media:** Does that mean more [*Inaudible*]

**PM:** Oh look—sure, Jason. I'll give you a go.

**Media:** Thanks. Does that mean more Facebook Lives as opposed to—

**PM:** No. I don't—look, for instance, if we look at the last two weeks, I've done 21 interviews, I've done eight press conferences, and stand-ups. I don't think any of you would say that you're missing me; you see me frequently. I am definitely available. This is not that we are substituting any time with social media. I'm not intending to change out what I do there at all, but I am intending to try and reach into a few different media outlets, a few different forms of media, radio, TV, and other varieties that I have not done before.

**Media:** As more and more people are vaccinated—

**PM:** Then, Ben, I'll come back to you. It was a bit unfair.

**Media:** Does that—how does that work with the elimination strategy? Does that mean the sort of elimination strategy slightly fades out and a new strategy fades in?

**PM:** Yes. Look, you'll have heard me say on Friday that I'll look to step that out in a bit more detail over the coming weeks, but, ultimately, the end goal absolutely is to move to a place where the vaccine is really doing the heavy lifting for us. In the past we've used restrictions because we don't have that personal protection that we want everyone to have from COVID. But as we see more of the population vaccinated, then we will step into the vaccine doing that job for us rather than restrictions.

**Media:** Do New Zealanders need to get used to, sort of, you know, a small number of people dying tragically from COVID every year?

**PM:** No.

**Media:** So no one will die?

**PM:** Well, look, the whole idea of having enough members of your community vaccinated is that means that then you no longer become a path for COVID to reach someone who's vulnerable, and that's the whole idea of herd immunity. So my message to New Zealanders would be: I know that many people feel safe right now and are questioning why

would I take or receive a vaccine when I feel OK; it's because the vaccine is the way that you protect others. The more of us that are vaccinated, it means that there isn't a path for COVID any more and eventually that's when we'll globally see it peter out.

**Media:** This week marks two years since the Christchurch Mosques attack and it's three months since the royal commission reported back. Could you give a general overview of how the Government is responding to those recommendations? And then very specifically in your comments you noted how the Australian terrorist was radicalised on YouTube and you pledged to take up that with the CEO of YouTube. So can I ask how you've gone doing that?

**PM:** I spoke to the CEO of YouTube. It was some time ago, now, that I did that. It was in fairly close proximity to when I said I would. I still think the best avenue for us to continue to make progress there is, for instance, dealing with the issue of algorithms within the Christchurch Call. I still think that's an area where we still have some work to do. But I'll give another update on the Christchurch Call as we get a little closer to the anniversary of the call itself. When it comes to the anniversary of March 15 and the royal commission recommendations, we will be doing a report back on the progress we're making. We'll do that fairly shortly, but a big focus for us has been that the immediate call from the community has been to continue to make sure that we are supporting them. And so that's where a big emphasis—we've been placing a big emphasis on getting that right up front.

**Media:** Did you get any sort of result from that chat with the CEO of YouTube?

**PM:** It was actually a while ago, now. So I want to go back and just search through my notes again on the call. But certainly I think there was an acceptance that there is work for us still to do, that algorithms is an area where particularly civil society want greater transparency and I think we all do and that's an area where I think we all need to do a bit more work.

**Media:** On this sort of idea of a potential delay in receiving some of our other vaccines; for instance, is the idea behind that that we would immunise the population with the Pfizer vaccine, push off, say, the Janssen one [*Inaudible*] other countries to get that Janssen supply and then use those other ones that we've purchased to do booster shots in future years?

**PM:** That is a possible option, yes.

**Hon Chris Hipkins:** That is one of the options. Look, we're still in conversations with the other three pharmaceutical companies that we have got advance purchase agreements with. So it's too early to speculate on that. In the statement today we've set out some of the things that we've talked to them about including deferring delivery maybe to 2022 so that they could be part of a follow-up for vaccination campaign for New Zealanders, donating them—you know, releasing them back into the vaccine supply so other countries who want to secure supply can get supply. So all of those conversations are ongoing and at this point we're not in a position to nail any of that down.

**PM:** But I think it is good point. I'm not sure that I'm seeing enough, the conversation about this being an ongoing pandemic that we'll need to fight. So, you know, I will keep likening it to the flu. It won't be a matter of once you've had one shot it's done. This is likely to be something that every year we'll be asking people to be vaccinated to look after themselves. That's the way we'll deal with additional variants.

**Media:** Prime Minister, did you or Chris Hipkins or any of your other Ministers negotiate directly with Pfizer on this matter, and was the rates of asymptomatic infections from the Pfizer vaccine part of your thinking in this because there's been quite a lot of results out of those [*Inaudible*] but how much asymptomatic infection is stopped as well?

**Hon Chris Hipkins:** In terms of—I can answer that last part of the question. The overall effectiveness of the Pfizer vaccine was absolutely at the forefront of our consideration. Our first opportunity to negotiate with Pfizer for these extra doses literally has happened over the last month or so, and at the time we were first exploring that, we were looking at all of the effectiveness of all of the vaccines that had been in development around the world, and Pfizer

at that point, as it is still now, was sitting right at the top of the pile in terms of effectiveness, both in terms of stopping people getting the virus but also around transmissibility and so on. So we're very confident that Pfizer's a really good vaccine and it's very suitable for New Zealand's campaign. That was absolutely a big part of our consideration.

**Media:** On negotiation, you were doing it yourself?

**PM:** When it comes to the negotiation for the purchasing, that's dealt with by MBIE officials predominately.

**Media:** Just on this roadmap that you've talked about, just a couple of questions. One is—

**PM:** Just the sequencing, you mean, or the elimination strategy—

**Media:** Well, on Friday you talked about—

**PM:** Yep, what the transition looks like.

**Media:** So, firstly, do you have an exact time frame on when you're planning to do that and, secondly, in terms of borders, is that going to—and borders opening—is that going to be part of that discussion? Because at the moment it seems as though there's a—every time we're kind of feeling like we're getting close, there's a community case somewhere and it all falls over. So is there a point where you start—

**PM:** That's for the bubbles, though, not the general border. No one's suggesting that we'll be opening up the borders generally at present.

**Media:** No, so in terms of the Pacific and Australia, though, are you going to start to provide the public, I guess, with a bit of a frame of what would be required to get to that point? Because at the moment it seems as though every time you get close, or we get close, you know, there's a case somewhere. So when do you start to go, OK, well, we'll just deal with the cases in—

**PM:** And that's because every time we get close and we have a case, then something happens that actually strays away from some of the protocols that we've been discussing and that causes us to go back and have to re-evaluate how in practice it will work. But in terms of what you're asking around what is the transition from the current environment that we have towards an environment where vaccines will play a significant role, I intend to speak a little bit more to that. It'll be in several weeks. One of the things that we have to try and get a bit of a sense of is of the variability—you know, of the different variables that we're dealing with, what does that mean in terms of herd immunity for New Zealand and when do we think we'll have a bit of a picture around final data on transmission? Because if we know the vaccine is making a big difference to transmission, that may change up the way that we deal with people coming in at the border. But a couple of weeks' time I'll look to speak to that.

**Media:** Prime Minister, what's your thinking on sending vaccines to the Pacific? Before all of New Zealand is vaccinated or—what's the prioritisation?

**PM:** Yeah, so, this is one of the discussions we're really actively having with the Pacific at the moment. It makes sense for us to—in the same way we've focused on our border workers, they're focused on their border workers too. The issue, of course, that we're discussing is in some cases we'll be dealing with population bases that are so small that if you're going to make the logistical effort to get up and get ready to do border workers, you actually are probably in a position to do the entire population at the same time. Niue, up to around somewhere between 1,200 and 1,500 residents in total—you're not dealing with outer atolls in that circumstance. Tokelau, three atolls that, actually, the effort of getting to, you should do the whole population at the same time. So those are a couple of the issues we're dealing with at the moment. So a bit of variation. We mostly want to hear back from the Pacific about what they want in terms of roll-out.

**Media:** Does that mean you could prioritise vaccinating the vulnerable Pacific communities before all of New Zealand?



**PM:** No, look, I wouldn't go that far. But at the moment, really, the conversation is, what logistically do you think you could support in terms of type of vaccine? If you're having to prioritise, who would you be prioritising? And then just working through how it might work. So, no, we're not a point yet where we've made any final decisions about what it would look like for individual countries. But talks are well in train.

**Media:** There's emerging evidence about the UK variant having a longer incubation period. Are you looking at extending the stays in MIQ?

**Hon Chris Hipkins:** We're not currently looking at extending the stays. We haven't seen any evidence at this point that would suggest that there is increased risk after the 14-day period, but what we do see a little bit more of is people incubating the virus for a little bit longer. So whereas they might have been picked up previously at, say, day three, they might be picked up at day six, or example. So we're very, very mindful of that. We're always reviewing the international and local evidence around transmissibility. We're always looking at our settings. It's one of the reasons why late last year we introduced the post-MIQ follow-up check where we're getting in contact with everybody who's left MIQ, touching base with them, making sure that they haven't suddenly started to develop any symptoms. So we're always looking at how we can continue to contain that risk.

**Media:** Last week, there was a document released by the New Zealand International Students' Association on the MIQ raise in prices. I was wondering, is there any consideration for international students coming in that they would not have to pay the rise in fees or MIQ fees at all, considering they're already paying higher prices for education here?

**PM:** I'll let the Minister of Education pick up that question, who also happens to cover MIQ. One of the things I would say is that even with that increase in prices we are still subsidising the cost of managed isolation. What we decided, though, is that we should just reduce down the amount that we are subsidising. Now, I totally understand that that does present some challenges, but we have to make a call on behalf of New Zealand taxpayers around where the split lies between the taxpayer and the person travelling.

**Hon Chris Hipkins:** Ultimately, it's a very difficult time for international education providers at the moment and for students who want to come into New Zealand to study. New Zealand is an incredibly attractive place for international students to come and study at the moment, and so we're seeing very high demand for those who would come here if they were able to come here. The reality is, we do have a limited amount of space to bring people into the country at the moment. We continue to prioritise that for returning New Zealanders. We do have a limited allocation of space available for international students, although they're having to get vouchers for their travel, the same as everybody else is. This is really about fairness to New Zealanders. New Zealand taxpayers aren't in the business of subsidising the educational experience for international students coming here. We are doing our bit by partially subsidising their ability to come in but we're certainly not meeting the full subsidy of that.

**Media:** Was New Zealand ever approached as a place where Prince Harry and Meghan Markle could live? It was mentioned that they suggested they could move to a Commonwealth country like New Zealand or South Africa.

**PM:** Officially, not that I believe so—not as I understand it.

**Media:** And Australia has cut ties with Myanmar's military. Do we have any ties with them, and if so, will we cut them?

**PM:** You will remember that we set out several weeks ago now that we would be putting in place travel bans for anyone closely associated, and we've created a schedule of those who will not be able to travel into New Zealand as a result of their connection to the coup in Myanmar. We've also specifically set out that any New Zealand aid and development funding will not and cannot be used for anything that is remotely associated with the military in Myanmar as a result of the coup.

**Media:** Prime Minister, are you comfortable with the pace at which the Government has worked to consult on measures to curb housing demand given the average house price has risen by nearly 7 percent in the past three months, during which time people have been on holiday and this consultation work has been occurring?

**PM:** So which consultation work are you referring to explicitly?

**Media:** Well, sorry, following consultation with Treasury and the Reserve Bank in ways to—

**PM:** Oh, so the advice that we're receiving? Yeah. Yes, I am. Look, even then, obviously, no one is happy with what's happening in the housing market. That is why we've asked for that advice to be prepared in the first place. But we are moving very quickly on what are significant issues, and, obviously, we've set for ourselves a time frame which will have us talking about those more publicly, in short order.

**Media:** Harry and Meghan—it does sound like a pretty disturbing picture of the royal family that they're painting. Did they ever raise any concerns with you when they visited, and, also, did you pause more broadly about New Zealand's constitutional arrangements with the British royal family?

**PM:** Oh, look, I've said before that, you know, I've not sensed an appetite from New Zealanders for significant change in our constitutional arrangements, and I don't expect that that's likely to change quickly from New Zealanders. But, ultimately, what you've asked me about, though, I still see as matters for Meghan and Harry, rather than something that you'll want an account or a commentary from me around.

**Media:** But you've marketed yourself, you've met before—she's actually quoted you as an inspiration of hers. Has she ever texted or reached out to you at all and said, "Hey, I'm kind of keen to move to New Zealand.", or something along those lines?

**PM:** Look, you know, it is fair to say that I have in the past had contact here and there. But, again, you know, ultimately, the matters that have been canvassed here I see as for Meghan and Harry to respond to directly. These are matters about their personal lives and their personal decisions, and I don't think it deserves a commentary from anyone else, particularly.

**Media:** Are you looking to reassess the rules around airline crew isolating?

**Hon Chris Hipkins:** Look, I've looked very closely at this most recent case. At this point, the advice that I've had—I've been briefed several times on it now—is that the risk around it is reasonably well contained. This is a person who's followed the rules as they've been set out. I can report that around 1,500 Air New Zealand people so far have been vaccinated. They've received their first dose of the Pfizer vaccine. That will make a big difference to Air New Zealand's ability to operate internationally. I do want to put this into context, though. We're talking about around five and a half thousand flights they've operated since May last year, and we've dealt with three cases, you know, of air crew who have come off those flights. They have done a remarkably successful job in containing the risk of people being infected whilst they're working internationally, and I want to acknowledge that. They are working very, very hard there.

**PM:** I'll take last two—in the back, yeah. Oh, sorry, just behind you, Mark, if I may. Forgive me, I don't have your name.

**Media:** Prime Minister, you said earlier that no country is safe until all countries are safe, and I know that, you know, you're in COVAX, but why hasn't the Government expressed support for the TRIPS proposal at the World Trade Organization?

**PM:** In fact, I would argue that for some of those specific issues that have been raised, you know, we have played a productive role, and, in fact, there is already provision within TRIPS to deal with some of the IP issues that have been raised. So what we're trying to do

is proactively find a way through where we can build some consensus. So New Zealand has not stood up in opposition to those discussions; we've actually tried to be bridge builders.

**Media:** So you do support a relaxation?

**PM:** Well, our argument would be that some of that provision already exists. And, so, for us, we're trying to find a way through. But, ultimately, we come from the principle of the fact that we won't all be safe until we have a world where vaccines are widely available and administered, and we're trying to do what we can to support that as much as we can. I'll take the last two.

**Media:** Just on Air New Zealand, Minister Hipkins, are you comfortable with Air New Zealand crew flying into New Zealand from Australia and then jumping on domestic flights the next day without having a test?

**Hon Chris Hipkins:** If they're coming from Australia, they'll be following a whole lot of protocols around making sure that they're protecting themselves and protecting their passengers. Australia is deemed to be a low-risk route. We do work with Air New Zealand around protocols around making sure that anyone who's transferring within New Zealand who's come off one of those flights, if they're air crew, that there's very careful, you know, protections around making sure that they're not an additional risk. That includes where they sit on the plane, when they get on the plane, how all of that is managed, what PPE they're wearing when they're on the plane, and so on. I work very closely with Air New Zealand on that, as do the health officials. If there are any specific concerns, then, of course, I take that up with them.

**PM:** Are you referring to people relocating after coming off an Aussie flight?

**Media:** It's a question from a colleague.

**PM:** OK, we might just dig in to that a little bit more if we can. I'll take the last one. Mark.

**Media:** Israel's agreement with Pfizer involved them supplying some data on how the vaccine sort of—

**PM:** We will not be doing that. Yes, you're right. I mean, they had very early access to the Pfizer vaccine, and one of the factors was that essentially health data was provided, and, in fact, in our case, we continue to seek health data from Pfizer as part of our ongoing work with Medsafe. But, again, it's already been through its approval process, and Medsafe consider it absolutely safe for us to be using here. Thank you, everyone.

**conclusion of press conference**