



# Briefing

## REVIEW OF CURRENT COUNTRY RISK CLASSIFICATIONS

To: Reconnecting New Zealanders Ministerial Group

<b>Date</b>	17/11/2021	<b>Priority</b>	HIGH
<b>Deadline</b>	19/11/2021	<b>Briefing Number</b>	DPMC-2021/22-661

### Purpose

1. This briefing provides an overview of the updated public health review of Fiji and Indonesia and recommends that these countries are re-classified as High-Risk (HR). It also provides reviewed public health advice regarding the risk designations of the original Very High-Risk countries (Brazil, India, Pakistan and Papua New Guinea) and recommends they are re-classified as High-Risk.
2. This briefing also considers recent public health advice for Malaysia and recommends that it remains classified as HR.
3. *This briefing has been updated, from the version provided on 27 October, with additional information on the COVID-19 situation in Papua New Guinea.*

### Recommendations


1. **Note** that on 13 September the Minister for COVID-19 Response received an updated risk assessment from the Ministry of Health outlining that the situation in Indonesia and Fiji has improved and that these countries could now be considered HR and managed in line with other HR countries
2. **Note** that on 10 September 2021 a public health risk assessment was also undertaken for Malaysia which recommended that Malaysia should remain as a HR country
3. **Note** that on 16 August 2021 a review of India, Brazil, Pakistan, Papua New Guinea was provided to the Reconnecting New Zealanders Ministerial Group which outlined that the situation in each of these countries had improved and recommended that they are re-classified as HR

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4. **Note** that updated public health advice from 20 October 2021, is that the risk designation of India, Brazil, Pakistan, Papua New Guinea remains unchanged
5. **Note** that that there have been no imported cases of COVID-19 from Papua New Guinea in the last three months (among the 68 arrivals) and that, despite the rise in COVID-19 cases, public health advice continues to recommend that Papua New Guinea is considered to be High-Risk
6. **Note** that travel volumes from the current Very-High-Risk (VHR) countries are low and are likely to remain relatively low even if travel restrictions from these countries are lifted, due to limited MIQ availability and other external factors (such as flight availability)
7. **Note** that although there are proposed changes to MIQ and border settings (such as shorter stay MIQ), public health advice considers that MIQ remains an appropriate risk mitigation for travellers from all high-risk countries
8. **Agree** that the following countries are re-classified as HR and managed in line with other HR countries:
  - 8.1. **Agree** to re-classify Indonesia as High-Risk
  - 8.2. **Agree** to re-classify Fiji as High-Risk
  - 8.3. **Agree** to re-classify India as High-Risk
  - 8.4. **Agree** to re-classify Pakistan as High-Risk
  - 8.5. **Agree** to re-classify Brazil as High-Risk
  - 8.6. **Agree** to re-classify Papua New Guinea as High-Risk
9. **Note** that the Ministry of Foreign Affairs and Trade (MFAT) requires 24 hours after Ministerial decision and before public announcement to advise affected foreign governments
10. **Note** that following Ministerial decisions officials will publish the COVID-19 risk assessments of all seven countries discussed in this paper (Indonesia, Fiji, Malaysia, India, Pakistan, Brazil and Papua New Guinea)
11. **Note** that amendments to the COVID-19 Public Health Response (Air Border) Order will be made to reflect the above decisions
12. **Note** that a minimum of 72 hours is needed to make the appropriate legal and operational changes for implementation
13. **Agree** to proactively release this Briefing and the associated public health risk assessments, subject to any redactions, as appropriate.

YES / NO  
YES / NO  
YES / NO  
YES / NO  
YES / NO  
YES / NO  
YES / NO

YES / NO

  
Alice Hume  
**Manager, Strategy and Policy, COVID-19 Group**

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17/11/2021

  
Rt Hon Jacinda Ardern  
**Prime Minister**

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22/11/21

Hon Grant Robertson  
**Minister of Finance**

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Hon Chris Hipkins  
**Minister for COVID-19 Response**

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Hon Nanaia Mahuta  
**Minister of Foreign Affairs and Trade**

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Hon Kris Faafoi  
**Minister of Immigration**

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Hon Michael Wood  
**Minister of Transport**

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Hon Peeni Henare  
**Associate Minister of Health (Māori Health)**

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Hon Dr Ayesha Verrall  
**Associate Minister of Health**

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Hon Aupito William Sio  
**Associate Minister of Health (Pacific Peoples)**

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Hon Meka Whaitiri  
**Minister of Customs**

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**Contact for telephone discussion if required:**

Name	Position	Telephone	1st contact
Alice Hume	Manager, Strategy and Policy, COVID-19 Group	s9(2)(a)	✓
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**Minister's office comments:**

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- Noted
- Seen
- Approved
- Needs change
- Withdrawn
- Not seen by Minister
- Overtaken by events
- Referred to



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# REVIEW OF CURRENT COUNTRY RISK CLASSIFICATIONS

## Background

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4. On 5 July 2021 Cabinet agreed to a new approach to country risk assessment, based on a broad range of public health considerations. India, Pakistan, Papua New Guinea and Brazil were originally classified as VHR countries (original VHR countries). Only New Zealand citizens (and dependants) can travel directly to New Zealand from these countries. All other travellers must spend 14 days in a non-VHR country before coming to New Zealand. Exemptions are provided for humanitarian needs and some foreign diplomats.
5. Cabinet agreed that following a detailed public health assessment, an inter-agency process would determine appropriate risk responsive mitigation measures for travellers from countries and jurisdictions that pose a very high risk [SWC-21-MIN-0101 refers]. Advice, considering a range of factors and mitigations (alongside public health advice), would then be provided to the Reconnecting New Zealanders Ministerial Group to make a final decision.
6. On 8 July 2021 the Minister for COVID-19 Response received advice from the Ministry of Health which outlined that the in-country situation had improved in each of the original VHR countries. The Ministry of Health advised that the public health risk assessment of these countries was that these countries would now be considered High-Risk, subject to any necessary risk mitigation measures.
7. On 16 August 2021 a review of the four original VHR countries was provided to the Reconnecting New Zealanders Ministerial Group. The review outlined that the situation in each of the countries had continued to improve and recommended that they are now considered High-Risk.
8. In addition, on 10 August 2021 the Reconnecting New Zealand Ministerial Group agreed to classify Indonesia and Fiji as VHR due to the growing COVID-19 risk in each country [DPMC-2021/22-105 refers].
9. On 4 October 2021 Cabinet agreed to introduce a requirement for all non-New Zealand citizens arriving in New Zealand by air to be fully vaccinated in order to arrive in New Zealand from 1 November 2021.

## Public health advice from the Ministry of Health is that Indonesia and Fiji could now be considered High-Risk

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10. The country risk assessment framework agreed by Cabinet enables officials to consider both a public health assessment and an assessment of whether the available risk mitigation measures are proportionate and appropriate to the measure of risk carried by travellers from these countries.
11. The public health risk assessments conducted on 10 September 2021, highlighted the in-country situation had continued to improve in each of the VHR countries. The assessment outlined that as at 6 September the following considerations for the VHR countries applied:

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- a) Indonesia – Reported case numbers have decreased significantly from a weekly rolling mean of 187 daily cases per million on 21 July to fewer than 30 daily cases per million since 6 September. Test positivity rates have fallen from 30% to 12% and vaccination rates have increased from 6% to 14% but remain at low levels.
  - b) Fiji – Reported case numbers have dropped significantly from 1175 daily cases per million on 3 August to 282 daily cases per million on 6 September (seven day rolling average). Test positivity rates have fallen slightly from 30% to 21.2% and vaccination rates have increased from 10% to 30%.
12. The public health risk assessment recommended that travellers from Indonesia and Fiji could be managed effectively in line with other High-Risk countries, without any further public health measures required. The public health risk assessment is provided in full in **Appendix A**.
  13. Travellers from most countries will pose a risk when entering New Zealand as COVID-19 is now prominent across the globe, with the Delta variant having been seen in at least 185 countries and now dominant in most countries. The countries that are currently designated as Very High-Risk have improved their in-country situations, with case rates similar to, or even dropping far below, other jurisdictions that are currently classified as High-Risk.

*Bilateral considerations for reclassifying Indonesia and Fiji as High-Risk countries*

14. Reclassifying Indonesia as High-Risk would enable a small number of New Zealand residents to travel to New Zealand. A number of other countries who had placed travel restrictions on Indonesia have now removed them. The Philippines, Malaysia, Turkey, Saudi Arabia and United States have recently reduced some restrictions on travellers from Indonesia. Singapore, the United Arab Emirates and Hong Kong have also reduced transit restrictions on travellers from Indonesia.
15. s6(a)  
A reclassification would support future travel to New Zealand from Pacific countries such as Tuvalu and Kiribati that rely on Fiji as a transit hub and their only connection to the outside world. Removal of the VHR restriction on non-New Zealand citizens would also assist with the repatriation of a small group of 37 Tongan nationals currently stranded in Fiji who are required to travel to New Zealand to undertake MIQ before their return to Tonga. New Zealand has previously supported the Tongan Government to help facilitate repatriation of these individuals, subject to securing MIQ slots in New Zealand.

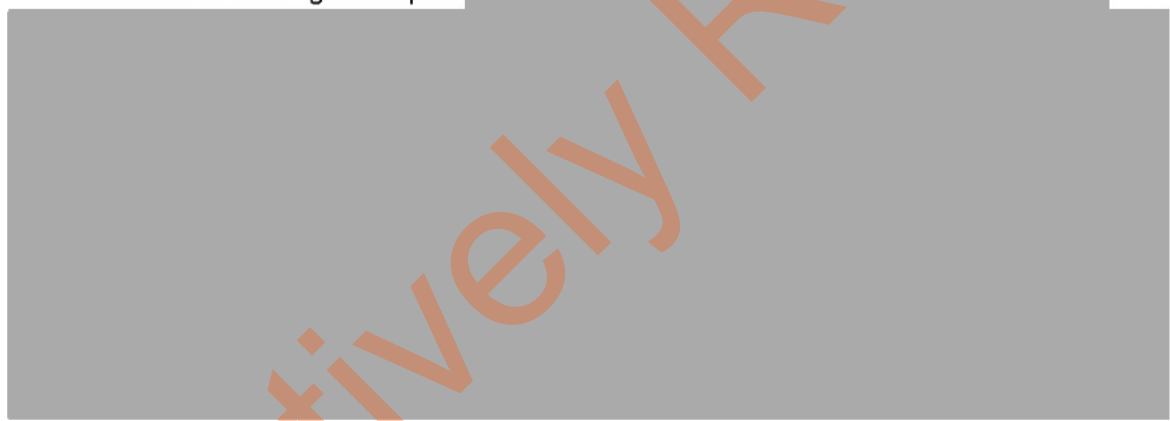
**The Ministry of Health has also re-confirmed its public health advice that the original VHR countries could now be classified as High-Risk**

16. On 16 August 2021 officials submitted a report to the Reconnecting New Zealanders Ministerial Group recommending that the four original VHR countries (Brazil, India, Pakistan and Papua New Guinea) be reclassified as HR. However, due to the current Delta outbreak on 17 August 2021, there have not yet been any decisions regarding a change in risk designation for these countries.

17. Recent public health advice provided by the Ministry of Health regarding the risk designation of those countries remains unchanged and it is recommended that travellers from the original VHR countries be re-classified as HR.

*Papua New Guinea*

18. In particular, given the increase in COVID-19 cases in Papua New Guinea, an additional review of the public health advice in relation to Papua New Guinea was undertaken on 20 October 2021. The public health risk assessment highlighted the following:
- a) Papua New Guinea – Reported a rise in cases from 2 daily cases per million on 3 August to 33 daily cases per million (seven day rolling average) on 20 October 2021. The current test positivity rate is 13% with 0.67% of the population fully vaccinated.
19. Based on the assessment, public health advice continues to recommend that Papua New Guinea is considered to be High-Risk and that any risk from arrivals are already mitigated by the current health measures in place for high risk jurisdictions. No further risk mitigations are considered necessary from a public health perspective.
20. As the rise in COVID-19 cases in Papua New Guinea remains small, the risk to New Zealand remains low. There are currently no direct flights from Papua New Guinea to New Zealand. All international travellers departing PNG must present a negative PCR test before entering the airport. s9(2)(f)(iv)



23. Officials will continue to monitor the situation in Papua New Guinea as part of the weekly surveillance and assessment process. The public health risk assessment for Papua New Guinea is provided in full in **Appendix B**.

**Public health advice also indicates that Malaysia should continue to be classified as High-Risk**

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24. A public health risk assessment was undertaken for Malaysia on 10 September 2021 as a result of the Ministry of Health's weekly surveillance and assessment process to identify potential VHR countries. The risk-assessment highlighted the following:
- a) Malaysia – Reported 605 daily case numbers per million (seven day rolling average) on 6 September 2021. The current test positivity rate is 14% with 48.8% of the population fully vaccinated. Since the assessment, daily cases have dropped to 270 cases per million as at 12 October 2021.



25. The public health risk assessment recommended that Malaysia remain as a High-Risk country and that no further risk mitigations are considered necessary from a public health perspective. Any risk from arrivals from Malaysia are already mitigated by the current health measures in place for high-risk countries.
26. The situation in Malaysia will continue to be monitored as part of the weekly surveillance and assessment process. The public health risk assessment is provided in full in **Appendix C**.

### **Public health measures in place for High-Risk countries**

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27. A range of substantial public health measures are currently in place for most High-Risk countries including:
  - a) Pre-Departure testing
  - b) The requirement to enter a Managed Isolation Quarantine (MIQ) for 14 days
  - c) Systematic testing in MIQ including testing on day 0/1, testing on (or around) day 3, and testing on (or around) day 12
  - d) Ending the transporting of guests to exercise
  - e) A test on day 6/7 for close contacts or confirmed/probable cases.
28. In August, advice was provided to the Minister for COVID-19 Response on further mitigating measures that have been developed by the Ministry of Health and MIQ to implement additional returnee testing on day 6/7 for all travellers returning to New Zealand, including from HR countries. These measures have been in place since 29 September 2021.
29. On 4 October, Cabinet also agreed to introduce the requirement for all non-New Zealand citizens arriving in New Zealand by air to be fully vaccinated in order to arrive in New Zealand from 1 November 2021. This additional layer of protection will also help to reduce the risk of COVID-19 transmission from travellers and encourages greater uptake of vaccination by non-citizens who wish to travel to New Zealand.

### **Traveller flows from Very High-Risk countries are likely to remain low for the remainder of 2021**

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30. Travel volumes from the current VHR countries are low and are likely to remain relatively low even if travel restrictions from these countries are lifted. Traveller volumes are limited by external factors such as flight availability and other countries' travel restrictions. Officials are aware that NZ residents and other visa holders have continued to enter New Zealand by spending 14 days in a non-VHR country.

*Future travel flows are likely to remain modest over the coming months*

31. Travellers from VHR countries hold bookings for a relatively modest number of rooms over the coming months. MIQ data outlined in the table below, highlights that travellers from VHR countries hold MIQ bookings for 885 rooms (1,609 travellers) between 1 October and 31 December. This averages at just over 10 new rooms per day or about 8.7% of rooms currently booked. The below table provides a country specific breakdown:

Total MIAS allocation 1 October – 31 December 2021, as at 23 September

Country	Rooms booked	Number of travellers	Estimated Proportion able to enter under standard VHR settings	Proportion of overall travellers to NZ
Indonesia	57	96	63.2%	0.6%
Fiji	80	135	72.5%	0.8%
Malaysia	79	138	31.6%	0.8%
India	575	1104	38.6%	6.7%
Pakistan	37	67	67.6%	0.4%
Brazil	19	28	47.4 %	0.2%
Papua New Guinea	38	41	89.5%	0.3%

32. This data includes confirmed bookings following the new approach to room releases carried out on 28 September 2021. An on-going process to release available room bookings will be undertaken on a weekly basis.
33. If VHR restrictions are eased there will be an increase in travellers eligible to enter New Zealand directly (including New Zealand Residents) who will seek to make new MIQ bookings. However, as travellers from VHR countries have continued to book spaces in MIQ despite current travel restrictions, it is unclear whether there will be a significant increase in demand above current bookings.
34. The ability of travellers from VHR countries to secure an MIQ place over the remainder of 2021 will be very limited. This demand continues to be driven heavily by New Zealanders, who make up 81% of confirmed MIQ bookings over this period. This level of demand is currently expected to continue until at least the end of the summer 2021/22 period.
35. While New Zealand's travel restrictions for VHR countries contribute to the reduction of arrivals from these countries, there are other external factors limiting arrivals including limited flight availability from VHR countries, travel restrictions in the VHR countries making it difficult for some travellers to leave and higher travel costs for non-New Zealand citizens affected by the VHR policy returning via 14 days in a non-VHR country.

*Current changes to MIQ and border settings*

36. Due to pressure in MIQ capacity, changes to border and MIQ settings were proposed to reduce the number of days for MIQ stays and suspend cohorting of travellers. However, the very high MIQ demand will continue to limit the ability of travellers from these countries to book MIQ spaces.
37. The space that is freed up by these changes will not automatically be released back for booking by travellers. Depending on the course of the domestic outbreak, it is possible that much of the capacity freed up by the changes will be deployed to support the response to the community outbreak.

38. Public health advice also considers that changing MIQ settings to, for example, reduce the number of days for MIQ stays or suspend cohorting of travellers would not impact current public health advice that MIQ is an appropriate risk mitigation for travellers from all high-risk countries.

39. s9(2)(f)(iv)

### **We recommend that the Very High-Risk countries are re-classified as High-Risk**

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40. We therefore recommend that India, Brazil, Pakistan, Papua New Guinea, Indonesia and Fiji are re-classified as HR. In addition, we recommend that Malaysia remains as a High-Risk country and that the standard High-Risk mitigation measures continue to apply.

*There are diplomatic implications if countries remain classified as Very High-Risk*

41. 6(b)(i) and 9(2)(g)(i)

42. The continued VHR classification of these countries additionally results in adverse effects for New Zealand residents (and other visa holders). In particular, the ongoing restrictions have been difficult for family relationships and students who are still unable to return to New Zealand for study.

### **Legislative amendments to action Very High-Risk recommendations**

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43. The original VHR country provisions are contained in schedule 3 of the COVID-19 Public Health Response (Air Border) Order (No 2) 2020 (ABO) and as such only apply to travellers arriving by air into New Zealand. In order to amend the current list of VHR countries to add or remove countries, an amendment must be made to the ABO.

44. Once Ministers have made a decision, officials will issue drafting instructions to PCO to prepare the required amendment order. In addition, consultation will take place with relevant Ministers on the legal amendments required (including the Minister of Justice). It is likely that the changes would be ready to be signed by the Minister for COVID-19 Response within 2-3 days of the decision and will come into effect 48 hours after being made. We therefore advise that a decision consistent with this could be given effect within three days.

### **Next Steps**

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45. The Ministry of Foreign Affairs and Trade will advise affected foreign governments of any changes to the VHR framework and will require 24 hours before public announcement to do so.

46. Border agencies (including New Zealand Customs Service and the Ministry of Transport) will also require 48 hours from the time of decision to implement these changes. This

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includes providing guidance to Customs frontline staff of the VHR changes (particularly in regard to pre-departure testing checking requirements) and to airlines who need to cascade any changes in requirements to overseas-based check in staff (who do not board travellers who are not permitted to enter New Zealand).

Attachments:	
<b>Appendix A:</b>	Public Health Risk Assessment: Review of Fiji and Indonesia as VHR jurisdictions
<b>Appendix B:</b>	Public Health Risk Assessment: Review of Papua New Guinea
<b>Appendix C:</b>	Public Health Risk Assessment: Malaysia

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