A Roadmap to Reopening

A report of the Open Society Common Purpose taskforce

Convened by the Sydney Policy Lab and the
Culture Strategy at the University of Sydney

May 2021
Acknowledgement of Country

The University of Sydney’s Camperdown Campus sits on the lands of the Gadigal people with campuses, teaching and research facilities on the lands of the Gamaraygal, Dharug, Wangal, Darkinyung, Burramadagal, Dharawal, Gandangara, Gamilaraay, Barkindji, Bundjalung, Wiradjuri, Ngunawal, Gureng Gureng, and Gagadju peoples.

We recognise and pay respect to the Elders and communities of these lands, past, present and emerging, who for thousands of years have shared and exchanged knowledges across innumerable generations, for the benefit of all. We respect and value the knowledges, cultures and traditions of Aboriginal and Torres Strait Islander peoples.

There is no place in Australia – water, land or air – that has not been known, nurtured and loved by Aboriginal and Torres Strait Islander peoples. We acknowledge that many people identify themselves by their Clan, Mob, or Country.
About the Sydney Policy Lab

The Sydney Policy Lab is a multidisciplinary research institute at the University of Sydney and a nonpartisan space where people from all walks of life can meet and collectively develop plans for the future.

We exist to forge collaborative relationships between researchers, civil society, industry, politicians, and policymakers that are capable of creating new knowledge and driving change that would shape an Australia which is more equal, where power is in the hands of everyday people and where more people feel a secure sense of belonging in their own society.

The Sydney Policy Lab develops far-reaching, original research projects which unite the grounded wisdom that comes from everyday experience and the perspectives gained from rigorous scholarship. We work in partnership with institutions that seek to put new ideas into practice.

Our unique way of working strengthens the ability of our researchers and partners to collaboratively generate new ideas, transform the ways they work, and effect change.

About the Culture Strategy

The Culture Strategy team at the University of Sydney is dedicated to strengthening the University’s institutional culture. We seek to bring out the best in the University, and to build a culture that enables our staff and students to thrive. We give voice to our values of courage and creativity, respect and integrity, openness and engagement, and diversity and inclusion. We work with academic and professional units within the University to empower our people and to harness their expertise. And, in partnership with colleagues and others, we seek to enable the University to fulfil its institutional purpose in leading for the public good, through excellence in research and education, and service to society.
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A report convened by the Sydney Policy Lab and Culture Strategy and the University of Sydney

Report authors:
Open Society, Common Purpose taskforce

Correspondence:
policy.lab@sydney.edu.au

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Theo+Theo

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Executive Summary

How can Australia re-engage with the world in the era of COVID-19? And how can Australia strengthen its social foundations as it does so?

This report of the Open Society, Common Purpose taskforce outlines a pathway to reopening Australia and to rebuilding for Australia’s future success. Formed in December 2020 at the invitation of the Chancellor of the University of Sydney, the taskforce is an independent grouping of leaders from across the Australian community that has inquired into the choices our nation must make to secure our future prosperity and stability.

The taskforce believes that to be prosperous, fair, and strong, Australia must be open to the world and close-knit at home. Never have both been so important, but so difficult to achieve simultaneously. One of the by-products of the pandemic has been Australia’s decision to close its borders and separate itself from the rest of the globe. We have also seen the unprecedented use of internal state border closures and the emergence of tensions within and between communities, often encouraged by pedlars of intolerance and racism. It is in no one’s interests that this situation continues longer than necessary.

The urgency shown by Australia in initially suppressing and then locally eliminating COVID-19 now needs to be shown towards preparing the country for reopening its international borders. Reopening requires not only building a path towards rapid large-scale vaccination of the Australian population and changes in the way in which quarantine operates, but also creating a ‘psychological runway’ for Australia to reopen. It is a case of moving decisively to ensure that Australia wins not only ‘the war’, but also ‘the peace’.

If Australia is not ready to reopen effectively when the world recovers from the worst of the pandemic, we face enormous dislocation socially and prolonged pain economically.

We need to move from the anxiety of the last year to a more confident and outward-looking future.

If we do not, it is no exaggeration to say that young people, in particular, face a lost decade.
Lessons from Australia’s COVID experience

As we look forward to the future, we can draw on several notable lessons from Australia’s COVID experience:

— Australia possesses a strong capacity for effective action in times of crisis;
— our leaders and people have at times shown considerable bipartisan unity and were guided by objective scientific advice in addressing the situation;
— Australia has been prepared to take significant measures to avoid a catastrophic economic downturn;
— Australian expert institutions, including our public health bodies, have proved generally up to the task of protecting our people;
— Australian civil society play a critical role in filling gaps relating to the support of vulnerable people and communities;
— Australia’s Indigenous communities have responded to the pandemic effectively;
— being an island nation made it easier to close our borders, which has helped to keep us safe, but it also increased our aversion to reasonable risk;
— parochial and ‘Fortress Australia’ attitudes have emerged at times, including some ugly and unfortunate outbreaks of xenophobia and racism;
— executive power has increased at the expense of parliament, sometimes worryingly so;
— state-of-the-art genomic transmission tracking assisted containment responses, but our health departments and quarantine measures also failed at critical moments and need to be made fit for purpose in an era of potentially more frequent pandemics;
— a worrying lack of sovereign capacity has been exposed in the Australian economy; and
— serious inequalities have been revealed, meaning the burdens of dealing with the virus have not been shared equally – in essence, existing social inequalities have been amplified with an unequal burden shifted onto younger people and future generations.

A vision for a post–COVID society

The taskforce believes Australia should strive to retain and enhance its reputation as an open, tolerant, liberal-democratic nation with good governance, strong protections for individual freedoms, effective programs to promote social cohesion and equality, and a robust market economy that generates inclusive prosperity.

Our strategy: ‘securely reopened and effectively vaccinated’

The majority of Australians have to date favoured an approach that emphasises the aggressive suppression of COVID-19, including continuing restrictions on entry into the country, potential closure of state and territory borders, and graded lockdowns when necessary. Nonetheless, Australia cannot continue to lock itself off from the world as a hermit nation indefinitely. The social and economic costs of doing so are simply too great and Australia risks being left behind as the powerful nations around the world emerge from the pandemic and start to re-engage. The question therefore is not when but how Australia should reopen.
While some argue that Australia should only open up to the world when zero COVID transmission can be guaranteed, the taskforce believes this to be unrealistic. The virus causing COVID-19 (SARS CoV-2) will not disappear from the world. We need to acknowledge and respond to this reality. As such, a ‘zero COVID’ strategy is incompatible with global reintegration, while continued isolation would damage Australia’s reputation as an open and tolerant society.

A more sensible and realistic option is to reopen to the world in a controlled and staged way, supported by the delivery of an effective vaccine program and a sensible regime of monitoring and isolating those with infection. In such a situation, large outbreaks associated with an excessive burden on the health care system or loss of life can be prevented and the safety of the nation assured.

In short, our recommended strategy is for Australia to move from zero COVID, which traps us in suspended animation, to ‘securely reopened and effectively vaccinated’ which would allow us to ‘live with COVID’ in a way that minimises both direct and indirect harm.

A roadmap to reopening

To emerge from the pandemic and re-engage with the world, Australia needs to move from fear to hope, from negativity to an optimistic belief that ‘we can do this.’

This will only be possible if Australia reopens to the world in a controlled, risk-weighted and staged manner. In some respects, Australia has already proven it can do this: since the emergence of COVID-19, some 250,000 people (citizens, permanent residents and short-term visitors) have arrived on our shores, with COVID-19 cases kept to a minimum.

The taskforce offers the following roadmap for Australia to reopen to the world. Australia needs to pursue:

1. a comprehensive and successful vaccination program;
2. sector and place-specific pilot programs to reopen prior to the conclusion of the vaccination program, supporting industries critical to Australia’s economy including tourism and creative industries, horticultural farming, and international education;
3. a certification scheme across these programs, which permits only those with documented vaccination and/or SARS CoV-2 immunity to enter Australia or travel overseas;
4. improved border protection measures involving rapid testing; and
5. a range of new risk-weighted quarantine measures complementing the maintenance of hotel quarantine for those who come from high-risk countries, refuse testing, or test positive on arrival.
Creating an open society and common purpose

The pandemic provides several important lessons that the taskforce believes will help meet its vision of an open society and common purpose.

1. Australia should return to its pre-COVID embrace of immigration and multiculturalism. This should be supported by a national anti-racism strategy.

2. The pandemic, with its obvious implications for people’s mental health, should be a catalyst for the creation of a fully integrated public community-based system of care.

3. The economic inequalities exposed by the pandemic need to be addressed through a strategy of inclusive prosperity.

4. The success of the National Cabinet in overcoming the pandemic should be regarded as an example of the power of national cooperation to foster success in other areas of our national life.

5. Australia must accept its moral duty to assist our Pacific neighbours to protect the health of their citizens and overcome the economic damage caused by the pandemic.
Introduction: The scope and purpose of the report
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The Open Society, Common Purpose taskforce

The Open Society, Common Purpose taskforce is an independent body drawn from a broad range of sectors working to promote a society that is outward-looking to the world and builds social connection at home. It was appointed by the Chancellor of the University of Sydney and hosted by the Sydney Policy Lab and the University’s Culture Strategy. The taskforce’s list of members and terms of reference and can be found in Appendix 1 and Appendix 2. The taskforce was invited by the Chancellor to address in the broadest terms the following questions:

*How can Australia re-engage with the world in the era of COVID-19, and how can it strengthen its social foundations as it does so?*

Our goal: an open society and a close-knit community

The taskforce believes that to be prosperous, fair, and strong, Australia must be open to the world and close-knit at home. Never have both been so important, but rarely have they ever been so difficult to achieve. To deal with the threat of this contagious, life-threatening disease, Australia’s international borders have been closed to the vast majority of travellers, including tens of thousands of Australian citizens stranded abroad; movement between states, and at times between cities and regions, has also been heavily curtailed. Not since the end of the Second World War has Australia’s open society been so threatened.

The urgency shown by Australia in suppressing COVID-19 now needs to be shown towards preparing the country for reopening its borders. Our current state may obscure the need for urgency. There are signs of a COVID-19 recovery: the economy is now larger in size than what it was at the start of the pandemic, while property prices across the country are once again booming. The number of COVID-19 infections remains very low, with almost no community transmission.

Amid all this, there is a risk of the national mood slipping into complacency. Many may presume that countries faced with the immediate danger of stubbornly high COVID-19 infections have no choice but to vaccinate their entire populations with haste. Meanwhile, Australia may have the luxury of time given our successful suppression of COVID-19 to date. Believing this would be a grave error. It would consign Australia to emerge from the pandemic much slower than it otherwise could. Such a delay would cause significant economic, social and cultural harm.

The alternative is to move urgently towards putting in place the protections needed for our borders to reopen safely. It is a case of moving decisively to ensure that Australia wins not only ‘the war’, but also ‘the peace’. This requires not only building a path towards the effective vaccination of the Australian population, but also creating a psychological runway for Australia to reopen.

For this reason, the taskforce’s objective is to explain the key steps towards Australia being able to reopen its borders, restart immigration and travel, and provide the preconditions for an open and prosperous society.
Getting these settings right is critical.

The pandemic has now reached a new phase in which anti-COVID-19 vaccines are being administered across the world, in some places with great speed and success. People are eagerly looking forward to the day when openness can be resumed, divisions can be overcome and rebuilding can commence.

When and how might such things happen? These are the issues the taskforce has addressed.

This first report provides discussion and outlines a roadmap forward.

**Securely reopened**

Because of the nature of the COVID-19 disease, we cannot say with any certainty when the global pandemic will end. We do, however, know that even if the pandemic ends the virus will not disappear from the world – it is here to stay and we need to plan accordingly. In order to plan well we need to agree on an initial set of criteria.

It is clear from the last year that the majority of Australians have to date favoured an approach that emphasises the aggressive suppression and effective elimination of COVID-19, including continuing restrictions on entry into the country, potential closure of state and territory borders, and, when necessary, graded lockdowns.

Nonetheless, Australia cannot indefinitely lock itself off from the world, nor does it need to as vaccines and other effective interventions gather pace in the rest of the world. The question therefore becomes not so much when but how Australia should reopen. Given this, the taskforce offers insights about several of the most crucial issues that need to be considered when making such a decision.

These include:

- understanding the risks and rewards of opening up versus remaining closed;
- measures that will allow us to open sooner rather than later, and in a staged and risk-weighted manner, as COVID-19 is steadily controlled; and
- co-designing measures that will give Australia the best chance of remaining open in a world in which COVID-19 is still present, but in a post-pandemic form.

While some argue that Australia should only open up to the world when zero-COVID transmission can be guaranteed, the taskforce believes this to be unrealistic. Given the improbability that COVID-19 will be eliminated globally, a zero-COVID strategy is incompatible with global reintegration. A more sensible and realistic option is to reopen to the world in a controlled and staged way, while our vaccination program is delivered and with a continuing robust regime of monitoring and isolating those infected in place. In such a situation, life-threatening outbreaks should be preventable and the safety of the nation can be assured.

In short, our recommended strategy is for Australia to move from zero COVID to ‘securely reopened and effectively vaccinated’.

**A roadmap back to openness and unity**

The taskforce has drawn up a roadmap of staged and risk-weighted measures that may aid decision makers and inform public debate. While reopening to the world will require strong
leadership, it must also transcend partisanship and gain popular support. There is a need now for the country to adopt a mindset of re-engaging and rebuilding, as opposed to simply controlling the pandemic’s spread. By providing this information and guidance we hope to assist the country to unify around intelligent and decisive action.

As we have developed this roadmap, our attention has been broadly directed. The pandemic has tested our nation’s political leaders, public health experts and business and community leaders, understandably drawing their attention towards day-to-day changes of policy and away from the bigger picture about the future. The taskforce understands that the specific question about international re-engagement can only be answered in the context of the broader questions:

What comes next for the country? What sort of nation should we aspire to be once we emerge from the pandemic? What might our national vision look like? And what useful lessons can we take from the experience of the pandemic so we can create a healthier, stronger, more prosperous society?

Many important questions have arisen about how well our institutions performed, who benefitted and who suffered from the pandemic-related measures, how it changed our cities and working arrangements, and what deep fractures the experience of the pandemic exposed about our economy, our society and ourselves.

**Continuing work**

Providing this guidance in the form of a report is the first step. A successful return to openness will require ongoing advice and continuing broad acceptance of change. No one group can do this on its own.

This has been the approach that has informed our work to date. During March and April 2021, the taskforce conducted targeted consultation with the public. We held five roundtables, with participants drawn from a wide range of backgrounds in business, civil society and academia, including one roundtable focused specifically on young people. We have commissioned briefings from the University of Sydney’s academic experts in public health, infectious diseases and the social sciences. Our deliberations have been enriched and enhanced by the dialogue we have generated from diverse expertise and lived experience.

We believe such a dialogue must continue.

In order to provide a larger wellspring of advice and enable better public understanding of the need to open at the right moment, there is a need for a broad alliance of government, business, the not-for-profit sector, civil society and academia. The taskforce therefore wants to see the unlocking of the silos of government, civil society and business, bringing people together to agree on a better way forward for Australia after the pandemic. To this end, the taskforce proposes establishing an ongoing forum that can transcend partisanship, bring dissenting voices together, engage with the marginalised, and overcome social divisions arising from the pandemic.
The taskforce recommends the establishment of an ongoing forum that brings together government, business, civil society and academia to create a civic dialogue about Australia’s post-COVID-19 future. It stands ready to work with organisations across Australian society in order to assist that work.
How We Got Here
1: How We Got Here

We believe that Australia’s post-pandemic vision must go beyond the important primary objective of minimising infections and deaths. Once a high level of ongoing safety against COVID-19 has been established, and Australians are confident that level can be maintained, the nation needs to pursue wider goals. Reopening after the pandemic should be seen as an opportunity to make lasting changes to our political, economic, social and legal systems – to improve how we are governed, increase our prosperity, improve our social equality and consolidate our liberties – in ways that operate within environmental limits. These things have all undergone significant changes over the last twelve months. After our people have endured so much, the safe emergence from restrictions offers a moment of nation-rebuilding, animated by a contemporary and intelligent patriotism.

So just what sort of country should we be aiming to create?
What is our national vision?

The taskforce wants Australia to enhance its record as an open, tolerant, liberal-democratic nation with good governance, strong protections for individual freedoms, effective programs to promote social harmony and equality, and a robust market economy that benefits all our citizens.

These things have been tested by the year-long period of lockdowns and closed borders, which by their very nature have temporarily curtailed individual freedoms, disrupted settled ways of doing things, advantaged those with greater resources, and unleashed fear and anger. Because Australia succeeded so well in achieving effective local elimination of COVID-19, especially when compared to the failures of similar countries like the USA and the nations of Europe, we have had the unique experience of rising public trust in government and business. Elsewhere, closed national mindsets and borders seem likely to entrench falling living standards, inequality and social divisions well into the future. In the United Kingdom, for example, experts are calling this the start of the ‘COVID decade’ which will require a major reinvention of public policy and governance to head off negative long-term economic, social and political results. We believe the widespread goodwill and common purpose displayed here in Australia can become the starting point for creating a better and more prosperous society in the decade ahead.

Conversely, the negative features that were displayed, such as food and medicine hoarding, the ‘Fortress Australia’ mentality and the sporadic and ugly outbreaks of racism cannot be allowed to gain acceptance. Australia must at all costs avoid the creation of a closed national mindset. As the Brexit victory in the United Kingdom has demonstrated, when the focus of a nation is fixed exclusively on its borders for an extended time, it is easy to lose sight of the enormous consequences that inevitably follow closing down. And while the temptation is strong for our leaders to close internal and external borders indefinitely – as proved by crushing victories to incumbent state governments during the pandemic – our long-term interests suggest such temptation must be resisted.

As we draw a roadmap back to an open society, we need to consider how we got to our current point. The following account with its five phases of response is drawn from the extensive research of others, including the Grattan Institute.

The first case was reported in Australia on 25 January. The first phase involved the Commonwealth screening arrivals from Wuhan and evacuating vulnerable Australians from Wuhan to quarantine facilities in Australia, including Christmas Island. Australians returning from mainland China were required to self-isolate for 14 days.

The second phase lasted until early March. With the exception of passengers disembarking from the Ruby Princess cruise ship, relatively few cases were recorded in Australia. Following WHO advice, the Prime Minister, Health Minister and Chief Health Officer rejected calls for travel bans and tighter quarantine for overseas passengers, and assured Australians they could go about their daily business.

The third phase began with the first recorded community transmissions of the virus on 2 March 2020. Bans on entries to Australia began with selected countries with high recorded rates of infection: Iran, South Korea and Italy. From 15 March, when 300 cases were confirmed in Australia, self-isolation was made mandatory for all foreign arrivals. Contact tracing systems were implemented at the state and territory level and testing regimes were expanded, giving Australia one of the highest testing rates in the world at that time. Commonwealth packages to share the cost of treating the virus with the states were introduced in the first half of March. On 12 March the first economic stimulus measure of $17.6 billion was announced.

The fourth phase saw Australia transition to a full shutdown, with spatial distancing, travel bans, testing, contact tracing and quarantine being introduced. The emphasis was on preventing the health system and especially hospital intensive care units (ICUs) from being overwhelmed by COVID–19 patients. Major events like the Australian Grand Prix in Melbourne were cancelled. A new National Cabinet made up of the Prime Minister, Premiers and Chief Ministers, was set up on 13 March to coordinate Australia’s response. Restrictions were escalated as overseas experience made the dangers of lack of rigour clear. All non-essential businesses and activities were shut down and Australians were urged to stay at home. Acceptance levels of these restrictions were high, but after it was revealed that some returnees from overseas were not adhering to self-isolation, mandatory quarantine measures in designated facilities were introduced for all arrivals. Some states closed their borders, starting with Tasmania from 20 March. ICU capacity was increased from 2400 to 7000 beds. Stocks of personal protective equipment (PPE) and ventilators were increased. Late March saw 400 cases a day recorded.

To address the resulting economic downturn, at the end of March the Commonwealth introduced two economic stimulus measures totalling $176 billion of spending, followed by additional measures by the states and territories. The major features of the stimulus measures were JobKeeper (a wage replacement intended to keep people in employment and allow businesses to meet wage and salary costs to help stay in business, which was paid to 1.1 million people) and a doubling of NewStart to create the new JobSeeker payment.

At Easter 2020, restrictions on visits to aged care facilities were put in place and in schools were closed at this time across most states and territories. Significant penalties were introduced for people breaking social distancing rules. The testing regime was widened to include health workers, people in high-risk areas, people in known clusters and people with possible symptoms of COVID–19. In April the average daily case rate nationally was around 70 – very low compared to other nations where the virus had broken free of control. By the end of April there had been 6753 cases and 91 deaths.

By the start of May, the daily case count had reduced to around 20 and in some states successive daily counts of zero cases were recorded. Only around 200 COVID–19 cases were in hospital, including around 30 in ICUs. Thus began the fifth phase with concern shifting to the economic effect of the lockdown measures, with a prediction of a 10% unemployment rate.

By mid-May, lockdown restrictions began to be eased across the nation. On 20 June, however, restrictions were reintroduced in Victoria as a new wave of infections was
discovered, later found to be linked to flaws in the hotel quarantine system. These restrictions were progressively tightened and extended. By August a state of disaster was declared in Victoria, including mandatory face coverings in public and controversially, a nightly curfew. Schools and most businesses closed again. Restrictions in Victoria were eased on 27 October after zero cases were announced on 26 October.\(^5\)

Australia recorded zero locally acquired cases on 1 November.

In November and December small outbreaks in Adelaide, Sydney’s Northern Beaches and Melbourne brought new restrictions, although the NSW Government resisted strong calls for an all-Sydney lockdown. By the end of the year Australia had recorded 28,408 cases and 909 deaths – with 20,368 cases (72%) and 820 deaths (90%) from Victoria.\(^7\)

During February 2021 the vaccination program began and by mid-April 2021 more than one million vaccine doses had been administered.\(^8\) This was far lower than the original government estimate that by this time four million people would have received their first dose of the vaccines.

In late March a small outbreak occurred in Brisbane, having originated in infected hospital workers. Similar outbreaks have occurred since in WA and NSW.

By 31 March 2021, there had been a total of 29,304 cases of COVID-19 in Australia, 910 deaths and a total of 155 active cases, mainly in quarantine.\(^9\) In international comparison, very few cases of community transmission were recorded across Australia throughout the entire first year of the pandemic.
Lessons From Australia’s COVID Experience
2. Lessons From Australia’s COVID Experience

We believe there are several notable lessons from Australia’s experience.

Problem solving can be a national strength

Australia’s response to the disease showed that the country possesses a capacity for effective action in a crisis. While experts insist that Australia was able to keep the highly infectious COVID-19 under control largely because of our geographical remoteness and border closures, they also agree that this does not account wholly for our success. A more complacent approach in the early days of the pandemic, when community transmission began, could have seen things spiral out of control. The United States, for example, would most likely have controlled the community spread of the disease better if it had adopted more sensible public health policies instead of choosing others that made the spread worse. Political polarisation in the States also made it easier for the disease to spread in that country.

By contrast, Australia prospered because in the midst of a major crisis we discovered a national genius for problem solving in the form of a willingness to: (1) listen to expert advice; (2) work collaboratively, putting aside excessive partisanship; (3) get our public service agencies working together effectively; and (4) obey reasonable rules for the common good. The reinvention of federalism at the start of the COVID outbreak, through the replacement of the unwieldy Council of Australian Governments (COAG) with the more streamlined and focused National Cabinet, was an obvious example of our nation’s deftness and adaptability. Despite the usual political and parochial tensions one would naturally expect from such a body, its record of cooperation (even cordiality) and achievement are largely beyond dispute.

Our leaders have been able to respond with courage, flexibility and bipartisanship

When the pandemic arrived, the Australian Government took significant measures to avoid a catastrophic economic downturn that would have blighted the lives of potentially millions of people. An economic stimulus package was introduced, resembling that introduced during the Global Financial Crisis of 2008, but on a far larger scale. According to the Parliamentary Budget Office (PBO), the combined cost of federal, state and territory government support packages will be $327 billion between 2019-20 and 2023-24. The majority is from the federal government, which has committed a total of $267 billion compared to $90 billion that was spent in response to the Global Financial Crisis.

The spending included major initiatives such as JobKeeper, an increased JobSeeker payment for the unemployed, and industry-specific packages such as the $1.2 billion tourism rescue package. The PBO estimates that the combined falls in revenue and increases in spending will raise cumulative net national debt from $393 billion or 20% of GDP in 2018-19 to $1.3 trillion or 59% of GDP in 2023-24. These significant economic measures were neither blocked nor heavily criticised by the non-government parties.
Our institutions can respond effectively

In the early months of the pandemic, Australia’s public health bodies and sources of expertise proved up to the task of protecting our people. There were of course exceptions, when mistakes were made, including the disembarkation of 2647 passengers from the Ruby Princess cruise ship in Sydney in March 2020. But given the size and seriousness of the situation, our institutions generally performed well.

One prominent example was the way Australia’s universities came together to lend their expertise to tackle the deadly outbreak. Experts from various universities have supported the government’s health response, including through secondments to government departments and through advisory bodies such as the National COVID-19 Health Response Advisory Committee. In April 2020 the Group of Eight Universities convened a group of more than 100 leading scholars from a range of fields to develop thinking about how Australia can recover from COVID-19. Australia’s academics have also been involved in shaping international understanding of the pandemic, including through the initial sequencing of the SARS-CoV-2 genome and the WHO investigation into the origins of the virus.

Our courts were another example of commendable adaptability. As the Law Council of Australia informed the taskforce, Australia’s courts and tribunals, from the highest to the lowest, had to adapt almost overnight to a radically different way of operating due to COVID-19 containment measures, embracing virtual hearings and virtual alternative dispute resolution processes – something made easier by the existence of e-filing systems prior to the outbreak of the pandemic. To achieve this, the justice system undertook an ‘up-skilling’ of judicial officers and members of the legal profession and introduced temporary measures relating to the electronic signing of legal documents. As a result, while some delays and backlogs emerged – some caused by increases in cases related to the pandemic (domestic violence, for example) – our judicial system, which has for centuries been based predominantly on face-to-face proceedings, kept functioning reasonably well. Further reviews will be needed to address the problems identified in this unplanned case study of the judicial system under pandemic conditions.

A more obvious case still of adaptability was Australia’s education system. With very little notice, the majority of schools and universities switched effectively from classroom teaching to online delivery. This suited some students more than others, and some institutions performed better than others, but they were able to carry on nonetheless and the result was a tribute to educators, administrators, students and parents alike.

Finally, Australia’s civil society has performed admirably during the pandemic, filling critical gaps relating to the support of vulnerable people and communities. Organisations in the human services and charity sectors, alongside new mutual aid groups and local governments, have provided invaluable support such as food, information, technological access, and mental health and emotional support to Australians in our cities and regions. Their efforts have helped keep many people and communities safe and secure during this pandemic.

Aboriginal and Torres Strait Islander people responded to the disease successfully

One of the success stories of Australia’s response to COVID-19 has been keeping Aboriginal and Torres Strait Islander people safe. Understanding that Aboriginal and Torres Strait Islander people were at added risk from the disease due to lower than average health levels and socio-economic status, strong measures were put in place to shield communities from infection. As reported on 13 November 2020, of the 27,698 cases of the disease in Australia, only 149 were reported among Indigenous people, with only 13 hospitalisations. No cases were reported in remote communities and no Indigenous deaths were reported.
Community leaders, including Pat Turner, chief executive of National Aboriginal Community Controlled Health Organisation (NACCHO), acted decisively to close remote communities to outside visitors, distribute PPE and share information on social distancing through those communities. Prominent epidemiologist Professor Fiona Stanley described this as the ‘best result for any Indigenous population in the world’, and that it ‘shows what happens when Aboriginal leadership is listened to.’ The lessons from this result are of obvious relevance to the wider cause of Aboriginal and Torres Strait Islander empowerment in Australia.

There have been ugly outbreaks of xenophobia and racism

Given the pandemic’s origin in Wuhan, China, there has been a surge in anti-Chinese and anti-Asian racism in many countries. As with the pandemic itself, Australia has not been immune. The Australian Human Rights Commission and state human rights and anti-discrimination bodies recorded a spike in racial discrimination complaints during 2020. Community advocates have recorded hundreds of instances of Asian Australians experiencing verbal abuse, threats and even physical attacks in the months following the pandemic’s outbreak. According to one study of attitudes within the Chinese–Australian community conducted by the Lowy Institute (2021), 37% of Chinese Australians say they have been racially discriminated against in the past 12 months, with 18% of Chinese Australians saying they have been physically threatened or attacked in that time because of their Chinese heritage. Such experiences have coincided with an alarming increase in extremist activity, though coronavirus racism has by no means been confined to fringe elements. The virus threat has, if anything, provided cover for the expression of racism among a wider constituency.

Executive power has increased at the expense of parliaments

A potentially negative consequence of the pandemic was an increase in the power of the executive over parliaments. The Law Council of Australia has noted a worrisome rise in the use of delegated legislation introduced as part of the nation’s COVID-19 response, with 192 instances of COVID-19-related delegated legislation between 1 January 2020 and 20 June 2020. Of these, 42 instruments were exempt from disallowance, with over half of those made under the powers granted in the Biosecurity Act, often including substantive matters of public policy. According to the Law Council, ‘the use of the Biosecurity Act to authorise the making of exempted legislation ought to be carefully considered, particularly due to the significance of the powers available and the frequency of their use in the current crisis.’ The pandemic experience has highlighted a clear need for the Parliament to develop mechanisms and guidance in relation to the enactment of legislation exempt from disallowance during emergency situations.

Our quarantine measures have in places been poor and inadequate

The reaction to the pandemic has varied significantly between states, and not all states had the same degree of strength in existing infrastructure and planning. During the pandemic, a sizeable outbreak from the hotel quarantine system in Victoria caused a major escalation in COVID-19 cases and deaths. Of Australia’s total of 910 deaths at 15 April 2021, 820 were from Victoria, with the overwhelming majority related to this outbreak. An independent inquiry into the hotel quarantine system uncovered systemic weaknesses in Victoria’s health
system, quarantine arrangements and contact tracing, as well as a lack of accountability that extended throughout relevant departments, including the Department of Health and Human Services. This provides an important moment for review and reform of the nation’s health systems. As public health experts have warned, COVID-19 will not be the last pandemic we will have to confront. The risk of another pandemic, within the foreseeable future, is high. The destruction of animal habitats, the effects of climate change, and the intensification of factory farming of animals have all heightened the prospects of animal viruses spreading into human communities. We must have health systems that are prepared for the next pandemic.

Some major national economic weaknesses have been exposed

One of the most commented on early features of the pandemic was that it exposed a worrying lack of sovereign capacity in the Australian economy, most directly in the manufacture of medical equipment, PPE and drugs. Manufacturing as a percentage of GDP has fallen from almost 30% in the 1950s and 60s to just below 6% today – a figure that some believe exposes us to danger in the advent of crises like the COVID-19 pandemic and international conflict, particularly given our reliance on just-in-time import processes. Indeed, although Australia is now producing the Astra Zeneca adenovirus vaccine using domestic facilities, it currently does not have the capacity to manufacture mRNA vaccines (such as the Pfizer and Moderna COVID-19 vaccines), leaving us in competition with other countries to import doses. Yet, mRNA vaccines are highly adaptable and likely to be useful to treat emerging COVID-19 variants, other infectious diseases and cancers in the future. This is an issue that is likely to lead to continuing conversations in the economic policy community.
Young people

Young people have been disproportionately affected by the COVID–19 pandemic and will be experiencing the impacts of current policy decisions around the pandemic well into their futures. The taskforce hosted a special roundtable on youth questions, with the youth leadership group Ripple. Young participants identified their concerns around a range of issues including mental health, impact on education and employment. Bernice’s [not her real name] story highlights some of the impacts of the pandemic on young people:

Bernice recalled after the announcements of the stimulus having to wait eight weeks for Centrelink and this resulted in not being able to pay for a car loan, food, rent and, struggling to find a job – even with a qualification. She found herself heavily relying on the COVID subsidy until October when it was cut, which resulted in her living in her car – all while experiencing a disability. Now she is in social housing, but with further cuts to social security, she has lost $150 per week and has to choose between paying for power or buying food. She reports a serious impact on her mental health. During this time she also experienced the passing of a loved one, who was her connection to culture.

Bernice is one of the stories behind the ‘one out of three young people who at the end of 2020 were unemployed’ statistic. Her story also demonstrates the compounding impacts of being a young person with a disability and someone who was rendered homeless due to the inability to afford housing. Undoubtedly the impacts of Bernice’s mental health were immense; however, mental health services are not always accessible or affordable for all. While there were ten additional Mental Health Care Plan sessions added to Medicare during the pandemic, the payment of the gap can still be unaffordable for many young people, and depending where one lives, not always accessible.

Important inequalities have been revealed

Predictably, perhaps, not all Australians suffered equally as a result of the disease and the national response to it. There were winners and losers and not everyone’s experience was the same.

Relief was only temporary for people experiencing homelessness and unemployment

The Australian Government’s economic stimulus limited the size of the recession and the hardship of unemployment, which reached 7.5% at the peak of the crisis – well below what it may otherwise have been. One notable result was a significant rise in income for those previously unemployed, who had not received a real increase in income for two decades or more. This lifted many long-term unemployed Australians out of poverty. Public health measures designed to prevent the spread of the disease also provided hotel-style housing for the unemployed, demonstrating that solutions to homelessness – a policy area previously considered intractable – are possible.

Poorer regions lost more jobs

Job losses, however, did occur. According to employment analysis by SGS Economics and Planning, lower socio-economic regions were hit harder by job losses than wealthier neighbourhoods. In Melbourne, for example, the less affluent municipalities of Wyndham, Dandenong and Casey suffered job losses of 6790, 2080 and 5389 respectively, while the more affluent Yarra and Melbourne saw increases of 786 and 1402. In Sydney, less affluent Fairfield and Campbelltown lost 3142 and 2125 jobs respectively, but 2010 jobs were created in the more affluent Northern Beaches. The withdrawal of JobKeeper payments on 28 March 2021 is expected to increase unemployment in these areas.
Women suffered more than men

It seems likely that the measures taken in response to the pandemic have affected women more than men. According to Professor Rae Cooper and Dr Sarah Mosseri at the University of Sydney Business School:

Many of the gendered inequalities that existed in the pre-COVID-19 world of work – like the overrepresentation of women in lower-paid, insecure jobs and the uneven distribution of unpaid domestic labour – have been exacerbated by the global pandemic. This has created a triple whammy for Australian women.

Their analysis found that women were badly affected in three major ways: (1) by comprising the overwhelming majority of frontline workers – particularly nurses, teachers, early childhood educators and aged care workers; (2) through unemployment, lost pay and lost superannuation – women made up 55% of unemployed people at the height of the recession in April 2020; and (3) by being called upon to do even more unpaid work at home – cleaning, cooking and helping educate homebound children.24

The elderly suffered cruel tragedy

Elderly Australians comprised the overwhelming majority of deaths from COVID-19. As of 31 March 2021, the median age of all cases of the disease was 37 years, but the median age of deaths was 86 years. Tragically, of the 909 Australians who have died of COVID-19, 685 of them lived in aged care facilities.25 The disease by its nature was more difficult for older people to overcome, but the death toll in aged care facilities has exposed profound weaknesses in Australia’s aged care system. The taskforce strongly urges the adoption of all necessary improvements to Australia’s aged care policies and funding.26

The vulnerabilities of culturally diverse communities have been exposed

The pandemic has underscored how many culturally and linguistically diverse communities have challenges in accessing information regarding public health. There was considerable public commentary about information regarding social distancing and COVID-19 testing not reaching some in the Australian community in a satisfactory manner, given a lack of targeted, non-English-language communications from government. Moreover, many children of migrant parents experienced significant disadvantage during extended lockdown periods – especially in Melbourne – as effective home schooling relied upon English-proficient, digitally fluent parental guidance.

Certain industries and workers were harder hit than others

Some industries were hit hardest and consequently suffered from higher rates of unemployment than others. According to the Australian Bureau of Statistics (ABS), job losses between March and October 2020 were the greatest in percentage terms in the service sector industries of accommodation and food services (17.4%), and arts and recreation services (12.9%).27 Populations from culturally and linguistically diverse backgrounds have also been disproportionately hit by unemployment. In particular, many people on temporary visas (there were some 2.17 million temporary visa holders in Australia as of 31 March 2020) were left facing destitution, as they were ineligible for welfare and government-funded support during the pandemic.28

Some businesses receiving government financial support increased profits and paid share dividends and bonuses

While many Australians lost their livelihoods as a result of the national response to COVID-19, many Australian businesses that were in receipt of Australian Government JobKeeper and industry support measures reported higher profits and paid dividends to shareholders and
bonuses to executives. While many companies have nobly offered to pay back to the Treasury the support they received, many of our biggest companies have not, creating a strong public sense that the burden of tackling the pandemic was not equitably shared.\textsuperscript{29}

\textbf{The quarantine arrangements and flight cancellations have been easier for the famous, well-to-do and sportspeople}

One of the most inequitable consequences of Australia’s response to the pandemic was the way border closures disadvantaged those with the least money and power. It was reported that while some 40,000 Australians citizens and permanent residents were able to return, another 40,000 were unable to get a flight home due to the rationing of places for mandatory quarantining and the tendency for airlines to offer limited seats to those who could afford first class and business class fares. Many found themselves stranded overseas – running out of money, without a permanent place to live, causing anxiety and other mental health problems – a situation some labelled as neglect by the Australian Government, amounting to human rights abuse. Meanwhile, more than 6000 humanitarian visa holders (people who have already been granted permanent visas and are living in desperate situations) have been unable to travel to Australia.\textsuperscript{30} By contrast, many wealthy celebrities were able to exploit exemptions, especially for the movie and television industries, and evade hotel quarantine by paying for private quarantining arrangements in luxury residences. In January 2021 this sense of neglect was increased by the decision of the Victorian Government to organise hotel quarantine for 1700 overseas travellers associated with the Australian Tennis Open – something that happened on a far smaller scale for other sporting events such as the Indian cricket team’s tour of Australia.\textsuperscript{31}
Residents born overseas

As of June 2020, 29.8% of Australia’s population were born overseas. Many Australians have deep personal ties to various parts of the world and are feeling the profound impacts of being separated. Pre-coronavirus, up to a million Australians were residing overseas, working, studying and operating businesses. Many of them are now stranded. Hana’s [not her real name] story demonstrates the agitation of being surrounded by multiple separation stories.

Hana’s best friend is an international student who was only just permitted to leave the country to live with her family again in Pakistan after four months of separation. Now Hana does not know when she will be able to see her again. Hana’s cousin is separated from her husband who she had recently married in Pakistan, unable to obtain a visa for him to join her in Australia. Further, Hana’s education experience in 2020 was quite isolating due to feeling the disconnect caused by the cessation of in-person classes. As someone who has always had good mental health, the pandemic saw Hana experience prolonged periods of stress for the first time in her life, and she reports feeling overwhelmed due to the multiple different angles from which anxiety about the unknowns of the future are stemming.

Hana’s story isn’t the only one. Many thousands of Australians are still stranded abroad; most of them holding cancelled tickets. Amnesty International collated The stories of stranded Aussies, highlighting the impacts of many of those Australians stranded, such as the cost of flying home for one particular family (a couple and five children), costed at $70,000. There are those with health concerns who are also currently stranded; one story speaks about a mother of a child with an autism spectrum disorder and anxiety and their inability to access the appropriate care required while overseas that they would usually access in Australia.
A Roadmap to Reopening
3. A Roadmap to Reopening

The goal: an Australia re-engaged with the world

Each of the lessons from the first year of the pandemic informs both how Australia reopens to the world and the ways in which it attempts to change domestically in the months and years ahead.

We do not support setting a fixed date for the removal of all external and internal pandemic-related restrictions. The possibility that the disease may struggle free from our control and return in an unpredictable manner cannot be ruled out. There are also no certainties about the long-term success of the vaccination program, both domestically and across the world, at present, but we need to be guided by the best available evidence and the most likely future scenarios. Despite the uncertainties, that is, responsible reopening is a crucial and urgent social, economic and moral requirement.

There is no prosperous or fair future for Australia set apart from the rest of the world. Therefore, rather than discuss dates, this chapter sets out the sorts of criteria that our national, and state and territory governments might consider in making such decisions.

Based on its public consultation and deliberations, the taskforce believes the following criteria for reopening to the world represent the safest and most practical way of doing so without a major risk of new disease outbreaks forcing us into repeated extensive lockdowns.

Our overall recommendation is that Australia aims to securely and fully reopen once it is ‘effectively vaccinated’. Based on scientific understandings of the disease and lessons from the pandemic so far, waiting until there is ‘zero COVID’ before opening our country to the world is an impossibility that will trap us in our current state of isolation. Delaying reopening beyond the necessary ‘safety period’ would also dramatically hinder our prosperity as a nation. As a trading nation that (1) is highly dependent on manufacturing imports, (2) relies heavily on service exports to people visiting our country such as tourism and international education, and (3) has a strong immigration program and a highly mobile population, the price of staying closed indefinitely is simply too great. This is the case when measured in hard dollar terms, but also when measured against less tangible factors such as fueling a negative and inward-focused national psyche that threatens our global standing, as well as national unity and cohesion, with the loss of talented new migrants that are vital for wealth generation and global competitiveness.

To emerge from the pandemic and re-engage with the world, Australia needs to move from fear to hope, from negativity to optimism. This will only be possible when a stable and safe approach to dealing with COVID-19 is in place. A more sensible and realistic option is to reopen to the world in a controlled, risk-weighted and staged manner, after our vaccination processes are complete and a robust regime of testing, quarantining and monitoring is in place as a second line of protection from further outbreaks. In such a situation, serious outbreaks will be unlikely and the safety of the overwhelming majority can be assured.

In some respects, Australia has already proven it can do this. Since the emergence of COVID-19, some 250,000 people have arrived on our shores – including more than 124,000 non-citizens between April 2020 and February 2021. Australia has done this with a high degree of safety, keeping COVID-19 numbers to a minimum. This should provide us with confidence to consider facilitating wider international movement and travel.

The pertinent question about reopening isn’t whether to do it, but how to do it. We believe our national leaders need to urgently articulate the preferred scenarios for reopening Australia to the world.
We must accept that global elimination of the disease is highly unlikely

We have to assume that SARS-CoV-2, the cause of COVID-19, has now become an endemic virus that is extremely unlikely to be eliminated globally. The global consensus is that the virus will continue to circulate for the foreseeable future, probably in a very similar fashion to common cold viruses or influenza. Only one human virus, smallpox, has ever been eliminated. This means that we, in common with all nations around the world, need to find a way to live with COVID-19 into the future.

Being an island nation meant that when COVID-19 emerged Australia could isolate itself effectively, by dramatically reducing population inflows, allowing state- and territory-based quarantine and employing strict social distancing and hygiene measures, which effectively eliminated the virus from our shores. At the time of writing this remains the status quo. Despite multiple virus introductions no sustained local transmission has been established. However, this temporary elimination is unlikely to survive the future reopening of our borders. If we are able to effectively vaccinate the majority of the population and limit virus importation events, linked to effective public health responses, we are likely to minimise the rates of serious disease, even if we are unable to totally prevent infection.

A roadmap to reopening Australia

Understanding that the virus is unlikely to be eliminated from the world, a strategy for safe reintegration is needed. The taskforce offers the following roadmap for Australia to successfully reopen to the world.

1. A comprehensive and successful vaccination program

The rapid development of highly effective vaccines against COVID-19 is a scientific success story of almost unprecedented proportions and needs to be acknowledged as such. Despite the extensive public attention given to rare side effects of some vaccines, this success needs to be acknowledged as providing the world with its only viable ‘escape option’, apart from ongoing disease spread and excessive COVID-related deaths until the pandemic ultimately ‘burns itself out’. The existence of reliable vaccines for COVID-19 provides the means for protecting vulnerable individuals and communities across the globe from large-scale outbreaks, if adequate uptake can be achieved.

The current vaccines have proven efficacy for protection at the individual level. Real world data increasingly also suggests that population-level protection will be achieved by limiting transmission (even if this is not complete), which is important to reduce the risk for older and more vulnerable people, especially those that are unvaccinated. Adequate population-level protection is likely if more than 80% of the population is vaccinated with a highly effective vaccine; rendering around two thirds (67%) of the population unable to transmit the infection. Even if a ‘herd immunity’ threshold cannot be reached, any level of protection will reduce population vulnerability to develop severe disease and sustain infection. Ongoing epidemiological studies of vaccinated populations will continue to inform future strategies, but current indications are that large scale vaccination is highly effective at the individual and population level.

It would have been ideal for high vaccination rates to be achieved in Australia before the onset of winter – when COVID-19 outbreaks are more likely to occur – with priority given to more vulnerable populations and essential workers in health care, border control and quarantine facilities. It is disappointing, given the difficulties experienced with vaccine roll-out efforts to date, that this is no longer possible. However, rapid vaccine roll-out should remain an urgent priority in the immediate future.
A major effort will be required to build goodwill and get people on board with the vaccination program more generally. Around 10% of Australians say they will refuse vaccine delivery and signs are that hesitancy levels are increasing. The taskforce believes that in a democracy such as ours with a strong emphasis on individual liberty, it is not appropriate or even possible to mandate vaccination for every person, although it may be permissible for people whose activity brings them into contact with highly vulnerable groups, in aged care facilities, hospitals and so forth.

Efforts to address and reduce vaccine hesitancy is absolutely vital to ensure maximal benefit and protection from vaccination. The need for clear and consistent government communications, as well as an honest assessment of relative risks and harms is paramount. Accurate data collection is important to provide the best evidence for informed decision making.

Australia has one of the best vaccine related adverse event surveillance systems and this should be strengthened. It is important that individuals can make personally informed decisions and that we establish a scheme for severe vaccine related adverse event compensation, as is in place in many countries around the world. Australia also has one of the highest uptakes of routine childhood vaccinations, which provides a very strong basis for COVID-19 vaccination to build upon. Access to the vaccine must be practical and ‘hassle free’ – obtaining the vaccine easily is a crucial factor in encouraging those who are wavering over taking it. However, successful roll-out will require consistency, resolve and leadership from our governments. A well-organised campaign on this should be undertaken in an open, caring and respectful way, with communication carried out at all levels from the national to the local, utilising the resources of all Australian communities.

While vaccines are unlikely to provide lifelong immunity and new virus variants will continue to emerge, the taskforce’s expert advisors are confident that it is the best way to introduce people’s immune system to a new pathogen without causing high rates of severe disease. Even if immunity wanes over time, some level of protection will be retained and this may be boosted by future revaccination of natural infection. There is scientific consensus that the mRNA COVID-19 vaccines developed in response to the pandemic are remarkably effective and that this novel technology will enable rapid vaccine adjustment if required for future SARS CoV-2 variants or other emerging infections.

If the vaccination program meets all of these objectives, we believe it will provide significant individual and population-level protection, even if the virus is brought into the country by returning travellers and establish local circulation. In such a scenario, some unvaccinated people may continue to get sick, as with influenza, but the number of people with severe disease should be low, greatly reducing the number of deaths and the overall burden on the health system. One practical way of framing the problem is that with high levels of vaccination and robust public health measures in place, we will need to recognise a small but acceptable risk for living sociably in a globalised world.

In other words, after a successful vaccination program, Australians will likely have to accept some limited circulation of SARS–CoV-2 if they want to reopen their country to the outside world. But once sufficient population-level immunity is achieved through vaccination, large disease outbreaks and excessive numbers of people with severe disease is highly unlikely and it should be possible to open our borders fully and return closely to pre-COVID normality.

2. Sector and place-specific pilot programs to reopen prior to the conclusion of the vaccination program, supporting industries critical to Australia’s economy, including tourism and creative industries, horticultural farming and international education.

Reopening need not happen all at once, and commencing it cannot wait for the completion of the vaccination program. Instead, we see reopening as happening gradually, starting with the lifting of travel restrictions to and from countries which have had the most success in
aggressively suppressing or eliminating the disease. There have already been numerous instances where non-Australians have been exempted from border closures by Australian Border Force on the advice of the National Skills Commission – as in the case of seasonal agricultural workers in the Northern Territory and Tasmania, mine workers in Far North Queensland, tennis players and associated professionals for the Australian Open, and a small number of business and innovation visa holders.  

We have also, of course, witnessed the opening of a travel bubble with New Zealand. Similar measures should soon be possible with other nations, according to a strict set of mutually agreeable criteria. These could involve low levels of community transmission for a set period of time, the completion of a successful vaccination program, and the development of an internationally recognised vaccination visa system. At present, countries that have combatted the disease successfully and may be candidates for quarantine may include: New Zealand, Taiwan, South Korea, Vietnam and possibly Singapore.

Beyond fully open travel bubbles with individual countries, we also believe that urgent consideration could be given to creating sector-specific bubbles to address the needs of industries hard-pressed by border closures.

These sectors include horticulture, especially fruit picking, international education and tourism and creative industries. According to the Australian Bureau of Agricultural and Resource Economics and Sciences (ABARES): ‘a large fall in the supply of overseas workers is expected to reduce the supply of horticultural produce in 2020–21 and 2021–22. In this year alone (2020–21) production of fruit is expected to be down by 17% and vegetables by 2% as a result of labour shortages, despite the favourable seasonal conditions. The case for a travel bubble for horticulture is that, despite technological advances having happened in most other industries and in the packing and supply chains of horticulture, there is little alternative to manual labour in vegetable and fruit picking.’ Such a bubble would also provide a means for Australia economically to support neighbouring Pacific nations that rely on seasonal work here for significant proportions of their income.

The case is similar in terms of international education. The economic and social cost of long-term restrictions of international students entering Australia will likely be significant. As one of Australia’s largest exports, international education contributes major economic benefits to the country which are currently being put in peril. Research by Victoria University’s Mitchell Institute projects that, should current restrictions on the entry of international students continue, Australia’s university sector will lose between $10 billion and $19 billion between 2020 and 2023, depending on how quickly the nation’s borders are reopened to students. They project also that a further $20 billion to $38 billion in wider benefits to the national economy would also be lost. The overall projection could result in a hole in the economy of between $30 billion and $60 billion. The cost to the New South Wales economy of the current restrictions of international students at the University of Sydney alone has been estimated by Allen ACIL at $2.6 billion and 12,100 jobs over the next decade.

If there is an orchestrated effort to make it work, it may be possible for international students to return to Australia, subject to a ranking of the countries from which students return – graded, perhaps, by a traffic light system such as currently being developed in other countries – and careful quarantine overseen by universities themselves. Unlike many other visitors, international students remain in Australia for the whole academic year, so a two-week quarantine is a reasonable requirement to facilitate their long-term stay. Existing purpose-built student accommodation on or near university campuses can also be used for quarantine and universities are likely to be willing to become responsible partners in this endeavour.

Tourism, of course, is similarly impacted but may well be harder to restart in the shorter term, except within specified travel bubbles. Nonetheless, the taskforce notes with interest proposals to reopen specific tourist venues – such as holiday beach resort hotels – to visitors
from countries rated as low risk, with quarantine facilities and infection control overseen by the resorts themselves. Although complex, pilot projects of this kind should be supported by both the federal and state governments and the sector seek some redress from the current economic turmoil that the sector faces.

3. Across these programs, only those with documented vaccination and/or SARS CoV-2 immunity should be permitted to enter Australia or travel overseas

Even countries which could be ranked as low risk could quickly change status. As we slowly reopen our borders, therefore, it will remain prudent to restrict entry into Australia to those who can demonstrate that they have been vaccinated or who have pre-existing immunity. These restrictions should also be extended to those who wish to leave and return to Australia. We urge the federal government to work with other nations around the world and with private companies in developing the requisite technologies and systems to validate the vaccination status of travellers.

We also need good data on our own domestic vaccination program (as we are gathering) to enable us to know who has been vaccinated, document how the vaccines are working in different individuals and risk groups, understand the durability of protection and guide future revaccination efforts.

4. Australia should develop improved border protection with rapid testing

Even partial opening of Australia’s borders should be supplemented by improved border controls and effective testing of incoming passengers. We support the continuation of the Australian government’s requirement that incoming passengers be in possession of a recent negative test result and we recommend the further development of a rapid testing system for all arrivals in Australia, drawing upon successful experiences overseas. Enhanced rapid testing technology is seen as a key requirement for effective reopening and ongoing surveillance that is essential to monitor risk; we urge the federal government to invest in it fully as a matter of urgency.
Despite the profound pessimism of some, reopening is possible. In January, Melbourne hosted the first post-pandemic international sporting event when more than 1200 tennis players and their entourages from more than 100 nations took part in the Australian Open. In the midst of deep public concern, tournament organisers partnered with Aspen Medical and the Victorian Government to develop a rigorous bio-security plan, involving graduated pre-entry testing, tightly enforced training ‘bubbles’ and a comprehensive safety plan for the tournament. When positive results were recorded, athletes were isolated and bubbles closed. The safety plan covered everything from accommodation and catering, to tournament transport and crowd interaction. It was a nine-month project, anchored in cross-disciplinary expert advice, tight coordination with venues, extensive training of key workers and the iterative development of policies and procedures. By the time 50,000 Melburnians celebrated the final match, there had not been a single community transmission from this iconic event.

Similarly, the first wave of seasonal agricultural workers from the Pacific Islands is currently underway in Adelaide. With the support of farming communities, the SA Government is working with Aspen Medical to quarantine more than 500 Pacific Island workers in group huts before the harvest begins. The industry plan was built around cohorts from low-risk nations like Tonga and Vanuatu, and is now being adapted for nations like Fiji where COVID is present. The ability to quarantine out of cities and strong community support for the inflow of workers has been integral to its successful implementation.

Canberra’s globally recognised symphony orchestra will also be back on stage this winter, complete with international guest artists. The concert series is being informed by a public safety plan, again with risk management and expert advice from Aspen Medical. The plan includes a comprehensive Public Health Declaration by all performers, regular monitoring and review and 75% capacity plan. Architects of the plan say it’s the product of planning, rigour and common sense, with a heavy focus on risk management and advice from health experts.

5. A new range of quarantine measures should be piloted, relative to risk, while continuing to isolate those who come from high risk countries, refuse testing, or test positive on arrival

A necessary adjunct to all of the above is a well organised and ‘fit-for-purpose’ quarantine system. Well-managed and secure hotel quarantine will be required for those who arrive at our reopened borders and show positive test results or for returning citizens and permanent residents who are coming from countries from which access is otherwise restricted. We urge the federal and state governments to work together to enhance the current system of hotel quarantine, possibly moving towards a more bespoke quarantine system with multiple centres situated in areas with adequate access to hospital care. We recognise that this will likely involve a considerable investment by the Australian Government and state and territory governments, but in this era of uncertainty, prudence suggests it is a vital investment. When not needed for quarantine purposes, these facilities could be put to other uses, including emergency accommodation during disasters.

We also believe that the Australian Government should recognise that it is neither possible nor desirable to ask millions of arrivals to quarantine for 14 days in highly supervised facilities. The approach to quarantine overall should therefore be more flexible, especially as vaccine uptake increases and country and sector specific travel bubbles are developed. The Australian government should develop a risk matrix that assigns an appropriate quarantine plan that is specific to the individual, the sector and the country of origin, with consideration
of technology solutions for limiting movement and social interaction as appropriate.

We believe, for example, that sectors including agriculture, international education and tourism and creative industries should be encouraged to develop their own quarantine arrangements, with careful consideration of all the principles described above. We also believe that as the vaccine roll-out continues, locally and globally, the government can start to consider home quarantine arrangements for vaccinated incomers who are test negative and arrive from low risk countries, with strong police enforcement as necessary.

This is our five-point roadmap for reopening. With this robust system behind it, Australia should feel confident that it can begin to open up and reintegrate with the outside world.
The taskforce recommends that Australian governments endorse a roadmap for reopening Australia’s borders, based on the adoption of:

1. a comprehensive and successful vaccination program;

2. sector and place-specific pilot programs to reopen prior to the conclusion of the vaccination program, supporting industries critical to Australia’s economy, including tourism and creative industries, horticultural farming and international education;

3. a certification scheme, across these programs, which permits only those with documented vaccination and/or SARS CoV-2 immunity to enter Australia or travel overseas;

4. improved border protection measures involving rapid testing; and

5. a new range of risk-weighted pilot quarantine measures, while continuing to isolate those who come from high risk countries, refuse testing, or test positive on arrival.
Open Society, Common Purpose
After presenting a roadmap to reopening, the taskforce would now like to outline some important lessons from the experience of the pandemic for our life at home. Some of the changes that have occurred in the last year possess the potential to improve our lives in certain ways and help us address other major problems. Alongside our five-point roadmap for reopening, therefore, we also present here a five-point plan for rebuilding.

1. A return of Australia to its pre-COVID embrace of immigration and multiculturalism, supported by a national anti-racism strategy.

A strong immigration program, with an emphasis on skilled migration, has been a vital ingredient of Australia’s economic prosperity and multicultural success. However, the experience of COVID-19 risks casting immigration as an unambiguous threat to Australia’s national sovereignty. It has exposed some of the limits of Australia’s dependence on temporary migration, as evident in the vulnerability of many international students, holiday makers and skilled migrants. Moreover, it has unleashed xenophobia and racism that challenges Australia’s successful multiculturalism.

There is a risk that, without a judicious reopening, we will see a shift away from an open, globalised Australia to a more closed Australia. For decades following the Second World War, the nation-building rationale of immigration was clear, even axiomatic: it was something that served the national interest, and enlarged the nation, in population as well as creating the conditions for a more prosperous and dynamic Australia. Reopening Australia will demand from political leaders a clear vision of nation-building that strengthens the connection between immigration and citizenship; one that positions immigration as an exercise in strengthening and enriching the nation’s economy, culture and society. We urge the federal government to return immigration in Australia to its pre-COVID level. More specifically, subject to the ongoing suppression of COVID-19 and the other proposals laid out above, Australia should plan to have a net overseas migration of 150,000 to 200,000 by 2022-23. This should include a restarting of our skilled migration program, as well as a resumption of Australia’s humanitarian and family reunion intakes. There is also a need for a concerted national effort to repair the social divisions caused by the pandemic, and to renew Australia’s commitment to multiculturalism and anti-racism. This should involve dedicated support for a national anti-racism strategy, as well as strengthened measures to combat extremism. It is striking, for example, that in Canada – that other exemplar of multiculturalism – the national government is funding a four-year CA$45 million anti-racism campaign aimed at countering the rise in racism linked to extremism (since supplemented by an additional CA$50 million).

If our multicultural society is to emerge from the pandemic stronger, we must speak again of a common good and of the value of equal citizenship. At a time when liberal democracies everywhere are facing these challenges, forging the conditions of civic solidarity has implications far beyond racial equality and multiculturalism.

2. The pandemic, with its obvious implications for people’s mental health, should be a catalyst for the creation of a fully integrated public community-based system of care.

Perhaps the biggest casualty of COVID-19 in Australia has been our mental health. In taking evidence, the taskforce has been informed that study after study has emphasised the high mental toll that the pandemic has taken upon us, especially several vulnerable groups: young people, women caring for children, those living with pre-existing mental health conditions, and the elderly. Some worrying findings spell out the dangers:

— at the height of the pandemic, in April 2020, the rates of people reporting symptoms of anxiety doubled compared to 2018;
— in November 2020 one-in-five Australians experienced high or very high levels of psychological distress, including one-in-three younger Australians aged 18 to 35;60

— women caring for children experienced higher rates of anxiety and depression than men (25% compared to 16%), possibly related to the additional strain of having to care for children and elderly parents as well as work from home,51 and:

— people with pre-existing mental conditions, like anxiety, depression or PTSD, suffered from higher levels of mental illness – made worse by the difficulty of accessing services.

Australians’ mental health, and the adequacy of existing services to cope with it, was of concern to experts well before the pandemic. Most concerning has been the rapid rise in anxiety and depression symptoms in 13- and 14-year olds – from 5% in 2012 to 15-20% in 2019.52 The spread of COVID-19 came as a severe blow to an already bad situation. For young people prevented from attending school and socialising, the result is likely to be concerning indeed.

The debate about the need to improve mental health services in Australia has been ongoing for several years now. The pandemic, with its obvious implications for people’s mental health, should be a catalyst for action in this policy space, leading to the creation of a fully integrated public community-based system of care linking mental health centres with the public health system, not-for-profit system and general practitioners. We urge the federal government to work with Australia’s Mental Health Think Tank, hosted at the University of Sydney, to direct a new course for the future.

3. The economic inequalities exposed by the pandemic – between genders, between professionals and non–professionals – need to be addressed through a strategy of inclusive prosperity.

As discussed above, Australia is an island-continent trading nation: our economy relies on the importation of capital, and the export of goods and services. Restoring our economic prosperity will not be possible with a closed country. Yet any economic renewal must also be attentive to how the pandemic has revealed some entrenched inequalities. It is our belief that there is an opportunity to develop new economic ideas capable of building the more inclusive prosperity that the Australian public deserves after the challenges of the pandemic.

This inclusive prosperity has many features.

Perhaps the most obvious effect of the pandemic-related lockdowns was the sheer numbers of people forced to work from home. Research by the University of Sydney Business School found that during the pandemic, working from home increased from 20% to 45% of the workforce in Victoria, from 20% to 39% in New South Wales, and with big increases also in Queensland. The research suggests that this telecommuting life suited many people, with many looking forward to continuing to work either fully at home or in some combination of home and office-based work – for example, three days at home, two days at the office.53 This provides a timely opportunity for Australians to discuss fundamental changes in the way we work, addressing that age-old adage of ‘working to live rather than living to work’.

If this trend is to continue beyond the pandemic, it will have implications for workplace rights, workplace health and safety, and remuneration. There have already been complaints that in some cases employees have been forced to work from home, without fixed hours, supplying their own technology and paying their own data and power costs, with inadequate health and safety arrangements.54 Should telecommuting remain common, it should not be a way for unscrupulous employers to exploit workers and push on–costs onto their employees, or for some employees to use working from home arrangements to do as little work as possible. This is therefore an issue that will need additional policy work to ensure it leads to an improvement in workplace productivity and the quality of our working lives.

If telecommuting becomes a larger and more permanent feature of our economy, it raises
Further questions. In particular, this telecommuting is likely to affect where we live into the future. One of the most talked about by-products of the pandemic has been population movement from the cities to the regions. The existence of quality internet broadband in regional and coastal towns enabled many people to relocate to escape potential infection while continuing to work.

There are, however, several drawbacks that will need to be addressed by public policy. The increased demand for regional and coastal properties has sharply driven up house prices and rents, making it difficult for locals with lower paying jobs in agriculture, tourism and services to afford to live close to their work. This has driven resentment among existing residents and damaged the viability of local businesses. Given the potential benefits of this decentralisation in easing population pressure on our cities (which is pushing new suburbs ever outwards at the cost of diminished farmland, commuting times, traffic congestion and lack of amenities), this should inspire a refocus on population decentralisation and regional development policies. Could the already existing movement of new immigrants out of our cities to regional centres and country towns be increased?

This further raises the issue of what we do with the resulting surplus office and retail space in our central business districts. A priority must be to get governments, employers, and landlords working together to get people back to our CBDs as quickly and safely as possible, through ideas such as free public transport and parking on slow days, and events to reactivate streets and precincts. Should things not snap back to normal quickly and empty office and retail space eventuate, this should spur a reimagining of what our CBDs may look like in the future. Could under-utilised city office space be repurposed into new types of inner-urban schools, childcare centres, medical facilities or other community assets? Might office towers be converted into apartments to help us increase urban density and limit urban sprawl? Could our CBDs be ‘greened up’ with additional green workplaces and streetscapes, and given additional sustainable transport options, including cycling, walking, e-bikes, scooters and so on?

Indeed, any post-COVID agenda cannot be separated from the urgent need for climate change action. In prompting lockdowns across major industrial nations, COVID-19 precipitated a temporary drop in global carbon dioxide emissions during 2020. Yet, by the end of 2020, many of the world’s biggest polluters were already above their 2019 emissions. While the taskforce believes it is vital that Australia reopens and reinvigorates its economy, this must be done in a manner consistent with reaching net-zero emissions by 2050, and cutting emissions by 2030. This can only be done if there is a transition towards clean energy, with major shifts in agricultural and production practices and investments in sustainable aviation fuels and carbon capture. To this end, Australia might rethink the “optimal scale” of industries (from local to state, national and global).

4. The success of the National Cabinet in overcoming the pandemic should be regarded as an example of the power of national cooperation to foster success in other areas of our national life.

The biggest innovation in governance to come from the pandemic, the National Cabinet, is considered a success, helping to foster a spirit of collaboration across Australian jurisdictions and institutions. We consider it to be an example of what cooperation can achieve in other areas of our national life. As the Law Council of Australia states, more can be done to build on this success:

…the pandemic has demonstrated the need to increase collaboration on future emergency response planning and decision-making to ensure clarity and harmony in law and policy in the future, and on other ongoing areas of urgent policy and law reform which have become even more important as a result of the pandemic. The Australian Government must continue to play a fundamental role in fostering this collaboration, while still recognising that in a federation, there are responsibilities...
which will remain with the states and territories. Continuing inter-governmental collaboration, including through the development of clear processes for doing so, should be a key theme for consideration.

The governmental response to the pandemic also highlights the need for more extensive public deliberation about how we are governed and how cooperation can be secured among different layers of government. How must we regard the status of national cabinet, given its recent advent? And how are we to secure our rights and liberties during periods of national emergency?

Federal, state and territory governments all currently have the power to declare emergencies under respective public health and emergency management legislation. In March 2020, the federal government declared a national human biosecurity emergency, which gave the Minister for Health the power to limit arrivals and ban Australians from leaving the country. In all states and territories, with the exception of New South Wales, public health emergencies have been declared. At the Commonwealth level, and in most state and territory jurisdictions, states of emergency may remain in place indefinitely and may be extended repeatedly without the need for parliamentary approval.

Although necessary, these are wide and far-reaching powers for government which must only be exercised proportionately and reasonably. To date, the exercise of such powers has been upheld as such in a number of notable cases. In a legal challenge to the curfew imposed in Melbourne, for example, the Supreme Court rejected claims that the Victorian government had violated the Victorian Charter of Human Rights and Responsibilities, holding that it was a valid exercise of the government’s power to detain persons during an emergency for a reasonably necessary period. The High Court also rejected a challenge to the West Australian government’s closure of its state borders, holding that the closure did not breach a Constitutional guarantee of free trade, commerce and intercourse among the states.

Yet, as Australia emerges from an emergency management footing and shifts into a reopening and rebuilding phase, national governance must re-emerge stronger. This must encompass robust scrutiny of executive power and an enhanced political culture of protecting rights and liberties.

5. Australia must accept its moral duty to assist our Pacific and regional neighbours to protect the health of their citizens and overcome the economic damage caused by the pandemic.

COVID-19 has hit Australia’s Pacific island neighbours hard. While some Pacific islands are currently COVID-free (including Vanuatu, Tonga, Samoa and the Solomon Islands), other countries in the region have had significant infection rates. Notably Papua New Guinea (PNG), which has recorded 10,000-plus cases since March, but with low testing the estimates of actual spread are as high as 100,000. There has, moreover, been the economic impact of the pandemic. Many countries in the region were already dependent on international aid to support their health and education systems. The halting of tourism and mining during the pandemic has created additional economic pressures.

Australia has a particular responsibility to quell the outbreak in PNG, given the close geographical, economic and community ties between our countries. There is a high rate of infection amongst healthcare workers and the health system is at or beyond capacity. In addition, 85% of PNG’s 7 million residents live in remote areas. As with any country with unrestrained transmission, PNG is also seeing the emergence of new COVID-19 variants, which threaten to undermine the effectiveness of existing vaccines.

So far Australia has provided humanitarian and health support to 13 Pacific island countries and Timor Leste. However, the region faces significant barriers to accessing vaccines. Half of the current global vaccine supply is reserved for the wealthiest 14% of the world’s population. Although the World Health Organisation and partners have set up the COVAX
program to ensure equitable access to the vaccine (with Australia committing $80 million),
this alone will not solve the problem of vaccine availability.68

The taskforce recommends that Australia plays a role in international advocacy for the
region, pushing for more vaccines, and global tailored financial support including an
extension of the G20 debt repayment suspension due to expire at the end of 2021. It also
encourages the exploration of travel bubbles involving Australia and COVID-free Pacific
island countries that would aid economic recovery in the region.

The taskforce recommends that Australian governments
endorse a plan for rebuilding the nation’s society and
economy based on the following priorities:

1. A return of Australia to its pre–COVID embrace of immigration and
   multiculturalism, supported by a national anti-racism strategy.

2. The creation of a fully integrated public community–based system of care,
   which recognises the pandemic’s effects on people’s mental health.

3. A strategy of inclusive prosperity that addresses the economic inequalities
   exposed by the pandemic.

4. The creation of further national cooperation and enhanced national
   governance, building on the success of the National Cabinet.

5. An acceptance of Australia’s moral duty to assist our Pacific and regional
   neighbours to protect the health of their citizens and overcome the economic
damage caused by the pandemic.
Conclusion
Conclusion

The global COVID-19 pandemic is not over. The world continues to be shaken by the health, social and economic devastation that it has caused and will likely continue to cause for many years to come.

Australia has been relatively fortunate in these extremely difficult times. An exceptional initial public health response and strong economic action from the federal government has placed the country in an enviable position. Nonetheless, challenges remain. In this report, we have focused in particular on the challenge posed by Australia’s international border closures and by some key economic and social policy questions at home. Each of these raises the possibility that although Australia succeeded in the early phase of the pandemic, it could fall behind latter stages. It could, in other words, have won the war only to lose the peace.

It is for these reasons that we recommend that the country prepare itself now for the future ahead. Australia needs once again to look out to the world and to work out how it can reconnect, safely and securely, with other countries as they emerge from the worst phase of the pandemic. We are under no illusions that it is easy to do so. Many in the Australian public will be understandably nervous and they are right to remember that the threat from the virus remains. Nonetheless, we believe the country has the ingenuity, the technical know-how and the optimistic spirit required to seize the moment, and we hope the recommendations included in this report help it on its way.
Summary of Recommendations

The taskforce recommends the establishment of an ongoing forum that brings together government, business, civil society and academia to create a civic dialogue about Australia’s post-COVID-19 future.

The taskforce also recommends that Australian governments endorse a roadmap for reopening Australia’s borders, based on the adoption of:

1. a comprehensive and successful vaccination program;
2. sector and place-specific pilot programs to reopen prior to the conclusion of the vaccination program, supporting industries critical to Australia’s economy, including tourism and creative industries, horticultural farming and international education;
3. a certification scheme, across these programs, which permits only those with documented vaccination and/or SARS CoV-2 immunity to enter Australia or travel overseas;
4. improved border protection measures involving rapid testing; and
5. a new range of risk-weighted pilot quarantine measures, while continuing to isolate those who come from high risk countries, refuse testing, or test positive on arrival.

The taskforce further recommends that Australian governments endorse a plan for rebuilding the nation’s society and economy based on the following priorities:

1. A return of Australia to its pre-COVID embrace of immigration and multiculturalism, supported by a national anti-racism strategy.
2. The creation of a fully integrated public community-based system of care, which recognises the pandemic’s effects on people’s mental health.
3. A strategy of inclusive prosperity that addresses the economic inequalities exposed by the pandemic.
4. The creation of further national cooperation and enhanced national governance, building on the success of the National Cabinet.
5. An acceptance of Australia’s moral duty to assist our Pacific and regional neighbours to protect the health of their citizens and overcome the economic damage caused by the pandemic.
Appendix 1
Independent Taskforce Members

Independent taskforce

— Chair:
  Mr Mark Rigotti, Immediate Past Global CEO,
  Partner and Senior Adviser, Herbert Smith Freehills

— Education:
  Professor Robyn Dowling, Dean, School
  of Architecture, Design and Planning,
  University of Sydney

— Arts and Creative Industries:
  Ms Emma Dunch, CEO, Sydney Symphony Orchestra

— Civil Society:
  Ms Violet Roumeliotis AM, CEO, Settlement
  Services International

— Professional Services:
  Mr Tom Seymour, CEO, PwC Australia

— Law:
  Mr Michael Tidball, CEO, Law Council of Australia

Formal advisers to the taskforce

— Professor Desmond King, International Advisor

— Peter Lewis, Communications Advisor

— Professor Ben Marais, Infectious Diseases Advisor

— Sue Vercoe, Public Opinion Advisor

University of Sydney sponsors

— Professor Tim Souptommasane
  Director, Culture Strategy,
  The University of Sydney

— Professor Marc Stears
  Director, Sydney Policy Lab,
  The University of Sydney
The taskforce has also received generous and insightful contributions to its work from many independent experts. The taskforce warmly acknowledges the detailed contributions of: Ass. Prof. Anna Boucher, Elisa Choy, Prof Lyn Gilbert, Prof Julie Leask, Prof Ben Marais, Andrew Parker and Prof Maree Teesson.

Their expertise has been invaluable in the production of this report. None of them are, of course, in any way responsible for the arguments that the taskforce makes or any errors of fact or interpretation in this report. The taskforce is also extremely grateful to Dennis Glover for his superb work on the text of the report. The taskforce further warmly acknowledges the superb support of its secretariat, led by Louise Beehag, Irmke Bonte and Dr Stephanie Wood, and thanks Dr Juliet Bennet, Dr Nancy Lee and Jananie Janarthana for invaluable editorial support.

The taskforce also acknowledges the contribution of those who attended three policy roundtables. The generosity of all participants in sharing their own wisdom and perspectives was very much appreciated. Contributors to those sessions are, of course, not responsible in any way for the argument the taskforce has made, but we do wish to say thank you to them all. They included:

Dr Amanda Cahill (CEO, Next Economy), Barry Brown (Emirates Divisional Vice President – Australasia), Bruce Watt (Vice-President, DDI), Caroline Argent (NSW Branch Director, Pharmacy Guild of Australia), Professor Emerita Carmen Lawrence (The University of Western Australia), David Barrow (Lead Organiser, Sydney Alliance), David Ritter (CEO, Greenpeace Australia Pacific), Dianne Tipping (Export Council of Australia Chair), Ed Santow (Australian Human Rights Commissioner), Emma Dawson (Executive Director, Per Capita), Erkmen Savaskan (Architect, academic, asylum seeker), Hawa Mohammad (UNICEF Young Ambassador), Councillor Linda Scott (City of Sydney), Jason Collins (CEO, European Australian Business Council), Jason Yat-Sen Li (Company director and corporate advisor), Jenny Lambert (Director of Tourism, Australian Chamber of Commerce & Industry), John Lydon (Senior Partner, McKinsey & Company), Kate Aubusson (Health Editor, Sydney Morning Herald), Ken Baxter (Chairman, PNG Sustainable Infrastructure Ltd), Lauren Jackson (Partner, KPMG Australia), Liam O’Brien (ACTU Assistant Secretary), Lisa Davies (Editor in chief, Sydney Morning Herald), Lorena Rios (International student, social entrepreneur and community development professional), Mark Morey (Secretary, Unions NSW), Maura van Dommelen (International student), Michael Buckland (CEO, McKell Institute), Ming Long AM (Non-Executive Director) Monica Barone (CEO, City of Sydney), Najeeba Wazefadost (Founder, Global Refugee Network and Asia Pacific Network of Refugees), Paul Zahra (CEO, Australian Retailers Association), Sigit Haryadi (Working holiday maker), Simon Goff (Partner and Global Managing Director, Purpose), Professor Simon Rice (Kim Santow Chair of Law and Social Justice, The University of Sydney), Dr Stephen Duckett (Health and Aged Care Program Director, Grattan Institute), and Travers McLeod (CEO, Centre for Policy Development).

We are also hugely grateful to the inspiring young people who joined a discussion on the implications of the pandemic, co-hosted with Ripple, and to many colleagues at the University of Sydney who joined briefing sessions and responded to requests throughout the process.
Appendix 2
Terms of Reference

Open Society, Common Purpose Taskforce
– Terms of Reference

The Open Society, Common Purpose taskforce is an independent group, appointed by the Chancellor of the University of Sydney, and hosted at the Sydney Policy Lab and the University’s Culture Strategy.

Representing a cross-section of Australian society, including business, the professions, the arts, civil society and academia, the taskforce will examine, and stimulate public discussion about, how Australian society can rebuild from the COVID-19 pandemic and reinvigorate its connection to the global community.

The taskforce will inquire into the following matters:

a. the conditions under which Australia’s borders should reopen to the world, consistent with the aspiration of an open, dynamic and vibrant society in a globalised age; and

b. how Australia can strengthen its social foundations, having regard to social, economic and racial inequalities.

The taskforce will make recommendations arising out of its inquiry, as it considers appropriate, and issue an initial public report.

Without limiting the scope of its inquiry or its recommendations, the taskforce will consider the following areas of concern: immigration, the economy, governance, human rights and civil liberties, public health (including mental health), cities and suburbs, and the arts and creative industries.

The taskforce will consult with experts from within the University and without, and facilitate public discussion about the matters of inquiry. Its work will be informed by the belief that dialogue between academic researchers and diverse parts of Australian society will unlock answers to the urgent challenges of our time.
The taskforce was provided with detailed private advice from a number of recognised experts. The references below are to publicly accessible sources.


33 For example, close to eight million people in Australia were born overseas and continue to be separated from family and friends by the restrictions on international travel. ABS, ‘Migration, Australia. Statistics on Australia’s International Migration, Internal Migration (Interstate and Intrastate), and the Population by Country of Birth. Reference Period: 2019–20 Financial Year’, Australian Bureau of Statistics https://www.abs.gov.au/statistics/people/population/migration-australia/latest-release [Accessed 30 Apr 2021].


50 Ibid.

51 Ibid.

52 Ibid.


For further discussion see the report by the Property Council of Australia, Reimagining our economic powerhouses: How to turn our CBDs into central experience districts https://www.propertycouncil.com.au/Web/Content/Media_Release/National/2021/New_playbook_reveals_steps_to_CBD_revival.aspx


A state of emergency can be ‘extended as long as a health minister considers it necessary,’ An exception is Victoria, which must seek parliamentary approval after twelve months. See RMIT ABC Fact Check, ‘Fact Check Fact File: Victoria’s State of Emergency Extension Has Received a Lot of Attention, but That Could Be Due to Parliamentary Scrutiny’ in ABC, (15 Sep 2020) https://apo.org.au/node/309467 [Accessed 30 Apr 2021].


Get in touch

For information or to contact the Sydney Policy Lab, please email or phone:

policy.lab@sydney.edu.au
(+61) 2 8627 5977

Sydney Policy Lab
Level 5 RD Watt Building
The University of Sydney NSW 2006

sydney.edu.au/sydney-policy-lab

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