



# TOITU TAIRĀWHITI

NGATI POROU - TE AITANGA A MAHAKI - RONGOWHAKAATA - NGAI TAMANUHIRI

## PANUI 9 NOVEMBER 2021

### *Whitiki Tairawhiti*

Tena tatou,

#### New Cases

There were 185 new cases reported today, 152 in Auckland, 25 in Waikato and eight in Northland. Cases continue to be detected in Northland ahead of the upper region's return to alert level 2 at 11:59pm - a case was detected in Kaitiaki late on Wednesday, with eight officially confirmed on Thursday. They are all linked to existing cases. The rolling average of **community cases for the past 7 days is 161.**

#### Location of COVID-19 of community cases in current outbreak;

- Auckland 4,737 (1,834 of whom have recovered);
- Waikato 203 (76 of whom have recovered);
- Wellington 17 (all of whom have recovered);
- Northland 36 (6 of whom have recovered);
- Nelson/Marlborough 1 (who has recovered);
- Canterbury 4 (all active)

Number of community cases (total): 4,998 (in current community outbreak). Total number of confirmed cases 7,746

#### Summary of current cases

Summary		
New cases reported during the past 24 hours	185	
Active cases	At the border	35
	In the community	3056
	Under investigation/other	0
	Total	3091
Most recent case reported	11 November 2021	
Most recent case reported due to community transmission (spread within our communities)	11 November 2021	

All case outcomes since first New Zealand case		
COVID-19 cases	Change in last 24 hours	Total
Active	124	3091
Recovered	60	4983
Deceased	1	33
		Change in last 24 hours
		Total at present
In managed facilities	-1	117
In hospital	3	71
At home or in self-isolation	0	304
Not in isolation	0	0
Other	122	2599
Source of active cases		
		Change in last 24 hours
		Total at present
People who travelled internationally and were diagnosed in managed facilities at the border	0	35
People in close contact with someone who caught COVID-19 while overseas	0	0
Caught COVID-19 from someone locally	95	2435
Caught COVID-19 within NZ, but source is unknown	0	25
Under investigation	29	596

## Mis- and disinformation in Aotearoa New Zealand

*(Extracts from Working Paper prepared by Hannah, Sanjana Hattotuwa, Kayli Taylor of the Te Pūnaha Matatini; Department of Physics, University of Auckland; Centre for Science in Society, Te Herenga Waka)*

### Introduction

Since February 2020 a small interdisciplinary team, "the Disinformation Project", has been observing and analysing open source, publicly available data related to Covid-19 mis- and disinformation on social media, mainstream media, and in physical and other digital forms of information and knowledge dissemination.

From August 2020, they worked on studying mis- and disinformation ecosystems in Aotearoa, including the seed and spread of 'dangerous speech', hateful expression, and criminal behaviour. The team focused on effects and causes here in Aotearoa, but studied global trends, themes, narratives, and actors, which influence online harms in Aotearoa.

Since 17 August 2021, when Aotearoa New Zealand's Delta outbreak meant a shift into Covid-19 Alert Level 4 across the country, there has been a sharp increase in the popularity and intensity of Covid-19-specific disinformation and other forms of 'dangerous speech' and disinformation, related to far-right ideologies.

The Disinformation Project monitored this material, observing key trends, and analysing impact. Their brief working paper introduces some of their key findings so far on the infodemic – around engagement; content, reception to the Covid-19 vaccine, language, approaches employed, and targeted groups.

For the purposes of their study, they used the following definitions from Berentson-Shaw and Elliot:

- Misinformation: "false information that people didn't create with the intent to hurt others"
- Disinformation: "false information created with the intention of harming a person, group, or organization, or even a company"
- Malinformation: "true information used with ill intent"
- Dangerous Speech - is any form of expression (e.g., speech, text, or images) that can increase the risk that its audience will condone or participate in violence against members of another group

Within the social media ecologies studied, key individuals and groups producing mis and disinformation capitalise on growing uncertainty and anxiety amongst communities, related to Covid-19 public health interventions, including vaccination and lockdowns, to build fear, disenfranchisement, and division.

Mis- and disinformation is also particularly targeting and scapegoating already marginalised or vulnerable communities – for whom distrust of the state is the result of intergenerational trauma and lived experience of discrimination or harm, which can increase engagement with conspiratorial explanations and disinformation.

The most recent Covid-19 outbreak, and the vaccine are highly visible, potent symbols used to push various far-right and conservative ideologies around issues such as gun control; rural land rights and 1080; Māori sovereignty and water/land rights.

The growing polarisation, engineered by leading mis and disinformation producers within Aotearoa New Zealand, between those who are vaccinated and those who are not, seeks to normalise the increasingly intense negotiation of difference. The Disinformation Project observed a large number of publicly available groups, pages, and accounts within Aotearoa's disinformation ecology.

The platforms observed include, but are not limited to: Telegram, Facebook Pages, Facebook Groups, Facebook accounts, Instagram, Twitter, and any sign-posted, off-platform content harbours, like the .nz top-level domain, other websites, and platforms.

Based on the grounded, daily analysis of large volumes of data, The Disinformation Project reports on emergent trends, themes and signals within a disinformation landscape that is sophisticated, motivated, adaptive, resilient, increasingly violent, and significantly volatile.

Both posts and engagement have drastically increased since 17 August 2021 and show a trajectory of growth and spread that is increasing, widening, and deepening every week. Disinformation activity shows a high degree of coordination and collaboration within and between platforms. This means that content shared into one platform is quickly shared amongst other accounts within the same platform or app, and also transmits across different social media platforms.

Since mid-August, Telegram emerged as the platform of choice for the spread of mis- and disinformation in Aotearoa New Zealand. As a platform, Telegram does not feature oversight of, or policies around, misand disinformation. The volume of content studied by the project team since 17 August, across all platforms, is significant and cumulatively in the hundreds of millions of data points.

A few accounts, increasingly, generate the greatest number of mis- and disinformation, which is shared far more widely. These accounts are increasingly coordinated in the production of content, and the selection of frames, subjects, issues, topics, and offline events.

The Disinformation Project's work reveals complex network effects as a consequence of this strategic, sophisticated production of harmful content by a few highly motivated actors, that tens of thousands of others go on to share

The project observed a critical shift from vaccine hesitancy to vaccine resistance within the core groups studied on Telegram. Here, with no platform-level guidelines or interventions such as the use of interstitials which may be present on other, more mainstream social media platforms, the discourse has shifted over the period of this study from hesitancy and uncertainty to one of active resistance and refusal.

Counter speech in an environment of active resistance, where individuals have attached identity to refusal, is difficult and in fact most often leads to further entrenchment of identity within this framework.

Telegram channels and groups proliferate content, which is violent, far-right, and related to the conspiracy theory QAnon, signalling a near-frictionless shifting of New Zealanders from vaccine hesitancy to vaccine resistance, and then to content reflective of wider conspiratorial ideologies.

## **Conclusion**

Since the return to Alert Level 4 settings across the country on 17 August 2021, there has been a sharp increase in the popularity and intensity of Covid-19 specific disinformation and other forms of 'dangerous speech' and disinformation, related to farright ideologies.

This intensification has included a number of key trends and observations

- an increase of both posts and engagement across an ecology of platforms
- a shift in reception to the Covid-19 vaccine from vaccine hesitancy to vaccine resistance

- the use of memetic material and emotive testimonies
- the intensification of language, and the normalisation of that intensification
- the use and abuse of Māori motifs and symbols by Pākehā mis- and disinformation spreaders
- the targeting of minority groups and key public figures, particularly those who belong to some intersection of identity.

The ecologies and spread of mis- and disinformation point to a broader threat and that is that Covid-19 and vaccination are being used as a Trojan Horse for norm-setting and norm-entrenchment of far-right ideologies in Aotearoa New Zealand.

Such ideologies include, but are not limited to, ideas about gun control, anti-Māori sentiment, antiLGBTQIA+, conservative ideals around family and family structure, misogyny, and antiimmigration. Mis- and disinformation and ‘dangerous speech’ pose significant threats to social cohesion, freedom of expression, inclusion, and safety

## Iwi Update

### Find a vaccination or testing clinic that suits you

\* No appointment. Just walk in.

\* Unless stated otherwise, please feel free to bring yourself and other whānau for vaccination

### Friday 12 November

Clinic	Venue	Time
Community Vaccination Centre	295 Palmerston Rd, Gisborne	9am-5pm
Te Tini o Porou	corner of Huxley Rd and Tyndall Rds., Gisborne	9am-5pm
Nga Uri a Maui	Lytton Rd, Gisborne	9am -11.am
Cedenco (Workplace Only)		9am -11am
Unichem Bramwell Pharmacy	232 Gladstone Rd	9am-1pm
Kaiaponi (Workplace Only)		1pm -3pm
Te Poho o Rawiri Marae Drive-Thru	24 Ranfurly St, Gisborne	3,30pm -7.pm
Rangatahi o Aotearoa		5.15pm -7pm
Te Puia Springs	Te Puia Hospital, Te Puia Springs	9am- 12.pm
Te Tini o Porou	corner of Huxley Rd and Tyndall Rds., Gisborne	9am – 4.30pm
Ngati Porou Forests Ltd (Workplace)	Ruatoria Office	1.pm -5pm

### Saturday 13 November

Community Vaccination Centre	295 Palmerston Rd, Gisborne	9am-5pm
Te Tini o Porou	Cnr Huxley Rd and Tyndall Rds., Gisborne	9am-5pm

Unichem Bramwell Pharmacy	232 Gladstone Rd	9am-1pm
Radio Ngati Porou	Waiomatatini Rd, Ruatoria	10am -12pm
Pak N Save	Gladstone Road, Gisborne	10am -6.pm
Waikirikiri Park	Cnr Tyndall and Dalton St	Time tbc
Ruatoria Airfield	Tapuaeroa Rd, Ruatoria	
Te Araroa Aerodrome	Te Araroa Aerodrome, Te Araroa	11.am -1.pm
Te Poho o Rawiri Marae Drive-Thru	24 Ranfurly St, Gisborne	3,30pm -7.pm
Tikitiki Fire Station	Rangitukia Rd, Tikitiki	3pm -5pm
Uawa Airfield	Uawa	3.pm -5pm

### Sunday 14 November

Unichem Bramwell Pharmacy	232 Gladstone Rd	9am-1pm
Pak N Save	Gladstone Rd, Gisborne	10am -6pm
Te Tini o Porou	corner of Huxley Rd and Tyndall Rds., Gisborne	9am -5pm
Te Poho o Rawiri Marae Drive-Thru	24 Ranfurly St, Gisborne	10am -2.pm
Te Karaka Waikohu Health Centre	Te Karaka	10am -2.pm
Te Puna Manaaki a Ruataupare	Onepoto Beach, Wharekahika	11am – 4. pm

*This information is up to date but please note that dates, times, and venues can occasional*

Colour Code

Iwi/hapu Health Providers

Hauora Tairawhiti & Unichem Pharmacy-Bramwells

## Regional Update

### Rainwater could impact test results

Tairawhiti may need to wait a little longer after two wastewater results returned positive for COVID-19 last week.

A sample was sent for testing on Monday and another test was scheduled for Wednesday.

Tairawhiti may be asked to provide a further sample on Thursday given the flooding events and the effects it may have had on Monday's test, as it would not give a full picture of the wastewater catchment, according to Dr Osman Mansoor, Tairawhiti Medical Officer of Health.

The positive results came from samples taken on November 1 and 3, before any flooding effect. Samples are collected by Gisborne District Council on behalf of the Ministry of Health and sent to ESR for testing.

Hauora Tairawhiti Chief Executive Jim Green says that while it would be useful to have updated results of wastewater testing, more important was the swabbing of people who have symptoms that might be indicative of COVID-19.

"These will tell us if there is spread of the virus in our community. Most important of all though is getting vaccinated. Now is the time to do this, with five weeks until full protection

of the vaccine is received from the two doses. Please don't wait a day longer to get vaccinated with COVID-19 on our doorstep now."

## Vaccinations at a glance

**Total Doses given to date** **62,967**

**34,169 (81.4%)** of the population has now received at least one dose

Group	1 dose	2 dose
<b>Māori</b>	72.7%	56.1%
<b>Pasifika</b>	94.9%	77.1%
<b>65 +</b>	96.1%	93.2%

**68.6% of the population are fully vaccinated**

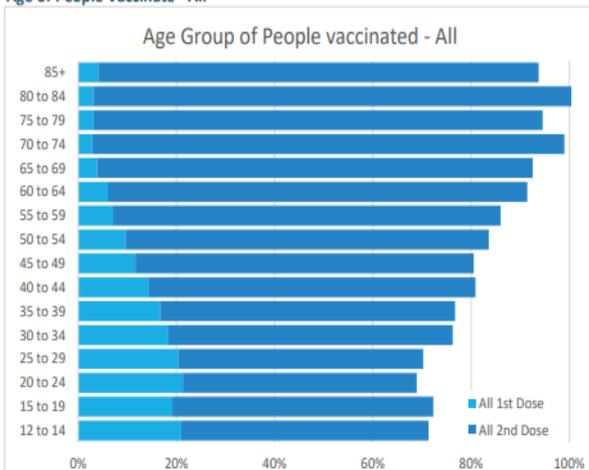
**Countdown**  
**7,796**  
people need first dose

Please note this is coverage based on Tairāwhiti Residents and will be slightly different to vaccination given within Tairāwhiti.

Tairawhiti COVID-19 Vaccine Summary - All



Age of People Vaccinate - All



	To be vaccinated			
	Dose 1		Dose 2	
85+	58		78	
80 to 84	-		-	
75 to 79	76	358	120	582
70 to 74	22		79	
65 to 69	202		305	
60 to 64	262		446	
55 to 59	454	1,841	684	2,919
50 to 54	516		817	
45 to 49	609		972	
40 to 44	549		958	
35 to 39	672	3,011	1,155	5,195
30 to 34	784		1,389	
25 to 29	1,006		1,693	
20 to 24	937		1,580	
15 to 19	997	2,636	1,686	4,481
12 to 14	702		1,215	

# National Update

## Reprioritise use of MIQ

Public health staff are now supporting, 2,835 people in and home isolation around Auckland - this includes 1,255 cases, across 885 households and 166 people are self-isolating at home in Waikato.

There are calls to drop Managed Isolation and Quarantine (MIQ) for low-risk travellers returning to live in Auckland, so space can be given to positive Covid-19 cases who risk falling through the cracks while self-isolating at home.

More than 1200 people with Covid are now isolating at home, and another 1600 household contacts are with them. That's 2835 people across 885 households, while just 117 people with Covid are in MIQ. For everyone person with Covid in MIQ, nine are isolating at home.

It comes after a South Auckland's Papakura Marae Health Clinic GP Dr Matire Harwood said some Covid positive patients were waiting up to three days to hear from authorities, let alone have a health check.

According to the Ministry of Health (MOH), each Covid-19 patient isolating at home should get a leaflet with advice and a pack with everything they need to monitor their health.

A Medical Officer of Health undertakes a public health risk assessment, looking at how safe the person is at home and what they might need.

The MOH said each day a health professional called to check in and ensure a person was well enough to isolate, was staying at home, and had the essentials they needed.

But groups supporting self-isolating patients have told the media that there are too many people staying home who should be in managed isolation, and its taking health authorities too long - in some cases days - to get in touch.

The health minister said public health staff were not expecting cases would increase this quickly.

"What happened is the rapid escalation of numbers [of cases] in the last couple of weeks took the system somewhat by surprise, so that initial stage of contacting people with a positive result meant that some were not contacted in a timely enough fashion," he said.

Hon Little said all he can undertake to do is to go back and ascertain to what extent the public health unit is not getting on top of the volume of cases and positive tests coming through. The assurances that he and other ministers have received is that they public health units are on top of it ", he said.

Dr Harwood said government health authorities were slow to get in contact with people

"Their guidelines say that [the government] will be the first point of contact, they'll make sure these things are in place, that patients have the oximeters, they'll be reviewed

clinically as well as having welfare issues addressed - but that hasn't been our experience. People are waiting two to three days to hear from anybody," Harwood said.

She visited seven recently positive households last Friday, and none of them had heard from the Ministry of Health or the district health board (DHB).

She had to go and do the oxygen checks because they' were really worried. People don't know their oxygen levels without having their oximeter, and the people in self isolation are seeing on the news, that people have passed [away] while not knowing how unwell they might actually be."

Otago University researcher in the Department of Public Health, Lucy Telfar-Barnard, said it would be better if more people were in MIQ with health staff on hand than at home.

She said that it would be so much better for them if they can be somewhere where there are people checking on them regularly rather than at home where they're kind of reliant on a whole bunch of services being able to coordinate well to make sure they're well supported," Telfar-Barnard said.

From this Sunday returning travellers will have their [MIQ stays halved](#), from 14 days to seven. Dr Telfar-Barnard said most double vaccinated returnees with negative pre-departure tests were very low risk and were more likely to get Covid in Auckland than bring it back to the country.

Given the virus is circulating widely in Auckland, Telfar-Barnard said low-risk returnees who were returning to live in Auckland should be able to skip MIQ altogether. This would free up MIQ facility beds for those who actually have Covid and may need more health care.

"We really need those MIQ beds for the known cases and their close contacts who can't effectively self-isolate at home," she said.

"Covid will spread throughout the rest of the country. We need to make sure every other DHB, every other region, is prepared and ready and their systems are ready to go. Everybody's looking at what's happening in Auckland at the moment because we can't repeat the things, we've seen in Auckland around other parts of the country."

Auckland Councillor Daniel Newman, who had been delivering food parcels to people with the virus, believed home isolation could be successful.

Councillor Newman believes the MOH had mandated, the self-isolation at home option before putting in place enough financial, emotional and welfare services for Covid-19 patients. There should be cross-agency support from Ministry of Social Development.

Director General of Health Ashley Bloomfield has acknowledged the system is under pressure. He said the Ministry of Health was working to get more resources to help support and contact people isolating at home.

### **Hospitalisations Overview**

- Current cases in hospital, 84 inpatients; North Shore (24); Waitakere (1); Middlemore (28); Auckland (30) and Whangarei (1)
- Vaccination status of current hospitalised cases-
- Unvaccinated or not eligible (46 cases / 56%);
- partially vaccinated <14 days (10 cases / 12%)

- partially vaccinated >14 days (14 cases / 17 %);
- fully vaccinated <14 days (2 cases / 2%) fully vaccinated >14 days (8 cases / 10%);  
unknown (3 cases / 4%)

Average age of current hospitalisations: fifty-two and cases in ICU or HDU: Another death has been added to the official tally - the death is under a police investigation.

### The number of unvaccinated NZers in hospital with COVID-19

More than half of New Zealand's hospitalised COVID-19 patients are not vaccinated, data from the Ministry of Health shows.



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There are 84 people in hospital: 30 in Auckland, 28 in Middlemore, 24 in North Shore, and one each in Waitakere and Whangārei.

Of these inpatients:

- Forty-six are unvaccinated or not eligible
- Ten had their first dose less than 14 days ago
- Fourteen had their first dose more than 14 days ago
- Two have been fully vaccinated for less than 14 days
- Eight have been fully vaccinated for more than 14 days
- Four cases are unknown.

The three District Health Boards (DHBs) in Auckland are among the most vaccinated in the country. The Auckland DHB has given first doses to 95 percent of its eligible population, Waitemata 92 percent, and Counties Manukau 90 percent.

In Northland DHB, where one person is hospitalised, 82 percent of eligible people have received their first dose.

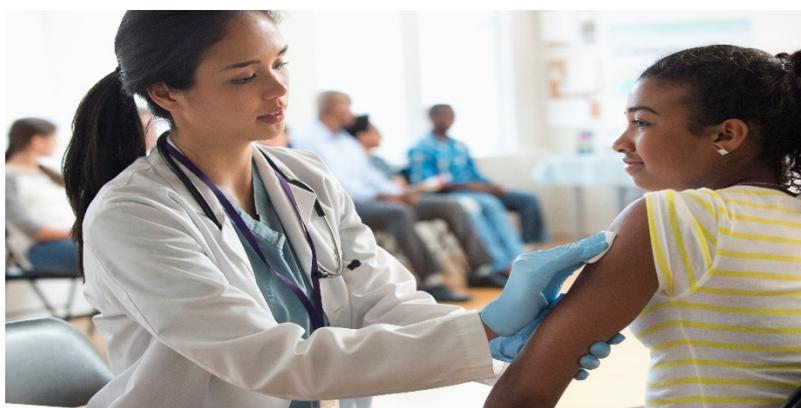
New Zealand as a whole is expected to hit 90 percent first doses in the coming days, with the Ministry of Health's data showing just 15,083 additional doses are needed to reach this.

### Vaccination Update

There were 22,007 COVID-19 vaccine doses administered on Wednesday, which is made up of 6045 first doses and 15,962 second doses.

### COVID-19 vaccine update

- Total first and second vaccines administered to date (percentage of eligible people): 7,123,172: 3,773,068 first doses (90%); 3,350,104 second doses (80%)
- Total first and second vaccines administered yesterday: 22,007: 6,045 first doses; 15,962 second doses
- Māori (percentage of eligible people): 764,891: 429,932 first doses (75%); 334,959 second doses (59%)
- Pacific Peoples (percentage of eligible people): 462,071: 250,091 first doses (87%); 211,980 second doses (74%)
- Total first and second vaccines administered to Auckland residents yesterday: 5,381:



### To 10 November 2021

Ethnic group DHB of residence	Māori				Pacific Peoples			
	# first dose per 1000 pop.	Rank	# fully per 1000 pop.	Rank	# first dose per 1000 pop.	Rank	# fully per 1000 pop.	Rank
Auckland	853	1	714	1	864	13	740	8
Bay of Plenty	674	20	512	20	1,125	2	944	2
Canterbury	808	4	613	5	878	7	701	16
Capital and Coast	823	3	680	2	837	17	704	15
Counties Manukau	770	6	601	7	854	15	727	10
Hawke's Bay	717	16	546	15	1,059	3	901	3
Hutt Valley	761	7	609	6	826	18	704	14
Lakes	695	18	528	19	826	19	689	17
MidCentral	751	10	577	12	873	9	713	11
Nelson Marlborough	734	13	580	10	1,750	1	1,556	1
Northland	715	17	542	16	844	16	684	19
South Canterbury	750	11	590	8	984	4	826	4
Southern	795	5	637	4	957	5	800	5
<b>Tairāwhiti</b>	<b>727</b>	<b>14</b>	<b>561</b>	<b>13</b>	<b>948</b>	<b>6</b>	<b>771</b>	<b>6</b>
Taranaki	722	15	533	18	865	11	687	18
Waikato	761	8	579	11	877	8	739	9
Wairarapa	741	12	553	14	857	14	707	13
Waitemata	825	2	679	3	873	10	749	7
West Coast	758	9	587	9	865	12	709	12
Whanganui	688	19	542	17	791	20	656	20
NZ	753		587		872		739	

Ethnic group DHB of residence	Non Māori Non Pacific				All			
	# first dose per 1000 pop.	Rank	# fully per 1000 pop.	Rank	# first dose per 1000 pop.	Rank	# fully per 1000 pop.	Rank
Auckland	967	1	912	1	948	1	880	1
Bay of Plenty	893	13	788	16	849	15	730	14
Canterbury	941	4	820	8	929	3	801	6
Capital and Coast	952	2	881	3	931	2	848	2
Counties Manukau	951	3	890	2	904	6	813	5
Hawke's Bay	907	9	818	9	868	13	757	13
Hutt Valley	925	7	842	5	894	7	797	7
Lakes	893	12	800	12	829	17	711	18
MidCentral	906	10	809	10	881	11	769	11
Nelson Marlborough	881	17	795	15	882	10	789	8
Northland	862	19	770	18	816	19	697	19
South Canterbury	890	15	800	14	883	9	786	9
Southern	925	6	831	6	915	5	815	4
<b>Tairāwhiti</b>	<b>890</b>	<b>14</b>	<b>800</b>	<b>13</b>	<b>814</b>	<b>20</b>	<b>686</b>	<b>20</b>
Taranaki	887	16	763	19	861	14	726	15
Waikato	914	8	820	7	883	8	770	10
Wairarapa	900	11	804	11	875	12	764	12
Waitemata	935	5	868	4	922	4	845	3
West Coast	850	20	733	20	841	16	718	17
Whanganui	872	18	785	17	826	18	724	16
NZ	923		836		896		796	

Per 1,000 pop	Gap Māori - total Population				Per 1,000 pop	Gap Māori - Non Maori Non Pasifika Popu			
DHB of residence	Dose 1	Rank	Dose 2	Rank	DHB of residence	Dose 1	Rank	Dose 2	Rank
Auckland	-95	3	-166	5	Auckland	-114	3	-198	4
Bay of Plenty	-175	20	-218	20	Bay of Plenty	-219	20	-276	19
Canterbury	-121	8	-188	10	Canterbury	-133	6	-207	6
Capital and Coast	-108	6	-168	6	Capital and Coast	-129	4	-201	5
Counties Manukau	-134	14	-211	19	Counties Manukau	-181	16	-289	20
Hawke's Bay	-150	19	-211	18	Hawke's Bay	-189	18	-272	17
Hutt Valley	-132	11	-188	11	Hutt Valley	-164	14	-233	12
Lakes	-133	13	-183	9	Lakes	-198	19	-272	18
MidCentral	-130	10	-192	13	MidCentral	-155	11	-232	11
Nelson Marlborough	-148	18	-209	16	Nelson Marlborough	-146	8	-215	8
Northland	-101	5	-155	3	Northland	-147	9	-228	9
South Canterbury	-133	12	-196	15	South Canterbury	-140	7	-209	7
Southern	-121	7	-177	7	Southern	-131	5	-194	3
<b>Tairāwhiti</b>	<b>-88</b>	<b>2</b>	<b>-126</b>	<b>1</b>	<b>Tairāwhiti</b>	<b>-164</b>	<b>13</b>	<b>-239</b>	<b>13</b>
Taranaki	-138	16	-193	14	Taranaki	-164	15	-230	10
Waikato	-122	9	-191	12	Waikato	-153	10	-241	14
Wairarapa	-134	15	-210	17	Wairarapa	-159	12	-251	16
Waitemata	-97	4	-166	4	Waitemata	-111	2	-189	2
West Coast	-83	1	-131	2	West Coast	-92	1	-146	1
Whanganui	-139	17	-183	8	Whanganui	-184	17	-243	15
NZ	-143		-209		NZ	-170		-249	

Note – positive number indicates that Māori vaccination rate is above that of comparator population. Difference is rate per 1,000 people

## General Updates

A sample collected from Stratford on 9 November detected the COVID-19 virus. A further sample was collected yesterday and is currently being analysed.

A positive wastewater test can also sometimes result from an historical case who may continue to shed fragments of the virus for some weeks after their illness – even if they are

Students in alert level 3 areas will return to school on November 17 - Years 9 and 10 can return full-time, however Years 1 to 8 will be back in the classroom on a part-time basis.

Retail has officially reopened in Auckland as the region enters its second day of alert level 3, step 2.

The AstraZeneca vaccine will be made available to those who medically cannot get the Pfizer jab and are aged eighteen or over from late November.

Whanau Tu Whanau Ora

**KIA MATAARA, KIA MANAWANUI**