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COVID-19 ROADMAP NEEDS REDIRECTION

AMA Federal Council Communique

The Australian Medical Association is calling on National Cabinet to review its May 2020 COVID-19 Roadmap at its meeting this Friday.

AMA Federal President, Dr Omar Khorshid, said that with COVID-19 successfully eliminated in many parts of the country - something that was considered unlikely when the plan was first developed - it is time to assess whether the roadmap remains fit for purpose.

“We have learnt a great deal about COVID-19 since May, with both local and overseas experience showing just how hard it is to keep infection numbers in check,” Dr Khorshid said.

“We believe that a renewed roadmap is necessary to continue to support our health response, as well as guide a sustainable economic recovery.”

Countries that have crushed COVID-19 have done much better from both a health perspective, as well as an economic perspective, Dr Khorshid said.

“We also know that even when countries have the virus well under control, it can quickly re-emerge when complacency takes hold and governments dismantle many of the restrictions on day-to-day life that had kept the virus at bay.”

The most recent Federal Budget works from the optimistic assumption that future outbreaks in Australia will be localised and contained, with larger outbreaks considered a substantial risk to recovery.

It also assumes that a population-wide vaccine would be fully in place by late 2021, whereas the AMA believes we could be living with the virus for some considerable period of time.

Dr Khorshid said that even taking into account a best-case scenario, the plans outlined in the May Roadmap now appear overly ambitious, with the end point of minimal restrictions leaving Australia at risk of severe outbreaks and potential lock downs.

“The recent New South Wales experience shows just how hard it is to keep COVID-19 under control, with the State taking three months to contain its most recent outbreak, despite it being caused by only a small number of infected people coming across the border from Victoria,” Dr Khorshid said.

“While NSW has a highly organised and effective system of testing and contact tracing, it also relies heavily on a range of restrictions and work-from-home directives.

“Had NSW moved to step 3 of the May Roadmap with minimal restrictions, it could have quickly found itself in the same position as Victoria.”

Western Australia has dropped most restrictions, having eliminated the virus and is now highly reliant on border controls and quarantine arrangements. This makes it very vulnerable to an outbreak – particularly given the level of complacency that now exists in the community.

“We do not think this approach is sustainable in the long term,” Dr Khorshid, a surgeon in Perth and former AMA WA President, said.

“While we understand that governments want life to return to normal, this is a risky strategy.

“Instead, Australia needs to learn to live with a sensible set of restrictions for the time being, while we wait for a vaccine and/or better treatments.

“Our approach needs to build resilience, which gives the community confidence that Australia remains as safe as possible and supports economic recovery.”

Dr Khorshid said governments must be more honest with the community about the need for restrictions and stop sending mixed signals that fuel complacency.

“In the last few weeks, we have seen the NSW community told to stay away from beaches because of crowds, the banning of small protest marches, and that it is on the verge of a Crossroads Hotel-style outbreak,” Dr Khorshid said.

“At the same time, they are being told that crowds of up to 40,000 at sporting events are safe and that it is time for people to return to Sydney CBD workplaces.

“People are struggling to understand these messages or take them seriously.”

The AMA’s most recent communique on COVID-19 and the measures required to tackle the virus and support economic recovery is at <https://ama.com.au/article/ama-federal-council-covid-19-communicue>

19 October 2020

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