

Witness Name:

Statement No.:

Exhibits:

Dated:

UK COVID-19 INQUIRY

WITNESS STATEMENT OF PAUL GIVAN

I, Paul Givan, will say as follows:

1. I was First Minister of Northern Ireland from 17 June 2021 to 4 February 2022 when I resigned as First Minister over concerns about the Northern Ireland protocol.
2. Prior to becoming First Minister, I was Minister for Communities between 25 May 2016 and 2 March 2017. In addition to being a member of the NI Assembly from June 2010, I was a Councillor from 2005 to 2012 on Lisburn City Council. I also served as Special Advisor to Edwin Poots in the Department of Culture Arts & Leisure from 2007 to 2008 and in the Department of Environment from 2009 to 2010. From 2008 to 2009 I worked for the Northern Ireland Federation of Small Business as its Public Affairs Manager.
3. I was co-opted onto the Assembly when Sir Jeffrey Donaldson resigned in 2010, and was subsequently elected in the May 2011 Assembly elections.
4. As First Minister, my role was to chair, jointly with the deputy First Minister, the Northern Ireland Executive ("the Executive"). The Executive exercises Executive authority on behalf of the Northern Ireland Assembly.
5. Section 28A of the Northern Ireland Act 1998 ("the Act") provides for a Ministerial Code ("the Code"). The Code sets out the rules and procedures for the exercise of the duties and responsibilities of Ministers and Junior Ministers of the Northern Ireland Assembly as specified in the Belfast Agreement, the Northern Ireland Act 1998, the St Andrews Agreement and the Northern Ireland (St Andrews Agreement) Act 2006. The Junior Ministers during my tenure were Gary Middleton and Declan Kearney.
6. The Head of the Civil Service during my tenure was Jayne Brady and the Permanent Secretary of The Executive Office ("TEO") was Denis McMahon. I also worked

closely with Covid Task Force officials who were based within TEO. My Principal Private Secretary was Deirdre Griffiths. I also worked closely with the Chief Medical Officer ("CMO") Sir Michael McBride, and Chief Scientific Adviser ("CSA"), Professor Ian Young.

7. My Special Advisers were Dr Philip Weir and Richard Bullick. Dr Weir generally took the lead in terms of advising on Covid-related matters, given his background as a medical doctor, and the fact that he had been in the same role since the commencement of the pandemic. Richard Bullick had previously been a Special Adviser to the former First Minister prior to the suspension of devolution in January 2017.

2021 and beyond

8. I took office in June 2021. At this stage in the Covid response, the focus was on easing restrictions and trying to get back to some level of normality. As such, economic considerations were one factor to take into account in the process of deciding the approach on maintaining restrictions. However, other factors such as societal and community impact, the impact on health and available funding also required to be given proper consideration. Therefore, while I consider there was tension between Ministers within the Executive, representing the five main parties within Northern Ireland, as to how best to balance competing factors, for example, as between the Minister for the Economy and the Health Minister, this tension was often positive as it ensured that the relevant factors were each weighed fully in the balance when making decisions.
9. The plan published on 2 August 2021 entitled "Building Forward — Consolidated Covid Recovery Plan" [**Exhibit PG1/01 – INQ000101002**] also known as the 'Building Forward Plan' was a TEO-led document which was agreed by the Executive. It set out interventions to be developed over 24 months. Each intervention was to be implemented by the Department responsible for that intervention. Monitoring and assessment of each intervention should therefore have been taken forward by the relevant officials in each department, in conjunction with their respective Ministers who were ultimately accountable for the actions of their departments.

Overarching and thematic issues

Scientific and medical advice to Ministers

10. I was concerned about the way in which data was produced in Northern Ireland, particularly in relation to the recording of cause of death. This was because deaths were recorded as 'Covid deaths' not only where Covid was the direct cause of death but also where a person may have died with Covid as opposed to of Covid. In addition, by the time I took office, the method for determining the R-rate depended on people testing and recording the result, to give an accurate assessment of spread. It is my view that the public had complied with requirements around this more faithfully earlier in the

pandemic, but as time went on, people became less concerned about the test results, and less compliant with recording the result. I believe this was because a level of fatigue had developed. Initially when testing became more widely available, there was a high level of testing. However, as time went on, some people were concerned that if they tested and were positive, they would have to self-isolate, and miss work or social events, or tell others with whom they had been in contact, causing them to have to self-isolate. Many people had also had Covid by this stage and this made them less concerned that they might get seriously ill. This was certainly the impression I developed from speaking to people. Moreover, Ian Young would have regularly indicated that the R-rate in the Republic of Ireland was not as accurate as NI or other parts of UK because of the difference in how it was reached. He also indicated regularly to the Executive Committee his belief that the R-rate in Northern Ireland was higher than what the modelling showed. I cannot be definitive as to when this took place but this comment was made by him during his briefings to the Executive. I did not, nor do I recall any other Minister asking how a more accurate calculation could be achieved. These concerns undoubtedly influenced the value placed upon data such as the Rrate by Ministers and others as time went on. However, the modelling itself was carried out by officials with expertise in this area. I'm not aware of how reliability questions influenced the way in which modeling was performed, but the perceived reliability did affect the weight placed on the modelling when determining how to respond i.e. there were times when there was concern about how much confidence to place in the modelling in terms of the potential outcomes such as hospitalisations, or deaths. The views of Ian Young carried significant weight and will have influenced all Ministers in reaching decisions. It is my recollection that issues around concerns related to the reliability of data was raised in Executive discussions at which the CSA presented. I cannot be more specific as to dates or examples. However, in general the modelling was explained by the CMO and CSA and showed the best case, worst case and likely impacts i.e. reflecting the range of possible outcomes.

11. I am not aware of any specific issues as to the ability of the Public Health Agency ("PHA") to play a significant role in the pandemic response.
12. I consider that the most effective way for scientific and expert advice to be provided to me was by the CMO and CSA speaking directly at Executive Committee meetings, although the data and figures were also presented in papers in advance of the meetings. Usually the Covid response was the first item on the agenda. The CMO and CSA would generally lead with a presentation which would include information such as pressures in hospitals, and in particular ICUs; case numbers; and data on the uptake of vaccinations. The CSA would provide scientific data, for example on the Rrate. In respect of decision-making, the CMO and CSA would have given their views on what impact certain measures would have on the R rate, and this would have been taken into account by Ministers in decision-making. By the time I took office, the presentation of data and the briefings had developed a rhythm. Therefore, generally speaking, it was possible to see a pattern in the data and, as Ministers, we knew where we were in terms of modelling and had an idea of the trajectory for case numbers from week to week and the modelling was able to give us a fair idea of what to expect in the following four

to five weeks. TEO brought forward papers to the Executive following ministerial engagement between FM and dFM and the Minister of Health supported by relevant officials in the formulation of papers. FM and dFM Special Advisers, when necessary, would have engaged in dialogue to reach agreement on points of detail including discussions with the Health Special Adviser.

13. I believe that the Executive was generally able to access the medical and scientific data that was available to the UK Government. If Northern Ireland requested access to data, for example, arising out of information we were given on a 4 nations call, I believe that this would have been followed up and subsequently provided. Certainly, I was not made aware of any particular difficulty in accessing information or data. Liaison about the flow of scientific and medical information would have been a matter for Department of Health ("DoH") in the first instance, and then filtered through to the Executive as needed. Thus, the Executive tended to be furnished with data on the Rrate; case numbers; modelling; advice on what factors were influencing transmission; and pressures, for example in relation to the numbers of available ICU beds.
14. One concern that I did have at various points was what could be characterised as an over-reliance on health factors such as modeling and advice regarding limiting the spread of the virus, without sufficient data and modeling being presented on, for example, the impact of measures being introduced to contain the spread on the economy and education, and the knock-on effects thereof on people's health and wellbeing. I was concerned that within the public, people's fears were influencing their decision making rather than applying a more rational and balanced approach to measures that could be taken i.e. people being afraid to leave their homes to go for a walk, or refusing to go into work despite mitigations being in place. This was primarily in the Northern Ireland context as these were the decisions with which I was directly concerned.
15. As information gathering was primarily a matter for the DOH, and, outside of Health, for other departments and their officials, I am not aware of the precise systems or structures used.
16. The Joint Biosecurity Centre was very useful in providing guidance and recommendations on the response. The Health Minister and the DOH would have been most directly engaged with the Joint Biosecurity Centre, and would have considered its recommendations before presenting Northern Ireland-tailored recommendations to the Executive. The outworking of this was that the Executive tended to follow the Joint Biosecurity Centre guidance. Thus, for example, on 24 June 2021, as the Northern Ireland Office noted:

"NIE have largely aligned previous JBC advice and MCS colleagues have not indicated divergence from JB recommendations. The recent inclusion of DAs at Covid-Os has also been well received given the NI DOH is part of the decision making process. We therefore do not anticipate the NI Health

Minister diverging with the JBC advice and expect he will make similar recommendations to the NI Executive in July. "

[Exhibit PG1/02 - INQ000091497]

17. I did not have any concerns that SAGE was too 'England-centric', nor do I recall this ever being raised with me.
18. In terms of concerns about the publication of 2 R-numbers, I consider that by the time I took office there was a better understanding of how the virus spread and by that stage each devolved administration was largely responding in a manner suitable to their area based on local data.
19. Indeed, at that stage, I believe that the R-number was widely understood, and that a range of data sources were used to produce it. Some Ministers would have questioned the basis on which it was calculated, and what impact this would have, most notably in my recollection, Edwin Poots. Other Ministers accepted the presented R-number without questioning how it was reached.
20. As set out above at paragraph 14, modelling was a tool that informed decision-making by the Executive but was not the only basis on which decisions were taken. I believe the approach to decision-making evolved as the pandemic progressed. By mid 2021 onwards, as well as taking into account factors such as hospital capacity and hospitalisation rates, the impact on vulnerable groups, the economy, and wider health impacts of restrictions, we also had to take account of vaccination numbers; the impact of booster campaigns, and the different behaviour of new Covid variants. However, I was not aware of any issues specific to Northern Ireland as to the reliability and availability of data to inform modelling, except perhaps insofar as it was difficult to obtain Passenger Locator Form data from the Republic of Ireland on the numbers of people travelling across the border having arrived on international flights into Republic of Ireland.
21. I believe that the Executive used behavioural science and management extensively in the response to the pandemic, albeit I am not sure to what extent behavioural scientists were involved in formulating the Northern Ireland-specific advice from DOH.

Reinforcing simple messages like 'Stay at Home, Protect the NHS, Save Lives' and 'Hands-Face-Space', which I believe were based on behavioural science, generally found fairly widespread support. Consideration as to how people would respond to measures taken by the Executive was also a regular feature of discussion with different views being expressed as to the merits or otherwise of various approaches. However, I do take the view that in some instances it is perhaps more accurate to say that certain Ministers relied on what they termed behavioural science to reinforce their positions i.e. the arguments made in favour of maintaining restrictions, and, for example, using coercive methods to promote vaccination, tended to rely on speculation, without any clear scientific basis, as to how the public might respond in any given circumstance.

This made it very difficult to lift restrictions in any phased or nuanced way as the DOH officials, Justice Minister and Infrastructure Minister, in particular, pushed the narrative that universal approaches were best and that any lifting of restrictions would necessarily dilute compliance in other settings. Regrettably, I believe that this had a negative impact on, for example, people who might be subjected to domestic violence and those whose mental health was suffering as result of restrictions, and that not enough flexibility was given to account for people with disabilities for whom facecoverings created real difficulties. Moreover, more widely, I was also concerned about all the people who missed opportunities for cancer to be treated at an earlier stage because of steadfast opposition to restrictions being lifted, and I was opposed to making Covid passports mandatory as I believed that this would exclude and marginalise certain sectors of society. In addition, I disagreed with organising concerts to incentivise (or, more accurately, coerce) young people into being vaccinated. While it is likely that the CMO and CSA were feeding in some behavioural science from SAGE, and we did receive data to demonstrate the level of compliance with measures such as data on traffic movements, I do not recall being briefed directly by experts in the area. Overall, I believe some of the restrictions went too far. In particular I would have been much more reluctant to close schools, particularly when it was apparent that children were at less risk from Covid-19. I also believe that at times the messaging was too simplistic i.e. while the "Stay at Home" message was effective, there needed to be greater nuance so that, for example, it was made clear that those suffering domestic abuse could leave home.

22. Submission of late papers to the Executive was not a new issue nor was it unique to the pandemic. It has been a constant source of understandable frustration for Ministers while the Executive is functioning. Part of the reason for this is the need for FM and dFM to agree the agenda and the papers to be presented. During the pandemic, the need for this agreement was a particular issue when it caused delay in Ministers receiving significant papers from DOH about proposals. This meant that at the outset of Executive meetings, there tended to be time spent on airing concerns over this issue before the substantive agenda could be reached. Minister Long and Minister Mallon would be particularly aggrieved about this as the process by which papers had to be agreed between FM and dFM, and during the Covid response, were also usually agreed with the Health Minister, meant that they, as the only Alliance and SDLP Ministers, had less time to formulate their positions. This issue was a distraction but did not have any material impact on the decisions reached. For the most part, Ministers would have been aware of the substantive issues contained within papers given that most issues rolled forward and were the subject of continual discussion.
23. Notwithstanding the comments I have made regarding the use of modelling and the Rnumber, in general, I do consider that the scientific and expert advice I received was sufficiently timely, detailed and reliable and allowed for a proper foundation for decision-making. It was also sufficiently clear and accessible.

24. As outlined above at paragraphs 13 to 17, I believe that there was sufficient access to the medical and scientific advice, data and expertise available to and used by the UK Government and that having such access as part of the UK was a considerable strength for Northern Ireland.
25. As a Minister, the ability to take on board scientific advice and interrogate the basis upon which it is predicated is important, but I consider that how you then apply that advice is perhaps more important. The Executive Ministers had to consider the scientific advice alongside all of the other considerations pressing upon Politicians and Senior civil servants. It is the ability to consider the totality of the situation and not just one perspective or element that is important for decision-makers. 'Follow the science' was and is a lazy strapline used by a range of people who couldn't articulate substantive reasoning for the position they took and was designed to close off rational consideration of the issues.

Relationship with the United Kingdom

26. The primary structure used during my tenure to facilitate intergovernmental relations was the 4 nations forum, more commonly referred to as the '4 nations calls'. These were convened by UK Government and chaired by Michael Gove, first in his role as Chancellor of the Duchy of Lancaster, and then, from October 2021, as the Secretary of State for Levelling Up, Housing and Communities and Minister for Intergovernmental Relations and Devolved Administrations ("SOS Gove"). Meetings were convened regularly, usually weekly, but sometimes with longer intervals.
27. I consider that these meetings were very helpful from an information-gathering standpoint. The meetings would often begin with an update on the current data and the steps being taken within each jurisdiction, and allow exploration of issues affecting each nation. A common theme was the need to follow a broadly aligned approach, particularly in relation to messaging.
28. However, I would not characterise these meetings as facilitating '4 nation decisionmaking' per se. Rather, my overarching impression and recollection was that each nation would be asked for, and would give their view on, policy matters being discussed, but I did not believe that those views were shaping UK-wide decisions in any meaningful way. Indeed, often the calls were a means of communicating UK Government decisions after they were made, and, as a courtesy to the devolved administrations, shortly before the decision was announced. There is an inevitable tension between a Sovereign central government and devolved administrations in terms of where power should lie, that makes consultation with devolved administrations difficult, particularly where there are different political parties with differing political agendas in play. However, it is important for central government, insofar as possible, to show appropriate respect for devolution and permit devolved administrations to make decisions suitable to their own needs.

29. I believe that the approach of the 4 nations and the relationship between the devolved administrations and UK Government was successful. There is much to be positive about. The 4 nations forum calls and use of COBR were each useful mechanisms to facilitate communication to inform decision-making in each jurisdiction. The transition of decision making from COBR and Ministerial Implementation Groups ("MIGs") to COVID-O and COVID-S took place before I took office and therefore I cannot comment on the effectiveness or otherwise of MIGs. I found COBR meetings to be very useful albeit my experience of these was confined to those called to deal with the risk of the Omicron variant in December 2021 **[Exhibit PG1/03 – INQ000232640]**; **[Exhibit PG1/04 – INQ000232641]**; and **[Exhibit PG1/05 – INQ000232611]**.
30. Northern Ireland benefitted from being part of the Union as it had access to wider scientific and medical expertise and data, which was based on larger population figures.
31. I am aware of Ms Michelle O'Neill's statement to Module 1 in which she alleges that actions by the British Government hindered our ability to reach consensus. However, this assertion is entirely unsupported by any detail and, in any event, I cannot think of any instance of this and therefore I do not agree with her.
32. I do not recall the SOSNI/NIO meetings concerning Covid-19 as playing any significant role in the substantive response. From a review of the minutes of the meetings, issues were discussed at a fairly high level, albeit with, for example, on 7 July 2021 clarification being sought on funding for Northern Ireland in the context of restrictions coming to an end in England **[Exhibit PG1/06 - INQ000232638]**. In the meeting on 26 January 2022, SOSNI provided an update on Omicron and made reference to a request by the Health Minister in Northern Ireland, Robin Swann, for Military Aid to the Civil Authority (MACA). There was discussion around whether a draft budget would be announced before purdah, and he indicated he was due to meet with Liz Truss to discuss the Northern Ireland **[Exhibit PG1/07 - INQ000232639]**.
33. As indicated above at paragraphs 26 to 28, SOS Gove met regularly with the leaders of the devolved administrations. This was the primary forum by which UK Government engaged with the DAs. SOS Gove, in his respective Ministerial roles, was responsible for coordinating (to the extent possible) the response of the four nations. He provided continuity and I was glad that the responsibility continued to lie with him after his Ministerial role changed in September 2021. As such, in the meeting of 7 October 2021, I congratulated him on his appointment **[Exhibit PG1/08 - INQ000232612]**.
34. In my dealings with UK Government, I was not aware of a lack of trust, and certainly there was no lack of trust on my part. Rather, the UK Government interacted with us regularly and freely shared data and information about policies.
35. During my period in office, the North South Ministerial Council ("NSMC") was not sitting in plenary. My party had initiated a boycott because of Brexit-related NI Protocol concerns. I understand that when Baroness Foster was in post that NSMC meetings were held but Protocol issues were not discussed. However, I do not consider

that even if the full NSMC had been sitting, this would have been an appropriate or effective decision-making forum to deal with the Covid response. The NSMC generally meets once every six months and is not suitable for managing North-South cooperation. The meetings are generally highly orchestrated and not designed for facilitating decisionmaking on an ongoing day-to-day basis.

Relationship with Republic of Ireland

36. Given the legal and financial framework of Northern Ireland within the UK, it was inevitable that the approach taken would align to a greater or lesser extent with the UK. National policies made available by the UK Treasury necessarily led to similar policies being adopted across the UK, and, therefore made alignment with the Republic of Ireland less likely on a practical level.

37. In my role as First Minister, my approach was to make decisions based on what was best and achievable for Northern Ireland within the legal and financial framework within which we had to operate. In the table of restrictions/measures there was a section including measures in Republic of Ireland and these would have been considered in the context of measures being taken by the Executive, for example, closure of nightclubs in Republic of Ireland, and what this would mean for cross border movement of people. When the Irish Government took the decision to close nightclubs, they did so without reference to Northern Ireland. This had an impact, particularly in border areas, as it drove people to cross the border to venues in Northern Ireland. In addition, the Republic of Ireland Government introduced a policy whereby visitors entering the Republic from GB were required to test for 5 days, but if those travelers landed in Northern Ireland and then crossed to Republic of Ireland, they would not have to test.

This decision was taken without dialogue with the Executive despite it creating a loophole that would tend to expose Northern Ireland to greater risk by increasing the number of passengers entering. I therefore engaged with the Taoiseach and Foreign Minister about this on 1st December 2021. Robin Swann had also consistently expressed his frustration at the failure of the Republic of Ireland to provide information in respect of passenger locator details for people arriving into Dublin and travelling into Northern Ireland. The desire for greater All-Ireland cooperation was not surprising for republicans and nationalists given their ideology but these actions underscore why greater alignment was not realistic. However, if there had been clear evidence that greater alignment would have improved outcomes, and been workable in practice, I would have adopted that approach notwithstanding the fact that I believe in the Union with Great Britain. Indeed, this has been the position with the DUP for some time. For example, prior to Covid, when Edwin Poots, a member of the DUP, was Health Minister, policies were implemented to improve collaboration between Northern Ireland and the Republic of Ireland on health matters when mutually beneficial. I would take a similar approach.

38. I do not believe the idea of treating the island of Ireland as a Single Epidemiological Unit for humans was ever given any serious consideration during my period in office.

I therefore was not briefed on, nor had reason to consider, what this would have meant in terms of approach. However, I am not convinced that this would have worked as the movement of people is not the same as the movement of animals. The borders are much more porous for humans, and it would have been difficult, particularly given the challenges that we did experience in collecting data from Republic of Ireland in relation to the movement of people, and the fact that the funding of interventions came from UK Government, to align more closely such that the island was treated as one epidemiological unit.

39. The Memorandum of Understanding ("MOU") was signed in April 2020, a year before I took up post as First Minister. I believe the affirmation contained within the MOU should have reflected the approach taken irrespective of whether the MOU was created or not i.e. practical cooperation between Northern Ireland and the Republic of Ireland where beneficial, should have occurred. However, I have accounted for my experience of North South Co-operation or the lack of thereof above at paragraph 37. Therefore, as, for whatever reason, there was a lack of timely dialogue on certain issues, it does not appear to me that the MOU made any material difference. The impetus for its creation is likely to have been political i.e. permitting Sinn Fein to be seen to be driving closeness and alignment with the Republic of Ireland, but I do not believe it resulted in any substantive change of approach to intergovernmental relations.
40. I believe the CMO and CSA in Northern Ireland had a good working relationship with their Republic of Ireland counterparts and I consider that these relationships likely did develop as the pandemic progressed, and it was right that they did so. However, in terms of other means or structures to facilitate a greater degree of cooperation and coordination, this would be, in the first instance, a matter for the UK Government and the Irish Government, as the two Sovereign governments, rather than for the Executive. Nevertheless if the political will was there, it would likely have been possible for means of greater communication to be put in place.
41. I am not aware of any review of the MOU being instigated during my period in office.
42. I cannot point to any particular piece of formal research being commissioned by TEO about the impact of Covid-19 along the Irish border during my tenure, though there may well have been. However, I do recall regular consideration of the movement of people around border areas, and the implications that restrictions might have across each jurisdiction, but I do not believe that this consideration led to any intentional policy alignment.
43. However, I reject the idea that comparative analyses of health outcomes are 'actively discouraged' between administrations, north and south. Rather, my experience, since being involved in Government in Northern Ireland, and as outlined above, is that the two administrations have worked closely, particularly on health issues, to deliver for people in both jurisdictions. There was never a reluctance to learn from the South, share data, or make comparisons, and in fact while Edwin Poots was Health Minister, there were a significant number of initiatives driven forward such as a shared paediatric

cardiology service. A more significant factor in my view, as to why more was not done to align with Republic of Ireland, is that the CSA regularly voiced concern about comparing our R-rate data with ROI data as he considered that the R-rate in ROI was higher than the data suggested. It was therefore difficult to determine whether any particular strategy or intervention adopted in ROI was better than what Northern Ireland was doing.

44. I consider that the timing of announcements by Republic of Ireland was more likely to have caused problems for the Executive in Northern Ireland during the first wave of the pandemic as decisions on relaxations/restrictions had an impact on the movement of people between both jurisdictions and created public discourse around the perceived inconsistencies of different measures in each jurisdiction. This in turn placed pressure on the Executive to respond. The same was also true of changes in measures by other countries within the UK but these did not have the same immediate impact on the movement of people. By the time I took office, the public were clearer about the role of the Executive in decision-making and, I believe, more aware that decisions were being taken in Northern Ireland, on the basis of what was best for Northern Ireland.
45. It is questionable whether there was any broader reluctance on the part of Republic of Ireland to share information or promote cooperation. The explanation given by the Tanaiste in the Quad meeting of 9 June 2020, that there were practical issues in discussing measures with the Executive before the Irish Cabinet, seems plausible to me, not least because there may have been concern that information might be shared back to Sinn Fein in Republic of Ireland which would undermine Irish Cabinet decisionmaking. Having said that, this was prior to my period in office and therefore I was not directly involved at this time. I am not aware of any other barriers, whether political, diplomatic, practical or otherwise affecting cooperation. The creation of the MOU was a direct attempt to reinforce the importance of harmonisation and co-operation between Northern Ireland and the Republic of Ireland. I am not aware if any formal review seeking to determine whether better outcomes might have been achieved if there was greater alignment has been prepared, whether prior to, during or since my time in office.
46. I believe it is very difficult to compare the outcomes as between Northern Ireland and the Republic of Ireland because of differences in how data was collected. For example, I am not sure how the Republic of Ireland recorded deaths i.e. whether the figures only included deaths attributable directly to Covid, or, if like Northern Ireland, death figures included those people who died having had Covid in the last 30 days whether, or not, Covid had any causative role in the death. Certainly, from my direct experience, it was difficult to compare the figures in live time. For example, the reliability (or relative lack thereof) of the rate of infection data being reported by Republic of Ireland was a regular feature of the CSA's commentary at Executive meetings, and therefore I did not consider the figures comparable at that stage. However, overall, my sense is that the two countries were likely broadly similar in terms of outcomes.

47. In any event, I consider that alignment with the UK was the better option for Northern Ireland. The primary reason for this is the fact that Northern Ireland greatly benefitted from funding from UK Government, via the Barnett consequential and also via direct funding mechanisms such as the furlough scheme. Information sharing with UK Government also worked well and shared messaging was effective in terms of encouraging compliance. This can be contrasted with the difficulties in communication between Republic of Ireland Government and the Executive, discussed above at para 37. The joining up of medical and scientific expertise across the United Kingdom, with the UK being advised by world-leading scientists, was also a clear benefit, and the flow of the scientific advice to Northern Ireland was well-managed and contributed positively to the response. When Omicron began to spread, UK Government responded quickly and involved the devolved administrations in a fulsome way, particularly via the use of COBR meetings. For example, during my period in office in late 2021, the UK Government data showing how the virus was spreading in South Africa, and data on the spread of Omicron in London and other parts of the UK was shared with us, which helped us understand the spread and impact to better predict when it would emerge in NI. This helped us with our preparations for the booster campaign that took place during my time to increase the protection against Omicron.
48. There were also coordinated efforts across the UK to keep communications effective and aligned. During my period in office, there was agreement at political level about the need for clear public health messaging and I do not recall any significant debate about the form that should take. Uniform messaging such as the 'hands-face-space' slogan, and use of UK-wide publicity campaigns ensured consistency and reinforced messaging. The vaccine roll-out and booster programme was another area where being part of the UK-wide response was beneficial, with those in Northern Ireland receiving the vaccine ahead of the public in Republic of Ireland. Indeed, it was this advantage that led to the EU threatening to trigger measures to take vaccines from Northern Ireland under the Northern Ireland protocol in January 2021.

Legislation and regulations: their proportionality and enforcement

49. Criminal sanctions had first been introduced during 2020 to enforce the Regulations during the initial lockdown. When I took up office, there was debate about whether enough was being done to enforce the regulations, and there were also regular discussions about whether measures should be contained by way of guidance or regulations with criminal sanctions attached. The Health Minister, CMO and some other Ministers were concerned that the restrictions were not going far enough, and not being properly enforced. I recall the CMO in particular expressing the view that criminal sanctions were necessary to reinforce the importance of compliance. However, the PSNI used the "4E" approach of 'engage, explain, encourage and enforce' and as such enforcement by way of criminal sanction was a measure of last resort. This led to tension between the Health Minister and the Justice Minister, with the argument being made that if the regulations were not going to be enforced, they would become meaningless. There is merit in considering whether criminal sanctions was appropriate

in the first instance however in any event their application should have been as a last resort. With the benefit of hindsight, I would be reluctant in the future to support criminal sanctions as a tool for dealing with a pandemic similar to Covid. I cannot recall alternative means of enforcement being discussed in any substantive way. Indeed, save for ideas such as giving local Council officers and Public Health officials the power to enforce in certain circumstances, I am not clear what alternative there would have been to criminal sanctions and fines.

50. I was not in post and therefore do not know why a compliance and enforcement working group had not been established prior to September 2020. However, in general, as the pandemic evolved and time went on, compliance became more of an issue. Enforcement of regulations and who was responsible was an issue of discussion often between the Health Minister and Justice Minister at Executive Committee meetings. Significantly, the integrity of criminal sanctions for enforcement and public confidence was fundamentally and irreparably damaged in Northern Ireland after the Bobby Storey funeral in June 2020. The actions of senior figures in Downing Street also had a damaging effect on public support for criminal sanctions. Law abiding people followed the law while those who didn't could continue not to do so with little consequence. There were also varying views within the Executive Committee on the proportionality and effectiveness of using criminal sanctions.

51. I cannot comment directly on the specific issues around PSNI enforcement in 2020. However, as outlined above, I believe that, in general, criminal sanctions were seen as a last resort. The emphasis was instead on promoting compliance through public messaging. This was a constant throughout the pandemic on a range of issues. I believe this was the right approach so I was frustrated that compliance and enforcement issues were relied upon as reasons not to lift restrictions by DOH officials including the CMO and CSA in relation to, for example, relaxing restrictions for hospitality — see TEO 3353 DOH meeting on 7 July 2021 and TEO 3384 meeting on 20 July 2021. I believed this failed to tackle the underlying issues in terms of ensuring that we maintained public confidence in the restrictions, by only using restrictions which were proportionate and effective while doing as little harm to people's health, wellbeing and livelihoods as possible.

Scrutiny by the Assembly

52. The Assembly Committees were able to operate and scrutinise legislation effectively during my time in office. The Ad-Hoc Committee in particular was useful as it provided a longer period of time to question the Executive. The normal protocols around time for debate in Assembly plenaries were more limiting i.e. in a normal sitting of the Assembly, an MLA would only be able to ask one question whereas the Committee format allowed for more dialogue. However, in terms of scrutiny by MLAs in the Assembly, a constant complaint from Assembly Members was the time period for retrospective Assembly approval for decisions taken by the Executive/relevant department. I understood this concern as the Assembly would be debating and voting on restrictions of significant public interest that may have already changed at the time

of Assembly consideration, and as a result the scrutiny function was effectively nullified. While I understand that DOH were under pressure, I do consider that in future more should be done to ensure that regulations are brought to the Assembly before they are enacted, or very shortly thereafter, and preferably while still in force. The situation whereby DOH had up to 30 days to bring the regulations to the Assembly meant that the debates were often retrospective and left the Assembly with no option but to take votes on regulations that had already been amended. Having said that, the way in which mandatory coalition operated at the time meant that the 5 largest parties each had at least one seat on the Executive i.e. 80 of the 90 MLAs in Northern Ireland were represented there. This resulted in a greater level of scrutiny and challenge that might have otherwise been the case. In addition, my experience was that while I was First Minister, TEO was able to cope with AQW's and engagement with MLAs. There was a period prior to my tenure as FM when the Assembly Speaker encouraged members not to submit written questions given the volume of AQW's and reported pressures from the Department of Health. This restriction and active discouragement did cause understandable frustration and concern from members of the Assembly.

Funding the response to the pandemic

53. I understand that in the early stages of the pandemic, there was unlikely to be any major issue with funding as the monies made available by UK Treasury were significant. However, I do not know what consideration was given to introducing any NPIs before the UK Government, prior to the first lockdown in March 2020. However, in June 2021 when I took office, generally restrictions were being eased across the UK. My concern as we went into the Autumn/Winter of 2021 was the lack of certainty around funding from UK Government for additional restrictions, or whether funding would be available if Northern Ireland needed to act more quickly, or differently, to UK Government. As outlined previously in my Module 2 statement, this became most acute in December 2021 as decisions required to be taken to respond to the Omicron outbreak. The devolved administrations did not have control over funding and were dependent on Barnett consequential/Treasury funding coming available as a result of interventions announced by UK Government, rather than having clarity at an earlier stage to aid planning at devolved administration level. Thus, in a CDL 4 nations call on 12 December 2021, I have indicated that it is important that if interventions are needed that funding is provided [Exhibit PG1/09 – INQ000232624]. By 21 December 2021 we were advised by HOCS and the Minister of Finance that additional funding for Covid support had been announced by UK Government but the final position was not clear [Exhibit PG1/10 - INQ000232625]. A Briefing paper to the Executive from the deputy First Minister and me titled Final Executive paper E (21) 260 (C) Covid-19 Winter Planning positional paper impact of Omicron variant, states: "Affordability of measures to be taken is a factor in the absence of Treasury funding" [Exhibit PG1/11 – INQ000232626].

Controlling Northern Ireland's borders

54. The ability of Northern Ireland to control its border or impose restrictions on those arriving from the CTA or internationally, was limited. Given the longstanding arrangements for free movement within the CTA, I consider the key issue was controlling international arrivals by requiring pre-testing and compliance with measures once in Northern Ireland. It was easier to deal with international arrivals coming directly into Northern Ireland i.e. by requiring the completion of Passenger Location Forms, but, as outlined above at paragraph 37, there was difficulty in obtaining data from the Republic of Ireland about people arriving into Dublin airport for onwards travel to Northern Ireland. I raised this with the Irish PM and Foreign Affairs Minister.
55. There was thus a need for UK Government to engage with, and obtain key information in a timely way from, the Republic of Ireland in relation to matters affecting Northern Ireland given that as UK Government and Republic of Ireland Government are each sovereign governments, it is constitutionally appropriate for such liaison and requests to come formally from UK Government rather than Northern Ireland's devolved administration. This theme recurred through meetings with UK Government from June 2021 onwards. For example, during a 4 nations call on 23 June 2021, I raised concerns about a lack of information from Republic of Ireland **[Exhibit PG1/12 - INQ000232633]**. This became particularly acute in December 2021. In a meeting on 1 December 2021, I said that "UKG needs to talk to Rol" and have written a note of the same date "Rol —

no comms - no indication of CTA" **[Exhibit PG1/13 - INQ000232634]**. At the COBR meeting of 10 December, it is recorded that I said: "Land border with ROI and need for Dublin Gov to be linked into plans (Michael Gove took ROI link in point onboard)". I raised this again with the Prime Minister on 17 December 2021 when it was recorded that I said: "engagement with Rol is essential as any measures they take impact upon M". The manner of such engagement is a matter for UK Government but I consider UK Government did not do enough to press Rol to cooperate more closely on issues affecting Northern Ireland.

56. Overall, I considered that the traffic light system was easy to understand and worked well. I cannot now recall precisely the methodology around how countries were identified as Red/Amber/Green but believe this was likely to have been mainly a matter that was discussed at departmental level between UK Government and Northern Ireland, in for example, Covid-O meetings, in which I was not directly involved.

Care Homes

56a. I was not in post until June 2021 and therefore I do not know the extent to which Ministers were briefed about the situation in relation to care homes in the first wave of the pandemic, nor the risks in the early weeks. In terms of monitoring the transmission or impact of Covid-19 within care homes, and the operational response, the Executive would have received briefings from the DOH as this was an area within the responsibility of DOH and the Health Minister. During my time as Minister there were no concerns in respect of access to PPE for care homes.

Inequalities

57. During my period as First Minister, TEO brought forward papers to the Executive with input from all of the departments including the Department for the Economy ("DfE"). My experience was that by this stage Ministers were aware of the economic impact of NPIs generally but some had a better understanding/appreciation of the extent of the economic issues than others. I felt I was sufficiently informed and had a good grasp of the issues. I believe that the Covid Taskforce tended to lean towards DoH's position with the CMO and CSA commenting regularly at Executive meetings on their view about what effect measures would have on health concerns. These views often carried considerable weight. This was compounded by the fact that after the Bobby Storey funeral, Sinn Fein almost universally rowed in behind and adopted the DOH position as their position, While I cannot comment specifically on Sinn Fein's approach prior to my taking post as First Minister, it was certainly my impression that Sinn Fein became more cautious about diverging from the position adopted by DOH after the Bobby Storey funeral.
58. Section 75 duties are considered by Government departments as a matter of routine. Therefore, there would have been an expectation that this was taking place but I am not aware of the extent to which there was full and proper assessment of how NPIs would have impacted upon those with protected characteristics. At times, the speed of introduction of measures may have meant that a full section 75 consideration was not completed and papers would have indicated this.
59. Regrettably, my experience was that consideration of the impact of NPIs on vulnerable groups was limited. During my period in office, with the exception of the period during which case numbers rose due to the Omicron variant, restrictions were being lifted. The DUP Ministers and I were concerned with striking the right balance and achieving proportionate restrictions. However, attempts to raise issues such as seeking to create exemptions for vulnerable individuals, or lifting certain restrictions, were often argued against by other Ministers on the basis that they would weaken the overall message or create loopholes that would make enforcement difficult. The main area of concern for me on this was around face coverings and the removal of exemptions during the Omicron period. This policy created controversy and had to be suspended. I agreed with the need to withdraw this approach, however some Ministers did not share this position. This highlighted a concern to me there were those who were failing to properly take into account specific groups of people in society and the need to act proportionately. Prior to my time in office, DUP MLAs were concerned that the Executive was not adequately taking into account the impact of the closure of churches, the restriction on numbers permitted at funerals and the time taken for schools to re-open and the impact that these restrictions were having on vulnerable groups. However, I cannot comment on the extent to which these issues were raised by DUP Ministers at the Executive.
60. Earlier in the pandemic, I also believe that mitigation of the impact of NPIs on specific groups within society who were suffering a disproportionate impact was not given sufficient consideration during decision-making despite attempts by me, and others in

my party, to raise those concerns. In closing schools, for example, there was a disproportionate impact on children who it became clear reasonably quickly were less likely to suffer adverse impacts from the virus. Despite concerns being raised repeatedly, I was frustrated about the continued attempts by some to close schools as a tool to achieve wider objectives for example, an argument that 'People know it's serious when schools close', and therefore take action, or that school closures reduce travel as more people stay at home. I was also concerned that the stay at home message would adversely affect people suffering domestic violence and that there was insufficient consideration given to how to mitigate those adverse effects. I regularly discussed these issues at DUP Assembly Group Meetings where I expressed my views and I also tabled written questions to relevant ministers on a range of Covid-related issues. These questions are accessible online. I cannot comment on the extent to which these issues were raised by DUP Ministers at the Executive as I was not on the Executive at this time.

61. However, overall, I do consider that Northern Ireland had features that benefitted its society. For example, the benefits of devolution within a country of relatively low population is the close proximity of decision makers to their communities. Outwith politics, Northern Ireland also benefits from strong community networks which were able to provide support to people in need, and mitigate, to a greater or lesser degree, some of the adverse impacts of NPIs.

Public health communications, behavioural management and maintaining public confidence.

62. During my period as First Minister, there was a clear communications approach for Northern Ireland Executive decisions. The NI Direct website, advertising, newspapers ads, billboards, were used extensively and to good effect. In addition to planned communications, regular FM and dFM media conferences, often also including the Health Minister were useful in communicating to the public, and the deputy First Minister and I each also gave individual interviews to communicate Executive decisions/positions. I believe the communication strategies were effective. From the point at which I took office, I believe that the public understood that the Northern Ireland government was responsible for measures in Northern Ireland and therefore problems that may have arisen early in the pandemic due to lack of consistency in messaging as between other parts of the UK and Ireland, had largely dissipated.
63. I didn't regard disinformation as a significant issue during the pandemic. It was managed effectively via public health campaigns urging the public to make sure they were receiving their information from authorised and legitimate sources, rather than via social media channels. However, there is a place within a democracy for debate, and it is important to allow challenge and opportunities for those who disagree with a stance taken by Government, to air their views. There also needs to be scope for nuanced debate. For my part, while I welcomed the vaccine roll-out, I personally felt that it was difficult to justify some of the restrictions on personal freedom being

contemplated, particularly around domestic vaccination certification, and was uncomfortable with the idea that people would be 'coerced' through government measures to take the vaccine. For example, on 14 September 2021, I outlined my concerns about the fact that at that time the policy of self-isolation was based on vaccination-status only and did not take account of previous Covid-19 infection. I was concerned that there was an inequality of treatment of people and that people were being judged or restricted on the basis of their vaccination status without a sound evidence basis [Exhibit PG1/14 – INQ000256606].

64. In terms of young people, my experience was that the majority of young people were compliant. For example, within school settings young people were required to wear a face covering for six hours a day, five days a week, and the overwhelming majority complied. If there were issues with vaccine uptake, or compliance with other measures, I believe this was due to the fact that, certainly by the time I took office, it had become apparent that as a cohort, young people were least likely to suffer illhealth due to Covid-19. This, coupled with the devastating impact restrictions had had on young people's education and social development, made young people more resistant to complying with public messaging. I believe social media was one tool used to try to communicate to the younger demographic but I cannot recall any particular piece of work being commissioned by TEO around improving communications with young people. I do not believe there was any correspondence sent by the Children's Commissioner brought to my attention during my time in office.

65. I did not receive threats of physical harm during my period as First Minister. In terms of whether I received abuse, that depends on the definition of abuse which is in my view fairly subjective. For my part, I consider my threshold as to what constitutes abuse is high. Looking back, I would say that I had challenging conversations at times but I believe that, as a person holding public office, I expected people to hold strong views that might be contrary to mine, and that part of my role was to listen when those were expressed to me.

66. I believe the communications approach during my time in office worked well. Within TEO, the approach was to seek consensus which helped ensure joined up messaging at a political level. This in turn assisted in media coverage around key health messages. However, I consider that the damage caused around the Bobby Storey funeral persisted in undermining public messaging from Sinn Fein Ministers. Their credibility was gone and confidence in PSNI was undermined. I also had concerns throughout that the initial statement by the Health Minister that the worst case scenario would result in 15,000 Covid deaths was the wrong approach. It engendered fear and was not balanced by highlighting that the best case scenario was much lower. As time went on, and (thankfully) the worst case scenario did not happen, the public's trust was diminished.

Executive Committee decision-making

67. Forming a Government in Northern Ireland requires a coalition to be formed based on the political strengths of the parties. Whether that coalition is mandatory as in Northern Ireland, or voluntary, the dynamics of achieving agreement on decisions would be the

same. During my period in office, I worked through the process of engagement with the deputy First Minister and the Health Minister so that papers for the Executive could be put forward with an agreed position. This approach meant that there was greater cohesion between the Ministers from DUP and Sinn Fein, and UUP, and allowed more time for wider discussion with other Ministerial colleagues. If one party governed Northern Ireland, it is likely there would have been a different approach, but given the nature of politics in Northern Ireland, it is unlikely that one party decision-making would have been effective in securing support across the community. At the heart of devolution and the Belfast Agreement is the inclusion of all communities. To govern with the consent of the public requires the political representatives from across the community to be represented in Government. My role as First Minister therefore required strong communication skills and effective relationships with political colleagues and key senior civil servants. I recognised that taking a singular position on what I believed was the right approach, would not always secure the consensus required, and which I had a responsibility to seek as Co-chair of the Executive Committee. Having said that I also recognise that in an emergency situation, achieving consensus for decisions in a timely way would be very challenging.

68. The political position of my party colleagues and I was to always act in the public interest. During my period in office, TEO functioned effectively and collegiately. There were areas of difference at times, such as in relation to the mandatory use of Covid passports to which I was opposed, but I believe those differences were managed sensitively, and public commentary on my part was measured. My Ministerial colleagues will have supported the positions taken in papers I presented through the Executive Office to the Executive Committee.
69. The position of the DUP Ministers was the same as that of the party more widely, namely to act in the interests of the people of Northern Ireland. Each of the DUP Ministers took the view that we needed to balance the wide range of issues impacting on Society, with each Minister bringing the particular perspective gained from their Ministerial portfolio to their Executive decision-making. The measures taken across the British Isles were also taken into account given, among other factors, the reliance on UK funding. My experience suggested Ministerial colleagues from other parties took broadly the same approach, however, I do believe that Sinn Fein were also influenced by policy positions being taken in the Republic of Ireland. Indeed, it was a generally held view among DUP colleagues that as an 'All-Ireland' party, Sinn Fein seek to promote policies that insofar as possible mirror Republic of Ireland.
70. During my period as First Minister, I did not have any constraints placed upon me by the Party to take particular positions on issues that were contrary to positions which I had myself taken after considering all of the issues and reaching a view. My Ministerial colleagues supported positions taken in papers I presented as First Minister. My experience of Sinn Fein Ministers was that they also acted collectively in discussions and decisions, and this was part of the reason that it was important for the deputy First

Minister and I to work together to iron out issues and secure agreement, where possible, before putting forward papers to the Executive committee.

- 71 . Where consensus cannot be achieved, the mechanism for requiring cross-community support for Executive decisions can be triggered. This emanates from the Belfast Agreement/St Andrews Agreement. I consider that the cross-community vote mechanism is important and I would not support a renegotiation of the accountability measures contained within these agreements which struck a delicate balance in securing the necessary support within all communities for the establishment of the political institutions in Northern Ireland. During my period as FM the cross-community voting mechanism was not used.
72. During my tenure, I believe the Executive navigated its way through many difficult and challenging issues in a collegiate manner. Notwithstanding differences on some issues including, notably, my opposition to the the mandatory use of Covid Passports, as set above at paragraphs 21 and 68, for the most part decisions were taken collectively. While DOH clearly had a difficult task, I consider that TEO and DOH worked well together, and therefore it was certainly not my perception that DOH considered TEO to be a thorn in its side. However, prior to my becoming First Minister, it was evident there were significant challenges in collective responsibility for the Executive. It was perhaps inevitable that, during an unprecedented time for the Executive, tensions would manifest publicly. This was particularly acute following the Bobby Storey funeral due to Sinn Fein's role in organising and participating at this mass gathering in June 2020.
73. I believe that the Health Minister was adequately supported by the Executive Committee during my tenure. The DOH had a key role in formulating measures for consideration by the Executive Committee. DOH fed into the Executive Covid Taskforce which brought together issues from all departments, but DoH's perspective carried considerable, if not primary weight* in the advice given by the Covid Taskforce, and ultimately the positions taken by the Executive.
74. During my period as First Minister, the CMO and CSA had prominent roles in terms of engaging with the Covid Taskforce to formulate advice, and providing advice to the Executive Committee. Considerable weight was given to their advice but I am not aware of concerns being expressed in respect of the responsibilities they held, or that they had too much power or influence. Ministers were able to, and did, scrutinise and challenge the advice given, but it would have been wrong given their expertise not to rely on the information they each provided. Given the range of political parties and Ministerial portfolios, as well as individual perspectives represented on the Executive Committee, it was inevitable that there would be tension on a wide range of issues, including in the context of the Covid response between health and economic considerations. However, I believe that this is part and parcel of governance in a divided society, and that it is how you consider the information presented, and navigate those tensions that is important. During my period in office, I believe tensions were

effectively addressed and, in respect of decisions about handling the Covid response, were never insurmountable.

75. However, regrettably, leaking of Executive papers was nevertheless a regular occurrence. I came to expect that when TEO papers were circulated to other Ministers, they would be leaked. I am not sure what the motivation for leaking was but it might have been used to undermine a policy or simply to give enquiring journalists information. However, I didn't let this leaking impact on how I discharged my responsibilities, nor did I let it affect my relationships with other Ministers. I continued to carry out my duties as best as I could, and, as part of that, endeavoured to maintain constructive relationships. I do believe that the leaking of information may have had a detrimental impact in public confidence for the Executive during the pandemic as it prevented the presentation of a 'United Front' by the Executive and revealed to the public the tensions and varying views among Ministers. That being the case I did not leak proposed policies or possible amendments (or anything else) to test the public's reaction, or indeed for any other reason.
76. Overall, I believe that the Executive Committee was the most effective structure for the government in Northern Ireland to respond to a pandemic. The magnitude of the decisions taken required democratic legitimacy and accountability. I am not clear that any other decision-making body or process would have achieved a better outcome within Northern Ireland as any decisions required support from all sides of the community. While not easy to navigate at times, the requirement that the Executive Committee, comprised of Ministers from 5 different political parties reach agreement, was highly democratic.
77. In terms of public confidence, I was concerned about the announcement made by the deputy First Minister contradicting the publicly stated position the Executive had taken, on advice, the day previously about schools closing. The issue of school closures was highly controversial, and the Education Minister and others were seeking to navigate the issue carefully, and in line with the advice being provided. The deputy First Minister's intervention undermined those efforts. Given this was also at the early stages of the pandemic, it presented a disjointed public image of positions within the Executive. This not only undermined public confidence but also affected confidence within those in the teaching profession in particular. Similarly, statements issued in or around April 2020 in which Ministers openly criticised other Ministers were unhelpful. There was also political opportunism at play when, for example, the deputy First Minister criticised the Health Minister for "slavishly following the Boris Johnson model". A common theme at this stage from Sinn Fein was the political desire to do things differently to the UK and align with the Republic of Ireland. In terms of other examples of Ministers contradicting collective messaging, I consider that it is inevitable that Ministers would express their key messages at various points throughout the pandemic. While decisions were taken at the Executive Committee jointly, there was a spectrum of views expressed, and around the margins of various restrictions it would be expected that Ministers would comment publicly or within the Assembly about these issues, in a way that did not undermine key messaging. Public disagreements between Ministers are not desirable but I don't believe Ministers expressing their views automatically undermines public confidence. The public can

understand the complex issues being considered, and indeed it can bolster public confidence to know that all perspectives are being given full consideration. I am not sure to what extent public confidence was impacted by the suggestion that rates of transmission were higher in nationalist areas. However, I understand there was surrounding context to the comment in that there was concern that GAA matches and other activities were the source of spikes in transmission.

Communications with ministers, advisers, political party officials and civil servant via electronic device(s).

78. When I became First Minister, I was issued with a NICS mobile phone, and an iPad type laptop device, and I held these devices throughout my tenure. I used Whatsapp and text/imessage on my personal and NICS devices, but did not use Slack or Signal.

79. I communicated with the following individuals: Philip Weir & Richard Bullick, my Special Advisers; Timothy Johnston — DUP CEO and Jeffrey Donaldson — DUP Leader. In terms of the latter I seem to have deleted most of the messages from Whatsapp but found some that I had forwarded to Timothy Johnston for his information. I also communicated with groups on Whatsapp including two groups set up by the Health

Minister to communicate with the DFM and I. I likely had a group with my Special Advisers, and there was a further group between me, my Special Advisers and Jeffrey Donaldson. I deleted these groups after I left office. My communication on these platforms was limited as communication was more usually verbal in meetings and phone calls. The messaging platforms were used to share information.

80. I did not use my ministerial phone for any business but did use the NICS iPad/laptop to access emails. My personal mobile phone was therefore my main source of contact for phone calls and messages. I did not see, nor was I advised of, any difficulty in using my personal phone.

81. In terms of decisions discussed on messaging platforms, there were some limited messages on Whatsapp with Timothy Johnston around the party officers' meetings and decisions taken by the Executive on Omicron. There was little detail in the messages. Other messages were for factual information sharing.

82. I did not take any steps to formally retain or record any communications that took place on either my NICS-supplied mobile or my personal mobile. Any emails that I sent as First Minister from my FM email address are automatically retained on the NICS information system, TRIM. I handed back my NICS devices when I resigned.

83. To the best of my knowledge, informal messaging platforms were not used as an alternative to formal or minuted meetings — they were certainly not used that way by me.

84. I did not delete any material from my NICS-issued devices before I handed them back. I did delete some material from my personal mobile device. When I was no longer First Minister, I deleted the DUP groups that I was a member of with colleagues and staff with the exception of the limited messages I still have between Timothy Johnston and me. I deleted the groups/messages as I was no longer in the role and were no longer relevant for me to be involved in or retain. This was not on foot of any policy and the deletions were done manually. I do not know how many messages I deleted and I do not know what the subject matter of the deleted messages was — entire groups were deleted and therefore all content was removed irrespective of subject matter. I do not know what steps have been taken to retrieve the content of my NICS device.
85. As indicated above, my NICS-issued devices were handed back to my Private Office when I left post. I did not delete any material before handing these back.
86. I do not know whether these devices were wiped, cleansed or factory reset after I returned them to NICS.
87. I still hold the personal mobile device I held during my period as First Minister.
88. I do not know what precisely what 'chat' refers to but during online Executive meetings, the chat function may have been used by a Minister to signal that they wished to speak.

I am not aware of it being used to share any substantive information.

Personal notebooks

89. I made some handwritten notes in notebooks during my time in office. The notes were used to help me remember information from meetings. These have been provided to the Inquiry.

Lessons Learned

90. The information received by the Executive on health impacts focused almost exclusively on the impacts caused directly by Covid and therefore the prevention of Covid spread was seen as paramount. As such, there was a failure to address concerns about wider health issues and this is now clearly evident. For example, the lack of understanding of the impact on children by stopping education in schools in terms of both academic and social development is now plain to see. There were also particularly acute issues caused by prolonged isolation and depriving people the ability to visit family and friends in hospitals but there were also many other hugely negative consequences of widescale lockdown that are now, unfortunately, well-known.
91. I believe the focus on Covid spread was to the exclusion of achieving a balance, and recognising, and limiting the harms caused by prolonged and widespread restrictions. This focus was fed by a dependency on worst case scenarios arising from modelling to formulate advice and recommendations to Ministers. My impression is that the worst case scenarios were often relied on heavily by the CMO and Health Minister, rather than a more balanced view of the relative risks being presented. Indeed, this was most

clear to me when pressure was being applied to lock down to respond to the emergence of the Omicron variant, and clearly showed a lack of balance, and understanding, about the impact that previous lockdowns had had.

92. In terms of the lessons to be learned around information sharing and communication, I think there was a blurring in the wider public as to official information, for example, that published on the NI website and advertising produced by government, and commentary by media and politicians which differed from the 'official' line in terms of emphasis and priorities. I do believe that communication was too 'fear-based' with the deployment of strategies intended to change behaviour using 'guilt techniques', for example, relying on the idea that in complying with restrictions, the public were 'doing it for granny'. Playing on people's fears created panic and regrettably had long term impacts on people both in terms of inducing and increasing levels of anxiety in members of the population, and diminishing public confidence.
93. Overall, in relation to the functioning of the Executive and government decisionmaking, I believe that the Executive Committee responded to the unprecedented events well. There were some tensions, but given the pressurised environment, complicated by the dynamics of a five party coalition government, this was to some extent inevitable. However, in my experience, Ministers put politics aside when necessary, and insofar as possible, to work for the people of Northern Ireland. During my period as First Minister, the development of the Autumn Winter plan was useful in providing a pathway which assisted in a managed approach to the pandemic and pathway out of restrictions. Of course, lessons can be learned but no amount of preparation and training could have been provided to deal fully with what unfolded.
94. With the benefit of hindsight, there are, however, fundamental questions that need to be addressed about the merits or otherwise of adopting lockdown measures. For example, I have continued concerns about issues such as the impact on people's health due to delayed detection and treatment of cancer; the denial of education and the impact on children from closing schools; and the emotional distress and trauma caused to families that could not visit their loved ones when severely ill and in their final moments. I also believe that serious consideration needs to be given in future to the ethics around the curtailment of personal freedoms and denial of services because of one's vaccination status, and whether any such proposal or measure can ever be justified, and indeed whether it is effective, or if it is a step too far in a democracy.
95. Finally, the Health Service requires significant investment to allow it to be better prepared for any future pandemic. I believe the lack of capacity within the health service to manage the pressures from the pandemic was ultimately borne by wider society through the imposition of restrictive measures. If the Health Service had been better prepared, I consider many of the most severe restrictions could have been avoided, and the experience of people who came into contact with the Health Service during the pandemic, would have been greatly improved.

Statement of Truth

I believe that the facts stated in this witness statement are true. I understand that proceedings may be brought against anyone who makes, or causes to be made, a false statement in a document verified by a statement of truth without an honest belief of its truth.

Personal Data

Dated: 15.2.24