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Public statement by advocacy group Protect our Province NB (POPNB) regarding recent news of the COVID-19-related death of a child under 5

Our thoughts are with the family and loved ones of the young child who passed away this month. Our condolences and support to you. This tragic and potentially preventable event was made public in the weekly Respiratory Watch report published March 25th.

This week's news is upsetting as New Brunswick has experienced the potentially preventable death of a very young person. We can only say *potentially*: our group recently reported on the significance of the changes in the definition to a COVID death in NB, which occurred in 2023. No other reporting on this change has put it in the same context or explained the significance to the degree that our volunteer group of citizens has, which you can read here: <https://popnb.substack.com/p/cultivating-the-myth-of-transparency>

New Brunswick's change, falsely explained at the time as conforming with other provinces (it does not), means reported COVID-19 deaths are those that occur in a hospital while a patient is known to be positive for COVID-19. In contrast to deaths reported from 2020-September 2023, which were reported if COVID-19 was listed as a *cause of death*, there is no longer any causation directly linked with the deaths, which makes moments like this one particularly challenging. We should rightly be able to take the government to task for failing to prevent this tragic death, but the change in definition of a COVID-19 death leaves room for the cause of death to be more broad than this communicable disease.

From our reporting linked above, which is drawn from documents obtained under the Right to Information act, the public and those involved in the government should plainly be able to see the results of changing the reporting of COVID-19 deaths: **as many as two thirds of COVID-19 deaths in NB are not reported publicly at all anymore**. The deaths reported in the weekly Respiratory Watch are a significant undercount. Additionally, we had previously requested through Right to Information data relating to 30, 60, and 90-day mortality data associated with COVID-19 and had been told at the time that such data did not exist. Meanwhile in 2025 we were given this data. You can see the significant discrepancy in our original reporting linked above.

While the change in COVID-19 death reporting occurred under the Higgs government, as did the initial denial of data relating to 30, 60, and 90-day mortality, the responsibility for this child's death in March 2025 lies with our new Holt government.

The current NB provincial government ran on an election promise of clean air in public buildings. The NB Liberal party brought forward an opposition motion in June 2023 regarding an update to the Clean Air Act. During the ensuing 90-minute debate in the legislature, various members of the current provincial Liberal government openly stated the importance of clean indoor air and the hazard of airborne diseases.

You can read the party's statements yourself starting on page 59 of the journal of debates from June 8, 2023: <https://forms.office.com/r/eR0pnhHCmm> Motion 36 read in part:

"Whereas the COVID-19 pandemic brought home the reality that if we don't improve air quality systems in government buildings like schools, hospitals, and institutions, we increase the risk of the spread of airborne illnesses; Whereas air quality in these buildings must be improved for the safety and well-being of patients, healthcare workers, students, educators, employees, and all who enter these buildings; ... Whereas air quality in these buildings must be improved for the safety and well-being of patients, healthcare workers, students, educators, employees, and all who enter these buildings; environmental health should be a priority of Government; BE IT THEREFORE RESOLVED that the Legislative Assembly urge the government to modernize New Brunswick's air quality laws and standards with a goal of bringing forward a strengthened Clean Air Act and modernized regulations."

That motion passed unanimously on June 8, 2023. And yet what has actually been done?

Make no mistake: the current government *does* understand that the primary route of transmission of COVID-19 is inhalation of virus-laden aerosols. And yet, our healthcare system continues to act as if transmission of COVID-19 is primarily by droplet or contact routes. Only droplet/contact protocols are required within NB hospitals for COVID patients, despite the scientific consensus that SARS-CoV-2 is airborne. Patients in different areas of NB don't even receive the same safety measures during their care: the Vitalité health authority has never brought back required masks since dropping them in spring 2023 (though masks are required when a unit has an active COVID-19 outbreak, closing the door after the horse has left the barn). In contrast, Horizon brings back required masks in patient-facing areas seasonally, although enforcement is very lax.

Children, particularly children under the age of 5, have very little agency. **This child was not able to advocate for their right to breathe air free of aerosolized virus.** This child did not have the agency to educate the adults around them about the importance of clean indoor air. This child was not responsible for informing education and childcare centres that air purifiers such as HEPA air cleaners in the room successfully remove these virus-laden aerosols from the air. This child was not responsible for informing education and childcare centres that opening windows and even interior doors helps dilute the rebreathed air in a room with fresh air, which reduces

transmission of airborne illnesses. This child was not responsible for informing the public that respirator masks work, that people who are sick should stay home, or that transmission can occur before people feel symptomatic themselves - therefore the standard of clean indoor air is extremely important and helps protect everyone, particularly people like young children who do not have the agency to protect themselves in any other way.

These are all things that our current provincial government could easily do. **Where is the communication on airborne transmission?** Where are the free respirator masks, outside of the ones that POPNB provides to anyone in our province free of cost through mutual aid, or the masks currently available from NGO NB Lung? Where are the free rapid COVID tests, which people in PEI and NS can still obtain - but not people in NB? Where is Public Health, NBMS, the health authorities?

Airborne transmission of SARS-CoV-2 is scientific consensus, and the continued intentional ignorance of this basic fact kills people in New Brunswick. Intentional ignorance of airborne transmission allows healthcare-acquired infections to spread with abandon. Intentional ignorance of airborne transmission means that childcare facilities and schools are still major sites of transmission, since indoor air quality has not been broadly improved or meaningfully changed in these environments throughout the entire length of the ongoing airborne pandemic. The current government is well aware of this. The widespread resistance to communicating the urgent and continued importance of clean air, which would enable people to make decisions to prioritize clean indoor air, kills people in New Brunswick.

We at POPNB are devastated, like all New Brunswickers, to learn this week of this potentially preventable death of a child. And we call on our provincial government including our healthcare and education systems to immediately step up in educating the public and requiring measurable changes to indoor air quality in NB. Actions supporting a new *Clean Air and Water* act were written into the mandate letters of many of the new ministers in our government. **Where is the progress?** While the infrastructure for clean indoor air in the form of improved ventilation systems obviously takes time, **delivering accurate information to the public as well as healthcare and education doesn't need to take 6 months, nor does encouraging people and businesses to use in-room air cleaners such as HEPA air cleaners.** There are many immediate actions people in NB could take that would reduce transmission of SARS-CoV-2, which spreads 12 months of the year and is not seasonal. New Brunswickers deserve to be informed of these simple and immediate actions which help protect their health and everything along with it. Clean indoor air breaks chains of transmission and keeps people in NB healthy. It keeps them in school and at work and out of the hospital. Clean indoor air must come from updated standards and broad public awareness. We can't individually clean the air in a meaningful way - this requires collective action.

We invite the public to sign a new petition urging the Holt government to take swift action on clean indoor air and providing factually accurate information to the public regarding transmission of SARS-CoV-2: <https://chnng.it/HTf9NZfMsk>

We are the volunteers who acknowledge transmission via inhaled aerosols of SARS-CoV-2. We are the volunteers who have been pushing New Brunswick government and media to do better to protect the public since 2022. We directly informed now-Chief Medical Officer of Health Yves Léger of the importance of airborne transmission in an open letter to all the medical officers of health in April 2022, which did receive a response from provincial Public Health. We have taken - and created - every opportunity to inform the institutions tasked with protecting us, such as the health authorities. We have provided written feedback to the health authorities when they have made changes to their policies which actively increased the presence of aerosolized hazards to both workers and patients. We have urged the Office of the New Brunswick Advocate to take action on the ignored hazard of airborne transmission in schools, hospitals, and long-term care. We have urged WorkSafe NB to take action on clean indoor air. We have met and communicated with the provincial Liberal, Green, and even NDP parties regarding airborne transmission. **This is not a lack of facts or deficiency of knowledge issue - they know.** The people responsible for preventing the spread of illness in NB are fully aware that SARS-CoV-2 is airborne - they just don't do anything about it.

We are POPNB, and we are so sorry that this tragic and potentially preventable death has happened here. We all deserve better. Kids and workers have the right to breathe clean air free of harmful substances, including SARS-CoV-2, in schools and in childcare facilities. As do we all, particularly in public buildings. Our government knows this. It's time that we in the public push for immediate actions and outreach to improve indoor air quality that work to prevent deaths like this one.

This is the end of our public statement on this sad event, but you can read on for resources and further information. Thank you for your time. Please push this government to do better - they know better.

Community resources

Mutual aid:

- If you would like free respirators, please contact us (PoPNB) using this form. We also have some rapid tests, mostly expired, though they still do work to detect positive cases.

https://docs.google.com/forms/d/e/1FAIpQLSf2N6cqRrG_XTn0Wo4WFog_xuh80zloPb_d9eVaeQD4IliPUw/viewform

NEW: We have received several donations of air purifiers and are planning to offer a loaning service. Please reach out if you have any air purifiers you would like to donate, or if you run a tool library or other space that could help us to coordinate local lending of air purifiers.

NGOs:

- **NB Lung** is one of the only health organizations in the nation to regularly confront the hazard that COVID presents to the population. NB Lung continues to communicate about SARS-CoV-2. At the moment, NB Lung has a supply of respirator masks that people in NB can obtain for free by stopping by their office or contacting them for masks to be mailed:

<https://nblung.givecloud.co/product/903188E/2-masks-health-care-particulate-respirator-and-surgical-mask>

NB Lung organizes Clean Air Day on the first Wednesday in June nationally:

<https://nblung.ca/our-programs/clean-air-day/>

They also distributed thousands of free rapid tests to New Brunswickers. We are grateful to NB Lung for their leadership - they are just about the only established health-related charity that discusses SARS-CoV-2 and tries to help people stay safe. The public can donate to NB Lung to support their efforts; some members of POPNB donate regularly:

<https://nblung.ca/>

Rapid tests:

- NS and PEI are still making rapid tests available for free for the public. NB is not. You can purchase rapid tests from your local pharmacy or from one of the websites listed here, in the document POPNB created to try to fill the gap left when GNB stopped distributing tests:

https://docs.google.com/document/d/e/2PACX-1vSrgZpCXP1rDto7p7nEwHPvdDfdPclPqTHQ2Duq69T3ARuBNacvJq4hA0GpqUbC9CDeHEKQxF_CgeN/pub

Science communication

Introductory resources for the general public:

- We recommend **Canadian scientist Dr. Al Haddrell's video series**. Dr. Haddrell is from BC but is working in the UK. He is an aerosol scientist and excellent communicator regarding the ways aerosols affect health. You can see his videos here: <https://www.youtube.com/@AlHaddrell>
- Dr. Haddrell was interviewed for **CBC radio's Quirks and Quarks** science show: <https://www.cbc.ca/player/play/audio/9.4223643>
- Quirks and Quarks has been reporting on airborne transmission for years. **In Nov. 2021 they interviewed Canadian physicist Dr. Lydia Bourouiba** on the topic. Dr. Bourouiba works at MIT. <https://www.cbc.ca/radio/quirks/snapping-science-male-pregnant-seahorse-placentas-astronauts-in-labrador-and-more-1.6263003/this-canadian-physicist-knew-years-ago-that-infections-like-covid-19-could-be-airborne-1.6263011>
- **Ontario Society of Professional Engineers (OSPE) Indoor Air Quality reports**. These were published in 2022 and CBC radio in NB interviewed OSPE about the reports, available here: <https://ospe.on.ca/advocacy/government-relations/indoor-air-quality/>
- In 2024, OSPE called for support of a Clean Indoor Air Act in Ontario: <https://ospe.on.ca/advocacy/ontario-society-of-professional-engineers-ospe-calls-for-support-of-clean-indoor-air-act/>
- Canadian engineer and OSPE member Joey Fox maintains the website <https://itsairborne.com/> where he and invited guests publish resources relating to improving air quality in order to prevent disease transmission.
- GNB is investigating adopting ASHRAE 241 as part of a new *Clean Air and Water Act*. ASHRAE 241, Control of Infectious Aerosols, was developed on an urgent timeline at the behest of the US Government in order to assist with reduction of transmission of SARS-CoV-2 and other airborne illnesses. ASHRAE has a 40-minute podcast that discusses the process of developing this new standard. <https://www.ashrae.org/news/ashraejournal/ashrae-journal-podcast-episode-26>
- New Brunswicker Jonathan Dunnett, CEO of Enable Leaders, has written a piece featured on the website of University of Michigan's Erb Institute regarding strategic intelligence and indoor air quality: <https://erb.umich.edu/2024/05/28/using-strategic-intelligence-for-growth-and-resilience-in-a-polarized-world/>

Podcasts:

- Canadian podcast *Public Health is Dead* has a recent episode about airborne transmission. From March 9, 2025 "Something's in the Air" <https://www.publichealthisdead.com/episodes>

- Podcast *Search Engine* episode from March 21, 2025 titled “Viruses in the Air” <https://www.searchengine.show/>
- Show discusses Carl Zimmer’s new book, *Air-borne: the hidden history of the life we breathe*. <https://carlzimmer.com/books/airborne/>

Television news:

- 60 Minutes piece from 2023, updated in 2024, featuring engineer Linsey Marr: <https://www.cbsnews.com/news/indoor-air-quality-healthy-buildings-60-minutes-transcript/>
- Follow-up piece on masks and fomites: <https://www.cbsnews.com/news/face-mask-effectiveness-what-science-knows-now-60-minutes/>

Foundations, Centres, and Institutes (note there are none in Canada!):

- The Corsi-Rosenthal Foundation UK, featuring an article on the Class-ACT RCT run in the UK where classrooms were randomized to have HEPA filtration or not. “...schools randomised to the HEPA arm of the study are reported to have had “illness rates over 20% lower than those in the non-HEPA arm.”” <https://corsirosenthalfoundation.org.uk/articles/class-act/>
- USA: <https://corsirosenthalfoundation.org/>
- Australia: The Burnet Institute’s Clean indoor air project: <https://www.burnet.edu.au/knowledge-and-media/research-reports-plus-policy-briefs/clean-indoor-air/>
- Australia: Thrive IAQ centre at Queensland University of Technology. <https://thriveiaq.com/>
- NB Lung video from Clean Air Day 2023: Corsi-Rosenthal Box build: <https://youtu.be/3kZfuodm7Dc>

Scientific and technical publications:

- The Johns Hopkins Bloomberg School of Public Health has published the **Model Clean Indoor Air Act**: <https://centerforhealthsecurity.org/our-work/research-projects/indoor-air-quality/model-clean-indoor-air-act>, stating “aerosol transmission drives the spread of many infectious diseases, including COVID-19, influenza, measles, and RSV.”
- Publication from the CDC’s Safe Healthcare blog (Jan 2024): <https://blogs.cdc.gov/safehealthcare/draft-2024-guideline-to-prevent-transmission-of-pathogens-in-healthcare-settings/>
- The **World Health Organization’s ARIA tool** (Airborne Risk Indoor Assessment) and related publication: <https://partnersplatform.who.int/tools/aria/>



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- OSPE indoor air quality reports (also linked above): <https://ospe.on.ca/advocacy/government-relations/indoor-air-quality/>
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If a community group of volunteers can find, read, understand, and disseminate resources like the above, including assisting with having these experts interviewed by media in NB, then what is Public Health's excuse for never discussing or applying any of the above? What is the Department of Health's excuse? What is WorksafeNB's excuse for ignoring the hazard of virus-laden aerosols?

We are not paid to do this work. We are parents, we are disabled people, we are caregivers. We range in age from our 20s to our 60s and up. We have worked tirelessly to find and disseminate this information within NB and beyond from 2022 to present. We have had to repeatedly submit Right to Information requests to the government in an effort to understand why action is not being taken regarding airborne transmission, long COVID, and other health and public health matters. We secured our own access to GISAIID to be able to monitor variant sequences being reported from New Brunswick samples. We fund our own travel and participation in public health conferences and other high-level meetings nationally.

Where is our medical leadership? Where are those who purport to be the authorities on caring for the health of New Brunswickers? Why aren't they doing this work? Nobody wants to hold their friends and longtime colleagues (particularly in medicine) accountable for continuing to overlook and ignore this inconvenient truth which results in ongoing harm to people in New Brunswick. There is a leadership vacuum in Canada and in New Brunswick when it comes to acknowledging airborne transmission and talking about - and implementing - the things we can do to improve IAQ and reduce disease transmission.

Our public leaders do not model these behaviours. They consistently appear maskless in large indoor gatherings. We do not see the lessons of COVID-19 implemented including smaller gatherings, outdoor gatherings, respirator use in indoor settings, modelling of use of air cleaners or CO2 monitors and talking about how to plan events with reduction of disease transmission in mind. Ignoring COVID does not make it go away; we have been fortunate since fall 2024 that the variant landscape has been somewhat stable. And yet you can see from wastewater monitoring that transmission continues. Fewer people each year receive their COVID vaccine, a direct result of the way that Public Health and the government shifted communications around COVID and risk, and a failure to address rampant radicalization and disinformation regarding science and public health measures. The Acadian peninsula does not have wastewater monitoring, like the rest of the province does. Workers are not warned about long COVID. We have no long COVID clinics. Healthcare workers are not kept up to date on the existence of long COVID. The failures to protect the health of the public are so numerous.

Through our taxes, we fund the health system, and currently a significant area affecting human health is largely ignored - airborne transmission of disease. We have been in touch with MLAs, unions, WorkSafeNB, and health authorities on these issues since 2021, and we have the receipts in our sent folders of the many times we have raised these issues - calmly, clearly, professionally, and with high-quality evidence as above. It is not a matter of not knowing - many in power in NB do know. They just haven't taken action based on what is known, and that continues to harm the public.