

DEPARTMENT OF CONSERVATION

OFFICIAL INFORMATION ACT REQUEST:

Unprecedented Vaccination of Endangered Native Birds: Scientific Assessment and Decision-Making Process

J R BRUNING. SEPTEMBER 17, 2026.

BACKGROUND & REASON FOR THIS REQUEST

This request follows DOC's response of 14 September 2026 to OIAD-9589 concerning the 2024–2025 H5 avian-influenza vaccine trial and subsequent vaccination programme for threatened native birds.

DOC refused the remaining information requested under section 18(f) of the Official Information Act, stating that it could not be made available without substantial collation or research and that responding would unreasonably divert departmental resources. DOC nevertheless stated that none of the birds had shown an adverse reaction to the vaccine and that the trial results showed the vaccine to be 'effective and safe'.

I remain concerned that the [publicly released 2025 trial report](#) does not provide sufficient transparency for those conclusions to be independently evaluated. The published percentages necessarily derive from underlying observations and numerical data. It is therefore reasonable to expect that records existed in which the numbers of birds tested, their antibody results, sampling time points and loss to follow-up were recorded before those data were condensed into the published percentages. It would be surprising if the publicly released report were the sole scientific record of the trial results.

The trial involved very small numbers of highly threatened native birds. Yet its principal antibody results are presented predominantly as percentages without consistently identifying the number of birds contributing data at each time point. The report records deaths, incomplete vaccination, difficulties recapturing birds and adverse events associated with capture, handling and blood sampling, but does not provide a transparent individual-level accounting showing which birds remained in the study and contributed to each subsequent result.

For a study involving such small cohorts, the denominators and extent of attrition are essential to interpreting the reported results. A percentage cannot be properly interpreted without knowing how many birds it represents, which animals were followed through successive observations, and why animals ceased contributing data. This information is particularly important where the resulting evidence is being used to support intervention in core breeding populations of highly threatened species.

This is not a frivolous or arbitrary request. It arises from a genuine concern that consequential scientific decisions affecting highly threatened species should be demonstrably evidence-based, transparent and accountable. Trust in science depends upon the scientific process being open to scrutiny. Where scientific evidence is relied upon to justify consequential public policy, confidence cannot rest simply upon an agency's declaration that the evidence is trustworthy. The

underlying methods, data, assumptions, uncertainties and inferential steps should be sufficiently transparent for the reasoning to be independently examined.

This is particularly important here because the vaccination programme appears to depend upon several scientific bridges.

The 2024–2025 trial did not expose vaccinated birds to H5N1. DOC expressly states that overall efficacy will not be known until natural challenge occurs and defines ‘efficacy’ in the trial report as the detection of antibodies following vaccination. Antibody persistence is itself described as only an approximate measure of duration of protection.

Further, H5N1-specific haemagglutination-inhibition testing was undertaken only in takahē. The thresholds used to infer expected protection from mortality and morbidity were derived from chickens. The resulting inference must therefore bridge from chicken-derived protective thresholds to takahē and, potentially, from takahē to the other threatened species for which equivalent H5N1-specific HI testing was not reported.

There is an additional vaccine bridge. The experimental trial used the H5N3 vaccine Poulvac Flufend i AI H5N3 RG, whereas the 2026 programme is proceeding [using a different H5N2 vaccine](#). The relevant policy question is therefore not simply whether vaccination produced antibodies, but what scientific evidence demonstrates that immune responses generated by the trial vaccine are informative about protection afforded by the vaccine now being used against contemporary H5N1 clade 2.3.4.4b.

International veterinary guidance similarly recognises these limitations. The World Organisation for Animal Health (WOAH) and the WOAH/FAO Network of Expertise on Animal Influenza (OFFLU) recognise vaccination as a potentially valuable complementary measure for controlling highly pathogenic avian influenza (HPAI), including in particular circumstances involving wild birds. However, WOAH treats vaccination as one component of a wider risk-based control strategy, rather than as a conclusion flowing simply from the detection of antibodies. It also acknowledges that application of vaccination to free-ranging wildlife remains limited and places vaccination within a broader process of risk assessment and coordinated response planning.

<https://www.woah.org/en/document/considerations-for-emergency-vaccination-of-wild-birds-against-high-pathogenicity-avian-influenza-in-specific-situations/>

Of particular relevance, OFFLU's Avian Influenza Matching (AIM) programme exists because antigenic variation among circulating HPAI viruses can reduce vaccine effectiveness. OFFLU notes that this is particularly important for killed, inactivated adjuvanted vaccines that depend substantially upon humoral immune responses. The OFFLU-AIM programme therefore compares the antigenic characteristics of circulating viruses with vaccine antigens to assist governments in selecting and updating appropriate vaccines. Its July 2024 assessment demonstrates substantial differences in antigenic distance between contemporary H5 viruses and different vaccine antigens.

The fact that a vaccine and circulating virus both possess an H5 haemagglutinin therefore does not, by itself, establish equivalent protective efficacy. The relevant considerations include antigenic matching, vaccine formulation and potency, dose and regime, the immune response of

the target species, and the relationship between measured antibody titres and clinically meaningful protection.

WOAH's specific guidance on emergency vaccination of wild birds similarly describes a decision process encompassing outbreak epidemiology, target populations, the vaccine and vaccination strategy, diagnostic capacity, regulatory considerations and available resources. It also acknowledges that application of vaccination to free-ranging wildlife remains limited and places vaccination within a broader process of risk assessment and coordinated response planning.

I am therefore seeking the principal existing scientific records that demonstrate how DOC addressed these evidential bridges before moving from a small experimental trial to vaccination of approximately 300 core breeding birds.

1. UNDERLYING TRIAL NUMBERS AND FOLLOW-UP

Please provide, for each species included in the 2024–2025 trial:

- a. the number of birds enrolled;
- b. the number receiving the first and second vaccine doses;
- c. the number contributing antibody results at each reported sampling time point;
- d. the denominator underlying each percentage reported in the published trial report; and
- e. where a bird ceased contributing data, the reason, including death, inability to recapture, removal from the trial or other loss to follow-up.

Where these data already exist in a spreadsheet, table, laboratory dataset or other record, I seek that existing record rather than asking DOC to create a new analysis.

Scientific results and draft report preceding publication

Please provide the most complete scientific report, draft report, results summary, analysis or equivalent record produced from the 2024–2025 trial before preparation or publication of the publicly released July 2025 trial report.

I am particularly seeking the record or records in which the trial results were originally assembled, analysed or reported, including the numbers of individual birds contributing results at each sampling point, antibody results by species and sampling point, deaths, adverse events, incomplete vaccination and loss to follow-up, before those results were condensed into the percentages and summary conclusions presented in the publicly released report.

Where more than one draft or version exists, please provide the latest substantive version containing materially more complete scientific results or underlying numbers than the publicly released report. I do not seek minor editorial drafts or versions differing only in formatting or wording.

If DOC holds no earlier report, draft, analysis or results summary containing more complete results than the publicly released report, please confirm this.

2. SCIENTIFIC BASIS FOR EXPECTED H5N1 PROTECTION

Please provide the principal scientific assessment relied upon by DOC in determining the extent to which antibody responses observed following vaccination with the H5N3 trial vaccine were

predictive of clinically meaningful protection against contemporary H5N1 clade 2.3.4.4b in the threatened species concerned.

In particular, please provide any assessment addressing:

- a. antigenic matching or antigenic distance between the H5 antigen in the trial vaccine and contemporary H5N1 clade 2.3.4.4b viruses;
- b. the scientific validity of applying HI thresholds derived from chickens to takahē;
- c. the scientific basis for extrapolating H5N1-specific HI findings from takahē to species in which equivalent H5N1-specific HI testing was not undertaken; and
- d. the relationship between the antibody measures used in the trial and expected protection from H5N1 morbidity, mortality and infection.

If DOC holds no assessment addressing any of these matters, please confirm this.

3. EVIDENTIAL BRIDGE FROM THE H5N3 TRIAL VACCINE TO THE 2026 H5N2 VACCINE

Please provide the principal scientific assessment relied upon by DOC in determining the extent to which results obtained using Poulvac Flufend i Al H5N3 RG in the 2024–2025 trial could appropriately inform expected safety, immunogenicity and protective efficacy of the H5N2 vaccine selected for the 2026 threatened-species vaccination programme.

The 2026 H5N2 vaccine is identified in MPI regulatory material under ACVM reference A012218; see also New Zealand Gazette notice 2025-go4956 and [MPI OIA26-0571](#).

Please include any assessment of antigenic relatedness or matching between:

- a. the H5N3 trial vaccine;
- b. the H5N2 vaccine being used in the 2026 programme; and
- c. contemporary H5N1 clade 2.3.4.4b viruses against which protection is sought.

If no such comparative assessment is held, please confirm this.

4. BASIS FOR DOC'S STATEMENTS CONCERNING SAFETY AND EFFICACY

DOC stated in its response to OIAD-9589 that none of the birds had shown an adverse reaction to the vaccine and that the trial results showed that the vaccine was 'effective and safe'.

Please provide the principal scientific record or records relied upon by DOC in making those statements, including the criteria used to distinguish:

- a. vaccine safety from the overall safety of the vaccination intervention, including capture, restraint, injection, blood sampling and repeated recapture; and
- b. immunogenicity, measured through antibody response, from demonstrated protective efficacy against H5N1 disease or mortality.

I acknowledge DOC's advice in OIAD-9589 that information concerning parts 3 and 4 of my previous request is held by MPI. I am not repeating my request to DOC for MPI's funding or authorisation records. This request concerns scientific evidence, assessments and advice generated, received or relied upon within DOC, including information provided to senior DOC scientific and executive decision-makers and any DOC recommendation, endorsement or decision arising from that advice.

5. SCIENTIFIC ADVICE TO SENIOR DOC DECISION-MAKERS AND DECISION TO PROCEED

Please provide the principal scientific assessment, advice, briefing or recommendation provided to or considered by DOC's Chief Scientist, Director-General, relevant Deputy Director-General, or other senior DOC official responsible for recommending, endorsing or approving progression from the 2024–2025 trial to vaccination of approximately 300 core breeding birds.

Please also provide the principal record documenting DOC's resulting recommendation, endorsement, approval or decision to proceed, including the position or title of the DOC official or group responsible.

I do not seek MPI's funding or regulatory authorisation records already identified by DOC as being held by MPI, nor routine correspondence. I seek the principal DOC scientific advice reaching the relevant senior decision-maker and the principal record showing what DOC decided or recommended on the basis of that advice.

If no such scientific advice, recommendation, endorsement, approval or decision record is held by DOC, please confirm this.

Scope

This is a deliberately narrowed request. I do not seek all correspondence concerning H5N1, the trial or the vaccination programme, nor do I ask DOC to undertake new scientific research, calculate new statistics or reconstruct an assessment that was not made at the time.

I seek the existing underlying trial data and the small number of principal scientific records demonstrating the evidential reasoning by which DOC progressed from antibody responses observed in a small H5N3 vaccine trial to expected protection from contemporary H5N1 using a different H5N2 vaccine in approximately 300 core breeding birds.

These are matters on which DOC has itself made public scientific claims. Transparency concerning the evidence and reasoning underlying those claims is therefore integral to public confidence in both the scientific process and the resulting policy decision.