



Government Legal Department

Jackson Osborne
20 Little Britain
London
EC1A 7DH

By email only

Litigation Group
102 Petty France
Westminster
London
SW1H 9GL

T 020 7210 3000

DX 123243, Westminster 12 www.gov.uk/gld

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Our ref: Z2112698/BDH/HOI7

12 January 2022

Dear Sirs

Re: Application for non-party disclosure in *R (on the application of (1) AB and (2) CD, children by their mother and litigation friend, EF) v The Office for National Statistics CO/3001/2021*

We write in response to your email dated 11 January 2022 in which you seek clarification of certain matters referred to in the statement of Dr Vahé Nafilyan filed by the Office for National Statistics (“the ONS”) on 10 January 2022 in accordance with the Court’s directions.

As to paragraphs 27 and 36c of that statement, Dr Vahé Nafilyan explains that the ONS estimate that they hold 62% of the record-level data you have requested. This is because you have requested record-level data in respect of all deaths occurring in the relevant period, rather than data in respect of deaths registered in that period. The ONS does not know that a death has occurred until the death is registered, and information relating to the registered death is made available by the General Register’s Office to the ONS. Due to the delay in the ONS obtaining death registration for some children and young adults (as these are more likely to be investigated by a coroner which increases the time taken to registration), the ONS does not currently hold death registration data for all the deaths that have occurred in the relevant time period. The figure of 62% has been derived by comparing figures for the delay in the ONS receiving death registration from previous years.

In respect of the figures which are included in the ONS published bulletins “Deaths registered weekly in England and Wales” these figures are based on the number of deaths registered in England and Wales. The delay in death registration data therefore does not affect the figures published by the ONS upon which you appear to have based your calculations which relate to deaths registered.

Separately, we refer to the Second Witness Statement of Dr Clare Craig which you appear to have filed in support of your claim for judicial review and which was served on 10 January 2022 at 2.48pm, shortly before the 4pm deadline for the filing of our response to your application for disclosure. In these circumstances, we reserved our position to respond to this evidence once our clients had had a proper opportunity to consider its contents.

Having now had the opportunity to do so, we make the following observations.

First, it appears to the ONS that the question whether or not this additional evidence is admissible in support of your claim for judicial review is a matter for the Court and the Defendant, namely the Secretary of State for Health

Lee John-Charles - Head of Division

Margaret McNally - Deputy Director, Team Leader Constitutional & Social Care Public Law



and Social Care. The ONS is not a party to the claim for judicial review and the issue of admissibility of this evidence is a matter between your client, the Court and the Defendant.

Second, we note that paragraphs 2 – 5 of Dr Craig’s second witness statement sets out figures relating to the number of deaths of 15 – 19 year-olds in the period 1 May 2021 to 24 December 2021 by sex. Based on these figures Dr Craig expresses the view that there is a “trend of excess non-covid deaths in boys 15 – 19 years of age” which is said to far exceed death numbers in previous year.

The ONS does not agree that data in relation to either the total number of deaths in the period between 1 May 2021 and 24 December 2021 (as a total for all children/young adults, or broken down by sex) necessarily evidences that the risk of death has significantly increased in 2021 for those 15 to 19 year olds. Whilst the data shows that the number of deaths for males was higher in 2021 than the average of the period 2015-2019, this analysis does not account for the corresponding increase in population size.

The ONS has re-run the analysis which is recorded in Table 1 in paragraph 22 of Dr Nafilyan’s witness statement, now with a breakdown by sex and the following represent the number of deaths registered for persons in the 15 - 19 age cohort, divided by sex, with mortality rates calculated for the period 1 May 2021 to 30 September 2021 and 1 May 2021 to 24 December 2021, compared with the five-year average (2015 to 2019). These figures are as follows:

Table 2

Persons

	Number of deaths	Rate	Lower CI	Upper CI
1 May 2021 to 30 September 2021	343	24.4	21.8	27.0
5 Year Average (2015-2019) 1 May to 30 September	312	22.4	21.3	23.5
1 May 2021 - 24 December 2021	565	25.0	22.9	27.0
5 Year Average (2015-2019) 1 May to 24 December	512	23.0	22.1	23.9

Males

	Number of deaths	Rate	Lower CI	Upper CI
1 May 2021 to 30 September 2021	244	33.7	29.5	38.0
5 Year Average (2015-2019) 1 May to 30 September	204	28.6	26.8	30.3
1 May 2021 - 24 December 2021	402	34.6	31.2	38.0
5 Year Average (2015-2019) 1 May to 24 December	337	29.5	28.1	30.9

Females

	Number of deaths	Rate	Lower CI	Upper CI
1 May 2021 to 30 September 2021	99	14.5	11.8	17.6
5 Year Average (2015-2019) 1 May to 30 September	108	15.9	14.6	17.3
1 May 2021 - 24 December 2021	163	14.8	12.6	17.1
5 Year Average (2015-2019) 1 May to 24 December	175	16.2	15.1	17.3

Notes:

1. Deaths for 2021 are provisional
2. Figures include deaths of non-residents
3. The average for 2015 to 2019 provides a comparison of the number of deaths expected per week in a usual (non-pandemic) year.
4. The monthly population estimate for all of December 2021 was used but the deaths are for 1 to 24 December 2021
5. Figures based on date of registrations rather than date of occurrence.

The figures in Table 2 above show a marginal increase in the mortality rate for males between the ages of 15 – 19 for the period 1 May 2021 to 24 December 2021 in comparison to the five year average for the period 2015-2019. However, caution needs to be applied in relying on these figures given that (i) the number of deaths in

young people is low, and therefore rather volatile and (ii) these calculations are based on death registrations rather than occurrences and these differences could be caused by differences in delays in death registration from year to year. As is explained in Dr Nafilyan's evidence, it is not possible to assess from the record-level data sought by your clients whether these deaths were caused by the Covid vaccine. These data could not either be used to draw any reliable conclusions as to a potential correlation between vaccination status and death in children and young adults, for the reasons highlighted in the witness statement.

However, the ONS recognises that more work could be undertaken to examine the mortality rates of young people in 2021, and intends to do so once more reliable data are available.

Yours faithfully

Sarah Roche

Sarah Roche
For the Treasury Solicitor

D +442072108558

F +442072103480

E Sarah.Roche@governmentlegal.gov.uk