

Working-class Londoners risk their lives fighting COVID-19 as the city's billionaires decamp

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“London is to billionaires what the jungles of Sumatra are to the orangutan. It is their natural habitat”—Boris Johnson, Conservative Party Mayor of London, 2014.

“I welcome the fact that we have got 140-plus billionaires in London. That’s a good thing. I welcome the fact that there are more than 400,000 millionaires. That’s a good thing”—Sadiq Khan, Labour Party Mayor of London, 2016.

London, the centre of grotesque inequality in Britain before the COVID-19 pandemic, has inevitably become an epicentre of the pandemic within the UK. The city is a concentrated example of the class divisions cleaving through the whole of British society.

On the evenings of March 26 and April 2, as millions of Londoners joined a country-wide applause for the self-sacrifice of grossly underequipped NHS staff, where were the super-rich that Johnson and Khan lauded as essential to society’s wellbeing? While the Tory government bailed out big business to the tune of £380 billion, the multi-millionaires and billionaires escaped to secluded islands and safe havens in private jets, climbed aboard luxury yachts for extended vacations, settled into their country retreats, or bunkered down in their mansions and luxury apartments.

A few weeks ago, private jet booking service PrivateFly said it saw a huge increase in bookings as clients evacuated back to the UK from disease-hit countries. Others were arranging private flights out of Britain to avoid planned lockdowns.

Those poorer multi-millionaires who could not afford private jets were using concierge company Quintessentially. The company’s spokesperson said, “Members who are travelling commercially are choosing to book elite services at airports, not your typical first-class lounge. For example, private terminals where guests are greeted and given their own suite. Check-in, customs and security are all done privately, and guests are then taken to the doors of the aircraft. Members can request for the jetty to be cleared so they minimise the interactions with other passengers on their

way to their seat.”

Luxury retail agency Quintessentially Estates said that early in the crisis their phones were hot with inquiries about “Scottish castles, mansions with bunkers, Cotswolds manor houses with moats, uninhabited Caribbean islands to buy, superyachts for a long charter and private jets to get clients home from abroad without their having to go near international airports.”

The London rich who could not escape buy designer face masks and attend eye-wateringly expensive Harley Street practices for private testing and expensive intravenous vitamin infusions. Others have moved to country homes or leased them for up to ?50,000 a month, according to the *Daily Mail*.

As reports began to emerge that London doctors, hospital workers, bus workers and a 13-year-old child were dying of COVID-19 across the capital in horrific circumstances, the elite had other concerns. One London financier is reported by *Forbes* to have complained that the lockdown was preventing her showing off her expensive jewellery: “I’m just not sure when my next ball will be.”

While the super-rich complain of being bored in their gated mansions, masses of workers in London have lost their jobs or are forced to work in unsafe conditions with next to no protection from the virus. Every journey on London Underground has turned into a nightmare. Poorly paid workers wrap scarfs and handkerchiefs around their faces and crowd into train carriages. Labour Party Mayor of London Sadiq Khan has closed 40 out of 265 tube stations due to the numbers of staff self-isolating at home with COVID-19 symptoms because no serious safety measures were put in place.

Among those travelling on packed transport systems are tens of thousands of the capital’s construction workers—many on their way to build high-value apartments and houses. Both the Tory government and Mayor Khan have made deliberately vague statements about what

constitutes “essential work,” allowing construction firms to decide for themselves. Twitter has been rife with the barbed comments of construction workers questioning why the luxury flats they must build were considered “essential.”

Another thriving industry is private tutoring. Tutors International, which provides elite tutoring services, says it has seen “a massive upswing in requests” since the COVID-19 outbreak.

While the super-rich carry on with their luxurious lifestyles as normal, the situation facing the working class is indicated by the Nightingale field hospital, officially opened on Friday in east London. The effort put in by workers to construct a facility from scratch has been tremendous. But the need for a 4,000-bed facility at such short notice highlights the gutting of the National Health Service (NHS) in London—leaving the population perilously exposed to the pandemic. Two new mortuaries, one in Newham and the other in Hillingdon, are also being built.

In the words of one health chief, a “tsunami” of cases is set to overwhelm London’s hospitals. On March 19, well in advance of the expected peak of cases, Northwick Park hospital in north-west London declared a critical incident after it ran out of ventilator capacity. One senior figure told the *Health Service Journal*, “Given we’re in the low foothills of this virus, this is f***ing petrifying.”

On Thursday, it was reported that one London hospital had nearly run out of oxygen over the weekend. NHS trusts in England have been given an urgent warning to limit the number of people on mechanical ventilators and continuous positive airway pressure machines.

Health chiefs are warning that an already overstretched London Ambulance Service will be unable to cope with the hundreds of extra patients needing hospital admission. Vehicles used to transport patients to non-urgent visits are being commandeered, but do not have the same medical equipment as an ambulance.

These conditions are putting London’s healthcare workers in danger. The lack of personal protective equipment and testing available to medical staff has become a national scandal. On Sunday, Thomas Harvey, a healthcare assistant at Goodmayes Hospital, London, died after treating a patient with COVID-19 with only gloves for protection. Across the capital, some hospital trusts have staff self-isolation rates of between 30 and 50 percent.

This Monday, a nurse in her 20s at King’s College Hospital, where eight COVID-19 deaths have occurred, committed suicide. Although the investigation into her death has drawn no conclusions, the experience in Italy where several health workers have committed suicide during the pandemic points to a similar trend beginning in the UK. Shortages are forcing medical staff to work incredibly long,

harrowing shifts and make the traumatic decision to deny treatment to the most vulnerable.

The *World Socialist Web Site* reported on the crisis at Kings College Hospital Trust in January this year: “King’s hospital has a vacancy rate of 19.4 percent for nursing posts in cancer care, 15.4 percent in children’s care and 12 percent in operating theatres. At the Princess Royal hospital managed by the King’s Trust, 26.3 percent of nursing posts in acute and emergency care and 12.4 percent in the children’s care unit are vacant.”

The terrible personal consequences of such sharp social inequalities were summed up last weekend by the contrasting fates of Prince Charles, tested and cared for while presenting only mild symptoms of the disease, and Kayla Williams, a 36-year-old mother of three from Peckham, south London. Williams, the wife of Fabian, a refuse worker, died in her flat of suspected COVID-19 a day after calling 999 and being told to look after herself at home.

Fabian said, “I called 999 because my wife was breathless, she was vomiting, and she had pains in her stomach. As I was talking to them, she was getting worse and they told me to put her on the floor and to make her body flat. She [the paramedic] told me the hospital won’t take her, she is not a priority.” Williams was dead the next day.

Twitter erupted as Londoners contrasted the brutal inequality in treatment between Kayla and Britain’s royalty. The lesson has been burned into popular consciousness that we are not “all in this together,” as the government claims. There is the pandemic experienced as an inconvenience by the super-rich, and the pandemic experienced as a catastrophe by the working class. Only a revolutionary overturn can protect the population from the virus and remove from society the cancerous growth of multimillion and billion-pound wealth threatening its very existence.



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