

UK government proceeds with criminal “Freedom Day” and junks COVID safety measures

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The Conservative government is proceeding with its criminal policy of ending all COVID safety restrictions today. This is happening while the UK is facing a massive surge of coronavirus infections, with daily cases passing 50,000 on Friday and Saturday.

In the last seven days, Britain recorded 313,647 new cases of COVID-19, up 44 percent on the previous week and the second highest seven-day total in the world. Only Indonesia with 341,749 cases, but with a population of 276.5 million, four times the size of Britain's, recorded more.

On Friday, the Office for National Statistics announced that one in 95 people in England have COVID, a leap from one in 160 the previous week. The hot weather, with many people travelling, staying in the UK for a holiday and gathering on beaches, will accelerate the spread of the virus.

Along with the surge in cases, hospitalisations and deaths are both rising. The 283 deaths over the last week were a rise of nearly 40 percent on the previous week's 203. Around 600 people a day are being hospitalised. On July 15, 3,964 people were in hospital with Covid, with 551 (almost 14 percent) requiring ventilation. According to research by the *Daily Mail*, four-fifths of NHS hospitals in England are now seeing a spike in COVID patients being admitted.

So widespread are the infections that the authors of the criminal ditching of COVID regulations are being infected. Health Secretary Sajid Javid, despite being double vaccinated, is ill. Prime Minister Boris Johnson (who contracted COVID last year and nearly died as a result) and Chancellor Rishi Sunak were contacted by NHS Test and Trace as contacts of Javid and instructed to self-isolate for 10 days.

Both tried to dodge the requirement, saying they would

take part in a “daily contact testing” pilot scheme. A storm of protest forced a U-turn. This was under conditions in which over half a million people, including key workers from all sectors, have been forced to self-isolate over the last week after being “pinged” by the NHS test and trace phone app. Moreover, 821,000 children (11.2 percent) in England's state schools were not in class on July 8 because of COVID, the highest level since March and a 31 percent increase on the week prior. Of those off school, 39,000 pupils had tested positive and 35,000 had a suspected infection.

There is no constituency within any section of the political establishment to halt or even delay the ending of restrictions. All that has been done is the release of a muted statement by the heads of the National Health Service in England, Scotland, Wales and Northern Ireland, calling for “caution”.

To comprehend the scale of the criminality being perpetrated, one needs only look at the statements of health professionals associated with the signing of a letter to the UK's premiere medical journal, *The Lancet*. More than 1,200 experts signed the letter titled, “Mass infection is not an option: We must do more to protect our young”.

On Friday, an online “Emergency international summit on UK's ‘freedom day’” was held. Hosted by The Citizens, a UK NGO, it brought together world-leading experts from 10 countries including scientists and physicians.

Introducing the meeting was Gabriel Scally, the Regional Director of Public Health in England and a member of Independent Sage, an alternative scientific advisory panel to the UK government's official Scientific Advisory Group for Emergencies (SAGE).

Scally spoke as a “representative of the group of scientists who wrote to *The Lancet* recently calling the

government's plans 'a dangerous and unethical experiment'." He said, "The Westminster government has failed to bring the virus under control and is now preparing to remove the last few measures that inhibit the virus spreading even more widely amongst our only partially vaccinated population."

The summit opposed the statement at a Downing Street press conference last week by the UK's chief medical officer Chris Whitty that there was "widespread agreement across the scientific community" with the government's ending restrictions.

"A blind man on a fast horse can see that this is a strategy that doesn't have the support of scientists, universally at all," said Scally. "And I personally was amazed at some of the comments, the idea that it was a good idea to have the virus spread widely through the population and infect people, make them ill, and have them die, so that we got that over with before the autumn. To 'go in the summer', as it was described [by Whitty].

"I've been a public health doctor for 40 years and I've never heard of a public health strategy like this. As you have heard from some of the experts from around the world this is not any concept of public health that any public health physician would really recognize I don't think."

Professor Stephen Duckett, Health Programme Secretary of the Grattan Institute and former secretary of the Australian Health Department, said, "There is no reputable public health advisor of any kind who would recommend opening up at a time when the virus is spreading rampantly. It just defies any logic, any science of any kind, and it is a recipe to just accept that 40,000, 50,000, 80,000 cases a day is somehow acceptable."

Dr Deepti Gurdasani, a clinical epidemiologist and senior lecturer at Queen Mary University of London, said, "The world is watching the current avoidable crisis unfold in the UK." She warned, "only about half of our population are fully vaccinated and we have been told to expect that millions will get infected over the summer with case rates reaching about a hundred thousand per day. Our government has chosen this path despite having safe and effective vaccines available that could have protected the millions who will now be exposed to a novel virus and its long-term consequences leaving a generation with chronic illness and disability."

Professor Christina Pagel, director of University College London's clinical operational research unit, explained, "Because of our position as a global travel hub, any variant that becomes dominant in the UK will likely

spread to the rest of the world. We saw it with Alpha. I'm absolutely sure that we contributed to the rise of Delta in Europe and North America. The UK policy doesn't just affect us. It affects everybody and everybody has a stake in what we do."

Pagel drew attention to a letter from UK clinical virologists published in the *Financial Times* July 15, stating that "complete relaxation of behavioural measures designed to reduce the spread of infection, before robust and sufficient levels of vaccine-induced immunity in the population have been achieved, is potentially a recipe for disaster, with the risk of negating the long-term benefits of the early UK rollout of vaccines." The virologists insisted, "Removal of precautions should happen only when infection rates are decreasing, not increasing."

The Labour Party and trade unions have no fundamental disagreements with the homicidal ditching of restrictions. Backing the reopening in a July 8 statement, Trades Union Congress General Secretary Frances O'Grady said, "We all want working life to get back to business as usual," with the TUC complaining only that it had not been consulted as it had been at the end of the first lockdown in May 2020.

No nationalist factions of the ruling elite, including the Scottish National Party government, has an opposed strategy. As a proportion of the population, even more people are infected with COVID in Scotland (one in 90) than in England. Yet First Minister Nicola Sturgeon could only muster a plea for "caution" in announcing that Scotland will move to Level 0 today and ditch a raft of restrictions.

With the onset of the pandemic's new wave, the Socialist Equality Party reiterates our call for the intervention of the working class to resolve the pandemic crisis in the interests of society. This must be centred on the establishment of rank-and-file safety committees in every workplace, independent of the unions, to demand proper measures of containment and protection.



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