Australia: Widespread opposition to NSW government's homicidal "roadmap to freedom"

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Epidemiologists, health staff and working people are strongly opposing a plan by the New South Wales (NSW) Liberal-National Coalition government to lift lockdowns next month, as COVID infections, hospitalisations and deaths continue to soar.

Unveiled on Thursday, the "roadmap to freedom" will be activated once 70 percent of the state's adult population is doubly vaccinated, likely in mid-October. Mass outdoor gatherings such as sporting events will resume for people who have received two vaccine shots, along with all retail and hospitality. Groups of 20 will be permitted to congregate outdoors and five in homes, while large religious services, weddings and funerals will be allowed. Full face-to-face teaching in schools will begin on October 25, with all students returning to classes by November 7.

These measures are a practical application of the homicidal "herd immunity" program pursued by the ruling elites internationally. They are in line with a federal government "roadmap" to end lockdowns and safety restrictions, signed off by all the state and territory leaders, most of them Labor. The governments acknowledge that these policies will result in increased deaths and infections, but insist that the population must "learn to live with the virus"—all in the interests of corporate profit.

Underscoring the bipartisan character of this program, NSW Labor leader Chris Minns "welcomed" the state government "roadmap," as did federal Labor representatives.

The response on social media has been very different, with thousands of comments denouncing the plan for jeopardising the health and safety of ordinary people while boosting the fortunes of big business. Popular opposition has particularly focused on NSW Premier Gladys Berejiklian's declaration on Friday that the government would end daily press briefings.

That announcement was made as daily infections reached a new record of 1,542 yesterday, followed by 1,599, an even higher tally, this morning. The press conferences, moreover, are being shut down before next week, which the government forecasts will witness the highest infection rates, and October, when its own cherry-picked modelling predicts that hospital intensive care units (ICUs) will be "overwhelmed," just as the reopening begins.

The government is seeking to shield itself from any scrutiny, as medical experts speak out on the dangerous character of its reopening plan, and health workers expose its lies that the healthcare system will be able to withstand the pressure, while it may be "stretched."

Professor Alexandra Martiniuk, a University of Sydney epidemiologist, told the *Sydney Morning Herald* she believed the measures were "prioritising industry above public health." The reopening was "inequitable and too early." Martiniuk expressed surprise at the resumption of large gatherings, noting the limited character of evidence about whether they could become "super-spreader" events, even if only attended by fully-vaccinated people.

Grattan Institute health economist Stephen Duckett told the same newspaper: "This plan was developed by business for business. They said right up front 'the Deputy Premier has worked with industry to develop this road map.' It is an extremely risky strategy which guarantees an increase in the number of cases and the number of hospitalisations."

Duckett added that increased case numbers will mean "one person's freedom is another person's going to hospital."

For weeks, the government's assertions about the state

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of the hospital system have been exposed as falsehoods.

Publicly, the NSW government claims that the crisis in the hospitals will be limited to one month, October. This morning, the *Saturday Paper* revealed that the "national cabinet" of the state, territory and federal government leaders, received a briefing yesterday indicating that "serious pressure on hospital networks" would continue "for a protracted period of time," likely to span at least half a year.

Given that the hospitals in NSW are already overwhelmed, this is a scenario that will spell mass death.

Other material in the *Saturday Paper*, based on leaks from NSW Health, exposed the fraudulent character of the state government's hospital modelling, released last Monday. That document predicted that the state's hospitals would enter a "code black" in late October, signifying that "demand for critical care services significantly exceeds organisation-wide capacity."

Even this dire forecast, however, deliberately understated the extent of the crisis. The figures in the publicly-released modelling, for infections and hospitalisations, were limited to 12 "hotspot" local government areas in Sydney, excluding most of the city and the state. The document's forecast was predicated on the existing restrictions remaining in place, not the lifting of the lockdown that Berejiklian later announced.

The *Saturday Paper*, moreover, noted that the modelling allowed for a maximum of 387 non-COVID ICU patients, for the system to avoid a complete collapse. But as of September 2, there were 519 such patients in NSW hospitals. The modelling also assumed that critically-ill patients could be rapidly transferred from one hospital to another, when ambulances are currently being forced to wait with patients for up to 11 hours before they are admitted to a hospital.

The paramedic service is in such a staffing crisis that students are being hired on 12-week contracts. Even with this, there are a limited number of ambulances and no plans announced to increase the fleet size.

The *Saturday Paper* included chilling new details about the "triage" system to be implemented once the "code black" is declared. In the "second stage" of a major surge, staff-to-patient ratios would effectively be scaled back, with trained ICU nurses overseeing other health staff from other areas, such as anaesthetics, emergency, operating theatres, recovery and coronary care units. Despite lacking experience or training in the field, these workers would be responsible for ICU patients. Their redeployment would mean a scaling back of other services.

During the third stage of the plan, an "intensive care consultant" would work "with other medical specialists to support intensive care triage and decision-making on resuscitation and goals of care."

Effectively, some patients would be denied treatment, resulting in their death. The *Saturday Paper* reported: "In NSW, doctors and nurses have been told by hospital managers that life-saving support may not be provided, or potentially even be withdrawn, for those with a median age of 72 during the 'overwhelming' phase of the current Delta outbreak—which is forecast for late October and early November."

An August study, led by Dr Jai Darvall from the Royal Melbourne Hospital, found that the activation of these ICU protocols would "exclude patients with a close to 80 percent hospital survival [rate] and a more than 30 percent five-year survival." People with an eight in ten chance of living—if provided with adequate care—would be left to die.

This program is triggering mass opposition from healthcare workers, including nurses, doctors and paramedics.

By contrast, NSW Nurses and Midwives Association state secretary Brett Holmes responded to the shocking revelations by telling the *Saturday Paper* the union was "still having discussions" with the NSW Health Department. He insisted that the crucial issue was "operationalising," i.e., implementing "the plan."

The fight against the criminal reopening, and to protect life, requires a rebellion against the trade unions in health and every other sector, which function as the industrial and political police of the governments and big business. Workers' rank-and-file committees are required to fight for a massive expansion of funding to public health, and for policies that prioritise safety and lives ahead of private profit.

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