British Columbia's New Democratic government intensifies policy of mass infection as Omicron spreads

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29 December 2021

COVID-19 infections, driven by the Omicron variant, are exploding across Canada, including in British Columbia (BC). The province recorded five straight records for daily infections last week, culminating in over 2,500 cases on December 25. BC's 7-day rolling average of cases has more than doubled in a week.

The only reason new records are not being registered this week is because BC has maxed out its COVID-19 test capacity. Young people displaying symptoms have been told not to seek PCR tests. "We won't be seeing the rise in case numbers that we would have seen if we did not hit that testing capacity," Caroline Colijn, the Canada 150 Research Chair in Mathematics for Evolution, Infection and Public Health at Simon Fraser University, told Global News. "Unfortunately it is going to be a struggle to interpret the data in the coming days and possibly coming weeks."

In the face of this disastrous situation, familiar talking points are being repeated by the political establishment to downplay the crush of infections.

BC Minister of Health Adrian Dix's declaration earlier this month that focus ought to be on the Delta variant, instead of the more transmissible and immune evasive Omicron variant, was as predictable as it was dangerous and irresponsible. It follows a pattern of deflection, lack of transparency, refusal to follow and acknowledge scientific developments and focus, above all, on the need to keep schools and nonessential businesses open in the face of thousands of deaths, that have been the hallmarks of British Columbia's pandemic response.

The homicidal pandemic policy, spearheaded by the federal Trudeau Liberal government and implemented by provincial governments of all stripes across the country, bears chief responsibility for the rise of Omicron itself.

The provincial New Democratic Party (NDP) government's handling of Omicron is the standard response from BC's pandemic playbook. In March, BC suffered a devastating wave of the Brazilian Gamma variant, sparked by a massive outbreak in the international ski resort of Whistler, which local health authorities exacerbated by refusing to close until the day after the end of spring break. The resort, which has a revenue sharing agreement with the province, was kept open, with no restrictions on dining and entertainment. British Columbia's chief Public Health Officer Bonnie Henry blamed the itinerant local working population for the outbreak. In line with the refrain of blaming sections of the public for any public health policy failures, NDP Premier John Horgan claimed that young people were "blowing it for the rest of us." There was no mention from government or public health officials of cramped housing conditions that most workers in the resort faced, which was likely a major driver of transmission.

The summer saw a tragic replay of the spring, with the emergence of another dangerous sub-variant, AY.25. The reckless summer reopening pursued by the BC NDP government and the hard-right United Conservative Party government of Jason Kenney in neighbouring Alberta resulted in large-scale Delta outbreaks in the Interior and Northern parts of BC and a devastating surge in cases that overwhelmed Alberta's hospitals.

The BC Centre for Disease Control's (BCCDC) weekly public variant report initially included a mysteriously labelled AY.X variant that was rapidly growing and outpacing the original Delta lineage. After a delay of weeks in July, sequences were finally submitted to GISAID, a global science initiative and primary source established in 2008 that provides open access to genomic data of influenza viruses and the coronavirus. The sequences revealed the lineage to be predominantly the AY.25 sub-lineage. This was finally included in the public variant report in October, after health officials in Saskatchewan admitted they had identified it having a transmissibility advantage.

The lack of transparency applies to all areas of BC's pandemic response, not just variant sequencing and disclosure. The province stopped sharing health care worker

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infection rates last year, according to PHAC (Public Health Agency of Canada), and then denied it had done so. When pressed by local media, Provincial Health Officer for British Columbia Bonnie Henry admitted that the province had indeed stopped sharing this key information, citing the data as "too sensitive to share." In the spring, leaked reports showed the BCCDC deliberately withheld granular local infection rate data, despite its claims that it did not collect that type of research.

The NDP government has also been deliberately opaque in acknowledging transmission in schools. Given the central role schools play in freeing parents from child care responsibilities so they can return to work churning out profits for big business, the pro-corporate NDP's determination to keep them open at all costs is hardly surprising. Unlike other jurisdictions, outbreaks have no set definition in BC and are declared at the sole discretion of the local health authority.

As a result, only a handful of outbreaks were declared during the 2020-21 school year. But this policy masked the true reality. For example, at Earl Marriott Secondary School there were at least 47 cases among students in the days leading up to Christmas across multiple grades. The severity of the situation was only brought to public attention when the local superintendent went public with the information, while Fraser Health Authority said nothing.

Data released in May of this year revealed that there were at least 21 different instances of school transmission in a single school district, School District #43 Coquitlam, over a two-month period, from January to March, despite the data being collected between the second and third waves when community transmission was at its lowest level since the previous spring. The report officially referred to the cases of school transmission as clusters, but those are loosely defined by the province. Any incident of transmission between two or more people is classified as a cluster. As with Earl Marriott, this definition system is able to mask precisely how many students and staff members have been infected.

Then there is the issue that has gained the province the most international notoriety: airborne transmission. The NDP and its top health officials refuse to acknowledge that the primary source of COVID-19 transmission is via aerosols, tiny particles that can float in the air like smoke for extended periods of time, even though this is the scientific consensus. Henry famously declared the issue a "tempest in a teapot" in July of 2020 and to this day continues to insist that droplets are the primary form of transmission of the virus. This dogma continues to be repeated across the top levels of BC public health, with Deputy Public Health Officer Reka Gustafson, Vancouver Coastal Health Chief Patricia Daly and BCCDC Medical Director Mel Krajdenl refusing to publicly declare aerosolized particles as the main driver of transmission.

A report released in the spring and authored by Oxford University researchers specifically called out the province, saying, "From the very beginning of the pandemic, British Colombia [sic] based its prevention measures on an explicit contact, droplet, and fomite theory of transmission," and noting that "Bonnie Henry appears at least partly driven by the urge to quell panic and maintain calm." The highly respected University of Colorado Chemistry Professor Jose-Luis Jimenez described BC's attitude towards aerosol transmission as "one of the most retrograde on the planet."

The pandemic record of the BC government over the past two years has been among the most reactionary, business-friendly and anti-worker in the country. The BC NDP repeatedly stresses its desire to protect businesses. Indeed Horgan and his ministers regularly tweet statements boasting about the province's credit rating, while, on the other hand, refuse to acknowledge the rights of workers to a safe workplace. The pandemic has shown that the NDP's claim to be a worker-friendly party is laughable and without any merit.

To save lives and put an end to the pandemic, everything depends on working people in British Columbia and across Canada forming rank-and-file committees which will take up the fight to eliminate COVID-19. This must include a comprehensive program of public health measures, including mass testing, the isolation of infected people, contact tracing, the provision of high quality masks to guard against airborne transmission and mass vaccination. It must also include the immediate shutdown of all nonessential businesses and in-person learning with full compensation to all workers affected until community transmission is reduced to zero as a part of global initiative to eliminate COVID-19.

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