

# Amid record deaths Australian prime minister declares “we should not fear” Omicron

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19 January 2022

While health authorities and government figures continue to insist the Omicron variant is “mild,” Australia yesterday recorded its worst daily death toll during the pandemic.

Across the country, 77 COVID-19 deaths were reported yesterday. This included record highs of 36 in New South Wales (NSW), and 16 in Queensland.

The toll yesterday provoked widespread anger. “Port Arthur” was a trending topic on Twitter in reference to a 1996 mass shooting in Tasmania in which 35 people were killed, fewer than died of COVID-19 in NSW yesterday.

That horrific incident was viewed as a national crisis requiring immediate action to prevent similar tragedies, including sweeping changes to Australia’s gun-control laws. By contrast governments present the mounting COVID-19 death toll as minor news while declaring that they will continue the profit-driven policies responsible for the tragic fatalities, ensuring there will be many more.

Prime Minister Scott Morrison declared at a press conference this morning, “as we face Omicron, we must respect it, but we should not fear it.”

A further 67 deaths were reported Australia-wide today, with 32 in NSW, 18 in Victoria, 11 in Queensland and 6 in South Australia. Government representatives and their lackeys in the corporate media noted the “good news” that this was slightly fewer than died yesterday.

In just the first 19 days of this year, the country has recorded 604 deaths from the virus, more than 21 percent of the total since the start of the pandemic.

Clearly indicating that the toll will continue to grow, an unprecedented statewide “code brown” has been declared in the Victorian health system. The emergency order came into effect from midday today and affects all public hospitals in metropolitan areas and six regional areas.

Victorian Deputy Premier James Merlino said yesterday: “We’ve reached a point in our healthcare system where it’s juggling extreme workforce shortages alongside a vast number of patients with COVID-19 who require hospitalisation.”

As of Tuesday, 4,067 Victorian health workers were furloughed due to COVID-19 infection or exposure. There are

currently 1,173 COVID-19 patients in Victorian hospitals, including 125 in intensive care and 42 on ventilators.

Under a “code brown,” hospitals can cancel workers’ leave, reassign staff to priority areas and postpone supposedly less urgent care. This includes “category one” procedures, which are meant to be performed within 30 days, such as lumpectomies, cancerous skin lesion removal and certain types of heart surgery.

The “code brown” designation is normally applied to a single hospital or region in response to a transport accident, chemical spill, fire, flood, or other sudden emergency, and is only in effect for hours or days. By contrast, the current emergency declaration is expected to be in place for four to six weeks.

Some indication of the parlous state of Victorian hospitals can be found in an *Age* article by Erin Pearson, who described her experience as a patient on a COVID-19 ward.

She wrote: “COVID-positive patients were experiencing hours-long delays in receiving time-sensitive medications; the elderly were left cold and hungry, patients unshowered, rooms in filthy conditions. Medication was lost, corners cut and dressings unchanged.”

Pearson reported that, with senior nursing staff seconded to the ICU, junior nurses were left in charge of COVID-19 wards staffed by a handful of graduate and trainee nurses. Basic items, such as drinking cups and blankets were in desperately short supply.

Monash Health Nursing Coordinator Mel Hyde told the *Sunday Age* the situation in Victorian hospitals was the worst she had seen in her 15-year career. “We are in such a crisis now,” she said. “I don’t think people understand how horrific it is.”

Hyde said that, even with nurses working double shifts and overtime, shortages were common. On one night last week, the hospital’s emergency department had only half the usual staff, meaning patients waited in ambulances outside for up to eight hours.

Emergency doctor Simon Judkins told the *Sunday Age*: “I can’t remember any time working in the public health system for the last 30 years that we have felt this much pressure and

this much stretching of resources and compromising of care. We're not able to maintain any level of the patient's respect or just humanity."

According to a report in the *Guardian* this morning, paramedics in Sydney are regularly being asked to drive ambulances home after their shifts, in order to remain "on call."

Chris Kastelan, NSW president of the Australian Paramedics Association said: "People will have done a 12- or 13-hour shift and then they'll go home on call, so they'll take an ambulance and equipment home."

Kastelan continued: "Then they've got to go straight back out... and they're out for another four or five or six hours doing multiple calls."

A spokesman for NSW Ambulance confirmed the practice, telling the *Guardian*, "as we continue to respond to the surge in cases associated with the Omicron variant of COVID-19, opportunities for on-call rostering have been offered to staff in metropolitan areas."

In an indication of mounting anger among health workers, around 60 intensive care nurses rallied today outside major Sydney hospital, Westmead, saying they were "at breaking point," due to the surge of COVID-19 cases.

Registered nurse Amy Halvorsen, who resigned earlier this month in protest because she could not continue working under "chaotic and dangerous" conditions, told Australian Associated Press: "We're not OK and we're being told just to "get on with it."

The protesting nurses reported working 18-hour days, and long stretches without breaks.

While the demonstration reflected widespread anger, the NSW Nurses and Midwives' Association sought to confine discussion to plaintive appeals to NSW Premier Dominic Perrottet who has presided over the catastrophe. The union, like its counterparts, has collaborated with the government throughout the pandemic, enforcing the dangerous conditions.

Moreover, union-brokered enterprise agreements have gutted the wages and working conditions of nurses and other health staff. The NSW Nurses and Midwives' Association and the other unions have worked hand-in-glove with Labor and Liberal governments that have decimated public health through decades of funding cuts.

Health Minister Greg Hunt announced yesterday that the federal government would invoke its private hospital agreement to make more than 100,000 health workers, including up to 57,000 nurses available to public hospitals.

NSW Australian Medical Association president Danielle McMullen noted, "here in NSW, we've had that arrangement on foot for a number of weeks already."

Amid the clearly mounting health system crisis in Victoria and around the country, Morrison blithely claimed in a press conference today, "our health system, despite a lot of pressure, is holding up."

Undeterred by rising hospitalisations and deaths, Morrison reiterated his commitment to "not shutting Australia away, not locking ourselves up, not destroying peoples' livelihoods and bringing our society to a halt."

In fact, the "let it rip" policies of Morrison and the Labor-dominated "National Cabinet," under which virtually all public health measures have been removed, have decimated the workforce. With whole sections of workers infected with or exposed to COVID-19, the country's supply chains have broken down, leading to widespread shortages of fresh food and other essentials.

To the extent that they have a choice, many workers are indeed "locking themselves up," avoiding non-essential shopping and cancelling social outings to minimise their exposure to the virus.

According to an ANZ-Roy Morgan survey, consumer confidence declined 7.6 percent last week, to its lowest January level since 1992. ANZ debit and credit card spending dropped 27 percent in the first half of January, 6-10 points lower than the usual post-Christmas decline. These economic figures are an indication of the growing divide between public sentiment and the reckless profit-driven reopening drive of the Australian ruling elite.

When they completed the lifting of restrictions and allowed Omicron to circulate last month, governments claimed infections were irrelevant, only hospitalisations and deaths were of significance. Now, with record fatalities and the hospitals filled to the brim, the very same governments tout fluctuations in daily infection numbers, amid a complete breakdown of the testing system, as proof that the 'peak' is near.

When the self-contradicting lies and obfuscations are stripped away, all that remains is the determination of governments, Labor and Liberal-National, to ensure corporate profits, whatever the consequence in mass infection, illness and death.

This demonstrates that the only way forward is for an independent political struggle of the working class, against the entire political set-up. The alternatives are the "forever COVID" program of the ruling elite, and a scientifically-grounded fight for the elimination of the virus. The latter course must involve the closure of non-essential businesses and other measures that impinge on profit. It is not only a struggle against a virus, but against capitalism.



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