

German federal and state governments end coronavirus protection measures

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The last coronavirus protective measures expired across Germany over the weekend, even as around 300 people are dying every day from COVID-19 with more than 200,000 infections. The federal and state governments are taking their policy of deliberate mass infection to extremes in the interests of big business. They are making it clear there can be no restrictions whatsoever that may limit profit maximisation—even if this costs hundreds of lives every day.

On March 18, the Bundestag (federal parliament) passed a new Infection Protection Act that reduces the pandemic measures to so-called “basic protections” consisting of mandatory mask wearing and testing in a few places. The federal states were allowed to adopt a two-week transitional rule consisting of mandatory mask wearing, which most states did, with rules for accessing certain public venues for 2G individuals (those recovered or fully vaccinated) and 3G (those recovered, fully vaccinated or with a negative test). This expired on April 2.

From now on, masks will only need to be worn in nursing homes, hospitals and local and long-distance public transport. Masks are not compulsory in shops, nurseries or schools. In Germany’s most populous state, North Rhine-Westphalia, state Education Minister Yvonne Gebauer (Liberal Democratic Party, FDP), explicitly instructed schools to no longer make masks compulsory. With an incidence rate of over 2,000 per 100,000 in some schools, this is tantamount to a policy of deliberate infection.

The new Infection Protection Act provides for the possibility of stricter measures in so-called “hotspot areas,” but even these are limited to mandatory FFP2 masks in more areas, a 1.5-metre social distancing rule indoors and 3G and 2G regulations. These are all completely inadequate measures, as the current wave of

infections shows.

Moreover, the decision as to when a region is considered a hotspot lies in the hands of the state parliaments, and they are signaling their refusal to do so. Up to now, only two federal states, Hamburg and Mecklenburg-Western Pomerania, have declared that they will resort to the hotspot regulation. Baden-Württemberg, Bavaria, Berlin, Brandenburg, Lower Saxony, Rhineland-Palatinate, Saxony and Schleswig-Holstein have explicitly ruled this out.

The ruling class is fully aware of the consequences of its policies. A particularly foul role is being played by Federal Health Minister Karl Lauterbach (Social Democratic Party, SPD), a trained medical doctor and epidemiologist, who regularly warns of the consequences of mass infections, which he then organises himself.

On Wednesday, he wrote on Twitter: “Long COVID leaves tens of thousands chronically ill, that doesn’t make it flu. We have no treatment. Even vaccinated people infected with Omicron are getting hit, so be careful.” And on Saturday he said the risk of getting infected had “rarely been higher than it is now. Epidemiologically, it would have been right to stick to the mask wearing requirement. But legally it was not possible ...”

He could hardly have been more brazen. The “legal” basis for ending compulsory mask wearing and all other measures was created by the coalition government itself. Their first official act was to end the legal designation of a “national epidemic emergency.” Lauterbach’s public crocodile tears over coronavirus deaths—“That is not acceptable. It’s a plane crash every day,” he recently declared—are hypocrisy of the first order. He and the entire ruling class are responsible for these deaths.

With the government's latest decisions, many more will be added to the nearly 130,000 coronavirus deaths in Germany. The situation is out of control, and both the number of infections and the number of severe outcomes are increasing rapidly. Within one week, the Robert Koch Institute (RKI) registered 1.5 million infections. The nationwide incidence rate is over 1,500. Some 123 districts have an incidence level of over 2,000, with 7 even over 3,000.

The actual numbers, however, are far higher. The overloading of public health offices and the lack of public testing capacities mean there is a very high number of unreported cases. Lauterbach himself recently admitted that the infection figures were actually "more than twice as high." Moreover, individual states such as Baden-Württemberg and Brandenburg do not report their data every weekday.

The drastic levels of infection are also reflected in the peaking of sick leave due to illness with the virus. According to an evaluation by the Barmer Institute for Health Care Systems Research (BifG), for example, 52,100 people were unable to work due to infections in the week from February 13 to 19. At the crest of the first wave, the number was 25,100. On a national average, 139 out of 10,000 people are currently unable to work.

The ruling class, which sees the maximisation of profits endangered by high labour absences, is increasingly concerned. But instead of responding with protective measures, quarantine and isolation, rules continue to be adjusted to force even infected and potentially infected people into work.

In January, the quarantine period was shortened to 10 days, with a release option after 7 days. Now, a draft regulation by the federal Health Ministry and the RKI, which was sent to the federal states on Wednesday, envisages reducing quarantine for infected persons and contacts to as little as 5 days. The formal ordering of quarantine by the health authorities is to be dropped, effectively making quarantining purely voluntary.

Scientists and epidemiologists warn of the dramatic consequences of the present government course. "Infections [will] thus also be carried back into the layers that have been able to protect themselves well up to now—in nursing homes, workshops for the disabled, i.e., the vulnerable groups," explained infection modeler Thorsten Lehr, professor of clinical pharmacy

at the University of Saarbrücken.

There is already an increase in severe outcomes, which disproves the myth of Omicron as a "milder variant." On March 31 alone, 2,061 people had to be hospitalised. The adjusted hospitalisation rate is already close to 15 per 100,000, which corresponds to about 12,000 hospitalisations per week.

Intensive care units are also filling up. Currently, 2,332 people require intensive care, and between 200 and 300 new people enter ICUs every day. At 9.4 percent, the proportion of free intensive care beds is already below the 10 percent level considered the threshold for hospital responsiveness and which hospitals try not to fall below.

The German Hospital Federation (DKG) also expects an even stronger increase in the number of intensive care patients. DKG Board Chairman Gerald Gass told *Redaktionsnetzwerk Deutschland*: "We will also see a stronger increase in the number of patients in intensive care units in the coming weeks." The many staff absences are also particularly problematic. "Three out of four hospitals must restrict services because staff are absent," he said. "This is due to infections, quarantine, or care for children who have tested positive."

There is widespread popular opposition to the government's herd immunity policy. A survey by the opinion research institute Forsa (Institute for Social Research and Statistical Analysis), commissioned by broadcaster RTL, showed that a clear majority rejects the relaxation of the coronavirus protective measures: 65 percent consider the lifting of nationwide uniform measures premature; 69 percent think compulsory mask wearing should remain in place in most areas. While 61 percent think the introduction of compulsory vaccination is the right thing to do, only 16 percent believe the government will introduce it.



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