

# Hundreds of COVID deaths every week as Australia's new Labor government continues "let it rip" policies

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The open adoption of "let it rip" COVID policies last December by all of Australia's governments, state and federal, Labor and Liberal-National Coalition alike, has been followed by the normalisation of continuous death on a scale not seen outside of war or mass casualty events.

The recently concluded federal election was called on April 10, with voting occurring on May 21. In the course of that six-week campaign, 1,527 COVID deaths were reported across the country, a higher toll than in each of the first two years of the pandemic. Over that period, the seven-day rolling average of daily deaths increased from 25 to over 40. The death rate is currently more than six times higher than at the end of 2021.

But the question of COVID was scarcely mentioned, even as COVID infections cut a swathe through the Coalition, Labor and their sycophantic media pack. That is because all of the official political tendencies, from the major parties to the Greens and the "Teal" independents, support the ending of all safety measures to ensure full corporate activities can continue.

Labor's new Prime Minister Anthony Albanese helpfully pointed out on his Twitter feed this week that "the pandemic is not over." He has, however, retained all of the health officials and state bureaucrats who devised and presided over the disastrous "reopening" of the economy six months ago.

And Albanese repeatedly pledged to big business during the campaign that there would be no lockdowns or other restrictions that would impact on profit-making under a Labor government. In his Twitter post, Albanese reaffirmed his commitment to the vaccine-only strategy, used to legitimise the scrapping of all other vital public health measures.

That means that the mass fatalities are to continue in perpetuity, while rampant transmission will result in new and potentially more deadly mutations of the virus.

In the past seven days alone, there have been 283 deaths across the country and 219,000 infections, though the systematic dismantling of testing and contact-tracing means that the latter figure is a gross underestimation. The public hospitals are overwhelmed, while aged-care facilities are once again killing fields.

While the big business politicians, along with the media, prefer to speak of the pandemic in the past tense, or not at all, the homicidal content of their policies have been made plain in a series

of revealing clashes within the medical fraternity.

The conflict is between those on the one hand whose medical advice is tailored to the needs of the stock market and their political patrons, and on the other a layer of courageous doctors and scientists committed to the protection of public health and working people.

An article in the *Sydney Morning Herald* on May 29 purported to give a balanced accounting of the dispute. It prominently cited Nick Coatsworth, the former deputy chief medical officer under the outgoing Coalition government.

According to the article, "Coatsworth acknowledges Australia is currently experiencing a relatively high number of COVID deaths. Some people have called it 'a plane crash a week.' But he takes issue with that analogy, pointing out COVID deaths are very much skewed to the elderly.

"'A plane crash has anywhere between babies through to people at the end of their lives and everything in between,' Coatsworth says. 'So it's not a reasonable analogy to draw when we're talking about largely the very frail elderly, who are very likely to succumb to infection whether there's a pandemic or not.'"

University of New South Wales Kirby Institute professor Greg Dore similarly stated, "The median age of death is in the 80s. There are very few people younger than their 70s dying—very, very few."

The comments drew scathing responses from epidemiologists who are committed to the Hippocratic oath and have not adopted the eugenicist positions most famously associated with the Nazis, who branded the elderly and the infirm "useless eaters."

Dr David Berger, who has previously given testimony to the *World Socialist Web Site's* global workers' inquest into the pandemic, noted that Coatsworth and Dore were advancing the same "herd immunity" program pioneered in Sweden and since rolled out globally.

He wrote: "This is the Scandinavian 'dry tinder' rationale: these people were about to die anyway. Even if it was true, and it isn't, this is beyond disgusting." He added: "Correct me if I'm wrong, but the last time I checked you didn't get a reduced sentence for murder because your victim was over 70 and 'going to die soon anyway.' I wasn't aware older people's lives were worth less, that the value seeped out of them as the years racked up."

Another Twitter user stated that perhaps the analogy of a plane

crash a week should be changed to an aged-care home and all of its residents being burnt to the ground every seven days. Would such an occurrence be the cause for no concern? And if the fires were purposely lit, would the arsonist be congratulated for easing the burden of the elderly on society?

In another Twitter comment, Berger pointed to the implications of the social Darwinism being put forward on the pandemic. “By this rationale—that older people’s lives are worth less—we should be rethinking procedures like hip replacements on older folks. I mean, how long is a 90-year-old going to live anyway? Is it really worth it to the public purse?”

That is precisely the agenda. The homicidal response to the pandemic is the sharpest expression of a broader drive by the ruling elite to do away with the last vestiges of the post-World War Two social safety net, and the associated expectations of the population, including that they will receive medical care when ill or injured. As an editorial in the *Australian Financial Review* declared on May 29, the new Labor government must reverse “public expectations about the ‘free and universal’ things that governments can provide voters.”

This is what Labor has undertaken to do. In its first week in office, the new administration discovered a budget “black hole,” that would necessitate social spending cuts and intensified exploitation of workers to drive up productivity. Having issued tepid promises during the election campaign to “fix aged care,” Labor nominated the sector as an area for budget cuts days after coming into office.

Eleven of the more than 40 people dying each day from COVID are in aged-care facilities. There were 1,572 coronavirus fatalities in the sector in the first five months of this year, compared to 231 in all of 2021. Around 780 of the country’s 2,650 nursing homes are currently experiencing COVID outbreaks, with many reporting massive staff shortages.

The situation is no better in the public hospitals. The *Guardian* reported this week that “Australians face ballooning waits from 24 hours up to several days to be admitted to hospital wards, as a combination of health worker shortages, surging Covid and flu cases and the legacy of pandemic backlogs means many hospitals have run out of beds to admit new patients.”

Sources in the health sector had reported horror stories, including a Sydney man with a suspected heart attack being instructed to call an Uber, because there were no ambulances, before being forced to wait in the rain for hospital admission. An elderly man with dementia and a severe urinary tract infection waited 72 hours before being given a hospital bed.

Dore and Coatsworth both foretold a reduction in COVID infections over the coming period and consequently of deaths. They presented no evidence. Their prophecy is contradicted by the beginning of the winter months, and the fact that even outside of a major surge, Australia has recorded tens of thousands of infections per day for months on end.

Vaccine immunity, already limited against Omicron, is waning. A fourth booster shot is currently limited to those over 65 years of age and others with underlying health conditions, while there is no indication of preparations to administer a fifth dose.

Coatsworth also sought to downplay the dangers of Long-

COVID, a set of debilitating conditions that occur in anywhere from 10 to 40 percent of all individuals who are infected. His incoherent argument, as characterised by the *Sydney Morning Herald* was the following: “Though long-COVID is real, Coatsworth says it has been misused by hard line COVID-zero advocates in the same way anti-vaxxers said they won’t take the vaccine because they don’t know its long-term effects.”

The cynical argument uses the method of amalgam: principled epidemiologists warning of the risks of long-COVID, who have supported vaccination and explained its crucial importance, are thrown together with the anti-vaccine movement, which is characterised by virulent hostility to all science. The connection exists only in Coatsworth’s assertions, not in the real world.

But aside from this, the argument, to the extent that it contains a rational kernel, is that the COVID response should not be dictated by any concerns of long-term health consequences or what Coatsworth describes as “unknowns.” This is nothing less than a repudiation of the precautionary principle that has been at the centre of modern medicine, under which doctors and the authorities should not expose the population to a hazard when they do not know its potential outcome.

Meanwhile, data reported by the *Herald Sun* this week revealed that more than 50 children in Victoria have been hospitalised during the pandemic with Paediatric Inflammatory Multisystem Syndrome, a potentially-deadly condition caused by COVID infection.

The fight to end mass illness, death and the pandemic, is above all a political question. As the Socialist Equality Party alone insisted during the elections, COVID can be eliminated, through public health measures that previously suppressed transmission in Australia and that have repeatedly vanquished outbreaks in China. The obstacle is the subordination of every aspect of social life, including the health of the population, to the profit dictates of the capitalist class.



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