

Child hospitalisations rise as new UK COVID wave begins

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Behind the Johnson government's pretence that the pandemic is over and we should "live with the virus", the number of COVID cases is surging in Britain. Infections shot up last week by 43 percent, with 425,800 new cases. According to the Office for National Statistics (ONS), one in 50 people in England had the virus.

The rise may be driven by new variants BA.4 and BA.5. Alongside another variant, BA.2.12.1, these variants replicate more effectively in the lungs than BA.2, indicating they could be more lethal.

Total daily hospital admissions for all age groups in England rose gradually from 443 on June 4, to 842 on June 15.

In the week from June 5-June 11, hospital admissions among children (0-17) rose 50 percent from 147 the previous week to 220, after falling steadily since April. For the youngest children (0-5), for whom a vaccine has not been approved in the UK, the rise was 60 percent, from 94 to 150.

On June 17, 39 children aged 0-17 were admitted to hospital, of whom 33 were aged 0-5 and 6 aged 5-17. There were 978 new child (0-19) COVID cases, 8.1 percent of the total 12,065 new cases in England.

On June 16, 36 children were admitted overnight, including 22 in the 0-5 age bracket and 14 aged 6-17. Total child cases in 0-19 age range rose by 914, or 7.5 percent of total new cases in England of 12,080.

The figures for the day before were 40 children (0-17) hospitalized overnight, including 31 aged 0-5 and 9 aged 6-17. Total new child cases were 1,053, that is 7.8 percent of the 13,401 total new infections.

Total child (0-17) hospital admissions due to COVID were 25,971 on June 16. By June 21, total hospital admissions of child COVID cases rose to 26,207, a rise of 56 overnight. This included 44 aged 0-5, and 12 aged 6-17. On that date there were 1,565 new child COVID cases. These figures are extrapolated from coronavirus.data.gov.uk by Twitter user Tigress.

Total UK child COVID deaths stand at 188 and cases

among children well over 3 million.

In the US, National Centre for Health Statistics, based on data from March 1, 2020-April 30, 2022, reported COVID as the leading cause of death among children aged 0-19.

The British Medical Journal (*BMJ*) noted as early as January a rise in hospital admissions in young children who contracted Omicron. The "proportion of children admitted to hospital with covid-19 who were aged under 1 was 42.2% in the four-week period studied (14 December 2021 to 12 January 2022), much higher than earlier in the pandemic." Children hospitalised with Omicron were not as sick as those admitted during the Alpha and Delta waves. The fear is the new Omicron subvariants may prove far more dangerous.

After prevaricating throughout 2021, the Joint Committee on Vaccination and Immunisation (JCVI) advised in February 2022 that all children in the 5-11 age group be offered two 10 microgram doses of the Pfizer-BioNTech COVID vaccine.

Introducing the roll-out as a "non-urgent offer of the vaccine," the Johnson government downplayed the dangers, leading to a situation where nearly three months on only 346,924 or 7 percent out of five million eligible children aged 5-11 have been inoculated.

Pulse magazine noted, "NHS England had previously said that primary care networks (PCNs) would not be expected to lead on the vaccine rollout for five-to-11-year-olds, due to ongoing workforce pressures."

The JCVI and the Royal College of Paediatricians and Child Health were at pains to stress that COVID is mild in children and the benefits of vaccination minimal.

While vaccines are a valuable tool in preventing serious illness, they do not prevent transmissibility.

A joint study across 130 countries conducted by a team from the University of Manchester and Imperial College London—with results published in *BMC Public Health*—found the closure of schools and workplaces the most effective measure in reducing deaths during the first wave of the pandemic.

The example of China, with a population of 1.4 billion,

underlines this. China pursued a strategy of elimination, and consequently managed to limit the number of COVID fatalities to just 5,226, implementing a gamut of public health measures including mass testing and lockdowns whenever an outbreak occurred.

In UK schools all mitigation measures were lifted as in the wider community, with the virus given free rein. Schools are instructed to record all absences including due to COVID as non-specific illness. Prior to the lifting of all mitigations, headteachers informed parents if someone tested positive in their child's class. The government did not make public which schools had outbreaks and neither did the trade unions.

Parent and grassroots campaigner Daniella Modus-Cutter took it upon herself to collate data showing a list of schools with outbreaks, to warn Clinically Extremely Vulnerable families like her own so they could shield their children at home. With the ditching of mass testing, there is no longer any reporting of infections in the education sector, making even such efforts made by Daniella impossible and putting more lives at risk.

The full implications of infection and repeated infections with COVID are still emerging. The virus can cause widespread damage, and its assault on the immune system is a possible causative factor in the otherwise inexplicable rise in hepatitis in children after infection. Last week UK child hepatitis cases passed 250 (251 confirmed cases), and 12 children, mostly under-fives, needed a liver transplant.

Children may also develop the rare, but life-threatening condition known as PIMS or MIS-C. The prognosis for those suffering Long COVID is still unknown. But for the education unions COVID is a non-issue.

The press releases of the National Education Union (NEU) makes no mention of COVID after April, when Joint General Secretary Kevin Courtney made a hypocritical statement regarding Long COVID, as he commented on motion 44 passed at the NEU's annual conference.

Courtney acknowledged that the pandemic "is far from over" and that the prevalence of Long COVID was "highest among those working in teaching and education." Declaring "employers owe these staff a duty of care" he outlined a series of demands regarding safety which he and the NEU have no intention of fighting for. This would mean mobilising its membership for online learning and the closure of schools until the virus is suppressed. This is anathema to the NEU leader who spent much of the pandemic insisting that children and staff remain in school as he ranted against "education disruption".

Courtney never mentioned the prevalence of Long COVID among children. On June 16, the *i* newspaper reported the comments of clinical epidemiologist Dr. Deepti Gurdasani

that Long COVID affects "2 percent of young children in the community to a level that is causing restriction of day-to-day activity... A small proportion of millions is still tens of thousands of children... I can't think of another childhood illness that has had the same impact on children... we've done so little to prevent this from mitigations in schools to vaccination."

The unions played a vital role keeping workplaces open before the virus was suppressed, allowing the emergence of more transmissible variants resistant to antibodies whether through prior infection or vaccination. The education unions were key to keeping schools, colleges and universities open, sharing responsibility for the deaths of over 500 educators.

In January 2021, the NEU released its Education Recovery Plan January 2021, urging the government "to create the conditions to sustain education throughout and beyond the pandemic."

This was predicated on the fiction that it was possible to reopen schools safely before the virus was eliminated, smoothing the way for the government to end lockdown restrictions then in place. At the time, the UK passed the milestone of 100,000 COVID deaths. Within 18 months that figure has doubled.

Emboldened by the cooperation of the unions, and despite cases of COVID-19 rising among school children, the government is pushing ahead with its threats to fine parents for non-attendance.

In the past week, new measures were announced beginning in September that track electronic attendance records centrally to streamline the issuing of fines for non-attendance, currently up to the head teacher or Local authority.

To fight for a fully resourced and COVID safe education system means setting up new organisations independent of the unions. Join the Educators Rank-and-File Safety Committee UK today.



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