

COVID surges in New Zealand, fuelled by new variants

Tom Peters
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Cases of COVID-19 have risen sharply in New Zealand, as experts warn that a new wave of infections has begun, driven by the much more contagious BA.5 Omicron variant.

On July 5, the country recorded 9,629 new cases, the highest daily figure in nearly a month, and an increase of more than 3,000 on the previous day. The number of people in hospital with COVID-19 reached 493, up by 110 in the space of just one week.

Another 24 COVID-related deaths were announced, bringing the country's seven-day average to 15 daily deaths, compared with 12 in the previous week. In the past week, New Zealand recorded 18 COVID deaths per million people (a total of 91 deaths), according to Worldometers.

New Zealand has the seventh-highest rate in the world, surpassed only by Iceland, Taiwan, and a few small island nations. These include the tiny Pacific country of Nauru (population 10,800), which recorded its first COVID death last week.

The total COVID-19 death toll in New Zealand remains lower than similar sized countries because of the zero COVID policy adopted in March 2020. Last October, however, in response to pressure from big business and the corporate media, the Labour Party-led government abandoned this policy. Since then, the death toll has soared from around 30 to 1,592 as of yesterday.

The vast majority of these deaths could have been avoided had the elimination approach been maintained. Instead, the government ended all lockdowns, the border quarantine system was dismantled, schools and businesses reopened, mask requirements were significantly weakened, and vaccine mandates removed for the vast majority of workers.

COVID-19 modeller professor Michael Plank

predicts that case numbers could soon reach more than 20,000 per day, the level in March, which led to more than 1,000 people hospitalised with the virus (twice the current figure). This will be even more devastating in winter, with hospitals already overrun by COVID, influenza and other seasonal respiratory illnesses.

Internationally, the BA.4 and BA.5 variants are fuelling a renewed surge of COVID-19, demolishing the lie peddled by governments that the pandemic is over. The new variants can more easily infect people who have been vaccinated or already had COVID. Almost all governments, except China's, have abandoned public health measures to stamp out the virus or even mitigate its catastrophic spread.

Speaking to *Newshub* on July 3, epidemiologist Michael Baker noted that around half of New Zealand's population has been infected with COVID. He warned that this does not provide any lasting immunity. Studies suggest people can be reinfected multiple times, with no reduction in the risk of severe symptoms or death. Reinfection can occur within just weeks of recovering from COVID.

Hundreds of thousands of those infected will suffer from Long COVID, which can include damage to the heart, lungs, brain, and other organs; COVID survivors have a heightened risk of stroke and cardiovascular and respiratory diseases.

In the *Guardian* yesterday, Baker said: "We need to think quite clearly about [the] scenarios. If we carry on with this rate of transmission and mortality—in the order of 12-14 deaths a day—we're hitting as many as 5000 deaths a year from the pandemic. That would add 15% to our annual mortality rate. It's 15 times the road toll. It's 10 times the mortality from influenza."

Every day brings more reports of the worsening crisis in public hospitals fuelled by chronic understaffing,

overcrowding, and thousands of staff getting COVID. In the 11 months to June 26, hospitals have been forced to defer or cancel 13,410 surgeries.

On July 4, the Association of General Surgeons sent an open letter to Health Minister Andrew Little expressing “grave concerns” about the staffing crisis. “Most hospitals are already close to, or at over 100% occupancy. This cannot be dismissed as ‘just a winter problem’, as a number of hospitals were at 100% occupancy in January,” association president Dr Rowan French told Stuff.

The association called for the cancellation of student debt, fee-free nursing training, and the removal of barriers for healthcare workers to immigrate from other countries.

The stark warnings from public health experts and healthcare professionals have not prompted any reversal of what can only be described as a criminal policy of mass infection.

Prime Minister Jacinda Ardern yesterday flatly rejected calls from some experts for the government to increase restrictions in its so-called COVID-19 Protection Framework from the current “orange” setting to “red.”

This book compiles the most critical programmatic statements, polemics, scientific analyses, interviews, and news articles published by the World Socialist Web Site on the COVID-19 pandemic. It is a social and political chronology of this world historic event based on a Marxist and Trotskyist perspective.

This minimal change would entail masking requirements in most indoor locations, and limiting indoor gatherings to 200 people, but would not close down any businesses or schools. Currently, masks are not mandatory in schools, which are a major source of infection. Ardern justified her position by asserting that New Zealand had retained more public health measures than European countries.

The statements by government ministers reveal indifference and outright denial of the crisis.

In a media conference on June 30, a reporter pointed out to COVID-19 response minister Ayeshia Verrall: “People are dying because hospitals are so overwhelmed. Have you really been planning properly for this?” Verrall replied: “This is a challenging winter for the sector. The health system is under pressure. But yes, indeed, there have been numerous ways of

reallocating workflow in our health system to make sure that we are able to care for everyone who needs care.”

Health Minister Andrew Little provoked an angry response from healthcare workers after he similarly told *Newshub* last week that “the wait times in the EDs [emergency departments] are starting to fall away” and the pressure on hospitals was “dissipating.”

One worker at Middlemore Hospital in South Auckland said: “Our staff are exhausted and now our patients are dying because we can’t get to them all.” On June 15, a 51-year-old woman died of a brain bleed after leaving Middlemore’s emergency department when she was told she would have to wait several hours to be seen.

Another Auckland hospital worker told *Newshub* that the minister’s claims were “an absolute lie... Corridors are full, wait times are crazy, elective operating lists have been cancelled because of bed shortages. Staff shortages are an issue, but so is the simple fact that our health system is way under-resourced and nothing changed in the two years the borders were closed and the government was preparing for the health system to have increased capacity.”

The working class cannot accept the “new normal,” dictated by big business, of unending infections and millions of deaths worldwide, when these could be prevented with a properly funded elimination strategy.

To end the pandemic, however, workers must take up a political struggle, in opposition to Labour and every capitalist party. New rank-and-file safety committees must be built, in a rebellion against the trade unions, which have accepted and enforced the reopening of schools and workplaces, fuelling the spread of COVID.



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