

Australian COVID-19 hospitalisations and deaths reach record levels

Clare Bruderlin
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COVID-19 cases, hospitalisations and deaths continue to surge across Australia, reaching record highs over the past week. 157 deaths were reported on Friday, the highest number on any single day of the pandemic. In the week ending Sunday, 674 Australians died from the virus, an average of 96 per day, more than double the rate at the end of June.

It took 547 days for Australia to reach the grim milestone of 1,000 total COVID-19 fatalities. The last 1,000 deaths were recorded in just 12 days.

In the early stages of the pandemic, Australian governments were forced by the demands of workers to implement public health measures including border closures, partial lockdowns, free PCR testing and mask mandates. As a result, by December 31, 2021, the country had recorded only 2,239 COVID-19 deaths. The more than 9,700 deaths that have occurred in the past seven months are the direct result of the dismantling of virtually all such mitigations by every Australian government, state, territory and federal, Labor and Liberal-National alike.

Despite multiple claims throughout the year by government health officials and in the media that cases and deaths have “peaked,” the weekly death toll has remained above 100 since January. The reality is, the homicidal “let it rip” agenda has created the conditions for an unending series of COVID-19 “waves,” each potentially more infectious and deadly than the last.

Prior to the December reopening, the highest number of new infections recorded in a seven-day period was just over 16,000. By contrast, every week this year more than 130,000 new cases have been recorded, despite the tearing down of mass testing facilities and the removal of requirements for regular surveillance testing of workers and school students. Over the past two weeks, an average of more than 45,000 new infections have been reported each day.

The latest surge in Australia and worldwide is being driven by the Omicron BA.4 and BA.5 variants, which are extremely immune-evasive and almost as infectious as measles. Despite this, the ruling class, with recently elected

Labor Prime Minister Anthony Albanese at the helm, has made clear it will do nothing to address the soaring rates of infection and death.

In line with the demands of big business, and in open defiance of the advice of disease experts and health authorities, governments are refusing to reinstate mask mandates or other basic public health measures and are continuing to remove the few remaining protections.

There have now been more than 9.4 million infections recorded across Australia, 96 percent of which have occurred since January 1. Under conditions where testing and contact tracing has been dismantled, even these figures are likely vast undercounts.

Based on a recent serological survey of blood donor samples, researchers at the Kirby Institute estimate that at least 46 percent of Australian adults had been infected with COVID-19 by early June, almost three times the level of infection found in February.

The continual emergence of new variants as a result of capitalist governments worldwide, with the exception of China, allowing COVID-19 to spread unchecked means that reinfection is increasingly common. The extremely limited reinfection data published by Australian health authorities show that tens of thousands of people across the country have already been infected with COVID-19 multiple times.

Growing sections of the population are developing lingering symptoms known as Long COVID, which can affect nearly every organ in the body. An estimated 10-30 percent of those who contract COVID-19 will be hit by Long COVID.

Hospitalisation is at record levels, surpassing the January peak, with 5,571 COVID-19 patients in Australian hospitals on July 26, more than twice the number reported on June 1.

Several major hospitals, in particular in Victoria and Queensland, have again been forced to postpone elective surgery due to the COVID-19 surge. Dr Patrick Lo, a neurosurgeon, told the *Age* that the mental toll of repeated delays is akin to psychological torture for the more than 80,000 Victorians on the surgical waitlist.

The hospital system was in crisis even before the pandemic, but the surge of COVID-19 infection has both increased demand for patient care and exacerbated staff shortages. In New South Wales alone, more than 2,600 health care workers are currently unable to work due to COVID-19 infection or exposure.

In an anonymous interview with the *Canberra Times*, one nurse from the Canberra Hospital emergency department described patients lining the walls of corridors and said: “It’s very, very, very common for nurses to be going to afternoon tea, lunch, a break... and you’ll walk past someone and they’re barely conscious. They’re grey, they’re blue, they’re having a fit and no one is there looking after that person. Every time I walk down a corridor, I’m terrified I’m going to find someone dead in a bed.”

Similar reports have emerged across every state and territory, with continued ambulance ramping and life-threatening delays of care.

Rebecca Thompson, a nurse from Western Australia who resigned last month, told the Australian Broadcasting Corporation that both junior and senior nurses are leaving the profession in droves due to the intolerable conditions.

She said: “One of the biggest things that hit me most was some dear friends of mine who are senior nurses came away crying from their shift because they had three palliative care patients and we’re not a palliative care ward... You don’t have time to safely see your patients anymore, the patients are in the corridor, you can’t give them any dignity.”

The virus is being allowed to tear through aged care facilities, with more than 1,000 active outbreaks in facilities across the country. Since the beginning of the year, 2,477 COVID-19 deaths have been recorded in aged care, out of a total of 3,394 since the start of the pandemic.

The surging death toll and refusal to reinstate public health measures to stop the spread of the virus demonstrates the commitment of the federal Labor government, like its predecessor, to implement the demands of big business and profit over the lives of the population. The lies of Labor’s election campaign, including that Labor would “bring back dignity to aged care,” have been thoroughly exposed.

With the stench of eugenics, Chief Medical Officer Paul Kelly last week described the thousands of coronavirus deaths of elderly people as a delayed “reaping” after the first eighteen months of the pandemic, during which COVID-19 rates were relatively low and influenza virtually non-existent.

This declaration, by the country’s highest-ranking health official, that those killed by the pandemic are too old and frail to be worth protecting, is a sharp expression of the callous and homicidal attitude of the entire ruling class, in Australia and around the world.

It is also bound up with the lie that young people are not seriously affected by COVID-19. On July 24, a girl died of COVID-19 two weeks before her second birthday and there have been at least 15 COVID-19 deaths recorded in children less than nine years old. New infections are predominantly among young people and are rampant throughout schools.

In line with the role of the unions throughout the pandemic in enforcing the “let it rip” policies of governments, at the cost of workers’ health and lives, Health Services Union president Gerard Hayes recently rejected any suggestion of a nominal right to work from home clause in enterprise agreements. Hayes declared on July 22: “It may prevent the spread of COVID, it may go some way to prevent the spread of flu, but it may well go to spread more mental health issues.”

The relentless campaign by governments, health officials, unions and the corporate media to downplay the severity of COVID-19 underscores their motivation to silence principled health professionals and scientists such as Dr David Berger, who are not only warning about the dangers of the pandemic, but advocating for the reintroduction of measures to protect health and lives.

The working class must oppose the policy of mass infection and death, and take up a fight for the elimination of COVID-19. This requires a break with Labor and the trade unions and the formation of democratically controlled rank-and-file committees in workplaces, schools and neighbourhoods, to enable workers to take matters into their own hands.



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