

Australia ends daily COVID reporting after deadliest month of the pandemic

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Australia's state, territory and federal authorities ended all daily reporting of indices of the COVID-19 pandemic yesterday. Infections, testing numbers, vaccination levels and deaths will now be the subject of a weekly report.

There is not the slightest scientific or health justification for the abrupt ending of daily reporting. Instead, the move is the latest stage in a protracted campaign to bury the ongoing coronavirus crisis and fraudulently depict it as a thing of the past.

This profit-driven campaign has the character of a conspiracy against the population, implicating the entire political establishment. The decision to end daily reporting was made at a meeting of all the state, territory and federal health ministers on September 2. It was quietly made public five days later, on September 7, and was mentioned in just a handful of media reports.

Notably, the majority of the health ministers are from the Labor Party, and the federal Labor government of Prime Minister Anthony Albanese is presiding over the abolition of regular reporting. That is a stark expression of the bipartisan character of the "let it rip" program, which has resulted in some ten million infections and more than 12,000 deaths this year alone.

In brief comments justifying the change, Labor's federal Health Minister Mark Butler stated: "The move is supported by chief health officers and will ensure high quality, accurate information is provided that sheds more light on COVID dynamics."

That is transparent nonsense. The ending of daily reporting is clearly not aimed at expanding information about the pandemic or "COVID dynamics," but stifling it.

State and territory governments made similar, cursory comments. Labor's health minister in the Australian Capital Territory, Rachel Stephen-Smith, bluntly stated: "The winter wave of COVID-19 has passed and we have reached a stage in the pandemic where daily reporting is not as important as it was."

The corporate media and the state-funded Australian Broadcasting Corporation have not published a single critical commentary questioning the ending of daily reporting, much less warning that it will restrict the population's access to essential information.

From the official statements, one would assume that COVID illness and death had slowed to a trickle, and infections were increasingly scarce.

This, however, stands reality on its head. On Friday, the last day of daily reporting, 133 COVID deaths were confirmed across Australia. That is the sixth-highest daily tally in the 954 days since the World Health Organisation declared a global pandemic on January 30, 2020.

Yesterday's 133 fatalities compare with a daily high of 27 last year, one of only six days in the entirety of 2021 that COVID deaths reached or exceeded 20.

In the last seven days of reporting, including Friday, 407 fatalities were recorded. That is a daily average of more than 58 deaths, greater than any period in the pandemic except for brief periods of this June and August.

August was the deadliest month of the pandemic yet, with 2,056 COVID fatalities reported. That was the first time 2,000 deaths had been exceeded within a month. In other words, the daily reporting is being ended as COVID claims a higher toll than ever.

The withdrawal of the reporting formalises a de facto arrangement that has been in place for months. When they lifted virtually all COVID safety measures last December, Australia's governments ended the previous practice of daily press conferences with health officers providing updates on deaths, infections and hospitalisations.

Politicians have rarely commented on the thousands of deaths this year. One would need to scour press reports to find even a mention of the tragic fatalities by Prime Minister Anthony Albanese or any state or territory leader.

The media had already largely stopped reporting the death rates. If referenced at all, they are consigned to the most cursory mentions or buried in newspaper and media websites.

This muted and completely indifferent coverage has contrasted starkly with the sensationalist reporting of such things as car crashes, violent crimes and unusual accidents, all of which have claimed far fewer victims than COVID over the recent period.

Data on infections has been all but meaningless since last December. As they “reopened the economy,” the governments presided over the deliberate crashing of the polymerase chain reaction testing system. Over the ensuing months, they sharply restricted access to the network which had been the primary testing mechanism through the first two years of the pandemic.

In its place, individuals have been instructed to purchase and self-administer less reliable rapid antigen tests. Throughout the first eight months of the year, epidemiologists have variously estimated that true infections are double, or sometimes far higher than, the official figure. Even still, almost ten million such official infections have been recorded in a population of 25 million. That means that a substantial majority of the national population is likely to have caught COVID this year.

The long-term health implications, covered up by the governments, are beginning to emerge. Treasury figures recently revealed that in June, 31,000 workers were calling in sick every day as a result of Long-COVID—a series of debilitating and potentially life-long conditions that can result from even “mild” coronavirus infection. According to some analyses, that equates to almost 10 percent of the national workforce.

The *Australian Financial Review* (AFR) yesterday cited a report by Impact Economics and Policy that estimated that the incidence of Long-COVID is “costing the economy” some \$100 million a year.

The AFR reported the case of Amy Orange, “an Adelaide-based strategist for charities and businesses with a social purpose.” The 37-year-old described herself as previously being a “healthy and relatively fit person.” Since a COVID infection in January, however, she has suffered chronic bouts of extreme fatigue as well as heart palpitations.

Experts have warned Long-COVID can impact virtually every organ of the body. The dangers were known in December, when all the governments embarked upon the deliberate, mass infection of the population. The claims

used to justify this program, including that “Omicron is mild,” have been refuted in the record deaths, as well as the Long-COVID epidemic, which has become a mass disabling event.

Governments are responding to this social and health crisis as they did in December: by prioritising corporate profits above all else. Rather than attempt to reduce infections, they are jettisoning the handful of remaining safety measures to force infected people to remain at their workplaces.

Together with the ending of daily reporting, the isolation time for COVID-infected individuals was slashed yesterday from seven to five days. The federal pandemic leave payment has been slashed by more than \$200 and is set to be ended altogether at the end of the month. Those measures were decided by the Labor-led extra-constitutional “National Cabinet.”

Epidemiologists have warned that half or more of COVID patients will remain infected after their five-day isolation period, guaranteeing that the next coronavirus wave will be worse than any before it. A mask-mandate on domestic flights, one of the last such requirements, has been abolished, ending even a pretence of infection control in high-risk public settings.

As they carry out this new onslaught on the health and safety of the populations, governments are presiding over a crackdown on principled epidemiologists and experts who have provided true information to the public.

That is the significance of the censure and threatened deregistration of Dr David Berger, a prominent Zero-COVID advocate, by the Australian Health Practitioner Regulation Authority. His “offence” has been to vocally condemn the “let it rip” agenda and advocate scientifically-grounded measures to eliminate coronavirus transmission and end the pandemic.

Meanwhile, the governments presiding over such attacks openly promote medical misinformation. They lie to the population about the “end of the pandemic,” or the advent of a “new,” supposedly less dangerous phase, while the deadly virus they have unleashed claims more victims than ever.



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