

COVID claimed more Australian lives in first three weeks of 2023 than all of 2020

Oscar Grenfell
22 January 2023

In the first three weeks of the new year Australia has recorded 1,059 official COVID deaths, with weekly tallies of 271, 408 and 380. Under conditions where any attempt to monitor transmission has been dismantled, and a myriad of barriers have been placed in the way of people seeking a test, the grim fatality figures are a more accurate indicator of the state of the pandemic than the official infection statistics.

The 1,059 deaths in some 21 days are substantially greater than the 909 fatalities reported in the entirety of 2020, the first year of the pandemic. In the whole of 2021, there were 1,330 COVID deaths.

The comparatively low tolls in 2020–21 were the result of mitigation measures, instituted in response to the demands of workers and public health experts. Despite many pro-business exemptions, these measures, including partial lockdowns, repeatedly succeeded in eliminating COVID transmission.

As a result of the profit-driven reopening of the economy in December 2021, and an ensuing Omicron tsunami that was never brought under control, there were some 14,780 COVID fatalities last year. But excess death figures indicate that the direct and indirect toll could have been as high as 25,000.

If the current average of 353 official COVID deaths a week holds for the entire year, 2023 will be the deadliest year of the pandemic yet, with some 18,356 lives to be lost, excluding those excess deaths not directly attributed to COVID.

An annual report, released by the government's Centre for Population at the end of 2022, revealed that the mountain of COVID fatalities had resulted in a decline in life expectancy, something that has never occurred before in post-World War II Australia.

It stated: "The increase in [COVID] deaths in 2021–22 and 2022–23 has resulted in a temporary drop in life expectancy in these 2 years. Compared to 2020–21, life expectancies are projected to decrease by 0.4 years for both females and males in 2021–22 and 0.2 years for males and 0.3 years for females in 2022–23."

The report blithely asserted that life expectancy would begin to increase again starting in 2023–24. The trends this year already, however, and the absence of even the ineffectual mitigation measures that remained in place for part of 2022, show that this is fantasy. If anything, the falls in life

expectancy, a key barometer of social progress, will intensify.

The sharp increases in deaths over recent weeks have pushed Australia's cumulative per capita death toll higher than at any previous point in the pandemic.

Figures collated by *Our World in Data* show that as of January 21, Australia's cumulative death toll was almost 575 per million people. That is higher than in Britain, one of the pioneers of the "herd immunity" program, where the figure is around 506, and other countries where there have been mass deaths, such as South Korea (515), Canada (465) and Japan (376.)

There is virtually no discussion within the political establishment on the unfolding medical disaster. Instead, the entire focus is on presenting the pandemic as a thing of the past, while normalising levels of illness and death not seen outside of wartime.

In a rare breach of the silence, which extends to the official media, prominent commentator Laura Tingle published a piece over the weekend entitled "COVID is still wreaking havoc across Australia but political and medical debate seems to have succumbed to pandemic weariness." It was published by the state-funded Australian Broadcasting Corporation (ABC) and the *Australian Financial Review* (AFR), one of the preeminent mouthpieces of the ruling elite.

Tingle noted that "the political—and for that matter medical—debate about COVID feels to have gone almost underground." Daily press conferences on infections, hospitalisations and deaths, which were the norm at an earlier stage of the pandemic, had been replaced by silence.

"Yet even without the detailed data we once had, figures for excess deaths and hospitalisations show COVID continues to wreak havoc," Tingle wrote. "The independent OzSage group of COVID experts noted earlier this month COVID was the third highest cause of death in Australia in 2022, running at 12 times the annual road toll."

Tingle pointed to the broader long-term health implications, noting that they extend beyond perceptions of Long-COVID as being akin to chronic fatigue syndrome.

She wrote: "COVID continues to be found in your brain, in your lungs, your heart—in fact, most of the crucial bits in your body, long after you have seemingly recovered. It has been

linked to higher risks and incidents of heart attacks and strokes. One epidemiologist said rather bluntly this week it ‘eats your heart, and kills your brain.’”

The obvious point is that the AFR and the ABC are hardly neutral parties when it comes to the normalisation of COVID.

Both aggressively promoted the reopening of the economy, and all the falsehoods used to justify it. This included the claims that Omicron, the strain that has resulted in most Australian deaths, was “mild,” that the spread of the virus would boost immunity, not cause major health issues as Tingle now documents, and that the pandemic would shortly end.

They, together with the rest of the official media, are principally responsible for the discussion on COVID going “underground.” Critical epidemiologists, who were once cited in the press, now find an audience only on social media. The WSWS is among a handful of publications that draws attention to the record fatalities.

Tingle’s article was published amid other reports of the impact of COVID over the weekend. The coverage does not mark a repudiation of the “let it rip” policy, which has universal support in establishment circles. Instead it is from the standpoint of the implications of the health crisis for the ruling elite. Such things as labour shortages and supply chain disruptions are no doubt front of mind.

On January 16, the *Sydney Morning Herald* reported on a new study by Nature Reviews Microbiology, with a headline “‘We’re all vulnerable’: One in 10 people will end up with long COVID, new study says.” It cited Professor Brendan Crabb, who explained: “Each time a person is reinfecting with the virus, they have the same likelihood of catching long COVID.” Crabb called for a “rethink of Australia’s relaxed attitude towards COVID-19,” aimed at reducing transmission.

On Saturday, the *Herald* reported: “More than 10,200 Australians died of ischemic heart disease in the first eight months of 2022—that is about 17 percent higher than would be expected in a normal year.” It stated: “The pandemic has caused a surge of fatal cardiac arrests in Australia, as delayed care and COVID’s damaging effect on the heart drives a major uptick in serious heart issues.”

Another article in the publication noted: “More people died last year than ever before. Sydney’s death industry has struggled to cope.” It said: “Everyone dies. But last year in NSW, far more people than usual did. Every single week up to September, dozens more deaths were reported than the state’s average. The cause is no secret: a rapidly ageing population combined with the ongoing impact of the pandemic.”

A January 22 article in the AFR warned: “Australia faces an era of unprecedented disease threat.” In addition to seasonally unusual outbreaks of RSV and other common respiratory illnesses, “new public health warnings have been issued about potentially serious bacterial infections that can become invasive, such as streptococcus A and meningococcus, which are also respiratory spread.”

Comments by Professor Dominic Dwyer, director of Public Health Pathology in New South Wales, highlighted the historic nature of the public health reversal. He said: “I don’t believe we have seen this before. There were complications of the influenza pandemic of 1918. But as there was limited diagnostic ability, much went undiagnosed.”

The COVID pandemic had “turned everything on its head.” Dwyer explained: “We used to have a typical pattern of respiratory diseases, but now, instead of just being a winter thing, not only did they begin occurring at different times, they did so with different frequency and different genetic characteristics.”

Australian governments are not instituting a single public health measure to address what is a threat to the entire population. As Tingle noted, even the COVID vaccine rollout, touted as a silver bullet justifying the lifting of all other safety measures, has effectively ended. Labor’s federal Health Minister Mark Butler has dodged questions about the rollout of a fifth vaccine dose or the provision of the more effective bivalent vaccines. As a consequence, even those who received all available vaccinations are largely without protection.

The COVID coverage of recent days, while pointing to the deadly nature of the virus, has advanced nothing insofar as a solution. The measures to eliminate COVID, including universal indoor masking, mass testing, contact-tracing, air filtration and, where necessary, lockdowns, are well known. The issue is that they potentially impact on the profits of big business.

That underscores the fact that the fight against the pandemic can only proceed in the form of a political struggle by the working class against the capitalist system and all those who defend it.



To contact the WSWS and the
Socialist Equality Party visit:

wsws.org/contact