

# Leaked UK government messages confirm pandemic crimes

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Britain's *Daily Telegraph* has begun publishing The Lockdown Files, a series of articles based on over 100,000 WhatsApp messages between former Health Secretary Matt Hancock and other leading figures in the government during the first two years of the pandemic.

The messages were given by Hancock to journalist Isabel Oakeshott in an act of supreme political idiocy. He wanted her help writing his autobiography, *The Pandemic Diaries*, presenting himself as an advocate for public health measures to control the spread of COVID-19—rather than the criminal responsible for tens of thousands of unnecessary deaths.

But Oakeshott was one of the most vocal anti-lockdown campaigners in the UK and is the partner of Richard Tice, leader of Reform UK—the former Brexit Party “relaunched”, in the words of Nigel Farage in November 2020, “to fight this cruel and unnecessary lockdown.” In an interview with the right-wing *GB News* platform last March, she described protective masks as “completely unnecessary symbols of fear and repression.”

Oakeshott writes in the *Telegraph* that she released the messages to “short-circuit” the UK’s “never ending inquiry” into the pandemic response and “avoid a whitewash”—by which she means anything which does not condemn such restrictions as were implemented as a “disaster”. Her primary target is the closure of schools—“Those responsible for school closures should now admit their mistake – and vow never to inflict such harm in the future.”

Allister Health, editor of the *Sunday Telegraph*, sums up the purpose of *The Lockdown Files*, insisting that governments should never again “panic, dig out their catastrophically flawed Covid playbooks, and seek to terrorise us into another lockdown, guaranteeing our final moral and financial degradation.”

But the conclusions Oakeshott and the *Telegraph* want to be drawn are far removed from those the working class

will draw from these messages. They so far provide more detail of the decisions which turned care homes into killing fields and reveal the constant efforts of sections of the Tory party to pursue an even more socially murderous course than that which has produced a death toll of over 200,000 people. All that stood in their way was fear of popular opposition.

Nearly 46,000 care home residents were killed by COVID during the first two years of the pandemic, close to a quarter of the total. On March 17, 2020, the government ordered the discharge of thousands of patients from hospitals into care settings. There was no requirement to test for COVID before doing so until April 15. But no policy of blanket testing of care home residents and staff was implemented, despite Hancock being advised to do so.

One of his messages dated April 14 reads, “Chris Whitty [the UK’s Chief Medical Officer] has done an evidence review and now recommends testing of all going into care homes, and segregation whilst awaiting result.” Later the same day, he set out a policy which limited testing only to those coming into a care setting from hospital, not the community: “I do not think the community commitment adds anything and it muddies the waters.”

Testing for those entering from the community was only recommended on August 14. There was no recommendation to care homes to segregate incomers from the community until given the all-clear. Testing of asymptomatic staff and residents only began at the end of April, with regular testing of staff only getting underway in early July.

The brutal ideology underlying this and other failures is made clearest by the leaked messages from Prime Minister Boris Johnson. His words fill in the details of the anti-public health policy he championed, and which were summed up by his angry declaration in October 2020,

“No more f\*\*ing lockdowns! Let the bodies pile high in their thousands!”

In one chat with Whitty and the Chief Scientific Officer Sir Patrick Vallance on August 26, 2020, Johnson misreads an article from the *Financial Times* as saying the overall fatality rate of COVID was 0.04 percent (in fact this was a probability figure, equating to 4 percent). He writes sneeringly that this is about “one in two thousand. And I seem to remember that when the plague began we thought the fatality rate was one in a hundred.”

He goes on stupidly, “So if all 66 m[illion] people in the UK were to be infected we could expect 33,000 deaths. And we have already had 41k. Is that why the death rate is going down? Is it possible that covid is starting to run out of potential victims?”

Informed that the overall mortality rate was between 0.4 and 1 percent, rising to 6 percent for older age groups, Johnson is unmoved. “If I were an 80 year old and I was told that the choice was between destroying the economy and risking my exposure to a disease that I had a 94 percent chance of surviving, I know what I would prefer.”

The callous disregard for the lives of thousands of elderly people was a running theme. Earlier in the month, Johnson had written exasperatedly, “If you are over 65 your risk of dying from covid is probably as big as your risk of falling down stairs. And we don’t stop older people from using stairs.”

He made this point to argue for an article published in the *Spectator*, “Herd immunity is still key in the fight against Covid-19,” written by the anti-lockdown advocate and Great Barrington Declaration (GBD) signatory Martin Kulldorf, who later that year defended President Trump’s “let it rip” COVID adviser Scott Atlas.

Johnson had met with other signatories to the pseudo-scientific, anti-public health GBD in September 2020—Professor Sunetra Gupta and Sweden’s state epidemiologist Anders Tegnell. The messages show he stayed in close contact with these circles. In November that year, he sent a note that he was “on a call” with Carl Heneghan, who sits with GBD authors Gupta, Kulldorf and Professor Jay Bhattacharya on the scientific advisory board of the anti-lockdown Collateral Global.

Johnson used their authority in an ultimately failed attempt to stop the November lockdown—though it was limited to the point it allowed a massive winter wave of infections to develop immediately afterwards. Over 56,000 people died in the two months from December 2020 to the end of January 2021.

It might have been even worse. With cases skyrocketing

at the end of December, Education Secretary Gavin Williamson was, in Hancock’s words, fighting “tooth and nail” and “going absolutely gangbusters” to have schools open for the new term. The health secretary worried about “a policy car crash when the kids spread the disease in January.”

In the end, schools were closed after just one partially attended day when it became clear educators would overwhelmingly refuse to go in, and many parents refuse to send their children. Williamson and Hancock had complained to each other a few months before, “What a bunch of absolute arses the teaching unions are”-“I know they really really do just hate work” after battles over school reopenings and delaying A-Level tests.

Messages refer to polling showing more than “50 percent of the public want the same \*or stronger\* lockdown” in April 2020, and that “80 percent of the public support the lockdown—there is no public clamour to start lifting measures,” in January 2021. When Johnson pushed to relax the first lockdown in the summer of 2020, he was warned “the whole package will be too far ahead of public opinion.”

The *Telegraph* cynically reports on concerns raised in government about the hardships caused by lockdowns—particularly to the elderly left isolated and children who education and social development was impeded—using these to decry the measure.

But the leaked messages show that these costs of implementing restrictions were exacerbated precisely because the government was so determined to avoid any public health measures at all, meaning those that were forced to be enacted by catastrophic rates of infection were poorly implemented and under-resourced. Schools had to be repeatedly closed because the government never took the necessary action to fully suppress and control the virus.



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