

Australia: NSW Labor government closes PCR COVID testing sites

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In a little-reported announcement on Tuesday, Chris Minns, the recently-elected premier of New South Wales (NSW), declared that his government would shut down all of the temporary Polymerase chain reaction (PCR) testing sites across the state.

The policy is one of the only concrete measures announced by Minns since Labor won a narrow victory in the March 25 state election. It is a reactionary attack on public health. After almost a year-and-a-half of governments across the country overseeing a “let it rip” spread of the virus everywhere, people are being denied even the right to know whether they have the potentially-deadly infection.

Not only was the announcement treated as a non-event by the media, which posted only a handful of uncritical stories. It was also implemented with extraordinary haste. Minns said that the clinics would be shut down in 24 hours. There were 164 of them, including 64 walk-in facilities and 52 drive-in only clinics.

Minns is a colorless career politician who has spent his entire adult life promoting right-wing “free market” politics. The announcement was entirely in keeping with this record and Labor’s character as a ruthless enforcer of the demands of big business and the banks.

“They’re temporary facilities, they’re not meant to be permanent,” Minns said. In his only other substantive justification of the measure, Minns added: “We travelled past one on the way to come to this press conference in Fairfield and it was empty.”

Even by the degraded standard of official politics, this is a pathetic statement. If Minns’ comment is accurate, government policies in the country’s largest state are determined on the basis of the premier’s observations from his car window. The image that comes to mind is of a tinpot dictator making substantive decisions with a snap of his fingers, behind the tinted windows of a limousine.

Or, more probably, Minns is simply making it up and implementing a policy that had been decided long before the election.

Pointing to the real reason for the change, Minns noted that the facilities cost money, and “We need to make sure that public money has been protected.” During the election

campaign, Minns feigned concern over the decrepit state of the public healthcare system. But his first measure in office is to shut an important component of it down.

COVID testing is, or should be, a “temporary” requirement, only insofar as the threat of mass coronavirus infection is “temporary.” But the pandemic is far from over. As a consequence of the bipartisan “let it rip” program, there is now a baseline of thousands of infections a week and scores of fatalities. Waves or surges of transmission build on that base, lifting cases to tens of thousands and deaths to hundreds.

This year, 3,085 deaths have been announced across the country, bringing the official total throughout the pandemic to 20,118.

By way of comparison, the national total of deaths only exceeded 3,100 on January 23, 2022. So the deaths in the less than four months of 2023 are approximately equal to the total number of fatalities in the entire first two years of the pandemic.

Through last December, January and February, national fatalities were consistently above 100 a week, reaching a peak of 523 for the week ending January 23. That was, arguably, the most sustained “wave” of mass death in the pandemic yet, rivaled only by the Omicron tsunami that was unleashed, as governments lifted most of the successful safety restrictions in December, 2021.

Deaths appeared to be decreasing in mid-March, prompting the usual sociopathic declarations from the media that the “worst” was behind, even as scores continued to perish each week. But for the week ending April 16, some 116 fatalities were announced, the first time 100 had been exceeded in five weeks.

Nationally, COVID hospitalisations have also risen sharply, from 1,292 on March 10, to 2,073 on April 21.

1,139 of those patients, or well over half, are in NSW. The state, together with Victoria, consistently accounts for the plurality, or often majority of deaths. And, despite sharply restricted testing, official infections in NSW were 12,388 for the week ending April 21. That is the highest weekly tally since the beginning of January, and almost double the infection totals of a number of weeks in February and March.

Experts have warned that because of the cutbacks to testing,

the true transmission rates are at least three to four times higher than the official figures indicate. That means it is entirely possible that almost 50,000 people contracted the virus across the state last week, as Minns decreed that his government would make it even harder for people to access a reliable test.

Not only are the infection numbers an understatement. So are the fatalities. Last year, 14,794 COVID deaths were announced across the country. But excess deaths, the number of fatalities that occurred, which would not have in a normal year, were estimated at between 20,000 and 25,000. So the 3,085 official deaths of 2023 are likely the tip of a deeper iceberg.

The excess deaths last year resulted in the first decline in Australian life expectancy since World War II, in a stark display of the historic reversal in public health that governments have perpetrated through their “let it rip” policies.

The full implications have yet to be revealed, given that as many as ten percent of all infections could result in the debilitating series of conditions known as Long COVID. That means that hundreds of thousands or even millions of people could have been afflicted with irreversible health issues, in what would be the worst mass disabling event in national history.

The reopening of the economy was carried out under former Liberal-National Coalition Prime Minister Scott Morrison. He received the support of the federal opposition Labor Party. Then NSW Coalition Premier Dominic Perrottet and his Victorian Labor counterpart Daniel Andrews formed a triumvirate with Morrison in forcing through the unpopular reopening.

Since its federal election last May, the federal Labor government of Prime Minister Anthony Albanese has gone further than Morrison could have. Albanese ended mandatory isolation periods for individuals infected with COVID. Together with the termination of federal COVID pandemic leave payments, this was a decree for sick workers to remain on the job.

Albanese ended daily reporting of COVID infections, illnesses and deaths, together with the state and territory leaders. His government also abolished any requirement for people to notify the health authorities of a positive COVID test result. Together, these measures make it impossible to track in real time, or close to it, the progress of the pandemic.

When safety restrictions were lifted, amid the first Omicron wave of late 2021, governments deliberately crashed the PCR testing system. They “encouraged” people to instead purchase less reliable and self-administered rapid antigen tests. The PCR system was scaled back substantially.

Then, in a further attack, the government published new testing guidelines last December. They declared that only “vulnerable” people should have access to a PCR test. And even they would be required to present a referral from their general practitioner (GP).

The bulk billing system, whereby governments subsidise

medical appointments, has broken down amid decades of underfunding. That means sick people, with conditions such as cancer, would be required to pay \$70 or more for a GP appointment, to get a referral for a PCR test.

This program has been implemented piecemeal, with people still reporting some exceptions. But Minns’ announcement is clearly in line with the new federal guidelines, aimed at dramatically reducing testing.

During the NSW election campaign, the trade unions, including in healthcare, aggressively campaigned for Labor. They claimed, despite all evidence to the contrary, that Labor would somehow alleviate the crisis in the sector and the broader hardships facing working people.

What has Minns actually done? In the election, he and the unions proclaimed that Labor would “break” the Coalition’s public sector wage cap of 2.5 percent. Minns has since indicated that Labor will restrict pay increases to 3.5 percent per annum, when official inflation was 7.8 percent last year.

Minns has consistently rejected the key demand of nurses, who remain in an industrial dispute, for nurse-to-patient ratios. Nor has he outlined a single policy that would address the breakdown of the public hospitals.

And now, he is preventing ordinary people from getting a COVID test.

That only underscores the fact that Labor, no less than the Coalition, is a ruthless defender of the financial elite, against the working class. So too are the corrupt and corporatised trade unions, which function as a police force of governments and big business.

COVID can be eliminated and the pandemic ended. The measures required are well known. They include mass testing, the universal provision of high-quality N95 masks, widespread air filtration, and where necessary, temporary lockdowns with full compensation for workers and small businesspeople. The issue is that such policies, which would save tens of thousands of lives, threaten the profit interests of the corporate elite.

The fight against the pandemic is thus a fight against capitalism and all of its enforcers, including Labor and the unions.



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