

New spike of COVID in Australia, highest deaths since February

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All available indicators show that Australia, like many other countries, is in the midst of a new spike of coronavirus transmission. Infections, hospitalisations and deaths are rising. The increase follows what the federal Labor government belatedly acknowledged was the most protracted surge of the entire pandemic, in late 2022 and the opening months of this year.

The most remarkable feature of the current uptick is that it has gone almost universally unremarked. Government leaders, at the state and federal levels, have said nothing about it. The official media, including the state-funded Australian Broadcasting Corporation, has shown a complete indifference.

This is the practical application of the “forever COVID” policy adopted by capitalist governments around the world. When they were lifting what had been highly successful virus suppression measures in December 2021, Australia’s governments and official medical authorities claimed that the pandemic would somehow end, and the impacts of the virus would taper off.

All these assertions have been exposed as lies. The pandemic has ended, only in the sense of the proverbial wise monkeys who see, hear and speak no evil. Effectively, what has been established is a new and highly regressive public health doctrine, where the continuous mass circulation of a deadly virus is ignored and treated as a non-event.

In the week ending May 26, the most recent figures available, there were 184 COVID deaths across the country. That is the highest level of mortality since the week ending February 17, when 195 fatalities were reported. Last week’s tragic toll was more than double the relatively recent lows of 70 deaths in the week to March 24 and 77 in the seven-day period ending April 7.

Deaths are a lagging indicator, showing up in statistical reports weeks after the transmission that caused them. With infections and hospitalisations continuing to increase, the fatalities will unfortunately only increase.

Last week, the national tally of confirmed COVID infections reported over the seven-day period was 41,399. That is the highest level since January 6 and the second-highest of the entire year. It is also well over double the figures that were being registered in a number of weeks of February and early

March.

The official infection figures have been completely unreliable since at least early 2022. All of the data sets for 2023 cover a period well after the Labor government removed any requirement for infected individuals to notify health authorities that they have a confirmed infection.

The recent increase, however, is notable, because the authorities have, over the very recent months, gone even further in dismantling access to testing. In line with federal guidelines unveiled late last year, the states and territories are shutting down the remnants of the Polymerase chain reaction (PCR) testing network.

While such exams can still be obtained in certain pathology offices and public hospitals, the PCR set-up that was purpose-built for COVID is largely being ended. In April, the newly-elected Labor administration in New South Wales, the country’s most populous state, suddenly announced that it was shutting 164 PCR testing facilities. It claimed that these services would be ended within 24 hours of the announcement.

But despite this, the infection count is growing. So are hospitalisations, with 2,555 people currently admitted to a medical institution for treatment required by a COVID infection. That tally is the highest since the second week of January. During an apparent ebbing of the virus, there were as few as 1,288 COVID patients in the last weeks of February.

Ominously, the hospitalisations are beginning to approach the peaks of the last surge, when more than 3,500 people were in hospital for COVID treatment during parts of December, 2022. Those levels of hospitalisation were associated with massive deaths, in the hundreds a week, with a high of 523 in the week ending January 27.

With the end of all safety restrictions, including masking, the virus is no doubt virtually everywhere. But once again, it is the most vulnerable sections of the population who are being hit the hardest.

According to the federal Department of Health, in the week to May 26 alone there were 482 COVID outbreaks in residential aged-care facilities. There were 2,755 active cases among residents, including 603 confirmed over the preceding seven days. That is an almost six-fold increase on the 102 positive COVID tests among aged care residents in the period covering

the first week of May.

In the city of Newcastle, about two hours north of Sydney, there are at least 10 aged care facilities in lockdown due to COVID outbreaks. As the reporting of such events is non-existent and such knowledge is the result of anecdotal evidence, it must be concluded that there are dozens of nursing homes similarly impacted.

The dangers were hardly unknowable. In every single outbreak of the more than three-year pandemic, the aged care facilities have been transformed into killing fields. But governments have done nothing.

In comments cited by the *NCA Newswire* last week, University of South Australia Professor Adrian Esterman said there were “obvious signs” that a new COVID wave was beginning. Esterman warned of a “triple whammy,” with a spike of influenza, Respiratory Syncytial Virus and the country’s fifth Omicron wave since the “reopening of the economy” at the end of 2021.

The *Newswire* noted: “Flu cases are 100 times higher than last year, with over 40,000 laboratory-proven reports since the start of 2023.” Substantial outbreaks have been recorded in Queensland and Western Australia, while transmission is being recorded in every other state.

In what should be a national outrage but has largely passed without comment, federal figures released on May 24 showed that just 42.9 percent of eligible aged-care residents had received their latest COVID booster vaccine dose.

When they were abolishing all other public health measures, governments proclaimed the vaccine to be a silver bullet, justifying an end to safety restrictions and creating the conditions for the pandemic to be overcome. Vaccination is crucial, but all experience has demonstrated that separate from other public health policies, such as mandatory indoor masking, air filtration, and where necessary lockdowns, inoculation alone cannot halt transmissions, illnesses and deaths.

However governments now are not even attempting to ensure the vaccine protection of the cohort that is most vulnerable to COVID illness and death, the elderly in aged-care facilities. This goes beyond indifference and negligence. Amid ongoing commentary about the fiscal burden of an aging population, it amounts to a eugenicist cull.

Children, the other most at risk demographic, are also being hammered by the virus. As the WSWS recently reported, numbers of schools have been compelled to institute temporary online learning arrangements. Far from reflecting a concern on the part of governments and the health authorities over transmission among kids, the temporary shutdowns are being caused by the fact that all available teachers are contracting the virus, amid a major staffing crisis in the sector.

The relative prevalence of different variants of the virus is unknown, because there is no government body that is actively tracking the spread. Much of the sampling is based on tests from overseas visitors, which says little about community

transmission. The limited data, however, indicates that different variants are predominating in different states.

Essentially, the country, together with the rest of the world, has been transformed into a petri dish, all but guaranteeing the emergence of new variants. Experts have warned it is only a matter of time before an even more transmissible and even more deadly iteration of the virus is identified.

More critical epidemiologists, who were once regularly cited in the official media, have been “deplatformed.” Their voices can be heard only on social media sites such as Twitter. In effect, authoritative and scientifically based public health advice has been forced underground.

One such expert recently noted that federal Labor Health Minister Mark Butler has presided over more mass death than any of his counterparts since World War II. Butler, and federal Labor, have been in office for just over 12 months.

There is a degree of shock and anger among those who follow the pandemic, that Labor’s election, at both the federal level and in almost every state and territory, has not altered the course of COVID policy in the slightest. More than that, the federal Labor government has gone further in dismantling any coordinated public health response than its conservative predecessor was able to.

That underscores the fact that Labor is a party of the ruling elite, committed to enforcing the dictates of the corporate elite against the working class, even if it means levels of preventable death not seen outside of war time.

More broadly, it demonstrates that the homicidal “let it rip” policy is not the result of the proclivities of this or that official politician. Rather it is the true face of contemporary capitalism, highlighting the urgent need to fight for a socialist perspective aimed at placing social need, including to health and life itself, above private profit accumulation.



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