

# Two Australian schoolgirls die amid surge of flu infections

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The recent deaths of two school-aged girls from influenza highlights the danger from a major surge of the virus that is currently sweeping Australia. The profit-driven removal by state and federal Labor governments of almost all public health measures to prevent the spread of COVID-19 has created the conditions for mass flu infection, in parallel with the ongoing pandemic.

Emma Schwab, an 11-year-old girl from the Sunshine Coast in South East Queensland, died from Influenza B on July 6. Less than a week later, New South Wales (NSW) Health reported the death of another young person from the B strain, a 15-year-old high school student in the state's Central Coast region.

The tragic fatalities highlight the danger of flu, which has killed at least 134 people in Australia this year, and, in particular, Influenza B, the effects of which tend to be most severe among pregnant women and children, including those who are otherwise healthy. Children have developing immune systems which are not capable of mounting an effective response to the virus.

As of July 9, some 71 percent of Australians admitted to hospital for influenza this year were children younger than 16. Of those, 5.9 percent were admitted directly to intensive care units (ICUs). Since May 2023, at least 16 children have been admitted to ICU with life-threatening complications from influenza, which include serious heart, brain, and muscle-related issues.

In Queensland, in the first two weeks of July, 89 children were admitted to hospital for influenza, with 58 infected with the B strain.

By 20 July, 168,133 laboratory-confirmed cases of influenza had been recorded by the National Notifiable Diseases Surveillance System (NNDSS), 44 percent of which were among children under 15. Children under 5 accounted for 12.68 percent of the total, with 21,327

cases recorded, while 33,318 infections (19.82 percent) occurred in those aged 5-9, 19,971 (11.88 percent) among 10-14 year olds and 11,358 (6.76 percent) in adolescents 15-19.

Although the typical Australian flu season is only at the halfway point, more than 15,000 Influenza B infections have been recorded, more than the total number in all of 2019.

Some infectious disease experts have suggested that the surge of flu infections among children is partially the result of the almost total suppression of the virus in 2020 and 2021, when COVID-19 public health measures were in place.

Like COVID-19, influenza is an airborne virus, and the implementation of measures such as masking, indoor capacity limits, remote learning and working, isolation requirements and wider access to sick leave were highly effective. In 2021, just 749 cases of influenza were recorded in Australia, while only 21,351 were detected in 2020. While the removal of public health measures led to 233,367 influenza cases being recorded last year, the B strain accounted for fewer than 200 infections.

Professor Frank Beard, associate director at the National Centre for Immunisation Research and Surveillance (NCIRS), told the Special Broadcasting Service (SBS) that, as a result, "children would be more likely not to [have been] exposed to influenza B before, as opposed to adults who have had various infections over the years, including A and B, and also vaccination which can contribute to immunity as well."

According to NCIRS data, just 14.3 percent of children aged between five and fifteen have received flu vaccinations this year. Rates are not much higher for other age groups, with 20.9 percent coverage among 15-50 year olds, 24.5 percent for children under five,

35.1 percent for 50-65 year olds and 62 percent among those 65 and older.

Federal and state governments, both Labor and Liberal, have ignored the need for effective public health information, leading to much confusion over vaccine need and safety. A 2022 poll conducted by the Royal Children's Hospital in Melbourne found that one in three parents did not know that healthy children can get seriously unwell from the flu, while more than half were unaware that it was safe to vaccinate children for influenza and COVID-19 at the same time.

With growth in inflation and interest rates massively outstripping nominal wage increases, cost is one factor behind the low influenza vaccination rate. The federal government funds flu shots for children under five, pregnant women, people over 65 and others deemed to be at high risk, but not for school-aged children.

Vaccination providers are allowed to charge an "administration fee," meaning in many cases "free" flu shots cost almost as much as "paid" ones. Prices are generally between \$15 and \$30, meaning an average family may have to pay more than \$100 to get vaccinated.

In response to public concern over the infection, illness and death of children from influenza, the Queensland Labor government announced Monday that all residents of the state could receive free flu shots, without administration fees, between July 22 and August 31. The NSW Labor government refused to implement a similar measure, merely urging people to get vaccinated.

But the Queensland measure comes far too late, as it takes around two weeks after vaccination for the body to build up enough antibodies to protect against infection, while the state's flu season typically peaks in August. The move has more to do with covering up the Labor government's responsibility for allowing respiratory viruses, including COVID-19 and influenza to spread freely through schools and the broader community.

The severity of influenza and other respiratory illnesses, especially among children, has been downplayed for years by governments and health authorities. This has reached new heights with the campaign, spearheaded by Labor, to declare that the COVID-19 pandemic is "over," even as hundreds of Australians continue to die every week, while tens of

thousands more are infected and reinfected, and ever-growing numbers endure Long COVID.

Under the profit-driven "let it rip" policies adopted by all governments globally, in line with the demands of big business, there can be no reintroduction of the public health measures whose effectiveness in suppressing COVID-19 and influenza was proved in Australia at an earlier stage of the pandemic.

The experience of workers throughout the world since the beginning of 2020 makes clear that they cannot afford to place their health and lives, or that of their families, in the hands of capitalist governments. Public health policy must not be allowed to be determined according to the interests of corporations and the financial elite!

Instead, rank-and-file committees must be formed in workplaces, schools and communities to implement the well-documented and necessary public health measures to limit transmission of influenza and other respiratory illnesses, including ventilation, filtration and indoor air quality monitoring, vaccination, isolation and masking. This should be seen as a first step in a global struggle by the working class to eliminate COVID-19 and prevent the spread of future pandemics.



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