



SEEK THE TRUTH AND SERVE HUMANITY

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EDITORIAL

The 'religion' of the capitalist system is profit. It is the god they worship and the altar on which they sacrifice anything or anybody that stands in the way of accumulating ever-more profit. They sacrifice health, housing, welfare, education, social security, the aged and the environment at the altar of their 'religion'. Nowhere is this more obvious than the appalling response around the world to the worst pandemic for one hundred years. The initial response from most world governments was not how best to protect the people of this world from the impact of the global pandemic, but how it would affect their economies, how they could best protect their profit and what influence they could achieve by targeting the countries in need.

In a just world where equality for all and true democracy prevails, the pharmaceutical companies would have been instructed to concentrate on providing a resource to vaccinate the world's people regardless of where they lived or how poor they were. Instead, the pharmaceuticals (heavily subsidised by tax dollars) raced to develop vaccines in order to make huge profits – and indeed they did. Pfizer alone announced the vaccine brought them US\$3.5 billion in revenue in the first three months of this year, nearly a quarter of its total annual revenue. The vaccine was far and away Pfizer's biggest source of revenue according to the *New York Times*.

Compare these heavily subsidised pharmaceutical companies under capitalism with tiny socialist Cuba, suffering from a protracted and disgraceful US embargo, unable to obtain many of the necessities of life, but whose people are dedicated to serving their

compatriots not for profit but for ensuring their needs are met. Their doctors continue to serve the people despite having the opportunity to work elsewhere for much higher salaries. 'We do have offers,' said Dr Mitchell Valdés-Sosa, a Chicago-born neurologist who sits on the country's coronavirus taskforce. 'But we prefer to stay because we feel a commitment to the development of our country. We're not working to make some chief executive obscenely rich; we're working to make people healthier.'

Compare the actions of the imperialist powers in relation to the Israeli genocide in Palestine, with their belligerent condemnation of China for human rights abuses. Are they not human rights abuses that are currently being imposed on the Palestinians by Israel? Calling on the 'two sides to cease fire' as if they are equal nations in dispute when landlocked Palestine is unable to receive any help, its infrastructure is being destroyed, and it is being deprived of fresh water, food and medical supplies. Palestine, that is using archaic weapons against Israel's up-to-date armoury of weapons. Israel, which is practising genocide, apartheid and slaughter. Where is the justice for Palestine? We live in a world of profiteering and exploitation, of power and politics vs justice and peace.

Those who support the religion of capital have neither morals, nor standards, nor values. They are simply engaged in perpetuating a system that continues to diminish our lives, exploit our values and perpetuate the impoverishment of the many. We cannot simply accept that there is no other way. There is. A new system is needed.

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AN ADDRESS DELIVERED VIA ZOOM ON 11 APRIL 2021



Confronted by the COVID pandemic, many of us, especially at the end of 2020, may well have been feeling we should get back to 'business as usual' as soon as possible. Yet we really need to take to heart the advice conventionally attributed to Winston Churchill when he said, 'Never let a good crisis go to waste'. Whatever the truth of that attribution, we wasted the previous crisis now known as the Great Recession of 2008. This time the current COVID-19 crisis has perhaps not really given us much choice. It has demonstrated the point of Theodor Adorno's aphorism that 'The splinter of glass in your eye is the best magnifying glass'.¹

In this short presentation I want to make three points. Firstly, the COVID shock crashed onto an already deeply damaged society and economy, one characterised by inequality. Secondly, the political and policy responses set loose after March 2020 here in Australia, while in many cases they protected us from the worst that COVID could do, exacerbated the damage done by 40 years of neoliberal policymaking.

Finally, in a time of shock and deep trauma, and given the experience of previous pandemics like the Black Death (1343–1356) or the Spanish Flu epidemic of 1918–20, we should have expected a significant increase in delusions, mass panic and fear and irrationality. As an explosion of anti-vaxx groups and protests suggests, we weren't disappointed. Yet we need to be clear in affirming the value of science and rationality. The only good news is that good science did not let us down: the development of COVID

vaccines like Pfizer and AstraZeneca highlight the value of evidence-based medicine and might even one day come to play an equivalent role in good policy.

THE CRISIS OF COVID

The COVID crisis reveals that we are now precisely at what the idea of crisis has always meant: we are at a crossroads and we need to decide which path to take. One path, expressed metaphorically, involves 'getting to the other side' and back 'to business as usual'. However, what the 'splinter of glass' reveals is that the suffering, pain and devastation set loose by the COVID-19 pandemic occurred precisely because of long-term fundamental economic, institutional and ideological changes underway since the 1980s. It is those changes, and the damage they have already done to vast numbers of ordinary people, that mean we must now seize the opportunity to chart a different path.

The COVID shock crashed onto an already deeply damaged society and economy, one characterised by deepening economic and social inequality and a deep crisis. This of course is not how many Australians have understood what has been going on because the official view and what is left of the mass media has persisted in telling us the Australian economy was in great shape having enjoyed decades of unbroken growth since the early 1980s. The future it seems would simply consist of more of the same.

That view is summed up in a 2018 release put out by the Australian Trade and Investment Commission

1 Theodor Adorno, 1978, *Minima Moralia* (trans. ed. S Jephcott), London: Verso.

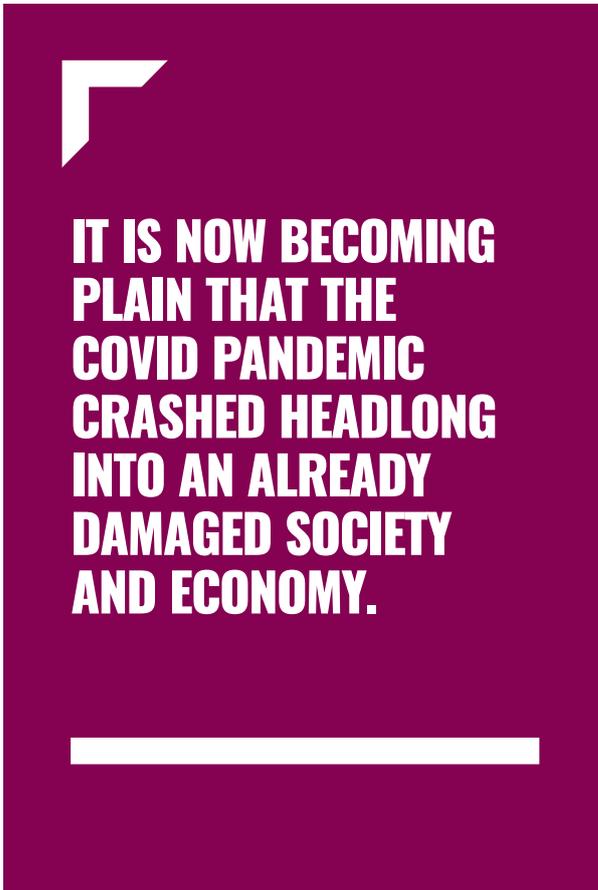
(2018), crowing that 'Australia holds world record for longest period of growth among developed economies'. This report emphasised that by 2018, Australia had enjoyed '27 years of uninterrupted annual economic growth' based on an average GDP growth rate of 3.2% per annum.

This official view has been paralleled in striking fashion by how the media has repeated and even amplified this roseate account. In Australia the Murdoch press has repeatedly played up Australia's record period of continuous economic growth as journalists, including Paul Kelly (2009), celebrated the role played by the Hawke ALP government's reforms in modernising the economy. As another commentator Richard Holden put it, 'Hawke will be remembered as a reformer – presiding over ... economic reforms that modernised the Australian economy and set the stage for the prosperity of the last three decades' (Holden 2019). External observers concurred. *The New York Times* no less, referred to the 'Australian economic miracle' in a story about the 'remarkable resilience of the Australian economy, which has gone nearly 28 years without a recession' (Irwin 2018).

We simply cannot afford to believe the story that COVID is responsible for a terrible shock to an otherwise healthy economy. It is now becoming plain that the COVID pandemic crashed headlong into an already damaged society and economy. Though the economic and social damage produced by policy efforts to protect us from the virus and chiefly registered as unemployment and economic stress has been deep and painful, it has been nowhere near the scale of the damage already in place before the Great Recession of 2008.

Missing entirely and in an entirely symptomatic way from these delusional accounts is any reference, let alone a detailed account, of the increasing scale of income and wealth inequality not seen since the early twentieth century. Similarly absent is recognition of the effects of persistent unemployment and underemployment, the crisis of housing affordability, persistent stagnant wages and productivity, increasing household debt stress, and the industrial scale of corporate malfeasance, especially in the banking and financial sectors, but manifest also in repeated 'discoveries' of massive wage theft. Compounding the failure to describe what has actually been happening, has been any willingness to say why this has been happening since the first waves of neoliberal 'reform' were set loose by the first and greatest of our neoliberal governments, the Hawke-Keating government (1983–1996).

It has not helped Australians to get clarity about what was happening, that both Labor and Coalition parties embraced the neoliberal project between 1983 and 2020 (notwithstanding Kevin Rudd's nonsensical claim in 2009 that the ALP was a 'social democratic' party). This was camouflaged in part by the way clearly 'left-leaning' actors, including ex-communists and working-class organisations, including most of the trade union movement, enthusiastically promoted the Hawke-Keating government's neoliberal agenda while relying on the canard that only right-wing or conservative governments led by the likes of Thatcher or Reagan could be neoliberal (Humphrys 2019).



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Thirdly, believing governments and conventional economists, whose grip on reality is usually weak at best, too many of us swallowed the story first peddled by the Hawke-Keating Labor government back in 1983, and adopted by every one of its successors, that they were simply modernising 'an excessively regulated', 'over-protected' and 'unproductive' economy. Here a refusal on the part of too many economists to practise close description of what is actually happening, rather than offering abstracted, theory-laden mathematical projections of what ought to be happening played its part.

THE COVID ECONOMY

The damage done to the fabric of Australian society by decades of neoliberal policy has been amply demonstrated by the way both the virus and COVID policies directed at containing the virus targeted vulnerable groups while benefiting the economically advantaged.

The facts of this are indisputable. We saw a similar ruthless efficiency in the way the virus homed in on older Australians needing care. As some writers have already noted, 'social inequalities in health are profoundly, and unevenly, impacting COVID-19 morbidity and mortality' (Abrams and Szeffler 2020). As of October 2020, the fact that of the 897 deaths so far, 676 occurred in aged care facilities, is hardly down to bad luck (Australian Department of Health 2020). Well before COVID, the 'Interim Report of the Royal Commission on Aged Care', running since late 2018, was reporting that the decision to hand aged care over to 'market forces' had not been taken with enough consideration, while the emphasis on competition, consolidation, and reduced regulation

was driving deteriorating levels and skills of staffing and care. In 2020 the combination of understaffed aged care facilities and the employment of underpaid, low-skilled workers working across multiple facilities, directly contributed to the fearful death toll among aged care residents. The disaster of aged care became a catastrophe during COVID, testifying as Russell Broadbent MHR said recently to the way 'profit became more important than care' (cited Bongiorno 2020:13).

A similar effect is evident in COVID policy on employment. COVID-related unemployment targeted already vulnerable people. By September 2020 some one million people were unemployed, while another 1.3 million people were underemployed. COVID-related unemployment targeted large numbers of low paid, young, casual workers with all the efficiency of an Exocet missile, highlighting with terrifying clarity some basic changes in Australia's economy and its labour market since the 1980s (Coates et al. 2020).² Both the virus and the quarantine lockdowns hit workers in labour intensive industries requiring close physical proximity to customers or co-workers, such as hospitality, health and aged care, private security, tourism, retail trade, education, and the 'gig economy', all of them involving jobs not easily done from home (Coates et al. 2020: 20).

At the same time, even as the impact of COVID slashed working hours by a record 9.8 per cent – with an obvious impact on wages – *business profits actually increased*. This was largely a result of a mix of business subsidies and effective tax cuts. JobKeeper subsidies worth \$31.0 billion were paid to employers, while another program called Boosting Cash Flow for Employers worth \$16.0 billion added an additional \$3.6 billion to business income (ABS 2020). As the ABS noted imperturbably:

*Federal government support to business made in the form of subsidies to JobKeeper resulted in a **strong rise in profits**. JobKeeper and boosting cash flow for employers are the largest and second largest subsidies ever recorded in the national accounts (ABS 2020) (Our stress).*

In addition, business taxes (minus subsidies like JobKeeper) *actually fell a record 111.9 per cent*, reflecting a large rise in subsidies on production and imports worth an additional \$49.7 billion or an increase of 859.7 per cent.

So, while the Morrison government spin insisted that JobKeeper was designed to support businesses adversely affected by the COVID-19 pandemic, thereby enabling them to keep their workers on by subsidising the cost of wages, this has not actually happened. This is evidenced by the increasing levels of unemployment and underemployment and the massive hit to wage income. In mid-2020, the growth in profits coupled with the fall in wage income resulted in labour's share of total factor income falling below 50 per cent for the first time since September 1959 (ABS 2020). This case rebuts the longstanding

neoliberal claim about the 'trickle down' effect that is supposed to occur when business gets tax benefits and other forms of assistance. COVID has in fact delivered a windfall profit to Australian business with no real benefit to many ordinary Australians.

The sharp rise in unemployment in 2020 triggered by six months of emergency COVID restrictions should not be allowed to disguise the fact that the Australian labour market had been stuck since 2008–9 in a mix of increasing underemployment, stagnant productivity and non-existent growth in real wages. And this in turn was a consequence of deep structural changes underway since the 1970s. In what follows, we document this claim.

The fact is that most Australians, whether affected directly or indirectly by COVID in 2020, have been caught up in a long-term fundamental process of economic, social and technological disruption which has eroded the historical commitment to equality – and with it the need to rewrite the policy rulebook.

THE ROLE AND VALUE OF SCIENCE

Hostility to scientists has been one of the toxic forces released by the COVID pandemic. A lot of nonsense has been peddled by various conspiracy theorists/ right-wing groups and populists with a grudge against sciences. In times of crisis, misinformation, fear and delusion abound. Right-wing movements ranging from QAnon to the Stop the Steal in the US have told us that COVID-19 could be cured by ingesting fish tank cleaning products containing chloroquine, or that COVID was developed in Chinese (or American, or French) labs. Apocalyptic warnings about the vaccine have fed into the far-right narrative that the government cannot be trusted. In the US, Alex Jones, who runs *Infowars*, reported on a supposed European Union report revealing that COVID vaccines had only killed 4,000 people and infected only 162,000 Europeans. On Christmas Eve Steven Brandenburg, a Milwaukee-area pharmacist, attempted to destroy more than 500 doses of COVID vaccine because he feared the Moderna drug would 'alter the recipient's DNA'. Described in law enforcement documents as a 'conspiracy theorist', Brandenburg, 46, had reportedly warned his wife that 'the world is crashing down around us' and that 'the government is planning cyberattacks and plans to shut down the power grid,' according to divorce court documents. Anti-vaccine protests here in Victoria have claimed that the rollout of the vaccines is part of a plot by the New World Order and part of a 'scamdemic', a theory that the pandemic is essentially a hoax. Vaccines are a magic potion, a way to implant a tracking chip, prelude to more oppressive lockdown measures, or a way to alter one's DNA, extreme vaccine scepticism has migrated from popular platforms like Facebook, YouTube and Twitter to apps like Telegram, Parler and Rumble.

For the record, since the first description of a coronavirus-related pneumonia outbreak in December 2019, the SARS-CoV-2 virus (to give it its proper name) that causes the COVID-19 disease has

² As Coates et al. (show young people aged under 24 have been hardest hit, with 44 per cent of those in the labour force losing hours or jobs due to COVID-19, *ibid*, p. 22).

MORTALITY FOR COVID-19 APPEARS HIGHER THAN FOR INFLUENZA, ESPECIALLY SEASONAL INFLUENZA.

evolved into a pandemic, and as of today, more than 135 million people globally in over 210 countries have been confirmed to have been infected and 2.9 million people have died of COVID-19.³

As you will all know, one of the fundamental difficulties early on was the belief that COVID was just like the flu. It isn't, because of the fact that large numbers of people can show no symptoms – unlike flu – and yet still spread it. This hampered early attempts to design effective policies.

On the claim that COVID was no more serious than the 'flu, one good French study made the point that COVID was far more serious. Patients admitted to hospital with COVID-19 more frequently developed acute respiratory failure, pulmonary embolism, septic shock, or haemorrhagic stroke than patients with influenza, but less frequently developed myocardial infarction or atrial fibrillation. In-hospital, mortality was higher in patients with COVID-19 than in patients with influenza (15 104 [16.9%] of 89 530 vs 2640 [5.8%] of 45 819), with a relative risk of death of 2.9 (95% CI 2.8–3.0) and an age-standardised mortality ratio of 2.82. Of the patients hospitalised, the proportion of paediatric patients (< 18 years) was smaller for COVID-19 than for influenza (1227 [1.4%] vs 8942 [19.5%]), but a larger proportion of patients younger than 5 years needed intensive care support for COVID-19 than for influenza (14 [2.3%] of 613 vs 65 [0.9%] of 6973). In adolescents (11–17 years), the in-hospital mortality was ten-times higher for COVID-19 than for influenza (five [1.1%] of 458 vs one [0.1%]

of 804), and patients with COVID-19 were more frequently obese or overweight.⁴

More generally, while the range of symptoms for the two viruses is similar, the fraction with severe disease appears to be different. For COVID-19, data to date suggest that 80% of infections are mild or asymptomatic, 15% are severe infection, requiring oxygen and 5% are critical infections, requiring ventilation. These fractions of severe and critical infection would be higher than what is observed for influenza infection. Those most at risk for severe influenza infection are children, pregnant women, elderly, those with underlying chronic medical conditions and those who are immunosuppressed. For COVID-19, our current understanding is that older age and underlying conditions increase the risk for severe infection.

It has been very hard to say what the infection mortality rate is. The infection fatality rate is not a fixed physical constant, and it can vary substantially across locations depending on the population structure, the case mix of infected and deceased individuals, and other local factors.

Mortality for COVID-19 appears higher than for influenza, especially seasonal influenza. While the true mortality of COVID-19 will take some time to fully understand, the data so far available indicates that the crude mortality ratio (the number of reported deaths divided by the reported cases) is between 3–4%, the infection mortality rate (the number of reported deaths divided by the number of infections) will be lower. For seasonal influenza, mortality is usually well below 0.1%. However, mortality is to a large extent determined by access to and quality of healthcare.

Another good study suggests that the median infection fatality rate across all 51 locations was 0.27% (corrected 0.23%). Most data came from locations with high death tolls from COVID-19 and 32 of the locations had a population mortality rate (COVID-19 deaths per million population) higher than the global average (118 deaths from COVID-19 per million as of 12 September 2020; 79 Fig. 3). Uncorrected estimates of the infection fatality rate of COVID-19 ranged from 0.01% to 0.67% (median 0.10%) across the 19 locations with a population mortality rate for COVID-19 lower than the global average, from 0.07% to 0.73% (median 0.20%) across 17 locations with the population mortality rate higher than the global average but lower than 500 COVID-19 deaths per million, and from 0.20% to 1.63% (median 0.71%) across 15 locations with more than 500 COVID-19 deaths per million. The corrected estimates of the median infection fatality rate were 0.09%, 0.20% and 0.57%, respectively, for the three location groups.⁵ Ioannidis' study represented 82 different estimates of the infection fatality rate of COVID-19, but they are not fully representative of all countries and locations around the world. Most of the studies are from locations with overall COVID-19 mortality rates that are higher than the global average.

3 Wang et al. 2021, 'COVID-19 in early 2021: current status and looking forward'.

4 (Piroj et al. 2021) 2021 Comparison of the characteristics, morbidity, and mortality of COVID-19 and seasonal influenza: a nationwide, population-based retrospective cohort study.

5 John PA Ioannidis, 2021, 'Infection fatality rate of COVID-19 inferred from seroprevalence data'.

One local study came to a quite different result: As of 31 August 2020, estimates of the time-delay adjusted case fatality rate (CFR) for men and women in Chile are 4.16% [95% Credible Interval (CrI): 4.09–4.24%] and 3.26% (95% CrI: 3.19–3.34%), respectively, while the overall estimate is 3.72% (95% CrI: 3.67–3.78%). Seniors aged 80 years and over have an adjusted CFR of 56.82% (95% CrI: 55.25–58.34%) for men and 41.10% (95% CrI: 40.02–42.26%) for women.⁶

As John Gray has noted in a great essay in the *New Statesman*, we need to be thankful for modern science but understand its limits.

On the one hand, the pandemic is not a once-in-a-century traumatic event, but a revelation of the fragility that lies at the bottom of our way of life. When the true human situation is suddenly exposed, the result is cognitive chaos. Paranoid mass movements – in which human misfortunes are represented as resulting from the machinations of hidden elites – are emerging as powerful forces, not for the first time in modern history. The present danger is that they could divide society and undo the struggle to contain the pandemic.

On the other hand, without science and the knowledge it yields, we would be practically helpless in the face of the pandemic. If some such virus had spread in pre-Pasteur times, just over a century and a half ago, it could have killed many millions.

Vaccines like AstraZeneca and Pfizer will give us a high degree of protection against the virus. We owe this triumph, and the ever-more effective treatments that will surely follow, to the genius of science. Asa Lawrence Wright notes in a recent issue of *The New Yorker*, American scientists had already worked out how to design an effective COVID vaccine back in March 2020.

The enduring achievement of science is explaining why a pandemic of this sort was bound to occur and how we should prepare for others in future. Epidemiologists warned for many years that the disruption of natural habitats increased the danger of outbreaks of zoonotic (animal-to-human) diseases. Some also observed that factory farms have become cesspits of bacterial diseases, which can easily jump into human populations.

The most fundamental effect of the pandemic – and for many the most disturbing – is that it has pricked the bubble of human supremacy. We are told we live in the Anthropocene, a geological epoch defined by the transformative impact of the human species on the planet. If it refers to climate change and mass extinction, the Anthropocene is a concept that reflects reality. If it means humans are in control of the Earth, it is nonsense. The neglected lesson of science is that the planet belongs to the microbes. We can use our growing knowledge to protect ourselves from the dangers of the natural world, but we cannot rule over it.

As John Gray notes, science is a means of coping with uncertainty, not of abolishing it. Nor is it sensible to expect science to deliver us from human folly.

Probabilistic models of the spread of the disease and potential death rates have been criticised for being inaccurate. This was strikingly so, for example, in the case of early projections produced by the Imperial College epidemiologist Neil Ferguson, who became a 'hate figure' for the far right. In this case the early modelling of COVID was wrong – and it got corrected. Good science encourages us to learn from these errors as more and better evidence becomes available.

Unfortunately, any increase in scientific knowledge does not make the behaviour of human beings any more rational. The millions of Americans who crossed the country to celebrate Thanksgiving were warned by scientists that they risked triggering spikes in infections and deaths, but they set off on their travels anyway. Whatever the criticisms to be made of Australia, we, like Taiwan, adopted science-based policy measures, the single most effective of which was banning international travel. The country that has been most successful in controlling the pandemic is Taiwan, which has a population of nearly 24 million and eliminated community transmission without lockdown by rapidly curtailing international air travel, early screening, publicly funded quarantine, efficient tracing and universal mask use.

In Victoria we saw a mix of science-based policy that worked – and folly. To this day no one knows who made the decision to employ private security guards at the Melbourne quarantine hotels, a decision that triggered a disastrous second wave. Nor can we get rid of human folly or delusion. This will affect the take-up of vaccines. Apart from the logistical problems of getting enough supply, if opinion polls are to be believed, something close to half of the people of France may refuse vaccines against the virus, and just under a third of Germans say they will do the same. In the US, attitudes seem to be correlated with polarised political allegiances. Many in Western democracies may resist or delay being vaccinated. One recent Australian survey found that 72 per cent of Australians are 'very likely' to get a COVID-19 vaccine – a decline in intention to vaccinate between September 2020 and January 2021.

In conclusion, in one sense we have done well in dealing with the COVID pandemic. In another we have failed to understand how COVID crashed into a damaged society. The scale of economic disruption underway since the 1980s and now because of COVID means there can be no going back to free-market capitalism and a neoliberal policy frame. A quick and strong economic recovery is possible as long as no attempt is made to revert to neoliberal fiscal policies. The economy is so weakened that it needs continuing government stimulus simply in order to keep functioning. Public borrowing is at enormous levels, but if it is severely curtailed the result will be disaster. If we can fix COVID, can we not fix the problems of an increasingly unequal society that also need to address the existential crisis of global warming? We should never ever let 'a good crisis go to waste'.

⁶ Eduardo A Undurraga et al. 2021, COVID-19 case fatality risk by age and gender in a high testing setting in Latin America: Chile, March–August 2020.

FROM LETTERS FROM AN AMERICAN

The 1918 influenza pandemic killed at least 50 million people across the world, including about 675,000 people in the United States. And yet, until recently, it has been elusive in our popular memory. America's curious amnesia about the 1918 pandemic has come to mind lately as the United States appears to be shifting into a post-pandemic era of job growth and optimism.

A year ago today, I noted that we were approaching 17,000 deaths from COVID-19. Now our official death count is over 560,000. If anyone had told us a year ago that we would lose more than a half million of our family and friends to this pandemic, that number would have seemed unthinkable. And yet now, as more shots go into arms every day, attention to the extraordinary toll of the past year seems to be slipping.

Remembering the nation's suffering under the pandemic matters because the contrast between the disastrous last year and our hope this spring is a snapshot of what is at stake in the fight over control of the nation's government.

Ever since President Ronald Reagan declared in his 1981 inaugural address that 'government is not the solution to our problem; government is the problem', Republicans have argued that the best way to run the country has been to dismantle the federal government and turn the fundamental operations of the country over to private enterprise. They have argued that the government is inefficient and wasteful, while businesses can pivot rapidly and are far more efficient than their government counterparts.

And then the coronavirus came.

The president put his son-in-law, Jared Kushner, in charge of the nation's response to the pandemic. Kushner sidelined career officials who knew how to source medical supplies, for example, in favour of young volunteers from investment banks and consulting firms. The administration touted what its leaders called an innovative public/private partnership to respond to the country's needs, but a report from Representative Katie Porter (D-CA) documented that as late as March 2, the administration was urging American businesses to take advantage of the booming market in personal protective equipment (PPE) to export masks, ventilators, and PPE to other countries. Porter's office examined export records to show that in February 2020, 'the value of US mask exports to China was 1094% higher than the 2019 monthly average'. Meanwhile, American healthcare providers were wearing garbage bags, and people were sewing their own masks.

As the contours of the crisis became clearer in late March, business leaders turned to Kushner to provide national direction. He told them: 'The federal government is not going to lead this response ... It's

up to the states to figure out what they want to do'. When one leader told him the states were bidding against each other for PPE and driving prices up, he responded: 'Free markets will solve this ... This is not the role of governments.'

Meanwhile, Trump's trade adviser Peter Navarro was so worried about the administration's failure to buy critical medical supplies that he undertook to find them himself, haphazardly committing more than \$1 billion of federal money to invest in drugs and supplies. Among other things, he bypassed normal procurement chains and arranged for a loan for Eastman Kodak, a company known for its work in the process of photography, to produce drugs to fight the pandemic. (The company's stock price jumped from about \$2 to \$60 a share upon the news of the deal, and the loan was put on hold. Navarro called Eastman Kodak executives 'stupid'.)

As infections and deaths continued to mount, the administration repeatedly downplayed the emergency. Today we learned that by May, science adviser Paul Alexander and his boss, Michael Caputo, the assistant secretary for public affairs at Health and Human Services, were working to change the language officials at the Centers for Disease Control and Prevention used to warn of the dangers of the disease. 'I know the President wants us to enumerate the economic cost of not reopening. We need solid estimates to be able to say something like: 50,000 more cancer deaths! 40,000 more heart attacks! 25,000 more suicides!' Caputo wrote to Alexander on May 16.

By July, Alexander was calling for the administration to adopt a strategy of herd immunity, simply letting the disease wash over the country. 'Infants, kids, teens, young people, young adults, middle aged with no conditions, etc., have zero to little risk ... so we use them to develop herd ... we want them infected,' he wrote to Caputo.

In keeping with the theory that the federal government had no role to play in combatting the pandemic, as the fall progressed and it appeared there might be a workable vaccine by 2021, the Trump administration made no plan for federal distribution of the vaccine. It figured it would simply deliver the vaccine to the states, which could make their own arrangements to get it into people. The states, though, were badly strapped for money either to advertise or to deliver the shots.

Infections surged terrifyingly after November until by late January, when Trump left the White House, new infections had reached about 250,000 a day and about 3000 people were dying of COVID-19 daily. With 170 deaths for every 100,000 Americans, the US outstrips every other country in the world for the devastation of this disease. (Brazil, with 159 deaths for every 100,000 people, is second.)

In contrast to Trump, President Biden has used the pandemic to show what the federal government can do right.

The night before he took office, he held a memorial for the Americans who had died in the pandemic. Once in the White House, he dedicated the federal government to ending the scourge. On January 21, he issued a national strategy for responding to the crisis that began by declaring 'the federal government should be the source of truth for the public to get clear, accessible, and scientifically accurate information about COVID-19.'

He begged Americans to wear masks, used the federal Defense Production Act to get supplies, got money to states and cities, bought vaccines, and poured money into the infrastructure that would get the vaccines into arms. As of today, the US is averaging 3 million shots a day, and a third of the population has received at least one dose of a vaccine. Twenty per cent of us are fully vaccinated, including 60% of those 65 and older.

Cases of infection are dropping to about 66,000 cases a day – well below the January surge but still high. The arrival of new, highly contagious variants continues to threaten worrisome spikes, but we are not, so far, facing the sort of crisis that Brazil is, where right-wing President Jair Bolsonaro opposes a lockdown, arguing that the damage a lockdown would do to the economy would be worse than letting the virus run its course. Hospitals in Brazil are overwhelmed, and this week more than 4,000 people died in 24 hours for the first time since the pandemic began. Meanwhile, the vaccine rollout in Brazil has been slow.

In America, the two very different responses to the pandemic have given us a powerful education in government activism. 'For the past year, we couldn't rely on the federal government to act with the urgency and focus and coordination we needed,' Biden said, 'And we have seen the tragic cost of that failure ...'

As time moves forward, if we really do get into the clear, it is entirely possible that the 2020 pandemic will fade into the same sort of vagueness that the 1918 pandemic did. But what it has taught us about government is important to remember.

NOTES

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Afghanistan has joined Australia's list of lost wars, and it's our longest. The Prime Minister's tears on announcing it may have been for that, or for Australia's 41 dead, 249 wounded, estimated 500 veteran suicides, and innumerable cases of PTSD, at a cost of A\$10 billion.

Perhaps he wept not with sorrow, but pleasure that the remaining few are coming home, to ratings-boosting ceremonies and photo ops. Or was he relieved that even sooner, it will be ANZAC Day? Whatever it was, Australia's retreat from Afghanistan will cast a solemn but convenient pall of khaki over the war crimes, sex scandals, funding rorts, and vaccination shortfalls which have been seismic for the government in recent weeks.

Announcing the retreat, Morrison revived the reassuring script, saying 'Freedom is always worth it'. It was an echo of Secretary of State Albright who callously said the same about children killed in the Iraq invasion. He wasn't asked 'Freedom for what, or from what? Whose freedom?'

Under the victorious Taliban, the Afghan people will not be free, except from foreign invaders. Australia, lacking the independence to cut its losses and get out in 2005, is not freed from its self-imposed alliance obligations. The West is not free of Islamist terrorism, and is still less free from right-wing extremist terrorism. Punitive sanctions make trade less free than it was before the war.

Neil James was asked would Afghanistan be in a worse state if we hadn't gone to war there. The head of the Australian Defence Association made the astonishing claim that Afghans were now 'probably better off'. By 2019, Afghanistan had lost an estimated 150 000 civilians, military, and Taliban fighters, according to Brown University's reputable Cost of War project. Internally displaced Afghans numbered 4 million, and another 2.6 m Afghans were refugees. Any social and educational gains previously achieved in the cities had been lost – and probably any empathy with the US, NATO or Australia in bombed villages.

When James added, 'The Diggers didn't die in vain, because they tried', he exemplified the Australian habit of not asking why we fought, only how we fought. It has been identified in P&I by Henry Reynolds, historian of Australia's 'unnecessary wars'. Our governments don't count the cost of wars and report them to Parliament or to the taxpayers. Nor do they explain in advance why our troops would be fighting, or for what. If they did, citizens might well revolt against losing yet another illegal, expeditionary, purposeless war.

**THE US MILITARY,
ALONG WITH CIVILIAN
POLITICAL LEADERS,
PERSISTENTLY LIED TO
AMERICANS ABOUT THE
STATE OF THE WAR AND
THE PROSPECTS FOR
SUCCESS.**

A clear strategy to achieve a definite outcome is what soldiers since Sun Tzu have known is essential in war. Retired General Peter Leahy argues that in Afghanistan neither mission nor 'end state' was defined. In future conflicts, Australians should know the reason they are going and 'what does victory look like', he told *The Australian*. For once, Foreign Editor Greg Sheridan agreed: Australia 'never had a strategic purpose in Afghanistan except to show the Americans we were good allies'.

Avoiding that obvious purpose, historian John Blaxland sticks to the script: the war was 'originally intended to remove al-Qaeda from Afghanistan'. The Lowy Institute's Rodger Shanahan argues that Afghanistan, for John Howard in 2001 and 2005, 'wasn't a war of choice – you had to do something'. What Australia could have done, and probably did, was ask the Americans after the decline of al-Qaeda in 2011, and the demise of the IS Caliphate in 2018, how much longer the war had to be fought.

If our leaders were told the truth, we could have got out then. If they were told lies, we should have done the same, as should the UK and Canada, whose losses are greater than Australia's.

But they all knew, because the Afghanistan Papers published by *The Washington Post* in 2019 revealed to the world that (just as in Vietnam) the US military,

along with civilian political leaders, persistently lied to Americans about the state of the war and the prospects for success.

The US will withdraw from Afghanistan the remaining 3,500 of its troops, which peaked in 2011 at 100,000. America has spent US\$2 trillion on the war in Afghanistan. US dead total 2,218, with 20,100 injured. In the US, more than 6,000 veterans take their own lives every year – more than 17 a day.

Veterans are reported to be joining ultra-right organisations in significant numbers.

An estimated 241,000 people have died as a direct result of the war, according to Brown University's Watson Institute for International and Public Affairs and Boston University's Frederick S Pardee Center for the Study of the Longer-Range Future.

Withdrawal from Afghanistan doesn't mean Australia shutting down potential criminal cases. The Brereton report revealed 'credible information' of war crimes committed by 25 Australian soldiers involving the deaths of 39 Afghans, widespread breaches of laws and customs of war, systemic coverups, and a deeply toxic culture within the SAS. Although this could compromise Australia's record in Afghanistan, Morrison said the troop withdrawal 'wasn't the time' to talk about it, as we concentrated on our war heroes. If the withdrawal process takes from May to September, no time will be appropriate to do so. Are the war crimes to be buried?

If this happens, Australia will have learnt nothing from the Afghanistan war and will be ready and willing to fight the next one. Professor Blaxland expresses the mild hope that in future, governments will explain their purpose to Parliament. Citizens should demand more: a debate and a vote in advance of any future expeditionary war.



Dr Alison Broinowski AM is Vice-President of Australians for War Powers Reform. She joined the Australian Foreign Service in 1963, lived in Japan for a total of six years, and for shorter periods in Burma, Iran, the Philippines,

Jordan, South Korea, the United States of America and Mexico, working alternately as an author and Australian diplomat.

Since leaving the Department of Foreign Affairs and Trade, she has received a PhD in Asian Studies from ANU, and has continued to lecture, write, and broadcast in Australia and abroad on Asian affairs and cultural and political issues.

WE ACKNOWLEDGE

Traditional owners of the Kulin Nation, past Warriors, Elders past and present.

from our readers



The permanent rate of JobSeeker was recently increased by \$25 per week. This increase is inadequate, and JobSeeker remains below the poverty line.

It must be remembered too, that JobSeeker had been increased as part of the Commonwealth's COVID response. The supplements have been removed meaning recipients have seen a cut in their incomes.

To illustrate the inadequacy of the increase, I will relate my personal experience. Recently I attended my local pharmacy and filled my prescriptions, which came to \$90.

I am now in receipt of the Disability Support Pension, after previously receiving Newstart (now known as JobSeeker). Accordingly, I received concessions under the PBS. These costs included the application of the relevant concessions. In many ways, I am very fortunate in that the Transport Accident Commission reimburses some of those. One of those was a \$49 nasal spray, which is non-PBS. I have private health insurance, which will defray some of that. I raise these matters to make a very important point.

There are many people out there with manifold medical conditions who are not reimbursed by an accident, transport or WorkCover insurer. The biggest group on JobSeeker are over 50 years of age with a number of chronic medical conditions.

The maximum rate of Newstart, now JobSeeker, was \$565 per FORTNIGHT. The Government has increased this by \$50 and trumpeted this as the biggest increase in 25 years. Aside from CPI indexation, it is the ONLY increase in 25 years.

The maximum JobSeeker rate is now about \$620 per FORTNIGHT. Using my real experience buying medicines, paying \$90 from that amount represents a significant proportion of income. Choices are made between housing, medicine and food.

I own my home, I have insurance and my costs reimbursed. Imagine the struggle that our fellow citizens have living on that amount. I am part of ACOSS Raise the Rate Campaign: The figures are real and factual. The people are real, not characters in either a Hemingway or Dickensian novel.

Decisions are made at a political level, by individuals who cannot relate to those forced to exist on JobSeeker. I will add that an MP, if a backbencher, no committees, etc., gets \$211,250 per annum plus 15.4% superannuation. Many sit on committees and earn additional remuneration. Further, I note travel allowances are \$280 per day when in Canberra. I have written to my MP making these points.

Prior to entering Parliament my MP was a doctor, and the daughter of another. Her life experience is such that she cannot relate. I have provided evidence above as to the costs of medicines. I am in a good position. Most are not. Further, the demographic data is available giving the breakdown of ages, gender and location of those receiving social security.

She did respond and used the same talking points made by many in the Government. The Government, when defending it, argues that people get other payments. That is true but it is also terribly deceptive and misleading.

For those who rent, there is a rental allowance. That allowance is not paid to a home owner. We all know that there are costs associated with home ownership. A home owner single, who finds themselves unemployed due to a pandemic, think recent COVID; industry restructure, think taxi, hospitality, manufacturing due to technical disruption; natural disasters, think drought, bushfire, cyclone or illness or injury cannot realistically support themselves on that amount.

For those who rent, the maximum rental allowance is \$140 per fortnight. Someone in share accommodation receives less. An individual paying a mortgage gets nothing at all. For the record, our MPs and Senators get other payments. These other payments they receive are more substantive than those received by an individual receiving social security.

For example, \$211,250 basic salary, plus travel allowance of \$280 per day. Join a committee and receive additional money, plus electoral allowance of \$30,000 minimum. That same MP made a claim that 99% of those receiving JobSeeker receive other welfare.

She did not specify the form or type, cite the source of her figures. The claim is worthy of a Fact Check.

Kind regards,

Peter Sutton, Vic

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Editorial: The religion of profit

AstraZeneca and the politics of COVID-19

From letters from an American

Out of this war, ready for the next?

Letters to the editor

Beacon Editorial Board

Peter Abrehart

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