



THE GREY PANTHER



Anarchist Communist Group

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Age, Herd Immunity and Coronavirus

At the end of February a private event took place at which Dominic Cummings, Johnson's chief adviser, unaffectionately nicknamed the Gollum, summed up the then current approach of the government on coronavirus. Those who attended described his position as "herd immunity, protect the economy, and if that means some pensioners die, too bad". A "senior Conservative source" was quoted as describing Cummings' views as, "let old people die".

This policy of herd immunity, which means allowing the virus to spread through the mass of the population fairly quickly and in the process allegedly establish mass immunity to the virus, is basically an experiment in eugenics. Wikipedia describes eugenics as "a set of beliefs and practices that aim to improve the genetic quality of a human population, typically by excluding people and groups judged to be inferior, and promoting those judged to be superior." This means eradicating the elderly, the ill, the disabled for the sake of a supposedly healthier population. It was horrendously applied by the Nazis in Germany to murder people who were mentally or physically disabled.

On March 11th David Halpern, chief executive of the government's Behavioural Insights Team and a member of the Scientific Advisory Group for Emergencies, persisted with the herd immunity approach. Then on March 12th Patrick Vallance, the chief scientific adviser of the Johnson regime, and Chris Whittle, chief medical officer, stated that herd immunity would be established once 60% of the British population had been infected, with social distancing and washing of hands easing the pressure on the health services. Community testing and contact tracing would end immediately.

They were proved totally wrong. If you look at what they meant, around 40 million people would be infected by the disease, with between 200,000 and 400,000 dying. Within three days the Johnson regime changed its position, moving to suppression of the coronavirus. This was because of advice from government mathematicians who, taking the example of

Italy, where 30% of those infected by the virus ended up in intensive care, saw that the NHS would not be able to cope with the crisis.

The Johnson government thought that coronavirus would behave like flu. However, the death rate from coronavirus is much higher, and unlike the flu, it is not seasonal. Without extensive testing, contact tracing and community surveillance, it will flare up again after the end of a lockdown. Social distancing will not be enough to control the virus. In China, after initial lockdowns and quarantines, thousands of community workers mobilised behind a national testing programme and mapping of infected people using case definitions based on symptoms of the virus.

Without this approach, the coronavirus will continue to spread in the UK despite social distancing and lockdowns. China managed to suppress the transmission of the virus in less than two months. There is no sign yet of this happening. Despite eight weeks' notice, Professor Neil Ferguson of Imperial College, acting as a governmental adviser, said that community testing and contact tracing was not possible because enough tests were not available.

All of this reveals a callous, cynical and coldly calculated approach to the elderly, the sick and infirm and the disabled, and is reflected in the lack of concern about provision of protective equipment for health workers, shop workers, cleaners and bin collectors. This approach has been shown to be widespread within the government, local government, among bosses and landlords.



The attitude that it would be better if a few hundred thousand elderly and infirm people were sacrificed to preserve the economy and the profit system is still visible among spokespeople for the ruling class. The vile Sherelle Jacobs wrote in the Daily Telegraph: "Through this 'herd immunity' strategy, a resurgence of the virus after it had seemingly peaked would be avoided. Championed by Dominic Cummings, the approach was creepy, clinical and completely correct". She went on to say that Johnson "should pay heed to Trump, who is raring to get America up and running by Easter lest the cure be worse than the disease. Premature, perhaps, but at least he is forcing Americans frankly to debate the trade-offs: millions of livelihoods versus thousands of lives". Well, that statistically would mean not thousands, but two million people dead in the USA.

The perhaps even viler Toby Young, a champion of eugenics, wrote in the Conservative magazine *The Critic*: “Like a growing number of people, I’m beginning to suspect the Government has overreacted to the coronavirus crisis. I’m not talking about the cost to our liberty, although that’s worrying, but the economic cost. Even if we accept the statistical modelling of Dr Neil Ferguson’s team at Imperial College, which I’ll come to in a minute, spending £350 billion to prolong the lives of a few hundred thousand mostly elderly people is an irresponsible use of taxpayer’s money.”

Young runs a number of free schools and refuses admittance to disabled children on the grounds that they are, in his own words, “Troglydytes”. These are views widespread within the ruling class, rather a few hundred thousand, a few million dead, than sacrifice Profit.

Ashton Applewhite, author of the book on ageism *This Chair Rocks!* wrote in a recent article that “Where does ageism enter in? In suggestions, mostly on social media, that since ‘only old people’ have been dying from this coronavirus in significant numbers, the rest of the world needn’t be too worried about it. Even worse, in suggestions of setting an age limit for medical treatment, so it won’t be ‘wasted’ on people less likely to survive. A public health emergency can indeed make it necessary to allocate resources by health status. That’s triage. Allocating resources by age, under any circumstances, is not triage. It is ageism at its most lethal.” She proceeds to say: “In some quarters the AIDS epidemic was considered divine retribution for sinful behavior. Shamefully, many of those most at risk, already marginalised by homophobia and racism, were overlooked and even left to die. Doing the same to those marginalized by ageism—the corrosive belief, at its ugly heart, that to age is to lose value as a human being—is just as reprehensible. It is not ethical, or legal, to allocate resources by race, gender, or sexual orientation. Doing so by age is equally unacceptable. Period. No one deserves to be sick. Everyone deserves respect and care. Viruses infect everyone. Humans shouldn’t discriminate either. The way we respond to a challenge, especially a fearsome one, shows who we truly are, as individuals and societies. There’s nothing like a global pandemic to prove that we’re all in this together. Let’s act like it, in solidarity across age, race, and borders.” She concludes that “Capitalism Kills”.



The writers of this article, as pensioners, reject the concept that the elderly should be sacrificed for the sake of the economy. The coronavirus highlights the class antagonisms in this sick society, the callous outlook of the rich, exemplified by Branson, Bezos and their ilk with their insatiable greed for more wealth. It also highlights this society's attitude to the elderly, seen not as human beings, with relations and friends who love them, but as a drain on the economy.

In any case, there is no need for people's livelihoods to be sacrificed. There is plenty of wealth in the world. What needs to be sacrificed is the wealth and profits of the privileged few, the large corporations and the banks.

Governments, in the aftermath of the coronavirus pandemic, will try to claw their profits back by further attacks on our living standards and benefits. Pensions will continue to be a target, unless we organise among pensioners and as a class to stop them.

[Ashton Hepplewhite article](#)

Profit before people: Covid-19 in care homes



There is no doubt that the staff in care homes work very hard and most care deeply about the residents. However, the struggle to protect both themselves and those they care for is an impossible task. It is estimated that in the first week of April over 1000 people have died in care homes. Half of Scotland's privately owned homes have corona virus cases.

Care homes were already an issue before corona virus struck. Though the vast majority of the elderly are still in their own home or with their families, 433,000 have to rely on living in a home. The vast majority of these establishments, 84% of all beds, are owned by private, for-profit companies. The care industry has mushroomed with the growth of older people who are living longer but not can't necessarily look after themselves. Many have dementia or serious mobility problems. When it is hard for the families to look after them, care homes provide an essential service and many companies or individuals have taken advantage of this fact to make a killing. The sector is worth £15.9 billion with 5,500 different providers, running 11,300 care homes. People are forced to rely on care homes because the government has repeatedly cut funding to councils for social care.

A 2017 government study concluded that "Those requiring care need greater support in choosing a home and greater protection when residents". Though many care homes may offer good quality care, the staff are not nurses and not equipped to deal with a major pandemic. NHS nurses and health assistants are poorly paid but for care assistants is even

worse. They are often on zero-hour contracts. Staff are often from agencies and may work at several different homes, which means they could bring corona virus into another home. Staff in one home actually moved in to the home because they are afraid of bringing the virus in from outside or bringing it out to their families. Like the NHS staff, but worse, there is a serious shortage of personal protection equipment. So even in the best homes, the risk to staff and residents is enormous. For those in the substandard homes who cannot afford up-market care, the situation will be a disastrous.

To make matters worse, the government has asked care homes to take people from hospitals who have tested positive for the virus. As one worker said, it is “importing death”. It is very difficult to keep residents in isolation in homes, especially those which are more crowded and do not have very good facilities.

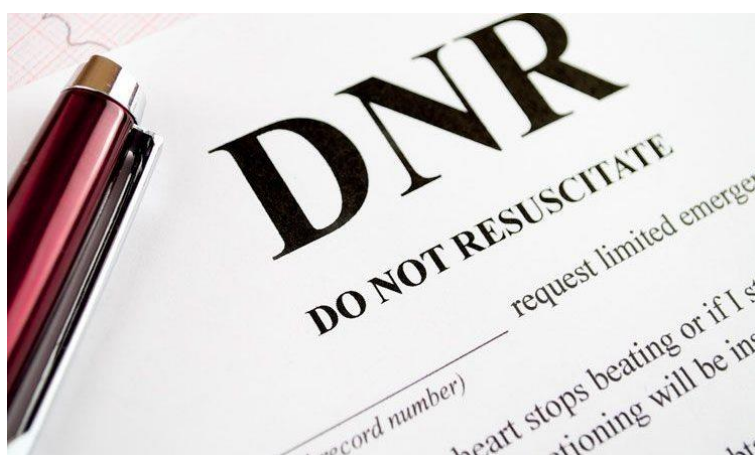
Like many other things in capitalism, the pandemic has revealed the fundamental inadequacies of social care for the elderly. Government cuts, allowing private firms to run care homes, poor pay and insecurity for staff, have all led to this situation where we can expect corona virus and death to spread rapidly amongst those who are most vulnerable.

<https://www.gov.uk/government/publications/care-homes-market-study-summary-of-final-report/care-homes-market-study-summary-of-final-report>

https://www.ageuk.org.uk/globalassets/age-uk/documents/reports-and-publications/later_life_uk_factsheet.pdf

<https://www.theguardian.com/society/2019/sep/19/84-of-care-home-beds-in-england-owned-by-private-firms>

DNRs, Age and Class



Age UK and Independent Age, two charities concerned with the care of the elderly, have warned against the increasing use of pressure for elderly people to sign Do Not Resuscitate (DNR) forms. It has created fear and anxiety among the elderly and a feeling that they are not wanted and are superfluous to society.

As the statement from the charities says: “Difficult and painful decisions will need to be made in the weeks ahead, but these must be made on a case-by-case basis, taking account of the risks and benefits, and people’s own wishes, through honest discussions between patients, doctors and families. We do not under-estimate the significant pressures being faced by all staff working across our health and social care sectors at this difficult time, but it is crucial that we continue to protect people’s fundamental human

rights. It would be completely unacceptable to abandon these rights in favour of taking blanket, discriminatory decisions.”

An 86 year old woman in Scotland was recently pressurised by her GP surgery to sign such a form. In Brighton and Hove, a Clinical Commissioning Group (CCG) wrote to care homes for elderly people. It stated that: “frail elderly people do not respond to the sort of intensive treatment required for the lung complications of coronavirus... We may therefore recommend that in the event of coronavirus infection, hospital admission is undesirable.” It instructed care homes to “check they have resuscitation orders on every patient”. In other words those in care homes for the elderly should be left to die.

There have been reports of similar incidents in Leeds and Wales.

It is not just the elderly who are under threat from the DNRs. A Welsh GP surgery sent out a letter to all high risk coronavirus patients and included those with “incurable cancer”, “neurological conditions” and “untreatable heart and lung conditions”. The mention of neurological conditions is particularly worrying, as government guidelines include Parkinson’s disease, motor neurone disease, multiple sclerosis, cerebral palsy and those with learning disabilities.

Obviously those suffering from such dire diseases as motor neurone disease would actually experience a deterioration in quality of life if a resuscitation was attempted. But those with some of the other conditions, including those with learning disabilities, have conditions that are not life threatening in the short and medium term. What is particularly disturbing is that people suffering from such conditions are amalgamated with those with terminal complaints. This reeks of the eugenics we referred to in our article, [Age, Herd Immunity and Coronavirus](#).

The health services are under massive pressure because of the many years of cutbacks by Conservative, Labour and Conservative-LibDem coalition governments. So the logic behind these letters is that the NHS cannot cope with many more chronically ill people. Whatever the logic, these letters are appalling and disturbing.

We should remember that it is unlikely that DNR request letters have been sent to Queen Elizabeth, Prince Philip (both in their nineties) Prince Charles (over seventy) or any of the millionaires and politicians seen as elderly. These decisions are influenced by class. If you are poor and old/have learning disabilities etc., you are deemed as expendable, and hang the stress this puts on you and your family. If you are rich and powerful, no such qualifications apply.

This further emphasises the need to move towards a society that looks after and respects the elderly, those with chronic diseases and those with learning disabilities. The austerity programmes of the last few decades are now breeding obscenities like these DNR request letters, the huge pressure on over-worked and ill-equipped health workers, patients in chronic conditions suffering and dying in corridors.

No Going Back!

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