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Bosses order end to lockdown, government obeys

30 April 2020, by **Gauche anticapitaliste/SAP**
Antikapitalisten

The cart before the horse

The National Security Council decided on an end to lockdown before the realization of the “strict conditions” listed in the experts’ report:

- 51% of intensive care beds are occupied as of 25 April, not 25%;
- around 10,000 tests are carried out each day, far from the target of 25,000;
- the 2,000 people required to contact the relatives of those testing positive have not been hired or trained;
- preventive measures in schools and in the workplace have not been implemented with the workers concerned;
- mandatory masks in transport, schools and workplaces where physical distance cannot be respected are not available!

The experts’ report was categorical: we cannot “envisage the transition to the first phase of an end to lockdown” if these “strict conditions” are not met. The Wilmès government and the National Security Council have ignored this recommendation. Large companies will reopen on 4 May, public transport also, and all

businesses will reopen on 11 May. Classes may begin to resume partially in schools on 18 May (15 May in Flanders), and people may be able to see their loved ones on that date. As for culture, we’ll see later...

No confidence in this government!

The Prime Minister promises that the “strict conditions” will be met in time. No confidence can be placed in the authorities. Deputy Prime Minister Geens says it is impossible to provide every Belgian with a mask by 4 May. On 16 March, Minister De Backer promised 10,000 tests a day. A month later we are barely there, and nearly 4,000 people have died in nursing and care homes, victims of a state crime that left them, as well as workers, without protection.

The mask affair shows that the government and the “opposition” parties involved in the management of the crisis take workers for fools. A month ago, politicians, with Maggie De Block and Philippe De Backer at the forefront, repeated that “masks are useless for the population”; today, we recommend them, we even sometimes make them compulsory,

and we reopen haberdashery on 4 May so that people can make up for the shortcomings of the state and the “free market” ... And Ms. Wilmès adds cynically that a scarf or a bandana can do the trick! Who are we laughing at?

Profit before health and life

The truth is that this end to lockdown is dictated by the employers. The employers’ organisation, the FEB, has since 4 March denounced the “disproportionate measures” of the fight against Covid-19. Ms. Wilmès agreed, saying that “some companies should not have closed”. The experts’ report was already a compromise between the health logic of scientists and the logic of capital defended by Wunsch and Thijs within the Group of Experts for an Exit Strategy (GEES). This compromise was not yet sufficient for the employers and their political representatives.

The truth is that profit takes precedence over public health, the right of parents to know their children are safe at school while they are working, and the legitimate right of people to undertake social relations while respecting safety conditions.

The truth is also that women will be the main victims of this situation, which will increase the burden of care that patriarchy places on their shoulders. The truth is that everyday life will become even more untenable for the poorest, especially the young, racialized and undocumented. This is unacceptable!

Another end to lockdown is possible

"We cannot remain locked down forever", say neoliberal politicians and bosses, as if that was the debate. Meanwhile, we have already seen an 80% increase in deaths in April 2020 compared to April 2019 and the share of the population immunized against Covid-19 is less than 6% (against a necessary minimum of 60%). It is therefore necessary to plan energetic measures so that the "strict conditions" are met before an end to lockdown. Politicians refuse this because it would be necessary to take money from where it is (i.e. in the coffers of the richest companies and individuals), to invest massively in the sectors of care and public services, to suppress useless production and requisition enterprises so as to produce what is necessary.

Custom-made for capitalists, the end to lockdown proposed by Wilmès & co is reckless and dangerous. It does not give the time necessary to judge the impact of each phase. This is likely to lead to a new outbreak of the epidemic, when health care workers, some of whom have died from the virus, are exhausted. Do we want to reproduce the tragedy that took place in nursing and care homes?

Shock strategy

The popular classes are taken hostage by employers' federations like ESSENSCIA (Chemicals) who practice blackmail for work and say in essence: "we can produce masks and all that is necessary, but only if we abolish the environmental protection and health rules" (which do not exist in China). 85% of the companies checked already

do not comply with the rules for protection and physical distance.

The employers will use the special powers measures decided by the government (with the support of the opposition, except the PTB) to impose their objectives. Extreme flexibility, sub-statuses, mobility and overtime are on the agenda. The bosses will take advantage of the social fragmentation created by lockdown to bypass unions as much as possible (or transform them into simple transmission belts). This has already started with the abuse of temporary unemployment and the measures of 11 April: up to 220 hours of overtime without overtime wages, successive fixed-term contracts, refugees working in agriculture without regularization, deregulation of student work and so on.

Organize self-defence

The popular classes are in a state of self-defence. This crisis and employer pressures show that without workers, no wealth is produced. *Gauche anticapitaliste* calls on workers, the exploited and the oppressed to organize in neighbourhoods, offices, workplaces, schools, and construction sites to actively monitor working conditions. Our lives and our health are at stake. Reject the agenda of the bosses' government

Gauche anticapitaliste defends the following proposals:

- In the workplace: strict compliance with the Guide to safety in ending lockdown. Two masks per day (minimum), provided by the owner; ditto for gloves, gel and protective clothing. A 15-minute break every two hours to breathe and wash your hands with soap. A work organization that guarantees physical distance, without resorting to night work. The right of withdrawal exists in Belgium. On this basis, workers and their unions can impose collective and individual screening and protection measures before returning to work, at the employer's expense. Collective refusal to work is strike action. It is more than ever the essential weapon of

legitimate self-defence for workers.

- About a third of the economy is currently in lockdown. In Belgium, 41% of employees in the private sector are temporarily unemployed. "One in five companies is forced to fire employees, that's a lot. One in four says they don't know yet", says Hans Maertens, the managing director of Voka (Flemish employers). "There is a huge risk that temporary unemployment will turn into full unemployment. The longer the economic lockdown, the longer the economic damage, I would almost dare to use the word 'massacre'". Dismissals should be prohibited for the duration of the partial economic paralysis. The ending of the control of the unemployed must be final.

- Let us reject the employers' blackmail that would make us accept irresponsible and dangerous working conditions. Those who are currently forced into temporary unemployment must receive 100% of their salary, the difference being paid by their boss. No social losses when returning to work. We need a union offensive to preserve jobs and to radically oppose any business closings. The reduction of working time to 30 hours per week without loss of salary with compensatory hiring must be put back on the table.

- In society in general: massive screenings, confinement of those testing positive, tracing and quarantining of contacts (without recourse to technological procedures based on smartphone data); support by public services and social security for quarantined people.

- Schools are not day-care centres for the children of workers. No reopening of classes before the end of the summer vacation and before the safety guarantees for workers are effective. Special measures are needed during the next school year to reduce the learning gap and to address the explosions in social inequality caused by the effects of the crisis. Teachers should be able to co-decide as much as possible the modalities allowing the schools to function differently and the way of validating the progress of pupils at the end of this school year and the following years. A solid

refinancing of education, as well as the end of grade repetition, is essential to guarantee sufficient hiring and means of health protection as well as classes of ten students in the long term.

- Undocumented migrants (between 100,000 and 150,000 in Belgium), the 15,000 homeless, detainees and all those who currently live without any form of income or support are particularly hit by the crisis. Detainees who have not committed a crime against persons must be pardoned, alternative sentences to imprisonment must be favoured. Empty houses and buildings must be requisitioned to provide shelter for everyone. The closed centres must be dismantled and replaced by humane reception structures. Medical care, test kits, hygiene must also be organized and followed up by regular and free medical consultations for all these people. The regularization of all undocumented migrants and free healthcare for all is a social and health emergency so that everyone has an effective right to healthcare.

- Due to lockdown, domestic violence has clearly increased. In order to combat this growing violence, provision must be made for the victims: shelters for women and care for children, psychosocial and financial assistance, and a feminist judicial response.

- The moratoriums on evictions of tenants and on water and energy bills must be maintained as necessary to guarantee basic needs and fundamental rights.

- The Corona crisis allows us to debate democratic decision-making: how are scientists used by political parties and a government with special powers? Scientists cannot dilute their positions in the name of "the needs of the economy", that is, those of the capitalists. The whole of society, the

world of work first, must be involved in the decision on what is an essential activity and how to respond to the pandemic.

- Public services, and above all the health sector, must once again play a central role in our society. No question of an end to lockdown without binding commitments to refinance the care sector - which must become 100% public - and public services in general which must be extended in particular to the pharmaceutical sector, cleaning, nursing homes and home care. The refinancing of public services and Social Security must be guaranteed by a 10% crisis tax on the wealthy, the abolition of the tax shift and other reductions in employers' contributions to Social Security, as well as the suspension for audit of the public debt with a view to its cancellation.

- Priority must be given to the local production of protective equipment and other medical equipment necessary for the next pandemics, by requisitioning the companies concerned. The production and distribution of medicines under the control of health professionals (doctors, pharmacists, care and nursing homes and so on) must ensure that the country has enough medicines and protective equipment for all.

- In agriculture and horticulture, local producers must also receive support for the conversion of their holdings to a green and diversified agriculture. Support is also needed for all local short-term production and distribution chains, directly to the consumer.

**No to "normality",
yes to the
alternative!**

After this crisis, we do not want to return to capitalist "normality", because this normality was the problem. A broad public debate on priorities is necessary. The economy can no longer serve profit but must serve social needs and the well-being of the population. All injustices must be fought. This means massive refinancing for the health sector, for education, for high quality and free public transport and so on. Scientific research should no longer be dictated by the pharmaceutical industry but by real social needs. Society must operate in a transparent and fair manner. For a radical democracy, from below, by workers and against the special powers of a minority government. Against the systematic police repression which attacks the most precarious, racialized people, young people in working-class neighbourhoods: no structural racism.

The end to lockdown decided by Wilmès and her accomplices is an offensive to further deepen her class policy, racist, sexist, colonial, destructive of the planet. It is in the basic struggle against this offensive that the popular classes can create the conditions for an alternative society, which takes care of humans and non-humans: an eco-social alternative. Self-organization of citizens, a trades unionism based on struggle, critical scientists and a strong social movement are essential to achieve this. These are the lessons we must learn from this crisis, which has shown that radical decisions can be taken in a very short time. It's up to us to impose other choices on society.

Hope is allowed, let's get organized and together we will get there!

27 April 2020

Translated by **International Viewpoint** from "*Déconfinement : les patrons ordonnent, le gouvernement exécute*".

Coronavirus: a month of pandemic in the

Indian subcontinent

29 April 2020, by **Chris Miclos**

Although the governments of the region have had different postures and policies in relation to the epidemic, they have the same relationship with the press. Beyond the viral images of social media, information is lacking. It is particularly complicated to apprehend the scale of hunger riots that have already been witnessed in major Pakistani cities.

In India, migrant workers are still trying to return home and are gathering in stations to demand the right to do so. This is an illustration of the precariousness that they have been experiencing for almost a month and that they anticipate will continue in the coming weeks. The queues by the side of the roads or at the entrance to the buses echo the miles of queues in front of the food distribution points. Last week, a 35-year-old woman died in a queue for a ration of rice in Badaun, Uttar Pradesh. Conversely, Hindu pilgrims left Benares by luxury bus and Alvi, the Pakistani president, authorized gatherings in mosques for Ramadan.

More than a hundred deaths have been identified as being due to the virus in Pakistan, five times more than that in India. This remains little compared to the ravages of diarrhoea or malaria. But given the number of tests carried out, these figures have no validity. The Indian government pretends that only 270 districts out of 700 are affected by the virus, with the aim of reopening many sectors, such as the building industry, from April 20.

Factories that have closed should follow. The pandemic is not about to be stopped.

"In exceptional circumstances, exceptional measures"

Twenty million jobs have already been cut in Pakistan. In addition to the social crisis in the subcontinent, there has been a decrease in the funds sent by expatriate workers. The unions also report numerous complaints relating to unpaid wages and sacking of workers. In the Indian mines that have remained open, wages have been drastically reduced. Textile workers in Bangladesh have demonstrated to demand their unpaid wages - and the cancellation of orders from big firms has already resulted in the sacking of a million of them.

The Indian government has announced that it wants to modify the 1948 legislation, already amended in 2016 and long since in the sights of the bosses. This law limits the activity of an adult to 48 hours of weekly work, a period to which overtime is added. They want to make workers move to 12 hours a day and 72 hours a week. The proclaimed goal is to meet the food and medicine needs of the population; it is above all a question of compensating for the labour problems of capitalists of various sectors and of

aggravating exploitation.

"The genocidal scenario is approaching"

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The far-right government in India wants to put responsibility for the epidemic on the country's Muslims, exploiting various incidents, in particular a religious gathering that took place prior to the confinement. In the suburbs of Delhi, a private hospital which treats patient for cancer has announced that it will only accept Muslim patients if they and their close relatives have tested negative for the coronavirus. In Bharatpur, 20 kilometres from the Taj Mahal, a Muslim woman who was on the point of giving birth was not admitted to hospital because of her religion. Her baby died.

At the same time, the authorities are preparing to test massively the prophylactic properties of hydroxychloroquine on several tens of thousands of inhabitants ("volunteers") of the slums of Bombay, from where the inhabitants cannot leave and where the virus is wreaking havoc. The weight of the Indian pharmaceutical industry is added to the political sympathies of the leaders of the main powers, in the first place Trump and Bolsonaro, for Modi. So, his abject policies are not denounced.

When Oil Markets Go Viral

29 April 2020, by **Adam Hanieh**

The ecological dimensions of COVID-19 have become increasingly prominent in much recent discussion, with several important [contributions](#) exploring the pandemic in relation to capitalist agribusiness, widespread loss of biodiversity, and the destruction of natural ecosystems. There is, however, a further element to COVID-19's 'ecology' that deserves much greater attention: the ways the escalating pandemic intersects with, and is simultaneously acting to accelerate, a profound shock to the fossil fuel industry. Global oil markets are undergoing an unprecedented transformation as a result of this shock, and while longer-term trajectories remain open, this moment will undoubtedly shape the politics of oil – and the prospects of mitigating climate change – for decades to come.

With states representing over 90 percent of global GDP stuck under some form of lockdown, and the simultaneous shuttering of large swathes of global manufacturing, transport, industry, and retail – the demand for oil and oil products has dropped to historic lows. Indeed, it has been [estimated](#) that the reduction in US automobile use alone has led to an astonishing 5 percent fall in global oil demand – about the same as if the whole of Europe, Africa and the Middle East had simultaneously stopped driving. The International Energy Association's Executive Director, Fatih Birol, [estimated](#) on 25 March that global oil demand could fall by about 20 million barrels per day, a prediction that has now been [revised](#) up to 30 million barrels per day. This plunge in world energy use is unparalleled in both speed and depth, exceeding all other major crises of the last century – including the 1929 Depression and the 2008 global financial crash.

And just as energy demand is in free-fall, world oil supplies look set to significantly increase following an announcement in early March that Russia and Saudi Arabia would remove limits on oil production levels. Combined with the effects of the pandemic, this 'Oil War' has pushed global oil prices to multi-decade lows, and left producers rushing to find storage space on land and sea for their oil, rather than sell it at a loss.

With global storage fast approaching full capacity, some oil traders are actually now expecting producers to pay them for taking oil off their hands. All of these factors have led analysts to forecast a record number of bankruptcies among oil companies for 2020, an eventuality that could imperil a range of important banks and financial institutions in a manner redolent of 2008.

But what might this extreme shock to energy markets mean for the future of the fossil fuel industry and the possibilities of ending oil-dependency? Some commentators have speculated that this might all be a little bit of good news in the context of the COVID-19 calamity – the pandemic could "kill the oil industry and help save the climate" as a [headline](#) in the Guardian newspaper exclaimed on 1 April, with the demise of many smaller oil producers and the weakening of oil majors such as Exxon Mobil, Royal Dutch Shell, and BP bringing us closer to a transition away from fossil fuel use.

Such rosy scenarios, however, tend to abstract from the realities of a [catastrophe capitalism](#) that is inexorably tied to the extraction and exploitation of fossil fuels, and which has deeply embedded 'Big Oil' in all facets of our lives. Like all moments of sharp change, the eventual path we take out of these multiple, intersecting crises – an oil price crash, severe economic downturn, and virus pandemic – will depend on our capacities to build effective political alternatives to [Fossil Capital](#). We need to pay close attention to the possible winners and losers that might emerge from this current moment, and be wary of equating the temporary (albeit severe) collapse of an oil-based economy with the demise of the system itself.

The Middle East, Russia, and US Oil

There is a long and complex [story](#) behind the rise of an oil-centered global capitalism. This story encompasses the displacement of coal by oil and gas in the early 20th century, the rise of Middle East oil

producers (led by Saudi Arabia) through the post-war period, numerous wars and revolutions, huge fluctuations in global oil prices in the 1970s and 1980s, and major shifts in the structure of the global oil industry. Importantly, this history is also centrally linked to how global finance developed in the postwar period – a fact often omitted in accounts that focus too much on oil as a physical commodity. Flows of so-called 'petrodollars' were [essential](#) to the emergence of new financial markets (such as the Euromarkets) from the 1960s onwards, the rise of Anglo-American financial dominance, and the patterns of debt dependency that continue to mark the relationships between countries in the North and South. Oil, in short, had come to permeate all aspects of global capitalism by the end of the 20th century.

Beginning in the early 2000s, world oil prices rose steadily on the back of the increasing global demand associated with the rise of China. Prices fell back sharply in 2008 with the global economic crisis, but soon resumed their upward trajectory and eventually peaked at around \$114/barrel in mid-2014. This was a financial boon for most Middle East oil exporters (and carried major consequences for the [political dynamics of the wider Middle East region](#)), but the extended period of rising prices also benefitted marginal producers elsewhere in the world. Most significantly, investments in the development of so-called 'non-conventional' oil and gas supplies – reserves that are difficult and significantly more expensive to extract than conventional fossil fuels – were strongly incentivised during this prolonged period of high oil prices.

Of particular relevance here is US shale, crude oil that is held in shale or sandstone of low permeability and which is typically extracted through fracturing the rock by pressurized liquid (hence the term 'fracking'). There are a variety of ways of calculating the 'break even' cost of shale production and this figure changes depending on the particular oil field and the prevailing costs of technology, labour, taxes and so forth – but a widely quoted figure is that most US shale producers [require a](#)

price of \$45 or more to turn a profit. By contrast, Saudi oil has a [production cost](#) of around US\$4/bbl and Russian oil around US\$10/bbl. These comparisons need to be interpreted with care, as Saudi Arabia and Russia are states not companies, and they depend heavily on oil and gas revenues to meet their budgetary needs – in this sense, the ‘breakeven price’ of oil for these states is much higher and fluctuate according to levels of government spending. Nonetheless, there is no doubt that consistently high oil prices through most of the first two decades of the new millennium helped to attract large investments into shale field development and drove significant improvement in extraction technologies for these non-conventional supplies.

This, of course, was an unmitigated ecological and social disaster, which rested fundamentally on the repeated deployment of [state-backed violence](#) against Indigenous populations in the US (and Canada) in order to make way for pipeline routes and other infrastructure. But the result was a spectacular boom in US domestic oil production. Between 2009 and 2014, the production of US shale oil tripled, propelling the United States into the top rank of oil producers globally. Remarkably, the US became a net exporter of oil in early 2011, and overtook Saudi Arabia to become the world’s largest producer in 2013 – a position it has maintained until this day, and a far cry from the panicked predictions of ‘energy dependence’ that had marked US [policy debates](#) in the early years of the new millennium.

OPEC+ and 2020 Oil Price War

However, the huge increase in global oil inventories that resulted from this additional US production – coupled with a moderation of Chinese energy demand, a sputtering global economy, and the move towards greater use of renewable energy sources – brought the period of high global oil prices to an abrupt end in mid-2014. The price of Brent fell by 70 percent through 2015, eventually bottoming out at around \$30/barrel in early 2016. This

was the [largest drop](#) in oil prices in three decades. With the US experiencing its first decline in annual oil production since 2008, many smaller and highly leveraged companies went under – for 2015, the U.S. Energy Information Administration (EIA) estimated that the [combined losses](#) of major publicly traded onshore producers reached a staggering \$67 billion.

US oil producers were not the only ones hit by the price rout of 2014-2016. All major oil exporters confronted mounting budget deficits and haemorrhaging of their reserves – this included Saudi Arabia, which burnt through more than one-third of its foreign reserves between the oil price peak in 2014 and end-2016. In the face of these mounting fiscal pressures, two of the world’s leading oil-producers, Russia and Saudi Arabia, took steps to strengthen global oil prices through a series of coordinated cuts to production. This de facto alliance was formalised in a mutual pact, dubbed OPEC+, which was established between the Organization of Petroleum Exporting Countries (OPEC) and 11 non-OPEC countries in December 2016. Until it unravelled in early March this year, OPEC+ proved successful in keeping the price of oil within a narrow band of around \$50-\$80.

For US oil companies – who were not bound by any of these international agreements – OPEC+ proved extremely fortuitous. In the wake of the 2015 plunge in prices there had been a wave of consolidations and bankruptcies in the US oil industry, and the stabilisation of relatively high oil prices served to reinvigorate domestic oil exploration and production. Indeed, by January 2020, daily US oil production was to [reach](#) over 12.7 million barrels, an increase of nearly 45 percent since December 2016 and up from less than 5 million barrels/day in 2008. These figures starkly demonstrate that while most of the world’s major oil producing countries sought to limit their production levels in line with OPEC+, US oil companies were essentially left free to increase their levels of production unhindered. As Keith Johnson [noted](#) in *Foreign Policy* on 27 March, “No country has added more

oil to the global glut in recent years than the United States—and despite the recent plunge in crude prices, U.S. producers are still increasing output.”

However, on 6 March this year, the OPEC+ alliance was to break apart spectacularly after Russia rejected a call by OPEC to cut global oil production by a further 1.5 million barrels/day. Not only did Russia refuse OPEC’s request, it also announced that it would no longer abide by the initial December 2016 agreement. This decision was swiftly met by a Saudi counterattack delivered on 8 March – a bombshell announcement that the Kingdom was also no longer committed to the negotiated production limits, and would seek to increase its oil supply to 12.3m barrels/day in April (up from 9.7 million barrels/day in March) and then further boost its production capacity to 13 million barrels/day as soon as possible. With the prospect of an additional several million barrels of daily supply about to hit world oil markets, the price of the key international benchmark for oil, Brent Crude, dropped more than 30 percent in the space of 48 hours. Global stock markets also plunged, with the Dow Jones Industrial Average falling a record 2000 points on 9 March, the largest ever intra-day loss.

The precise trigger for Russia and Saudi Arabia’s decision to walk away from OPEC+ remains unclear. Some [observers](#) speculate Russia may have been seeking to retaliate for US sanctions that had been placed on the largest Russian oil company, Rosneft, in February. Others [claim](#) that Russia’s decision needs to be understood in the context of its own internal politics, with Putin seeking to cultivate support among Russian elites closely connected to the oil industry and who have long opposed OPEC+. Other analysts have [described](#) the Russian and Saudi actions as a “game theory masterstroke”, which both countries were fully anticipating prior to the March announcements.

Regardless of the immediate conjunctural factors, the longer-term strategic motive behind the Russian and Saudi decision is clear. For several years, both countries had seen US oil producers, unhindered by any

production limits, continue to gain market share at their expense. By threatening to flood the world with more oil (and here, Saudi Arabia's actions are particularly decisive, due to its unique ability to quickly ramp up production capacity) the price of oil would fall significantly. Saudi Arabia and Russia would need to endure the pain of low oil prices for several years; in the meantime, high-cost US producers would be driven to the wall.

An Oil Price War Meets COVID-19

However, in the days following this massive supply shock to global oil markets, it quickly became evident that a much larger blow to oil prices was looming as a result of COVID-19's escalating spread outside of China. For oil producers, the tsunami of demand destruction greatly magnified the effects of the Saudi and Russian announcements, and pushed oil prices towards single digit levels. By 29 March, the price of the US benchmark, West Texas Intermediate (WTI) oil had dropped by more than 60 percent since the beginning of the year, falling below \$20/barrel, its lowest level in 18-years. The international benchmark, Brent, dropped to \$23.03/barrel, the lowest since 2002. Importantly, these benchmark prices often don't reflect the actual real price that a barrel of oil costs in the physical market - with traders [reporting](#) some types of oil selling for as low as \$8/barrel. Amidst predictions of \$10/barrel, oil companies began to [slash](#) their spending on further exploration, rig construction, and capital expenditure.

In the face of these extremely low prices, oil producers have been scrambling to store their oil in the hope of making a profit when prices rise sometime in the future. The problem, however, is that storage space is highly limited (particularly on land) and there are logistical and technical costs associated with bringing oil to where it can be safely stored away. Analysts have estimated that around three-quarters of the world's storage capacity is already utilised, and that limits will be [reached](#) by the end of May. By mid-

March, leading pipeline companies in the US were worrying that oil producers might attempt to use their infrastructure to store oil rather than transfer it somewhere else, and thus began [insisting](#) on a bill of final receipt before they would accept any new oil. And because it is expensive to shut down or temporary halt oil wells (and land leases sometimes contain clauses that require continuous production), oil companies may prefer to give away their product rather than halt work; indeed, in mid-March, traders were bidding for Wyoming Asphalt Sour (used mostly to produce bitumen) at *negative* 19 cents per barrel, effectively [asking](#) producers to pay them in return for taking the oil off their hands.

All of this presents enormous pressures across the entire oil value chain, from crude oil producers (companies and countries) through to refining and the petrochemical industry. Firm bankruptcies and the shutting down of oil wells are almost certain in the immediate weeks, and will likely be concentrated among those producers who rely upon relatively high oil prices, e.g. US and Canadian companies active in oil sands and shale production. Indeed, this prognosis was confirmed in the Dallas Federal Reserve March Monthly Survey on Oil and Gas, where industry respondents [commented](#) that the prospect of "the domestic oil and gas industry has never been bleaker" - this was "a perfect storm of disaster" and "the single worst reset in energy prices in [a] lifetime".

Oil and Finance

But mapping the potential trajectories of this pandemic-led crash requires a closer examination of the linkages between the oil industry and the wider economy. Crucial here is the deep interconnection between energy-related companies and financial markets, most evident in the US, where energy companies have become extremely leveraged over recent years. Much of the debt issuance by these companies - not only producers of crude oil, but also oil field service companies, refiners, and other 'mid-stream' firms such as pipeline companies - has been rated below

investment grade. Quite strikingly, energy companies have been the [biggest issuers](#) of 'junk bonds' in the US for 10 out of the last 11 years, and now make up more than 11 percent of the entire US junk bond market. The problem is compounded by the very significant amount of unsecured debt (debt that is not backed by any collateral) of US energy companies; [this figure](#) surpassed the levels of secured debt for the first time in 2016, reaching \$70 billion in December 2019, up from only \$1 billion in 2015.

With the cratering of demand in the wake of COVID-19 - amplified by the Russia/Saudi decision to increase production levels - many energy-related companies face an imminent downgrade to their financial ratings. UBS Group [estimated](#) on 16 March that up to \$140 billion of bonds issued by US energy companies are at risk of becoming 'fallen angels' - i.e. losing their investment-grade status. As this debt is downgraded to junk-bond territory, the increased supply will act to lower bond prices while increasing their yields (the interest paid on the bond, which moves inversely to price in the case of bonds). One possible consequence is a liquidity crisis where energy companies not only find it very difficult to find buyers for their debt - a critical issue as many are due to [renegotiate](#) their debt throughout 2020 - but are also forced to pay much higher interest rates on their bonds.

The net result will undoubtedly be a sharp increase in bankruptcies among such US energy companies over 2020 and 2021. Indeed, the first of these casualties occurred on 1 April with the filing for Chapter 11 by Whiting Petroleum, the largest independent oil company in North Dakota (the second-biggest US oil producing state). Whiting carried [carried more](#) than \$2.8 billion of debt on its books, but just days before the Chapter 11 filing, its senior executives awarded themselves \$14.6 million in bonuses, with the company's CEO walking away with an immediate payment of \$6.4 million - much more fortunate than the one-third of the company's workforce that had been fired last July. Whiting is almost certainly the first in a coming wave of energy company bankruptcies; indeed, Rystad Energy estimated on 3 April that if oil

continues to sit around \$20/barrel then more than 500 firms would be pushed into Chapter 11 over 2020-21, the largest number of such filings in modern history.

Such defaults could seriously destabilise other parts of the financial system. Pension funds, insurance companies, banks and other financial institutions hold large quantities of energy debt and may be placed at risk in the event of a large wave of corporate defaults - smaller US regional banks, in particular, are heavily exposed to the oil and gas sector. Recent years have also seen the widespread practice of securitising highly leveraged corporate loans - i.e. the bundling together of a large number of risky corporate loans that are then sold as securities known as Collateralized Loan Obligations (CLOs). Although it is difficult to disaggregate CLOs by sector or to determine with any precision who holds them, a wave of defaults among oil and gas companies could [cascade](#) through financial markets in much the same way that occurred with mortgage backed securities in 2008. Such interdependencies with financial markets are of course not unique to the fossil fuel industry. However, this sector stands out particularly sharply among the potential landmines that lay littered across financial markets today. Very high levels of unsecured debt, a predominance across junk bond and distressed debt categories, and the extreme shock presented by the oil price crash - all combine to make this sector a likely candidate for the propagation of severe financial stress throughout other parts of the global economy (much like the real estate sector in 2008-2009).

Winners, Losers ... and the Climate

It is certain that all parts of the fossil fuel industry will face a severe crisis over the remainder of this year and into 2021 - but what might this mean for our ecological future? Unfortunately - unless fossil capital can be effectively challenged now - a likely scenario is that a significant wave of bankruptcies in the energy

sector will actually accelerate the further centralisation of control by the largest oil majors. 'Big Oil' - Exxon, Shell, BP and a handful of others - are much better positioned to survive this crisis than other smaller producers. They tend to be vertically integrated firms, i.e. they are active across the entire energy value chain, including refining, and thus will have some of their losses in crude production offset by the lower cost of fuel inputs for their downstream operations. As truly global firms, they have reserves and assets distributed across the world, not solely in the higher cost shale fields of the US. Financially these firms also tend to have much deeper pockets, and their prospects are deeply entwined with broader financial markets (including pension funds) - in the UK, for example, BP and Shell [account](#) for a remarkable one-fifth of all FTSE dividends.

This scenario is precisely the one that leading financial firms are expecting to see unfold over the next 12-18 months. Goldman Sachs, for example, [noted](#) recently that while the current crisis will undoubtedly "be a game changer for the industry," the probable outcome is that "Big Oils will consolidate the best assets in the industry and will shed the worst ... when the industry emerges from this downturn, there will be fewer companies of higher asset quality". Inter-industry disputes over state support to the ailing shale industry in the US also reflect this possible outcome. Here, as Justin Mikulka [meticulously documents](#), large oil majors such as Exxon have sought to hasten the collapse of smaller producers and have vigorously *opposed* any state support to the shale industry. Mikulka cites the CEO of one shale firm, Pioneer Natural Resources, who told CNBC that efforts to engage the Trump administration in support of shale producers were not going well, because "We've had opposition from Exxon who controls API [American Petroleum Institute] and the TXOGA [Texas Oil and Gas Association] ... they prefer all the independents to go bankrupt and pick up the scraps."

For this reason, the current moment presents a real danger for climate justice campaigns. In the US, for

example, the Trump administration has agreed to loosen environmental regulations for power plants, factories and other industrial facilities - essentially allowing these polluters to 'self-monitor' their own pollution levels, according to a [recent report](#) in the New York Times. This new policy has been rolled out by the Environmental Protection Agency as part of addressing the COVID-19 crisis, but tellingly, it was also one of the key demands raised by the American Petroleum Institute in a [letter](#) sent by these Big Oil lobbyists to the Trump administration on 20 March. It is not just the fossil fuel industry that is attempting to use this crisis to roll-back environmental regulations, large banks and financial firms are similarly [pushing](#) for a relaxation on climate change reporting requirements and a delay to climate change 'stress tests'.

A scenario that sees the undermining of (already inadequate) environmental regulations and a wave of industry consolidation ultimately places Big Oil in a stronger position to capitalise from a post-viral world. While oil prices are today at historically low levels, they will not remain there over the longer term. One of the critical consequences of today's vast destruction in the demand for oil is that most leading oil companies are announcing savage cuts to their capital expenditure (CAPEX) on oil exploration and project development. For the oil majors these initial cuts have averaged around 20 percent over the last few weeks; they are even higher in the shale industry, where one energy consultant [expects](#) a 40 percent drop in spending over 2020. It takes considerable time and expense to restart or bring new oil production online after projects have been halted or oil-wells shut-in, and for this reason, the effects of today's cutbacks to CAPEX will be felt in supply constraints for some time in the future. This creates a strong possibility of a sharp rebound in prices as we emerge from this crisis - an outcome that will incentivise a renewed wave of investment and expansion in fossil fuels globally (much as happened through the recent history of US shale production).

How might this be reflected beyond

the US and the fortunes of the large, globally-diversified oil majors? Here we also need to differentiate between the more powerful oil producing states and other poorer oil exporters. There is no doubt that countries like Saudi Arabia, the United Arab Emirates, and other Gulf states will certainly experience rising deficits and greater pressure on government spending in a prolonged period of low oil prices. These states, however, have relatively low levels of existing debt and can borrow fairly cheaply on international markets. The Gulf's particular class structure - an overwhelming reliance on temporary migrant workers that make up more than 50% of the Gulf's labour force - also means that any sharp economic contraction can be partially displaced through simply sending migrant workers home (as happened in Dubai in the aftermath of the 2008 crisis). Indeed, much like the possible strengthening of 'Big Oil' through this crisis, the Gulf states could see their position further consolidated if assets in neighbouring countries become more cheaply available in a post-viral world. One important market here is India, where companies headquartered in the Gulf are continuing to make significant inroads in [expectation](#) of a boom in future energy demand. The Gulf's strategic insertion within trade and financial networks connected to China is also important to highlight. Crude oil and petrochemicals remain central to these connections, and work on [key projects](#) in these sectors is continuing

throughout the current crisis (such as Abu Dhabi's Ruwais refinery, which will be the largest integrated refinery and petrochemical plant in the world on completion).

Other poorer oil exporters will face much more serious problems as a result of the current plunge in oil prices. These include Ecuador, Venezuela, and Iran - the latter two contending also with savage US-imposed sanctions. States such as Nigeria - which [depends](#) upon oil for 57 percent of government revenue and over 90 percent of foreign exchange earnings - will find it exceedingly difficult to meet budgetary demands, a problem that will have deadly consequences in the midst of the current pandemic. Similarly, for Iraq, where oil exports make up 90 percent of government revenues and a large proportion of the population depends upon the public sector for wages or pensions, it is difficult to see how the expected shortfall in funding will be addressed. The problems these countries face, however, should not be blamed on low oil prices; instead, longstanding legacies of colonialism, the destruction wrought by Western-led wars and occupation, and the relations of debt and dependency that bind these countries to the centres of the global economy need to be [placed upfront](#) in tackling this pandemic. Nigeria, for example, may depend on oil for a large proportion of government revenues - but [more than half](#) of these revenues are spent

simply on servicing existing foreign debt. Any attempt to move beyond fossil fuel dependency at the global level must challenge this combustible mix of oil, debt, and finance.

At the time of writing, there is talk of a [possible deal](#) between the US, Saudi Arabia, and Russia around oil production levels. It is unlikely that such a deal would have any sustained effect on the price of oil given the vast destruction of demand that has occurred in recent weeks. Some observers have noted the irony of seeing leading Republicans who had previously called for the dismantling of OPEC because of its 'cartel'-like behaviour now demanding greater market collusion with Saudi Arabia and Russia over prices. There is certainly no doubt that the mutually-reinforcing crises of the COVID-19 pandemic and the global economic downturn are indeed provoking a whole range of unexpected political realignments, strange bedfellows, and new openings for political change. But this moment is also one where previously existing arrangements may be re-worked and consolidated in the interests of the most powerful - we face the very real danger of an emboldened and resurgent oil industry, positioned ever more centrally within our political and economic systems. Such an eventuality would be a disastrous outcome to this current pandemic.

Source 8 April 2020 [Verso](#).

Sex work, Covid-19 and the UK lockdown

28 April 2020, by **Tayler Hackett, Paige Murphy**

There are between 60,000 and 80,000 sex workers in the UK, most of whom work across a variety of indoor (private work, parlours) and outdoor (street based) settings. Since the surge in the number of Britain's Covid-19 cases at the beginning of March and the declaration of the lockdown, many sex workers have been forced to reduce or cease

business. In some cases, this has left sex workers without alternate sources of income or access to Universal Credit, forcing them to continue to work and put both their own and others' health at risk. Whilst the media is often titillated by the supposed sensationalism of sex worker struggles, they are in many ways emblematic of the mundane

difficulties faced by the millions of precarious workers in Britain's gig-economy. In simple terms: they have been forced to choose between health and homelessness.

Sex workers are a diverse population, encompassing many marginalised groups - disabled people, trans people, people of colour, migrants,

single mothers and carers – for whom the sex industry is often the best, or only, option in a country ridden by wage stagnation, ten years of Tory austerity and a decimated welfare system. A lack of job security, zero hour contracts, and crushing student debts have meant that an increasing number of people have taken up sex work in order to afford rising rents, the cost of raising children, and basic necessities. Their ability to meet their own costs of living are dependent on an industry that is unstable and prone to great fluctuations, influenced by everything from shifts in the economy and school holidays, to the political climate and changing seasons. As large groups of newly-redundant workers are advised to apply for Universal Credit, they will experience the inadequacies and insufficiencies of a benefits system that has [compelled many people to take up sex work](#).

For escorts, the impact of Covid-19 began gradually, as non-essential travel, conferences, meetings and flights were cancelled over the last month. Many clients, in a frenzied panic, then cancelled bookings due to the virus, and fears of catching it. Dancers and strippers have found themselves out of work with their clubs slowly emptying out and now indefinitely closed after in compliance with government regulations. Some clients find themselves instructed to work from home whilst others are now entirely out of jobs with little disposable income. With the sudden downturn in the economy and the recession that Covid-19 has already catalysed, not to mention the dramatically increased policing and surveillance of people as disease vectors, many of the people who will suffer the most are the workers who are deemed ‘unskilled’ and inessential to our economy. Regardless of the logistics of meeting clients in cities that are epicentres of the UK’s outbreak, many will be hard pressed to find work at all as sex services are usually among the first expenses to be wiped out of an average client’s monthly spending. Ironically, times of economic crisis – such as the Great Recession of 2007-8 – are also moments when the sex industry becomes flooded with new workers looking for extra sources of income. This leads to a situation in which there

is less demand and a never ending source of supply, driving prices down. Inevitably, workers make less and less on average, with less work to go around and more predatory clients seeking to exploit the situation. The fallout of Covid-19 may mean that as workers become more desperate to make a living, they are more increasingly restricted from doing so and more likely to see clients they usually would not, leading to potentially disastrous consequences and – as seen in the United States following the introduction of the [SESTA/FOSTA](#) legislation– often to a [rise in violence](#) and murder of sex workers.

Whilst selling sex (indoors and alone) is legal in the UK, workers are afforded precious few protections from the state. For example, vital safety measures such as working together, in a brothel or having a safety buddy to check in with, are criminalised. Because sex workers lack worker status and are instead classed as self-employed or contractors, their income is reduced to nothing during periods of illness. As self-employed workers, they are not entitled to employee benefits such as statutory sick pay or annual leave and migrant sex workers are often doubly excluded from what limited provision the state has to offer. Despite the increased risks and lack of protections granted to them, sex workers are still expected to pay and file tax returns just as other self-employed people. Indeed, despite the package of support that Chancellor Rishi Sunak has announced for the self employed, there is little doubt that many sex workers will find themselves excluded from this safety net due to their fluctuating income (making it increasingly difficult for them to report their average income, even where tax reports can be provided). Furthermore, the high levels of stigma faced by sex workers means that many report their income as earned through alternative sources such as beauty or massage therapy. How this will impact their ability to access the funding set out by Sunak is still unclear; what is certain is that the measures the government has taken are far from good enough and bound to exclude groups of the most vulnerable who need the state’s support the most.

Some workers have the resources and time to transfer the majority of their in-person work online, by creating content and using platforms such as Only Fans or webcam and chat sites to create an alternative source of income. However, this is often not a viable replacement for in-person work, with the rate of return being much lower for online services. Many sex workers also prefer the relative anonymity that full-service work allows them. Online content incentivises workers to show their face in advertising for a higher earning potential, which brings with it an increased risk of outing, stalking and other real-world dangers and consequences. Online sex work is also often vastly more time consuming – involving creating and editing content, advertising and interacting with audiences on social media. For newcomers to online platforms, building an audience and income can be notoriously hard work, requiring access to digital technologies that many of the poorest simply don’t have, as well as free time that is now absorbed by care duties. What is more, the influx of otherwise in-person workers to these platforms makes an already crowded market even more difficult to compete in.

Despite the dire predicaments of the current moment, sex workers are finding means of survival and solidarity through collective action. Grassroots sex worker-led collective SWARM has started a [hardship fund](#) for UK workers facing financial crisis along with guidelines for how allies and clients alike can donate in order to share support. The grant provides payments of £200 to UK sex workers in financial hardship with no savings to fall back on. In many ways, this crisis has already highlighted the importance of the diversity of tactics used by marginalized people simply to stay afloat under austerity. The flourishing of mutual aid networks across the country has been an inspiring sight and vital resource for many. However, it is important that such efforts are not co-opted by the Conservative government’s ‘Big Society’ politic and used to absolve the role that the state has played in underfunding vital services. We cannot overlook the role that long-term Tory neglect of welfare has

played in fueling the fire of this crisis. As the [English Collective of Prostitutes](#) has already pointed out, this is as vital a moment as ever to make the same radically transformative demands that sex worker activists have been espousing for years: the decriminalisation of sex work, a moratorium on raids, arrests, and prosecutions, worker status and labour protections for all sex workers, an end to immigration detention and a call for decarceration. The coronavirus

pandemic emphasises vital insights about how and who states and capitalism care for, neglect, and ultimately view as disposable. Sex workers have a resilient and enduring role in activist struggles, but in order to succeed support is needed from allies to reduce stigma, to resist criminalisation and to struggle better together. In the words of poet, Diane Di Prima,

“No one way works, it will take all of

us shoving at the thing from all sides to bring it down”.

Allies, organisations and other sex workers are encouraged to donate to the SWARM hardship fund, [here](#).

Sex workers facing financial hardship are able to apply to the fund by emailing swarmmutualaid@gmail.com

[Verso](#)

COVID-19 in the Age of Bolsonaro

28 April 2020, by [Aldo Cordeiro Sauda](#), [Camila Valle](#)

Going further than even Donald Trump in the United States, Brazilian president Jair Bolsonaro has downplayed the threat of the virus and the scale of the global pandemic, flippantly calling it a “little flu” and saying that “we’re all going to die one day.” With an added dose of sexism, he went so far as to tell supporters to confront the virus “like a man, not a boy.” [1]. Even Twitter, followed the next day by Facebook and Instagram, took down two of Bolsonaro’s posts in which he questioned quarantine measures. In a statement, Twitter explained that it had broadened its definition of *harm* in its global rules in order to “address content that goes directly against guidance from authoritative sources of global and local public health information.” [2]

In one of the deleted tweets—a video showing Bolsonaro proudly flouting his own government’s social distancing guidelines by mixing with supporters in an open market in Brasília—a street vendor tells the president that people are worried that if they “don’t die of the disease, [they] will die of hunger.” Most people’s reality is clearly encapsulated in this sentiment: people can’t stay safe if they have to go to work, but they can’t survive if they don’t. The only government response that makes sense is to guarantee every person the conditions under which they can feasibly stay

home: access to food, clean water, shelter, and healthcare. Essential workers like healthcare and food industry workers should be given everything possible to ensure their health, such as adequate protective equipment, like masks; a clean work space; free, accessible, and quick testing; paid sick leave; hazard pay; and more. Bolsonaro’s takeaway, however, was the complete opposite: “What I have been hearing from people is that they want to work.”

While the senate, against Bolsonaro’s wishes, has approved a monthly emergency R\$600 for low-income people for three months, this will do little to alleviate people’s needs, especially given that eligibility for the money has various stipulations, including not being formally employed and not receiving social security, assistance benefits, unemployment insurance, or federal income transfer payments. [3] In a victory for the Socialism and Liberty Party (PSOL) and the Democratic Labor Party (PDT) during the negotiation of the emergency payment in the Chamber of Deputies, single working mothers will be able to receive a monthly payment of R\$1200 for each of the three months. [4]

Under the slogan *Brazil Cannot Stop*, Bolsonaro has prioritized the increasingly anthropomorphized “economy” over workers’ lives, often

in contradiction to the statements of other Brazilian officials, whom Bolsonaro has attacked accordingly. For example, his government’s own health minister Luiz Henrique Mandetta has emphasized the importance of containment as a means of mitigating the virus. The governors of the states of São Paulo and Rio de Janeiro, former Bolsonaro supporters in the country’s virus hotspots, have banned public gatherings, closed schools and businesses, and called for strict social distancing. Twenty-five of the country’s twenty-seven governors signed a joint letter demanding Bolsonaro support the safety measures. [5] At a time in which the usual forms of protests such as rallies and demonstrations are impossible, self-isolating Brazilians in São Paulo and Rio de Janeiro nevertheless drew on the great Latin American tradition of the *cacerolazo*, or *panelaço* in Portuguese, and banged on pots and pans from their windows on many nights to protest Bolsonaro’s handling of the pandemic.

While Bolsonaro’s direct response to the COVID-19 crisis has been critical, even putting his government at risk of impeachment, so have the structural conditions he helped set in place that have rendered the Brazilian healthcare system—the largest government-run public healthcare system in the world—less rather than

more equipped to deal with the current pandemic, as well as any future ones. In 2019 alone, for example, Bolsonaro took away almost R\$10 billion meant for the country's healthcare system. [6] That same year, he also vetoed a bill that guaranteed all patients the availability of blood, medicines, and other necessary resources for the diagnosis, prevention, and treatment of their illnesses. [7] In another attack on the healthcare system, Bolsonaro gutted the Mais Médicos program established in 2013 that sent doctors to work in small villages, indigenous lands, maroon communities, and the poorest, most under-resourced neighborhoods of Brazil. Around half of the Mais Médicos doctors came from Cuba and were sent back to the island after Bolsonaro became president. As a consequence, twenty-eight million people in Brazil have seen their right to medical attention waived. [8]

As public health was under assault, agribusiness—one of the main sectors responsible for the election of Bolsonaro in the first place—boomed. One of the world's largest producers and exporters of coffee, sugar, orange juice, soybean, corn, ethanol, pork, beef, and poultry, Brazil has been wiping out small family farms to make room for highly capitalized, export-oriented, large-scale commodity growers, which occupy 75.7 percent of the nation's agricultural land and make up 62 percent of total agricultural output. To put it in starker terms, the top 1.5 percent of rural landowners take up 53 percent of all agricultural land. [9] As Rob Wallace, Alex Liebman, Luis Fernando Chaves, and Rodrick Wallace explain:

"However unintended, the entirety of the production line is organized around practices that accelerate the evolution of pathogen virulence and subsequent transmission. Growing genetic monocultures—food animals and plants with nearly identical genomes—removes immune firebreaks that in more diverse populations slow down transmission. Pathogens now can just quickly evolve around the commonplace host immune genotypes. Meanwhile, crowded conditions depress immune response. Larger farm animal population sizes and densities of factory farms facilitate

greater transmission and recurrent infection. High throughput, a part of any industrial production, provides a continually renewed supply of susceptibles at barn, farm, and regional levels, removing the cap on the evolution of pathogen deadliness. Housing a lot of animals together rewards those strains that can burn through them best. Decreasing the age of slaughter—to six weeks in chickens—is likely to select for pathogens able to survive more robust immune systems. Lengthening the geographic extent of live animal trade and export has increased the diversity of genomic segments that their associated pathogens exchange, increasing the rate at which disease agents explore their evolutionary possibilities". [10]

As he dismantled environmental protections and advanced the destruction of the Amazon, Bolsonaro exceedingly catered to the industrial agribusiness model, where monoculture and profits dominate. The world market, imperialism, ecology, indigenous land, workers' rights, and the legacy of slavery and land reform have thus come together to render Brazil particularly vulnerable to the spread of disease. As Wallace et al. so succinctly put it: "Agribusiness is at war with public health. And public health is losing." [11]

Like all capitalist crises, the repercussions of Bolsonaro's approach to the pandemic (or lack thereof) will not be felt equally among all Brazilians. A research study by Central Ásñica das Favelas and Instituto Locomotiva has shown that *favelas*, where 13.6 million Brazilians, the majority indigenous and/or Afro-Brazilian, currently live, will be particularly hit hard.

The study shows that COVID-19 has hurt the jobs of 86 percent of workers in the periphery, the ability to acquire food and other basic necessities of 86 percent, and the family income of 84 percent. On top of the lack of food, the pandemic has worsened the quality of food for almost 60 percent of residents and, of these, 80 percent of parents say they are very scared about not having food to give their kids. Despite this, 71 percent disagree with the

president, who is insisting that informal workers would like to go back to work, about ending their quarantines. As Renato Meirelles, president of Instituto Locomotiva, described:

"We have heard the narrative that the epidemic is democratic, that it affects the rich and the poor equally. But the research makes it clear that this is not the case, that there is a section of society that doesn't have savings, that doesn't have the resources to maintain their way of life if they can't work. It's much easier to be quarantined with a full fridge in a comfortable house than it is when you live in a favela where the fridge is empty, there is no water, and five people live in a space of 20 square meters". [12]

In an attempt to prevent and address the effects of the crisis on favelas and the periphery, the left-wing PSOL has come out with an emergency plan. The plan includes proposals for a basic emergency income to families, supply of necessary items, distribution of hygiene products such as hand sanitizer and soap, provision of water, and use of hotel and inn rooms for sheltering people in isolation. [13]

Indigenous communities are also preparing themselves in the face of the government's carelessness toward human life. "Coronavirus could wipe us out," explained Ianucula Kaiabi, an indigenous leader in Brazil's Xingu national park on the southern edges of the Amazon, home to about six thousand people from sixteen different tribes, and head of the Xingu Indigenous Land Association. From influenza to smallpox, highly infectious diseases, almost always brought by white, well-to-do travelers, have a long history of devastating indigenous communities and are a particular threat to Brazil's more than one hundred isolated groups.

Given indigenous groups' communal ways of life, the effects of the virus would be nothing short of genocide. For now, indigenous communities' main objective is to prevent COVID-19 from reaching them in the first place. In Brazil as well as across Latin America, indigenous people are sealing off roads into and out of the reserves, blockading their lands, and urging people to leave only in cases of

emergencies. [14] Despite this, there have been at least seven reported COVID-19 cases among the country's indigenous population, including one death—that of Yanomami teenager Alvaneí Xirixan. In response, the Hutukara Yanomami Association is asking the federal police, the army, and the National Indian Foundation to immediately withdraw mineral prospectors from indigenous land in order to prevent new transmissions of the virus. [15]

Kaiabi noted that Brazil's specialized indigenous health system has faced dramatic cuts under Bolsonaro and that he feared it was "totally unequipped" to deal with the looming catastrophe. Questions of how to quarantine on reserves, as well as regarding the distribution of food, medicine, protective equipment, hygiene products, and more remain unanswered. [16]

Similarly bearing the brunt of the current crisis, *quilombolas*, or maroons, descendants of African slaves who formed their own communities away from slavery, are being devastated during this period. In a federal resolution published on March 27, in the midst of the pandemic, the government announced that it would forcibly (and illegally) remove quilombola communities of Alcantara, in the state of Maranhão, from their lands in order to expand the Alcantara Launch Center, a satellite launching facility of the Brazilian Space Agency, per an agreement between Bolsonaro and the United States. According to the National Coordinating Committee of the Black Rural Quilombola Communities, the removal will harm approximately eight hundred families, communities who have occupied that land since the seventeenth century. The Landless Workers' Movement, the Alcantara Association of Quilombola Territory, the Movement of Women Workers of Alcantara, among others, have condemned the move. [17]

As in all over the world, violence against women has also been drastically exacerbated by the pandemic in Brazil. According to São Paulo state's office of the prosecution, restraining orders against male aggressors have gone up by 30

percent. [18] This comes following cuts to the government program promoting women's autonomy and against violence (*Políticas para as Mulheres: Promoção da Autonomia e Enfrentamento à Violência*). In 2019, the amount invested in the program was the lowest it has ever been since its establishment in 2012. At its peak in 2015, the program received R\$290.6 million, compared to 2019's R\$48.2 million—a slashing by almost 84 percent. [19]

Unsurprisingly, Bolsonaro's appalling treatment of the pandemic has united political figures and activists across parties and tendencies, spanning from the center-left to the revolutionaries. On the morning of Monday, March 30, along with other prominent opponents of Bolsonaro, Fernando Haddad (Workers' Party), Ciro Gomes (Democratic Labor Party), Guilherme Boulos (PSOL), and Manuela Davila (Communist Party of Brazil)—who all ran against Bolsonaro in 2018—published a manifesto entitled "Brazil Cannot Be Destroyed by Bolsonaro," calling for the president to step down due to his handling of the COVID-19 crisis:

In our country, the emergency is exacerbated by an irresponsible president.... Even before the arrival of the virus, public services and the Brazilian economy were already dramatically weakened by the neoliberal agenda that has been imposed on the country. In this moment, we need to mobilize, without restraint, all the public resources necessary to save lives.

Bolsonaro is in no position to keep governing Brazil and to face this crisis, which compromises public health and the economy.... He should resign.... He needs to be urgently contained and must answer for the crimes he is committing against our people. [20]

The demand for Bolsonaro's resignation has become a galvanizing force, with calls for impeachment picking up steam. The latter included three PSOL congresspeople, Fernanda Melchionna, Sâmia Bomfim, and David Miranda, filing an impeachment request against Bolsonaro in the Chamber of Deputies on March 18.

The request was signed by various members of civil society and a petition of support has accrued over one million signatures. Like all political decisions taken by the left, however, the impeachment filing has opened up an important debate about strategy in this moment, with some, including within PSOL, saying that a political and juridical process such as impeachment should not be the main priority. [21]

While other far-right governments around the world, like India's Narendra Modi and Hungary's Viktor Orbán, have used quarantine measures as an opportunity to restrict civil liberties, Bolsonaro's approach, based on denying the seriousness of the pandemic and sabotaging social distancing measures, is tied to the legitimacy crisis that has marked his government since taking office in January 2019. Elected on an anticorruption platform, Bolsonaro has permanently clashed with Congress and the Senate as part of a rejection of "old politics"—what he claims was a method of building consensus among different political elites that led Brazil to the moral crisis it was in before he took over.

While Bolsonaro riled up many of his supporters on the ground, an important part of his right-wing base, especially in São Paulo and Rio de Janeiro, defected. According to recent polls by the Brazilian Institute of Public Opinion and Statistics, one of the country's biggest polling agencies, Bolsonaro's support in São Paulo has collapsed. Having won the second round of the 2018 presidential elections in the city with 60 percent of the vote, those who now describe his government as good or excellent amount to a mere 25 percent, with 8 percent describing his government as bad and 40 percent as terrible. [22] Even before the impeachment initiative by PSOL representatives, former government supporters like conservative parliamentarians Alexandre Frota and Janaina Pascoal have been openly calling for the president's impeachment. [23] They were joined on March 15 by the governor of Goiás state, Ronaldo Caiado, a physician and one of Bolsonaro's earliest supporters, who now claims that the federal

government has lost authority in his state.

Isolated from the political establishment and within his own government by continued declarations undermining COVID-19, Bolsonaro has narrowed his support to a core base of Christian fundamentalists and far-right militants. Important sectors of capital also seem to be abandoning him, siding with the governors and Congress. Both of the country's main newspapers, *Folha de São Paulo* and *Globo*, for example, have put forward editorials calling on him to resign. [24]

The spiraling crisis between Bolsonaro and the Supreme Court, Congress, and most of the country's governors over federal government attempts to

sabotage curfew initiatives, has led to increased power of the country's military. There is even growing talk of an army takeover, led by the vice president, retired army general Hamilton Mourão, who would have the support of the unprecedented number of generals named by Bolsonaro as government ministers. [25] It is improbable, however, that Bolsonaro will be toppled by maneuvers from above without substantial pressure from below. While there might be little excitement for the president, himself a former army captain, among the top hierarchy of the military, it was he who returned the military to the forefront of Brazilian politics.

As the left seeks the best strategies to

unite against Bolsonaro and prevent mass loss of life, the president's treatment of the pandemic seems to be fracturing the alliance between Brazil's traditional conservative elite, responsible for toppling Dilma Rousseff's Workers' Party government in 2016, and Bolsonaro's eclectic political coalition, made up of rebellious noncommissioned military officers, fanatical evangelicals, agribusiness, and businesspeople from the service industry, particularly the retail sector. [26] While the political, economic, and public health future of Brazil is uncertain, one thing is clear: Bolsonaro and the system that spawned him have blood on their hands.

June 11, 2019.

Thanks, Bernie!

27 April 2020, by Joanna Misnik

This discussion will continue for a time. Meanwhile, I suggest closing your eyes and visualizing what U.S. politics, electoral and social movement, would have looked like if Bernie Sanders, democratic socialist, had not launched his campaigns for President.

At the outset of the primary season, Bernie Sanders' ratings and his substantial wins in Iowa, Nevada and New Hampshire made his nomination seemed like a surprising, but distinct, possibility. His popularity had moved other progressive candidates to adopt some form of support or lip service for Medicare for all, fixing student debt, a fair tax system which makes the billionaires pay their fair share, an end to corporate and oligarchic campaign financing, ending the immoral income gap between rich and poor, raising the minimum wage to \$15, immigration and criminal justice reform, and more.

Bernie revolutionized funding for campaigns, refused to take billionaire donations or money from corporate super-PACs[i]. He raised over 10 million from millions of small

donations at an average \$18.50[ii] per donation. This was unprecedented in big-dollar presidential campaigning. Message received: working people are in this and will band together to finance their political message. The wealthy do not monopolize our elections. Candidates will now forever be judged on how they are financed and by whom.

Centrist alarm

The popularity of Bernie's platform alarmed corporate centrist Democratic Party leaders, who launched a campaign known as ABB - anybody but Bernie. Senator Elizabeth Warren was their first weapon - a radical progressive often allied with Sanders and a woman to appease the loss of Hillary Clinton felt so keenly among upper middle class suburban women, the sought after base of the Party. But Warren failed to attract voters away from Bernie. The back-up plan was flooding the contest with a clown car full of candidates, something for everybody, so as to take

votes away from Bernie in the primaries.

And then there was Joe Biden, Obama's Vice President who had traction among the Party's Black voters that could deliver victories for a return to life before Trump, the Obama days. The appeal played on the abject fear that Donald Trump might be re-elected and the Democratic candidate had to be someone who could vanquish him. The Democratic leadership insisted the idea that Bernie's democratic socialist program made him a long shot. That worked, and Bernie's lead was pushed back, never to return, after a stunning Biden victory in South Carolina. Other candidates dropped out one by one, sheepishly endorsing Joe Biden, knowing that there was a real issue about his diminished capacities.

Medicare for All

One attack that backfired was the constant question during the debates and in interviews about Medicare for All: Sanders was accused of not

having a plan to pay for Medicare for All. Workers really love the health coverage they get from their employers and they do not want to give it up; the government should not force them.

Again and again, Bernie explained how Medicare for All would save money, be more efficient and fulfil what is a human right for all. But it never stopped - until Covid 19. The life-threatening chaos of the botched response to this pandemic has made the case for Medicare for All. With 17 million and rising suddenly unemployed, the virtues of employer furnished health care have evaporated. As one author put it; "Reality Has Endorsed Bernie Sanders." Even before the pandemic, Medicare for All enjoyed majority support in most polling.

Bernie Is Not Just Running for President

Bernie ran for President to jumpstart and focus much-needed resistance in this country to the inhumane plunder by billionaires, the oligarchs that create obscene income inequality and exploitation. He railed against corporate greed, the seizure of our government by the corporations, the destruction of anything like a humane society that cares for everyone.

He gave hope to people ground down by the extreme individualism of neoliberalism, called out the profit system as the cause of this deep inequality and urged a political revolution, a movement to take back our society. To emphasize that he was not a savior candidate, Sanders popularized the phrases 'Not Me, Us!' and 'A Movement, Not a Moment!'

He explained that even if he were elected, it would take this mass movement to bring about needed change. And it would take time, nothing overnight. This message was heard by millions of young people, anxious to fight for a vision of a just society on a planet that can sustain life.

Socialism was back in the U.S. lexicon, running ahead of capitalism in poll after poll - even if this was the socialism of post-war Europe, of catch-up with social measures in other capitalist societies, our working class had been denied. The special urgency was the need to defeat the most dangerous President in the history of our country - Donald Trump had to go.

From the beginning, Sanders pledged to support the Democratic nominee and help beat Trump. The pandemic, social distancing and uncertainty about the election calendar, combined with Trump's utter inability to lead the response or even assemble the facts at hand must have been a factor in suspending his campaign and closing the Democratic Party ranks.

A Democratic Election in the Time of Pandemic?

April 7 was primary election day for Democrats in the state of Wisconsin. The voting took place the day that a record 1,200 Covid19 deaths occurred in a 24 hour period and 97% of the US population is officially under what is imaginatively called social distancing, or lockdown. The Democratic Governor of Wisconsin tried to postpone the primary but was overruled by Republican-dominated state legislature as well as a US Supreme Court ruling (strict partisan vote of 5 to 4) that will not allow any mail in ballots to be counted if postmarked after April 7.

The city of Milwaukee managed to open only five of its 180 polling places as poll workers, many elderly, opted not to risk it. Lines were intolerably and undemocratically long and severely dangerous.

More than 20 states and territories have yet to hold primary elections. Fifteen have already postponed them. And the Democratic Party has optimistically pushed its national nominating convention to mid-August from mid-July. In addition, social distancing severely restricts face to face campaigning, door to door neighborhood canvassing, and the

mass rallies that gave the Sanders political revolution its reality and energy as a movement.

The recently-passed Congressional \$2.2 trillion relief package number 3 contains a hard fought for \$400 million for states to implement balloting by mail as opposed to in-person voting. But the United States is a federated system, not a federal one. And Republicans control a majority of state legislatures that have the power to accept or reject the "suggestion" of reliance on mail-in balloting. Prior to the pandemic, some Republican-controlled states had removed around one million voters from eligibility under various pretexts to damp down the Democratic voting base. Donald Trump tweeted his opposition to a national mail-in ballot because it would advantage a Democratic victory

From the beginning, Bernie Sanders has emphasized that in order to beat Trump there must be record-breaking voter turnout. This did not happen in the early primary contests; a disappointing 20 percent of young voters came out. The fight for mail-in balloting and funding to implement it continues in Congress. In the end, the pace and depth of the Covid 19 crisis and the economic collapse are decisive factors in the democratic conduct and timing of the US presidential election and its outcome.

The Cycle of Rebellion From Within

The Democratic Party leadership is adept at pushing renegade leftist nomination-seekers off a path to victory. The cycle of these attempts is about every 15 to 20 years, as social unrest rises to a pitch seeking "political": power but does not look to the near unthinkable strategy of a third political party in an anti-parliamentary system. Thus far, the ruling class has been able to contain deep divisions within the duopoly.

Eugene McCarthy's 1968 campaign, under the slogan 'Clean for Gene' reflected deep opposition to the war in Vietnam and a general radicalization

against the “system.” McCarthy’s nomination was defeated as thousands of young people demonstrating outside the Chicago convention were attacked in a police riot.

The next defiance came in 1984-88, when the Rev. Jesse Jackson, an aide to Martin Luther King at his side when King was assassinated, twice sought the nomination. Jackson surfaced the deep anger within the working class suffering from the recession of the 1980s, stagnant wages, and unemployment – the full reality of the end of the American dream.

Jackson ran in the social democratic spirit of Martin Luther King. Broad scale support to his campaign was multiracial and working class. In 1988 he came in second to Michael Dukakis, winning 13 primaries and 7 million votes. This was probably the final offensive struggle the Black civil rights movement waged within the national Democratic Party for equality and political inclusion of an MLK trajectory.

Jackson’s campaign vehicle, the Rainbow Coalition, basically disappeared after 1988. And the near unanimous loyalty of the Black vote since to the Democratic Party is a defensive one as neoliberalism ravages large sections of Black America.

The New Socialist Movement

Unlike the previous radical rebellions

in Democratic presidential politics, the Bernie candidacy inspired the growth of the Democratic Socialists of America (DSA). This organization now has some 56,000 members in 170 chapters spread all over the country. They were a boots on the ground army for Bernie, knocking on over one half million doors and making untold phone calls. Over the past several years, DSA has been studying Marxism, history of socialism, and has adopted a firm commitment to a rank and file strategy of building a working class movement from below. The group is a big tent, open to all radical points of view operating within a democratic framework.

DSA is overwhelmingly young. At the time of the last rebellion in the national Democratic Party in 1988 some were not yet born and others were in grade school[iii]. It was not surprising that many believed Bernie would win, underestimating the obstacles to his campaign not just in the corporate centrist Party leadership but the actual level of class consciousness and readiness for struggle, particularly with the acute weakening of the organized labor movement in the U.S and its inability to lead resistance as a national movement. Lesson learned.

A plurality, if not a majority, of the DSA holds a position of opposition to taking over the Democratic Party and supports an eventual building of an independent workers’ party. Various tactics attempt to cope with the failure of any left force to build a durable mass working class third party in this country. Propaganda for such a party

combined with abstention from elections or running strictly symbolic campaigns is not an attractive strategy for most new socialists born of the Bernie effort.

Involvement in local struggles, building coalitions with other organizations fighting for a minimum wage, against police brutality, housing for all, rent control, decarceration[iv], immigrant rights and strike support have deepened the ability of the DSA to play a role in real time in the real world. Close to 100 DSA endorsed candidates, most members of the group, have won election to become tribunes of the people. In Chicago, DSA elected six members of the City Council, the first socialists in that body for over 100 years.

The eruption of the new socialist DSA and Bernie’s campaign has placed pressures on the small groups that remain from the deep decline of the 20th Century revolutionary left. Even DSA, which voted as its convention not to endorse any Democratic nominee but Bernie, has some further thinking and discussion to conduct. Everyone understands the need to rid this country and the world stage of Donald Trump, the “most dangerous President ever”: as Bernie repeatedly said. (For the flavor, rent the 1990s film “The Madness of King George.”) The discussion of left strategy toward that end in the time of pandemic and looming economic depression is continuing – electronically of course.

15 April 2020

Source [Socialist Resistance](#).

“Bordeaux En Lutttes” 11.7% for an anticapitalist programme

27 April 2020, by **Beatrice Waylo, Philippe Poutou**

It has been a month since the first round of the municipal elections in France and yet it already seems like eternity. In fact, the announcement of

the start of lockdown and the postponement of the second round of the elections came the day after the first round voting on 15 March 2020.

Since then, whether we are strictly isolated or relatively so for those who continue to work, concerns have been largely dominated by the spread of the

epidemic, according to the sobering statistics for those who die or return to intensive care. The election and its campaign are therefore distant, and assessments have not been made. Once this introduction has been made, we can try to make at least a first attempt at analysis.

On Sunday, 15 March, the atmosphere was already heavy. Maintaining the vote was highly contested because of the risks it posed to the population. Abstention was also at a record level, limiting the validity of this election. The first rules of social distancing having been in place for three days, we had logically cancelled the election night gathering.

We therefore could not “celebrate” our result of 11.77% which enabled us to qualify for the second round and therefore to remain in the race to obtain municipal councillors, which has been our goal from the start. Not through electoralism and having positions but to continue the political battle for the next six years and not just be protesters during the campaign month.

Birth of a list, a team, a dynamic

Before running the campaign, we had to go through a difficult period, which would leave its mark. Several weeks marked by significant strategic disagreements within the Nouveau Parti anticapitaliste (NPA) as well as among activists more generally concerning the question of a unitary list which would group organizations which are usually separate, namely the NPA and France Insoumise (FI).

It was the Bordeaux Debout collective, bringing together activists in France Insoumise, trade unionists, *gilets jaunes* and associations which took the initiative of proposing that the NPA

consider a common list. On both sides, this caused a crisis and ruptures. Despite the tensions, the discussion went on to the end. On both sides, activists fought to reach a political agreement, a unity that appeared to be beneficial, promising a campaign that would make some noise and be effective through bringing together diverse activist circles.

For the first time in Bordeaux, the right - in power since 1944 - was threatened and the “left” had a historic chance of winning. The issue in this election was this alternative. So we needed a list capable of representing something other than the right-left swing, of defending a perspective based more on class struggle, that of a popular Bordeaux against a bourgeois Bordeaux, that of a real social alternative.

And for the first time too, a list expressing social anger, representative of our camp, proposing an anti-capitalist programme of rupture, succeeded in existing, being heard, appearing to be credible.

A minority with no chance of winning, but making an impact

Because it was unitary, our list managed to bring people together, to encourage activism, to lead the battle. We immediately felt it around us, everywhere, our list and our ideas aroused enthusiasm, hope and at least curiosity. We quickly saw this in the polls, which gave us 9%, 12% and 11%. Forecasts that can be taken with a pinch of salt, but which made it possible to have elected officials. And so that gave a reason to vote for us. Voting for us became a useful vote, useful for obtaining councillors representing the proletariat, the

precarious, rank and file employees, demonstrators, protesters, anti-capitalists in the Bordeaux parliament, at the Palais Rohan, in Bordeaux, a bourgeois city, what a symbol, what a feat!

We can't claim to have turned everything upside down. Of course not. Our campaign does not change the situation, power will remain in the hands of the Bordeaux bourgeoisie. The Juppeist right and the social-ecological-liberal left came a long way ahead of us (34% each). Even the Macronians, in bad shape, took third place just in front of us (12.6%). But we came fourth with 11.77%. The goal is reached.

The fact of not having been able to go to the end of the process does not allow for a real assessment. But we have plenty to do for the future. The activist team is determined to resume the battle, to make ourselves heard even louder next time. We are going to stay the course, that of our revolt, of direct democracy, of the sharing of wealth, of a social emergency plan. And in fact, we will also stay the course against the false right-left alternative, against pressure and blackmail trying to make us responsible for another victory for the right. We have managed, in our opinion, to enforce the existence of a list representing our social camp, not seen simply as a divider of the left, as useless or harmful but as a list which has its full legitimacy.

This is what we will remember, as an air of small victory, like a scent of pride widely shared among the population. For many people, whether they voted for us or not, we made an impression, we made some noise, shook the political landscape, we certainly succeeded in bringing something else into being, on a modest scale but real.

17 April 2020

Pandemic, capitalism and climate

26 April 2020, by **Daniel Tanuro**

What gives the event a historical significance is that the capitalist profit machine has almost stopped on a world scale, because there is a little thing which is not even an animal, which is a virus, hardly a living form, which is destroying the whole machine and threatening human health. It is therefore necessary to protect life, to protect the sick, to treat them: it is also necessary to protect the workforce for the capitalist economy. And this very, very deep crisis comes in a particular context: it comes at a time when capitalism had started a recession already in 2019. This recession had begun, and the pandemic is amplifying it in an absolutely extraordinary way.

An important point is that this situation is shifting the media and political focus:

- In normal times, what do they say to us? We are told about GDP growth, the balance of payments, we are told about inflation, the exchange rate, interest rates, etc. All abstract indicators of the accumulation of capitalist profit, of the accumulation of abstract value... And today, with this pandemic, the focus is quite different: political and media attention is completely focused on the work of nurses, on their overwork, on the sick who die, on those who recover, on the work of garbage collectors or staff in food stores, on species the fate of confined people, non-confined people, etc.

In summary, in normal times we are told about the abstraction of non-life, and at present we are told about life and death, that is to say about the living. There is a very important change in the general ideological atmosphere, a change to which we will return.

2. The epidemic is not a regression towards the epidemics of former times, it is not a return to the Black Death of the Middle Ages for example, it is quite another thing. Viruses of a particular type have multiplied for several decades. We first knew about

AIDS, then zika, then swine fever, avian flu, chikungunya, Ebola, MERS-Cov SARS-1 in 2002, now SARS-COV2. All these viruses have the particularity that they are born in natural environments that have been attacked and wrecked by human action, or in industrial farms. These are called zoonoses, that is to say that the virus that lives in animals jumps the species barrier and contaminates Homo sapiens. There is therefore a completely new and specific origin of this pandemic compared to those of the past.

The virus itself is a product of the contradictions of capitalism. The mode of dissemination of the epidemic is also particular. The epidemic moves very quickly, it very became global - the epidemics of the past were never global, they were continental - and it is being diffused thanks obviously to the modern means of communication, in particular air transport, and it spreads all the more quickly as humanity is grouped in enormous cities, megacities, like Wuhan itself, which is a city of several million inhabitants.

These two factors, the particular origin of the virus and its mode of diffusion, mean that we have no archaic virus, we have no archaic epidemic, we have, on the contrary, as Bruno Latour puts it, modern epidemics, epidemics of the Anthropocene.

3. It is not only a health crisis. There is obviously an aspect of health crisis which is acute and very important, but this health crisis is in fact part of a much wider ecological and social crisis. In fact, the Covid-19 crisis is the first global crisis - social, ecological and economic - of the Anthropocene.

There are scientists who, a few years ago, at the beginning of the 2000s, began to study what is called the great acceleration and global change. They identified the parameters of the sustainability of human existence on this Earth:

1. climate change;
2. the decline in biodiversity;
3. freshwater resources;
4. chemical pollution;
5. air pollution by fine particles;
6. the state of the ozone layer;
7. the state of the nitrogen and phosphorus cycles;
8. ocean acidification;
9. soil use.

At the conclusion of their report, submitted in 2015, these scientists estimated that the sustainability ceiling had been crossed for four of these parameters: climate, biodiversity, nitrogen and soils. To use biblical language, we could say that these four parameters are the four horsemen of the Anthropocene apocalypse and the pandemic that we are experiencing is sending us a message. It signals that these four horsemen are today joined by a fifth, which is the epidemic risk.

4. This epidemic risk does not fall from the sky; it is a known threat. Because we are fortunate today to benefit from an absolutely extraordinary progress in science, with magnificent capacities of anticipation. Scientists have warned us of the risks - not only of an epidemic in general but even very precisely of the risk of an epidemic of this type. After the SARS epidemic, which was already a coronavirus, in 2002, several scientists came to these conclusions which were translated into official reports, notably two reports to the French National Assembly (2005 and 2009), which pointed to the great likelihood of repeating a new epidemic like that of SARS, caused by a zoonosis, a virus which jumps the species barrier, which is of animal origin and which spreads within the species Homo sapiens. The World Health Organisation (WHO) itself, as recently

as 2018, was drawing up a list of the health threats hanging over the globe with a series of known pathogens, in which it had inserted disease X, because the WHO considered probable the appearance of an unknown pathogen capable of causing an epidemic with very serious consequences, a complete disturbance of society worldwide, and it considered it probable that this new pathogenic agent would still be of the coronavirus type.

So, we are in a known scenario, like that of climate change, for which scientists have been sounding the alarm for more than 50 years, saying that if we continue to send greenhouse gases into the atmosphere we are going to completely unbalance the climate system and that this could have absolutely dramatic consequences. Again, governments absolutely ignored it, as we know, and greenhouse gas emissions continue to increase - except that now, with the pandemic, they are being reduced substantially.

The height of absurdity or the blindness of policymakers is that concerning the pandemic, in 2003, Belgian and French researchers arrived at the conclusion that the coronaviruses constitute a very stable category of virus and it would therefore be possible, quite easily, to find a treatment which would be valid not only for SARS-1 but also for other coronaviruses which would come afterwards. They estimated the cost of this research at 200 or 300 million euros. Obviously, they needed public subsidies which they did not obtain, because governments consider that research on medicines belongs to the pharmaceutical industry, whereas the latter does not do research for the good of the people or public health, but for profit. It therefore needs a market and solvent customers. The SARS epidemic was over, so there was no more market, no more customers, so they did not do the research. This illustrates the mark of the political attitude of decision-makers and economic leaders in the face of major ecological threats, of which the pandemic is now a part. It is this inability to heed what is known and the warnings issued to them.

This deafness, or this blindness, is due, firstly, to the fact that political decision-makers are completely subordinated to the dictates of capitalist imperatives of short-term profit and they therefore have their "nose to the wheel". Second, there is a more ideological reason, that they are themselves intoxicated by the ideology of capitalism, the neoliberal ideology: they consider that the laws of the market are stronger than the laws of biology for the virus or the laws of physics when it comes to climate change. They consider that the laws of their economic system are superior natural laws and that the market will settle everything in the event of a problem.

Now we see more than ever that the market does not regulate everything: if we count on ordering masks in China to protect caregivers in our countries but China is blocked because of the pandemic, there are no more masks and we don't protect the caregivers or the population. It's that simple.

5. The management of the pandemic: all politicians today are forced to resign themselves to this management, even those who did not believe they should, like Trump, Johnson or Rutted, who wanted to let the virus spread and the community become immunized. Even they are forced to backtrack hastily. Indeed, doing nothing - as they advocated at the outset - will not only cost more financially to the capitalist system, but will also cost them dearly from an electoral point of view. And for Trump, for example, that is not a minor consideration, far from it. So, they all tell us the same thing: that it is a question of the common good, and that we must all be united around our enlightened leaders to fight the virus.

Obviously, we have to respect the safety instructions: stay confined, respect physical (rather than social) distancing ... Not to do so would be irresponsible. But respecting the safety instructions does not mean that you have to submit to the political logic behind these instructions.

This logic is a logic of class, of pure and hard capitalism. The first priority of this logic is to minimize the impact

of the pandemic on the productive sector, where profits are made, which is the heart of the capitalist economy. That is the reason why they are going to send workers to work in sectors that are not essential production. The second priority of this management of the pandemic is not to question the anti-social policies, the austerity plans that they have imposed until now, especially in the care sector, leading to the overwork of all personnel in these sectors. Obviously, the condition for this equation to be able to balance itself is to put the lid on all social, cultural or personal activities which do not fall into these categories, hence the lockdown and confinement.

There is also a political concern which is added to these considerations, namely that all governments (or most of them) are facing a terrible crisis of legitimacy: people no longer believe in them and want change. The pandemic offers leaders an opportunity to present themselves as war leaders - as Macron does on television. Strong power mechanisms are being established with the pretext of fighting the pandemic. The case study is Orban in Hungary, who has established himself as dictator for the management of the epidemic. We are in the logic described by Michel Foucault: biopolitics coupled with "monitor and punish". This is a serious warning, because the pandemic is serious, but it is nothing compared to the impact of climate change, if we have a tilt towards a climatic cataclysm with a rise in sea levels of 2 or 3 metres. But the management of the pandemic gives us an image of what capitalist management of a situation like this would be, which they obviously will not have seen coming, and which they will be obliged to manage, and they will give priority to the same kinds of means: priority to production, putting under wraps liberties, social life, cultural life, and, in the name of the fight against the scourge, grant themselves special powers, to create a strong state.

6. The strategic objective of health management is obviously to revive the capitalist machine, which has for the moment completely broken down due to the pandemic. The situation will lead to a very serious economic crisis,

worse than the financial crisis in 2007-2008. Today, governments, to face the situation, must let go of some ballast in their neoliberal policies: the European Union has put on ice the fiscal stability pact and its zero debt/zero deficit objectives. They are obliged to go even further, they are obliged to challenge not only a certain number of neoliberal dogmas but even to challenge a certain number of capitalist rules, for example the sacrosanct freedom of enterprise for companies: they talk about nationalizations and requisitions. In other words, capitalism, endangered by capital, must be saved.

This does not at all mean that there is already a break with neoliberalism and even less with capitalism. It does on the contrary mean that a very large-scale social offensive is being prepared, against which the popular classes must prepare to fight back.

I limit myself here to the ecological impact of the revival of the capitalist economy. This impact is very dangerous. François Gemenne - member of the IPCC, co-author of the Anthropocene Atlas [27] is not wrong when he declares that the coronavirus crisis is a climatic disaster. Because the discourse that we are going to hear on to is that of priority to the economy, to recovery, taking the pretext of employment. So, to revive the economy, it will be necessary to tone down the climate objectives, to soften environmental regulations which are too rigid, etc. But François Gemenne is not right either, because all this is not due to the coronavirus, on the contrary this crisis today proves to us that we could reduce CO2 emissions quite radically by about 7 per cent per year, on condition that we produce and transport less goods around the planet. The danger does not come from the coronavirus crisis but from the capitalist response to this crisis. And it is all the greater since the coronavirus crisis is used as a pretext or a screen to respond to an economic crisis that had started before the pandemic.

We must prepare for a very harsh attack because they will put in the balance, as is very often the case in capitalism, employment on the one hand and environmental protection on the other. However there is a very important contradiction in this determined offensive: it is that the will to revive and to give priority to capital and its profitability goes against the feeling in the population, which thinks that things went too far with the economy, with profit, and that we forgot the social dimension, health, care of people. This contradiction constitutes a major obstacle for the capitalist offensive that the governments want to conduct.

Because "taking care" in the light of the pandemic crisis takes on very concrete content today. It is a question of avoiding other pandemics which could be more serious and which would have the same origin in the destruction of ecosystems.

7. The conclusion is obvious: if we want to avoid other pandemics, we must get out of agribusiness, industrial farming, we must stop deforestation, we need a long-term urban reform that deconstructs all these mega-cities and which builds cities more interconnected with natural or semi-natural environments. To fight pandemics, we especially need clean water, to which hundreds of millions of people do not have access. The water must be publicly-owned and not be used to irrigate agro-industrial plantations. Likewise, if we want to institute robust health systems capable of coping with the new pandemics of the Anthropocene, they must be radically refinanced. To do this, it is necessary to make the shareholders pay and cancel the debt in the countries of the South. Forty-six countries spend more on interest on debt than on health care. Debt cancellation is a sine qua non condition for fighting pandemics.

There is also climate change itself: we know that the melting of the permafrost will most likely release old

viruses or bacteria which will spread through workers who are employed in mines in these regions. This is why it is absolutely necessary to respect the objective set in Paris of 1.5°C of maximum warming, therefore to socialize energy and finance.

In short, it is a matter of drawing on the thread of "taking care" - a theme developed by (eco) feminists - to unwind all of the anti-capitalist objectives. It is a question of reformulating the ecosocialist alternative starting from this point of view, starting from this major change: today people draw from the crisis the conclusion that it is necessary to give a much stronger priority to health, to well-being, to taking care of each other and that it is necessary to put the means for that on the table. This represents a major strategic turning point, because for decades ecosocialists have been faced with a problem: ecological struggle, although social in the long term, appears to contradict social well-being in the short term. Here, with this major change, the emergence of "taking care", the two issues overlap, the social and the ecological coincide. To lead the social fight is to lead an ecological fight.

It is this turning point that we must try to capture and whose opportunity we must see. It has consequences immediately and we must start now this fight, by fighting against this system and the productivist projects like 5G, by fighting so that health is definitively taken out of the market, refinanced, that the pharmaceutical industry is confiscated, banks are socialized, etc.

1 April 2020

*This transcript of a talk given during a video conference of the Anticapitalist Left in Belgium published in **Inprecor** was translated by **International Viewpoint**. The talk as well as the questions and answers: <https://www.facebook.com/gauchecapitaliste/videos/530976537793375/>.*

Covid-19, capitalism and the end of normality

26 April 2020, by **Jaime Pastor**

If there is debate in the scientific field about the origins of the pandemic, there does seem to be sufficient evidence that diffusion is closely related to “the evolutionary pressure cooker of capitalist agriculture and urbanization”. [28]. And with factors such as “the global alteration of ecosystems associated with the eco-social and climatic crisis, deforestation in Southeast Asia, massive changes in land use, fragmentation of habitats, urbanization, massive growth of tourism and air travel, the weakness and commodification of public health systems”, as Joan Benach explains: “The coronavirus is a threat to the poorest neighbourhoods.” A set of factors, in short, that demand a radical challenge to the unjust and unsustainable civilization model that has shaped capitalism throughout its history and that has reached its highest point under neoliberalism.

A capitalism that has not even shown itself compatible with the task of guaranteeing a universal right as fundamental as that of health. Quite the contrary: it has been restricting it through the looting, privatization, cuts and super-exploitation of public health and its workers to gradually put it in private hands, solely motivated by the logic of profit maximising. All this is what has created the conditions for the collapse of the system that is taking place now in the ill-named First World which is supposedly a model, with the consequent human tragedy that we are observing with growing indignation every day.

So if there were doubts before this crisis, there should be no more to convince ourselves that we have entered the era of disaster capitalism (Klein), with the climate crisis as the main threat to life on the planet, but with others interacting, such as the health sector, along with those derived from the aggravation of inequalities of all kinds that make an

increasing number of people disposable. And with an outlook for the crisis even worse given the imminent entry into a new Great Recession, likely already before the Covid-19 eruption, which will come with greater force due to the enormous increase in global debt that is being generated and with the consequent pressure from the great transnational economic powers so that the states rescue them again and, in turn, they compete more with each other in the midst of general geopolitical instability.

In the midst of this almost general national-state withdrawal, we could soon find ourselves - even in a European Union that is showing all its impotence when it comes to giving a solidarity-based response, as Manuel Gar   and Fernando Luengo have explained - before a neoliberal austerity offensive tougher than the previous one. Although it is possible that this new twist is accompanied, at best, by some temporary compassionate measures aimed at neutralizing social unrest, as is happening now, but which will not compensate for the brutality of what is to come. A discontent that was already being expressed before the pandemic through popular revolts in many parts of the planet, stimulated by mobilizations driven by environmentalism and feminism, and that we hope will be reactivated in the face of this probable strategy of shock, whether under one or other national-state variant depending on the different relations of social and political forces.

A bankrupt new way of the world

All in all, it will not be easy for a neoliberalism that had become “the new way of the world” (Laval and Dardot) to regain the legitimacy lost in

this crisis. We have seen how the response to the pandemic has been incompatible with the culture of proprietary individualism and entrepreneurship and requires seeking collective solutions in defence of the public - not to be confused with the state - of common goods, of solidarity and mutual support in care. Among these public goods, the demand for universal, free, quality, and socially controlled public health anywhere in the world is now the most urgent. A struggle that is already manifesting itself through an enormous number of initiatives from below that, even in confined conditions and making a virtue of necessity, herald a leap forward in the construction and reinforcement of community self-organization networks in many cities, neighbourhoods and towns.

Also, the forced paralysis of a long list of economic activities, often under pressure from the working class around the slogan “Our lives are worth more than your profits”, as has happened in industry or construction, reduces things to their essence, giving credibility to proposals for selective degrowth - including the questioning of the consumption model, distinguishing between needs and false desires - coming from environmentalism; to the revaluation of the care work that feminism has long demanded; in short, the foreshadowing of an alternative moral economy against the fetishism of economic growth and the political economy of capital.

It will not be easy, therefore, for the neoliberal think tanks to repeat the history of 2008 seeking to demagogically blame those below for having “lived above our means” and converting the state in its neoliberal version as saviour of the large corporations. The hegemonic framework is in dispute and with it emerges the collective feeling that this

crisis changes everything or, at least, should change it. Starting with the socialization of the strategic sectors of the economy, of the production and reproduction of life and, therefore, pointing towards a response to the crisis that, in the face of the perverse Keynesianism that the states adopt for the benefit of 1%, faces the need for a radical redistribution of wealth from top to bottom and social shock plans similar to those that are being proposed by more than 200 social groups in the Spanish case.

Every effort will have to be put into preventing the return to normality prior to this crisis, demanding a radical break with the old common sense and forcing the dismantling of all the policies that have prevailed during the long neoliberal wave. It is not, for example, about temporarily suspending the Budget Stability Law or article 135 of the Spanish Constitution be temporarily suspended, but repealing them, as some left-wing forces have already proposed in the recent debate in the Spanish parliament.

Because now it does seem evident that the time of reformism without reforms that social-liberalism has represented is over. Speeches like Pablo Casado's are already showing the fear of the right wing that after this crisis all the cuts and privileges made in the name of the preservation of sacred private property will be questioned; and we should not be scared of this, quite the opposite. Because we are going to witness a greater polarization of conflicting interests, values, and reasons, and they will no longer be worth half measures. It will be necessary to propose measures that, once and for all, lead to a radical transition towards a civilizational rupture, reforms that question the logic of this increasingly destructive capitalism in which we are immersed and do not simply serve to wash the system's face.

Human security vs. emergency neoliberalism

On the other hand, there is another more complex and difficult field of struggle to face pedagogically as a result of the measures adopted by governments in the fight against the pandemic. It has to do with the suspension of fundamental rights, derived from the application of the state of emergency according to country. Because, although the adoption of confinement measures and others aimed at curbing contagion is justified (although some of them are the consequence of the absence of a preventive policy that should have taken into account alerts from at least part of the scientific community), the recourse to a warmongering discourse is not, with the leading role of high-ranking military commanders at press conferences and their appeal to the citizenry to become soldiers, and nor is the role of the army in assistance tasks that could have been assumed for civil protection services if they had been prepared for it in advance.

Behind this authoritarian option is the false conception of the fight against the pandemic as a war and, with it, the intention of gradually restricting our freedoms and rights in the name of a "patriotic unity" (with the corrupt Felipe VI at the forefront) that pretends the pandemic does not recognise social class, gender, skin colour, age, functional diversity, territorial and other inequalities. A discourse that is serving as an alibi to demand a complete closure of ranks and, in particular, the exhibition and abuse of force by members of the police and military forces in the streets and even, worse, the promotion of a punitive populism

against vulnerable people and social groups, as has already been denounced by legal groups. That is why it is very necessary to promote from now on what Jordi Muñoz has defined as a "democratic emergency culture" that contests the idea of a culture of obedient subjects to an authoritarian and recentralizing state that aspires to emerge more strengthened after this crisis.

In summary, in this state of alarm we must watch those who watch us if we want to prevent the exception from becoming the norm and here, too, the trend towards the digital panopticon continues. A danger that is not unreal but closer and closer, as we are seeing in its extreme forms in countries like China, the great power that, by the way, may emerge as short-term winner of this crisis within the global geopolitical game. A new paradigm of social control of dissent emerges, as denounced by the Chuang collective, since "as the secular crisis of capitalism takes on a seemingly non-economic character, new epidemics, famines, floods and other "natural" disasters will be used as a justification for the extension of state control, and the response to these crises will increasingly function as an opportunity to exercise new and untested tools for counterinsurgency."

All this in the name of a narrow concept of security, assimilated to the preservation of public order in an Orwellian world and in the new capitalist war economy they want to sell us. Faced with this, a complex and multidimensional concept of human security (which would have to be extended to other sentient and suffering beings) will have to be advocated, as already claimed by, among other premonitory voices, Elmar Altvater, a defender of an ever more necessary horizon of solar communism.

27 March 2020

European Union: economic response to

health crisis is a new disappointment

25 April 2020, by **Fernando Luengo, Manuel Garí**

Institutions and policies reveal their true nature and pass or fail the test of their social utility precisely in difficult times. From this point of view, in terms of defending the interests of the social majority, the actions of the European Union (EU) have revealed it as clueless, overcome by events and in a frank process of decomposition.

The media have announced that, finally, the community institutions that govern the EU have taken note of the seriousness of the situation. The European Commission (EC) accepts the breach of the Stability and Growth Pact (SGP) and the European Central Bank (ECB) has opened emergency lines of financing, expanding its program of purchases of corporate bonds and public debt securities.

Some political leaders and community leaders have also sparked debate about the possibility of launching "corona bonds", opening the door, hitherto blocked, to the mutualization of public debt through what have been called Eurobonds. These have been repeatedly rejected by the ruling neoliberals who run countries like Germany and those in their immediate area of influence, as is the case in the Netherlands. And now, more of the same. As we finish this text, the German finance minister has completely discarded this alternative, with the same arguments as always; ignoring the gravity of the situation for the EU, which would require a joint response from it.

In the reflections that follow we refer especially to the first two issues. In relation to the SGP, the President of the EC, Ursula von der Leyen, has declared that, given the exceptional circumstances that the EU countries are experiencing, noncompliance with it is authorized, limiting herself to recognizing what reality has already made abundantly clear. The reduction in tax collection as a consequence of the collapse of economic activity and

the increase in public spending to face the disease make it impossible to achieve these objectives of public deficit and debt.

A welcome break, in any case, from the straitjacket of austerity policies, since in this way governments have a much-needed margin of manoeuvre to face the pandemic, although insufficient and temporary. But we cannot forget that the restrictive obsession of community institutions in the budgetary field, in addition to being a key factor in the increase in inequality, in addition to having socialized in 2008 and the following years the costs of a crisis caused by a runaway financial industry, in addition to having trapped the economies in a recessive loop ... in addition to all that, has weakened the capacities of intervention of the public powers, whose coffers are empty and indebted, putting them on the ropes in an emergency situation like the current one. A dramatic example of this is found in the degradation of public health, unable at the moment to put a stop to the unstoppable advance of the coronavirus.

For all these reasons, in our opinion, the position of softening, in such an adverse situation, the strict budgetary criteria established by the EC and embodied in European treaties and national constitutions, only to return to them later, when the crisis has been overcome, constitutes a conjunctural solution to the emergency, but not a change of course, which is a fundamental error.

The crisis has highlighted the need for a powerful public sector, committed to the popular classes; in the same way that, beyond the disease, the great challenges that lie ahead in terms of equality, sustainability, democracy and decency require a strategic intervention by the state. Which brings to the fore the question of undoing the mess of neoliberal

policies. Immediately, it involves supporting public health, reversing the process of dismantling and privatization, as well as social services. But also to place on the horizon the development of the public sector in banking, pharmaceutical and bio-sanitary industries, water, gas and energy.

And that is incompatible with budgetary austerity policies and with the very existence of the SGP, but also with privatization and the absence of social and fiscal harmonization.

As a background to the foregoing, it must be borne in mind that the EU has been built on the strict separation between monetary policy, located "above", without political or member state control, and budgetary (and therefore social) policy that lies within the remit of the states, subject, in turn, to restrictions. The SGP cannot and should not be complied with, now or when it is time to rebuild the economy after the tsunami caused by the disease. This pact, its content and its logic, must be definitively questioned.

Regarding the role of the ECB, Christine Lagarde, its president, has made a few unfortunate statements recently, pointing out that the function of this institution was not to intervene to reduce the risk premiums of the public debt of the states, thus blessing the trading and speculation that private financial intermediaries carry out on account of that debt, which had an immediate impact in raising risk premiums, especially in the most vulnerable economies, such as Italy.

More recently, Lagarde announced the launch of a program of purchase of public and private bonds worth 720 billion euros, on top of the previous 125 billion. With two fundamental objectives. On the one hand, to stop the rise in the risk premium of public debt (contradicting what was said a few days earlier); on the other, to

provide resources to governments, families and companies, which, theoretically, will benefit from lower interest rates on loans from banks.

The truth is that this intervention (presented as an extraordinary response to an exceptional situation) does not change the roadmap set out in the asset purchase programs - quantitative easing - that Mario Draghi launched. These actions, although it is true that they have appeased the markets, reducing the risk premium, have had above all the "virtue" of providing financing under extraordinarily privileged conditions to large banks and corporations.

If the objective was for this financing to reach families and companies and to widen the margin for action by governments, the balance sheet is a resounding failure. It has been used primarily to reward senior executives and large shareholders, to buy back shares in order to increase the stock market value of the companies and to open lines of credit to "zombie" companies that already have high levels of debt. The result has been a substantial increase in debt, especially

private debt, the upward trend of stock indices and the substantial growth of inequality. In reality, the ECB has moved, as always, within the coordinates established in its founding treaty, which prohibits opening direct financing channels to the states, which, of course, have to go to the markets to meet their needs.

Community institutions, precisely to avoid putting everything on the backs of national budgets, should have mobilized resources to meet the challenge posed by the pandemic. They have not, and the response today benefits oligarchies and in no way guarantees that the money gets where it is needed urgently. In this sense, the ECB could and should have acquired public debt at a zero interest rate, that is, at no cost to governments, and convert it in perpetuity, to facilitate the extraordinary financing required to fight the disease. That would suppose direct injection of sound cash money to face the present sanitary, humanitarian, economic and social crisis.

It is not just a matter of lack of

reflexes, of the weight of institutional inertia, of the neoliberal ideology that weighs down all community policies, of prejudices about the virtues of budgetary austerity and of the supposedly neutral role of the ECB. All of that counts, of course. But the most important thing to keep in mind, which allows us to explain all of the above, are the powerful interests that are behind the SGP and the asset purchase programs: those of the private corporations that have turned the public sector into a market, the banks who have found a succulent business with the debt, the wealthy who have received resources with which to continue speculating on the stock market, the large shareholders who appropriate a fundamental part of the profits obtained by the companies, and the top executives, who have kept their salaries extraordinarily high. This is the "coalition of interests" that governs Europe, these are the pillars on which an asymmetric Europe has been built that has benefited, above all, the business and financial elites. This is the cancer that must be eradicated.

26 March 2020

Turkey's Newest Tiny Foreign Enemy to Unite the Nation

25 April 2020, by **Metin Feyyaz**

This quote more or less sums up the Government of Turkey's response to COVID-19 pandemic, first centrally control everything including flow of information and declare that whoever criticizes Government's policy are terrorists or traitors, secondly keep the economy going on as usual even if this would cost the lives of workers. The President of Foreign Economic Relations Board, one of the representatives of big business, declares that "a curfew or lockdown will have devastating results for business and would bring the country in the verge of a chaos" [29] Government has always followed this

advice of big capital very carefully, while there are constant reminders to everyone to stay at home, no measures were taken to protect workers who goes to work everyday and works in factories together with thousands of other colleagues, use same workstations, same busses, same canteens, same locker rooms in the factories. These has a deadly consequence for workers. A civil society coalition named Occupational Health and Safety Assembly collected the names of 52 workers died after they were infected by Covid-19 virus at their workplaces, this data was compiled based on the information

published in newspapers so the real number should be even much higher. [30] There were some spontaneous work-stoppages against this especially in construction and metal sectors but these were mostly isolated and fragmented. Because of these work-stoppages, Governorship of industrial town of Zmit has published a decree telling that "all demonstrations including work-stoppages are banned during the pandemic". Later after the reactions they withdrew this Article from the Decree.

On the other hand, there is already

many workplace closures because of economical results of the pandemic. Turkey as the biggest auto exporter to EU, now all the automotive factories were closed due to lack of supply. In order to postpone the economical affects of the crisis, Government also prepared an economical stimulus package full of incentives to capital which they claim to overall has value of 100 billion Turkish Lira (15,4 billion US Dollars). [31] Like almost all other countries in Europe Turkey as well introduced a short-term work benefit which will cover the at most the 60 percent of the workers wage with maximum limit of 4380 TLs, around 580 Euros per month, when the workers are not working. But this only covers workers who has certain amount of days in social security system. On 16th of April, Parliament made a new legislation which will

allow employers to send unpaid leave without workers consent and in case of that Government would pay 1168 TLs, income support per month, around 155 Euros. This amount is even less than the rent for most of the workers. Unfortunately there was not even a real opposition to these measures as a result of very weak and disoriented left in the country for many years.

Another measure applied by the Government against the pandemic was an amnesty for the prisoners but this was not a general amnesty, this law released rapists, murderers, mafia leaders but not the arrested journalists or opposition politicians like Selahattin Demirtaş who became symbol for those who are criticizing this amnesty law. On the other side, the symbolic name for those who are

released by this amnesty was Alaattin Çakıcı, notorious mafia leader and one of the prominent figures of ultra nationalist grey wolf who was arrested in France in 1998 and held responsible for 41 murders. Actually, Çakıcı's release was not a new issue, it was also discussed after the elections in 2018 when head of ultra nationalist MHP party, de-facto partner of AKP now, visited him in prison and made a call for amnesty to him. Over the years since his arrest himself and many officials of Turkey's national intelligence agency openly declared that Çakıcı has "served to country" in "operations" (murders they mean) abroad mainly towards Armenians. During Çakıcı's release from prison social media was full of shows of joy/excitement where people were saying that "now the wolf is out, traitors needs to hide."

The political instrumentalization of the Covid-19 crisis in Egypt

25 April 2020, by **Khaled Abdul Rahman**

While the opposition is accused of instrumentalizing the Covid-19 crisis, the facts point to the military regime itself exploiting the crisis to achieve its own objectives and in order to restore its brand. Here are some examples of how the system uses the crisis or, in some cases, the system even creates a crisis within the crisis so it may then use the resolution of a problem for its own propaganda purposes.

Suspension of teaching

Although the first case of covid-19 dates back to February 14, the decision to suspend schools was made four weeks later, after seven students were confirmed to have the virus. Others called for the suspension of classes earlier out of concern for the students, but they came up against

government declarations in the person of the Minister of Education, who emphasized social disparities within schools and refused to close them. He even claimed that schools are "not gathering places!" Thus, President Abdel Fattah el-Sisi's decision to suspend classes on March 15 only exposed the naivety of the government, and of the Minister.

Aid to Italy

Despite a major shortage of disinfectants, sterilizers, gloves, and masks in Egypt at hospitals, pharmacies and markets, the Egyptian regime sent medical aid by military aircraft to Italy on March 24 and 5 April. Some people have linked this aid to efforts by the Egyptian state to improve its image in Italy, tarnished following the murder of Italian graduate student Giulio Regina, as well as to support the Egyptian and Italian

governments' common interests in the Mediterranean.

Two generals die of Covid-19

On March 22 and 23, military press releases announced "the martyrdom of Brigadier General Khaled Shaltout and Brigadier General Shafie Abdelhalim," who were members of the Armed Forces Engineering Authority. It reported that they contracted the Covid-19 virus while participating in disinfection efforts. Yet leaks indicate that they were infected as early as March 11, at a time before there were any disinfection efforts underway, and that the generals were not doing the work themselves.

It was also revealed that they had been infected while carrying out work on the construction of the new

administrative capital city. In fact, sources from the Arab Contractors Company revealed on March 19 that all the sites entrusted to that company in the new capital were suspended after the discovery of twenty confirmed cases of contamination among workers at the “Flowers” project site, a site under the supervision of officers from the Seventh Region of the Armed Forces.

100 billion Egyptian pounds to deal with covid-19

On March 14 and 22, President el-Sisi announced a 100 billion pound fund to deal with the Covid-19 crisis to great acclaim in the media. It was later revealed that Prime Minister Mostafa Kemal Madbouly’s directive allocated only one billion pounds for health care. After which the Minister of Finance announced that the budget allocated to health was, in fact, just 188 million pounds, and that the rest had been allocated to support businesses. Indeed, so far 20 billion pounds have been spent to support the stock market while 50 billion pounds have gone to help the tourism sector.

Increase in compensation for medical professions

El-Sisi’s announcement that he was increasing compensation for medical professions by 75 percent shocked doctors because this increase was not exceed 400 pounds, or 25 U.S. dollars, an insignificant amount. Meanwhile, there is a court decision dating back to 2015 ordering an increase of 1,000 pounds for physicians working with infectious diseases. The government refuses to implement this decision and the Ministry of Health itself has

appealed it. As of today, a doctor still receives only 19 pounds compensation for exposure to infectious diseases. The compensation for health professionals was initially approved in 2014, following a determined fight by doctors and a sixty-day strike by all health workers. The media welcomed el-Sisi’s new measure despite the doctors’ dissatisfaction, doing its job of polishing up the system in the face of public opinion.

An increase in doctors

According to a September 2019 law intended to address the serious shortage of doctors, salaries were to be raised to 2,200 pounds and they would be permitted to fulfill specialty training during their internships by means of working two years instead of one. President el-Sisi, publicly reiterated this law again on April 3, 2020. There was no explanation for this, except that his timing turns out to be an attempt to use the court ruling politically.

“Long live Egypt” funds allocated to quarantine costs

President el-Sisi decided on April 1 to dedicate “Long Live Egypt” funds to cover quarantine costs for Egyptians who returned from abroad before March 31 after dozens of Egyptians who returned from Kuwait refused to pay quarantine fees of 28,000 pounds per person at the airport hotel. Although the decision concerns only the latter, and those who returned later are required to sign an agreement to bear the full costs of quarantine as a condition for boarding an aircraft bound for Egypt, and the cost of the return trip is also their responsibility, the media hailed the decision and deliberately ignored its limited nature. Just as they ignored the fact that travelers in other countries do not have to bear the costs

of medical quarantines upon returning home.

A “Republican decision” to test for infections at the National Cancer Institute

Following the discovery of seventeen coronavirus infections among doctors and nurses at the National Cancer Institute, and despite the imperative of testing people who came in contact with the Institute’s doctors, nurses, staff, and patients, the Ministry of Health initially refused to do so, triggering a major crisis. After which el-Sisi ordered the government to carry out tests of all employees at the Institute, including doctors, the nursing staff, and all the patients who visited the Institute during the two last weeks, as if such an obvious decision required the intervention of the President of the Republic in person.

There are many other examples of the political instrumentalization of the coronavirus crisis intended to enhance the military regime’s image, at home and abroad, besides those we have cited here, for instance, decisions like suspending classes was announced by the Head of State. And sometimes, they even create a problem from scratch so the Head of State may step in to resolve it, such was the case with quarantine costs and the National Cancer Institute. Other times they simply restate decisions that have been taken previously, such as the remuneration for doctors who fulfilled specialty requirements during their internships.

20 April 2020

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How South Korea flattened the curve, and who pays the bill

24 April 2020, by **Woo Seoc-Gyun**

No Borders New: Please describe the state of the pandemic in South Korea. How many people are infected? How many have died? What do experts expect in the coming weeks in terms of how fast the contagion will spread.

Woo Seoc-Gyun: As of April 19, South Korea, which has a population of over 51 million, has conducted more than 461,233 Covid-19 tests. 10,661 confirmed coronavirus cases have been reported and 234 people have died. [Covid-19 figures updated] 6,463 people who have been diagnosed with Covid-19 have since recovered. The death rate is about 1.79 percent. By way of comparison, Germany has a 2.2 percent Covid-19 infection rate and 1.8 percent death rate, which is the lowest in Europe. But given that Germany is not conducting Covid-19 tests on those who died, South Korea is considered one of the countries that has most effectively controlled the spread of Covid-19.

From January 20, when the first case was reported, through February 26, there were only 30 confirmed Covid-19 cases. On February 28, the 31st confirmed case was reported in Daegu, the 4th largest city in South Korea, which is about 237 kilometers away from the capital city Seoul. This 31st confirmed Covid-19 patient turned out to be a member of the Shincheonji Church of Jesus, a South Korean-based megachurch. Then large cluster of cases began to occur among Shincheonji churchgoers in Daegu, but luckily the community spread was confined in Daegu and the surrounding areas. Although the Shincheonji Church has a huge membership, which is about 250,000 (approximately 0.5 percent of the South Korean population), tracing them was possible through membership lists, and the confirmed

patients were relatively young so the death rate was relatively low. But due to the patient surge caused by the community spread, the hospitals in Daegu could not handle all the patients so about 23 percent of the patients could not find hospital beds until March 16. Due to the lack of sufficient hospital beds in Daegu many patients ended up dying in Daegu. The infection cluster among Shincheonji members and followers made up 50.6 percent of confirmed cases (5,602 people infected by the virus).

The fact that South Korea is geographically close to China - the average number of people who entered from China was about 20,000 people per day until early February - combined with our experience from the 2015 MERS (Middle East Respiratory Syndrome) outbreak, which hit Seoul and Gyeonggi Province hard, made it possible for the government to impose social distancing very early on, to conduct mass Covid-19 tests and isolate patients, and to trace and isolate those who have contacted Covid-19 patients. All these measures have been very effective, especially given the fact that the Shincheonji Church cluster infection occurred at the beginning of Covid-19 outbreak in South Korea. But many experts say that Shincheonji case produced an optical illusion effect. There is now a slow but steady increase of community infections reported in Seoul and the surrounding Gyeonggi Province, which are home to about 50 percent of South Koreans. Governor Lee Jae-myung of Gyeonggi Province warned on April 4 that "An explosion of novel coronavirus infections is coming in the nation and it is time to prepare the worst scenario of mass infection."

Right now, the government is enforcing low intensity social

distancing. All schools and universities are currently closed and students are taking online classes. Religious gatherings and any other large indoor activities have been suspended, but offices, factories, restaurants and cafes are allowed to open. This low intensity social distancing was extended until April 15.

NBN: How has your healthcare system responded to the crisis? What are your health care system's greatest weaknesses? What are its greatest strengths?

Woo Seoc-Gyun: So far we have managed to handle the public health crisis. The national health insurance (universal health care) was introduced to South Korea as a result of the June Democracy Movement and the Great Workers' Struggle from July to September in 1987. The fact that all healthcare institutions in South Korea, regardless of whether they are public or private, must accept the national health insurance and that all hospitals are non-profit institutions is one significant strength we have in South Korea. On the other hand, the percentage of privately-owned and operated hospital is really high, representing about 90 percent of the total while the number of public hospital beds accounts for only around 10 percent of the total. There are about 10 hospital beds per 1,000 people, but there are only 1.3 public hospital beds for every 1,000 people in South Korea, which is much less than other countries, such as Germany (3.3), France (3.8), Britain (2.5), Spain (2.1) and Italy (2.0).

NBN: Describe the official political response to Covid-19 in your country from the far-right and conservative parties, to liberal and social democrat parties, and the parties of the left if applicable.

Woo Seoc-Gyun: There are not many differences between far-right and conservative parties in South Korea. The right-wing opposition party and its ally Korean Medical Association (KMA)'s rightwing leadership claim that the Covid-19 has spread in South Korea because the liberal government did not ban all Chinese visitors. But epidemiologists believe that the outbreak of Covid-19 in South Korea had begun even before Wuhan was locked down.

The ruling Democratic Party is a liberal party. Justice Party, a social democratic party, has not strongly criticized government's Covid-19 response, but instead argues for expanding the public health systems. The Minjung Party, who are nationalist social democrats, criticize the government's neoliberal policies while emphasizing the need to expand the public healthcare systems.

The Workers' Solidarity organization, which is part of the International Socialist Tendency, argues that Covid-19 stems from the capitalism's contradictions and that President Moon Jae-in's administration is incapable of handling the current economic crisis. They argue, therefore, that workers must fight back against the government's attempts to impose the burdens caused by the economic crisis on the working class. They also criticize policies that weaken and promote privatization of the public healthcare system pursued by both the previous conservative and the current liberal governments alike. They argue this privatization is the main culprit of the ineffective response to Covid-19, and that this may lead to further crises in the future.

NBN: How have trade unions responded to the crisis? Especially public sector, education, and healthcare unions?

Woo Seoc-Gyun: The Korean Confederation of Trade Unions (KCTU), the largest network of democratic unions in South Korea, has put forward the following demands on the government in order to ensure workers' rights and workplace protections during and after the Covid-19 pandemic: protect the most

vulnerable workers, such as irregular, subcontracted, and migrant workers; pay emergency disaster relief income immediately; form a Tripartite Labor, Management, and Government Commission; set up hospitals specializing in infectious diseases in all parts of the country; secure and increase spending on public hospitals and healthcare workers; reorganize and reform the current private-hospital-centered healthcare system and strengthen public health systems; and form a Covid-19 Task Force between government and labor. It also calls for international solidarity among workers.

The [Korean Public Service and Transport Workers' Union](#) (KPTU) - which represents workers in the public and social services sectors - has demanded protection from infections for essential public service workers and employees working at care facilities. KPTU also demands strengthening public control of railroad and public transportation.

The [Korean Teachers and Education Workers' Union](#) (KTU) has demanded the government protect teachers by providing masks and hand sanitizers, to guarantee sanitizing after-school care facilities, and the implementation of paid family leave. It has also demanded concrete assistance for teachers to be able to teach online classes.

The Korean Health and Medical Worker's Union (KHMU) - the largest hospital workers union - demands more hospitals specializing in infectious disease, strengthening public health systems, and healthcare workers protections. The Korean Hospital Workers' Union also made similar demands such as: increasing the number of public hospitals and securing a larger government budget for the public health system; protecting healthcare workers by providing comprehensive PPEs to all those carrying out essential public services or working in public or in high-traffic areas; and no layoffs during the pandemic, especially for temporary and contracted healthcare workers.

NBN: How have social movements (student, feminist, ecological,

immigrant, indigenous, etc.) responded to the crisis?

Woo Seoc-Gyun: On March 18, medical and healthcare sector NGOs, KCFU, hospital workers unions, feminist groups, and social services providers announced a joint-statement calling for the followings: an increase in government funding for social safety net provisions such as disaster relief benefits; increasing the number of medical and healthcare workers for public hospitals; guaranteed paid sick leave, paid leave, paid family leave as well as developing a plan to support the most vulnerable workers; public control and free distribution of PPEs and masks; an end to unreasonable demands from the Korea Management Association; and that news outlets should stop scapegoating and blaming people for the spread of the virus based on their nationality, religion, or region.

On March 31, about 380 civil society and non-governmental organizations representing religious, labor, feminist, environmental, human rights, farmer, and urban poor community and activist groups made the following seven suggestions: (1) distribute special crisis relief funds immediately, (2) fix the underfunded and insufficient social safety net, (3) no layoffs, (4) expand the public healthcare system both qualitatively and quantitatively, (5) take steps to proactively address climate change, (6) support international solidarity, especially providing assistance to Iran and other countries hit hard by Covid-19, (7) promote solidarity among citizens.

The second demand I mentioned above includes calling for a moratorium on all evictions.

NBN: Can you describe the impact of the Covid-19 crisis and how you think it will impact national politics in the coming weeks and months?

Woo Seoc-Gyun: I really hope we will not see any further public health crisis in South Korea. But if the government eases up on the low-degree social distancing (that is, not shutting down production and the distribution of goods, but only imposing social

distancing in social and cultural contexts) beginning April 15, it could spark a new wave of Covid-19

infections in Seoul and the surrounding areas, which is the most densely populated region in South

Korea.

Source [No Borders News](#).

Viktor Orbán is Using the Coronavirus Emergency to Crush Minorities

24 April 2020, by **Imre Szijarto, Rosa Schwartzburg**

In a mid-morning session on March 30, Viktor Orbán read aloud in the wood-paneled hall of the upper house. [32] With its high neo-gothic arches, this grandiose venue is a remnant of the Hungarian parliament's time as a bicameral legislature, before World War II. In today's supposed unicameral democracy, this space is mainly used for ceremonial purposes or for tourist visits. But today the extra room is needed for social distancing — allowing MPs to sit two seats apart from each other.

Some parliamentarians had white masks strung across their faces — and the matter at hand was at least supposed to do with coronavirus. [33] Standing at the center of the hall wearing a stiff, wide-cut black suit, Orbán calmly read out the introduction to an act that would grant him emergency powers for an indefinite period. MPs duly voted through the “Coronavirus Bill” — a document with no expiration date, allowing the de facto autocrat to rule by decree.

There was no doubt the bill would pass — Orbán's Fidesz party already controls some two-thirds of seats in parliament. [Jacobin 16 April 2018 “Fidesz's Two-Thirds”.] But the measures allow Orbán to bypass the national assembly entirely, while promising two-to-five-year jail sentences for anyone who “distorts facts” or publishes “false information.”

“You want to approve this law,” opposition lawmaker Timea Szabo told Parliament, “which practically authorizes you to govern without any

meaningful control. And it gives you a free hand to do away with even what's left of the press and practically imprison journalists, doctors, and opposition lawmakers if we say things that you don't like — namely, the truth.”

It's understandable that some emergency measures must be taken during a pandemic. Parliaments across the globe have granted governments powers unseen since World War II, in the effort to curb the spread of the virus and safeguard human lives. But no democracy has granted the head of government complete authority with no defined time limit. And Orbán has form.

In the past he single-handedly crafted a new constitution, systematically eroded the system of checks and balances, introduced a new electoral system favoring his party, and gerrymandered electoral districts to maintain his stronghold. He has intimidated his critics in cultural and academic spheres and established a near-complete control over the country's media landscape using public funds — to name just a few of his actions.

The fear, then, was that Orbán's kleptocratic regime would use the state of emergency to extend its powers, far beyond the response to COVID-19. And the steps taken since March 30 show it's doing that already.

Attacking Press

Freedom

The ballooning of government powers is most strikingly visible in the jail terms promised for those convicted of “spreading falsehoods” related to COVID-19. This is supposedly needed to prevent misinformation that could pose a potentially lethal threat to human health. Not explained is why the existing legal framework for the dissemination of misleading information was insufficient.

Given Orbán and Fidesz's history of silencing journalists, we can expect a rather selective enforcement of the law. On the pro-government Hir TV, Gábor Megajda — a leading researcher at Orbán's pet think tank Századvég — said, with reference to independent journalists critical of the government's response to the pandemic: “I would suggest their arrest in a crisis like this.” This was, of course, “only a joke.”

In truth, Orbán's government has itself spread much of the misinformation around the virus. Gergely Gulyás, minister for the prime minister's office, claimed that people under the age of sixty-five can catch coronavirus without risk to their long-term health, and that the virus leads to no fatalities for healthy people under the age of fifty. Both claims are falsehoods likely to obstruct the fight against the pandemic.

Yet the fear is that this legislation will be used to silence those with legitimate criticism of the government's handling of the situation. And grounds for criticism

there surely are. While Hungary introduced social-distancing measures relatively early, the number of tests performed is low compared to other EU countries. Underpaid health care workers moreover often lack the personal protective equipment — such as masks and gloves — required to reduce their risk of infection.

Smokescreen of Emergency

The pandemic found Hungary's health care system in shambles, following decades of systematic underfunding. Such neglect has coincided with escalating government investment in pet projects like a football stadium in Orbán's home village, boosted by corporate tax credits. Yet there is little sign that the government is turning to focus on the health situation alone.

Indeed, since the Coronavirus Act was passed Orbán has already begun to push through further regressive changes on a range of fronts. On March 31 his deputy prime minister Zsolt Semjén introduced a law containing fifty-seven legislative changes — what Hungarians call a "salad bill," throwing together entirely unrelated measures, all under the pretext of coronavirus response.

Typical of this is the fact that the bill will expand Fidesz's control over the arts — and, more specifically, theatrical productions, perhaps not the most likely terrain for a response to coronavirus. The government has long waged a war against "liberal cultural hegemony," meant to attack artistic independence and Hungarian counterculture. The legislation will pack the theater supervisory board with government appointees — expanding this censorship.

The bill is also used for blatant monetary gain. It will force through one of Orbán's own favored projects: the construction of new museum buildings in one of the capital's biggest public parks. Budapest's mayor Gergely Karácsony had tried to halt this, as it takes away much-needed green space from the residents of Budapest. But the bill also provides cover for the premier's

shadier dealings. Documents related to the delivery of the construction of a new Budapest-Belgrade railway — a megaproject in which Orbán's cronies are believed to have significant interest — are moreover to be classified for ten years.

Semjén's package initially also included the suspension of municipal autonomy — meaning that local governments would no longer have any independent power. However, faced with the outcry from the opposition — who made significant gains in the last municipal contests in fall 2019, including Karácsony's election in Budapest— this measure was reversed. Gergely Gulyás justified this zigzag by saying that the "government aims at unity irrespective of party affiliation and thus will refrain from enacting this change." This is a quite typical move from a government that is notorious for what Orbán himself called a "peacock dance" — backing away from some of the most controversial aspects of a proposed change while still keeping some aspects of it in order to parade a "sensible willingness to compromise."

Semjén is not a member of Orbán's Fidesz but of one of its allies, the ultraconservative Christian Democratic People's Party. And notable in this regard was the fact that his package of legislation also introduced a bill attacking trans rights. The measure, introduced on March 31 — the International Day of Transgender Visibility — forces trans people to have the same gender as they were assigned at birth and bans gender reassignment altogether.

After the pandemic is over, Orbán may or may not give back the powers entrusted in him. But what seems certain is that many of these regressive changes introduced in the meantime are here to stay.

The World Health Organization has already provided detailed, data-based instructions for governments to follow in order to prevent the spread of COVID-19 throughout their populations. Its key pillars include widespread and readily available testing; providing medical workers with personal protective equipment;

and clear directives to the public about the importance of proper social distancing. There is no research to suggest that rampant censorship of the arts, robbing trans people of their rights, taking power away from local governments, or funding cronyistic construction projects will in any way help hold back the spread of COVID-19.

"The Dogs Bark, the Caravan Carries On"

The bill has sparked vocal dissent from sections of the Hungarian opposition as well as some international media. Over 100,000 Hungarians protested the Coronavirus Act in an online demonstration, and the European Commission has stated that it is "investigating the new law" and will debate its validity this week. [34] The European People's Party (EPP) — the powerful alliance of European conservative parties — has once again floated the proposition of expelling the already-suspended Fidesz from its ranks. [35] In recent years, the EPP has refrained from such a move even faced with the intentional deployment of starvation tactics against asylum seekers in Hungarian detention facilities, or indeed the de facto expulsion of the Central European University from the country. Foreign Minister Peter Szijjarto, a member of Fidesz, dismissed critics — remarking "the dogs bark, the caravan carries on."

But if Orbán's moves have sparked upset even among conservatives abroad, does this mean he is turning to outright dictatorship? The passage of the Coronavirus Bill is cause for deep concern given Orbán and Fidesz's proclivity for dismantling democratic institutions. But some reactions to the bill have been alarmist and premature. The Alliance of Liberals and Democrats for Europe — a liberal-centrist group within the European Parliament — called the bill's passage the rise of a "corona dictatorship", while some German press have translated the legislation's title as "Ermächtigungsgesetz" or "Enabling Act" — invoking the

similarly-named act that granted Adolf Hitler total power after the Reichstag fire of 1933. [36] In the United States, a Washington Post article claims that Hungary is the first democracy to be killed by the coronavirus. And Hungarian social media is swarming with memes and videos comparing Orbán's move to Palpatine's rise to the throne in Star Wars.

The rise of Fidesz clearly has pushed Hungary towards authoritarianism and an abandonment of democratic processes. [37] Yet despite its dominance of state institutions and even its packing of the Constitutional Court, this is not, for now, an outright dictatorship. Political scientists have described Hungary as a "competitive authoritarian system" or a "ballot-box dictatorship" — meaning a system in which elections have real significance but are also significantly rigged through the dissemination of partisan propaganda and misinformation, by the state-run public broadcaster as by privatized ones "donated" to a holdings company in fall 2018. [38] Others have described Hungary as a hybrid regime, stuck between dictatorship and democracy. Some even call it an "externally constrained hybrid-regime" — assuming (rather optimistically) that the European Union somehow acts as a constraint on Orbán's actions. [39]

Thus far, Orbán has mostly ruled with the "velvet fist" — a strategy based on media manipulation, the bending of institutional rules, corruption, gerrymandering, and the skillful art of crafting laws that are designed to destroy perceived opponents such as universities and NGOs. [40] While there is self-censorship in the media, which will likely worsen as a result of the emergency bill, Putin-esque tactics such as locking up or otherwise physically threatening journalists have thus far been absent from Fidesz's playbook. There is currently no way of knowing if or when Hungary's competitive authoritarian system will drift into open dictatorship — and if Orbán will at some point start to "rule by the iron fist."

The measures taken since the passing of the Coronavirus Act are alarming — and could mark a slide into more dictatorial territory. Yet at the same

time, the staging of emergency and authoritarian-power grab may itself be a public relations move designed to defame the opposition politically, making it seem as if their opposition is obstructing efforts to fight the pandemic itself. The best way to confront the political plague of post-fascism is thus similar to how we should be confronting the COVID-19 pandemic itself: stay calm, but be vigilant.

Social Sadism

Indeed, one of the unfortunate consequences of even justified concerns about the bill is that it diverts public attention away from something else Orbán is doing. For amidst the COVID-19 pandemic, he has pursued a ruthless top-down class war against the lower strata of Hungarian society in the interest of the wealthy, and to some extent the upper echelons of the middle class. This is similar to the "shock politics" described by author and activist Naomi Klein — and today highly visible in US politics. Donald Trump and his administration deploy "rolling shocks" to freeze the public and the opposition into a state of panic, and thereby push through their own agenda.

This ought not blind us to Orbán's social agenda. Faced with the recession sure to result from the pandemic, he has focused relief on upper- and upper-middle-class portions of Hungarian society — while ignoring the rest. In particular, his economic plan has centered on helping businesses, with the bulk of the support individuals receive provided in the form of tax credits. It is, of course, hard to benefit from such relief if you do not have any income in the first place. Equally, while mortgage payments and some other liabilities have been suspended, rent is still due. Compared to other EU countries, Hungary is thus an outlier in a second sense — for it is hardly providing any financial assistance to workers affected by the crisis.

A commentator from leftist news website Merce.hu described Orbán's reluctance to suspend debt collection as "social sadism"; the European

Trade Union Congress sent a letter to the prime minister to protest his abandonment of working-class Hungarians at their time of need. [41] It is not yet clear how this aspect of the crisis will play out. But the signs are that the government will remain extremely generous when it comes to bailing out a crony capitalist class that it has itself enriched — a key pillar of Orbán's so-called "system of national cooperation."

Schmitt Disciple

In his *Political Theology* the Nazi jurist and political theorist Carl Schmitt pointed out the failings of even the most seemingly sophisticated liberal norms — liberal constitutions he sought to undermine. In exceptional circumstances, he insisted, somebody will decide on "the state of exception" and suspend the norms previously in place. Schmitt claims that sovereignty lies where that decision on the exception can be made. In *The Concept of the Political* Schmitt further defined a political act as a sovereign act that differentiates friends from potentially mortal enemies.

Orbán has put Schmittian theory into practice in two ways. First, he used the pandemic to decide on the state of exception — thus reaffirming his own sovereign rule. Second, he declared that we are "at war" with COVID-19: claiming that the opposition must be on the side of the virus, given that they are opposing his unchecked rule. He also attempted to carry on with his older friend-enemy distinction by linking the pandemic to migration, but this narrative proved too unconvincing.

As a young man Orbán aspired to be a political theorist, writing his undergraduate thesis on the Italian Marxist Antonio Gramsci. [42] Faced with the exceptional opportunity offered by coronavirus, he has turned out to be an uncannily faithful disciple of the "Crown Jurist of the Third Reich." Hungary is not yet a dictatorship, but the state of emergency is hastening the disappearance of liberal-democratic norms.

“The health emergency could possibly end up having total control over our lives”

23 April 2020, by **Enzo Traverso**

What is the situation in New York state, in the United States, where you are now?

The governor of New York state has reacted quite strongly, and we are homebound. Several states have taken the same decision, but there is a great heterogeneity of approaches. A federal state can be an extraordinary tool but can also become a source of paralysis. Trump contradicts himself every day and is occasionally disowned by public health officials. He started by calling the coronavirus the “Chinese virus”, with very xenophobic connotations. Then he said that the United States had the best hospital system in the world and that everything was fine. Now he says that the next two weeks will be very painful. If there is one country that is weakened by the pandemic due to the lack of a public health structure, it is the United States. It is a very vulnerable country, where there is a real risk of an extremely rapid and extensive spread of the virus. Tens of millions of people have no social security or have only very weak and ineffective social security. New York, one of the richest cities in the world, with the most advanced research centres in the medical sciences, is in desperate need of masks and ventilators, with makeshift military hospitals in Central Park.

You have ties in Italy. How do you perceive what is happening on the peninsula?

I am very worried because a part of my family is in the north of Italy, in an area where the spread is very strong. I also have a lot of friends in Milan. I hope that in the rest of Europe, lessons will be learned from what

happened in Italy. Obviously, the country is paying a very high price, as in France, for decades of cutting healthcare spending, with fewer beds available than there were twenty years ago. But the country generally reacted rather well, with a rather impressive surge of solidarity. And in the middle of the disaster, there is good news: for three weeks, Salvini has disappeared from the screens! (laughs)

Is xenophobic discourse taking advantage of the crisis?

The xenophobic discourse that began to emerge at the start of the crisis - in Italy as in the United States - and which claimed that migrants brought the virus, has been swept away. Public opinion quickly understood that we are facing a global pandemic, and that the response must be global. In the media, we see that Chinese and Cuban doctors are welcomed as heroes. Xenophobic discourse has so far been stopped, even if the temptation to politically exploit this epidemic was strong. I’m not sure that in the long run this will hold.

Politically, what could be the effects of this crisis?

My impression is that this global pandemic has revealed nothing new. It has only pushed to the climax a series of trends which are before our eyes, and which have already been described in recent years. For example, the fact that the boundaries between the biological and the political are becoming increasingly blurred. It is the triumph of biopower theorized by Foucault, that is to say a state which assumes the management of our lives in the biological, physical

sense of the term. A “pastoral” state at this time of health emergency, which we all feel the need for, but which could possibly end up having total control over our lives.

Likewise, all the work on political ecology has explained to us for years that the ecosystems within which civilizations have succeeded each other are no longer able to self-regulate, and that we will face a multiplication of crises and of pandemics. Finally, the virus only amplifies the inequalities that are the basis of the neoliberal economy. We are not on an equal footing in the face of the virus: there is a segment of society that is far more vulnerable, as much because of the weaknesses of public health systems as, above all, because of mass unemployment and the precariousness that the crisis is creating. All this is a source of concern, even if at the same time, there is a need for the commons, for solidarity, for living in society, for communicating with others. This counter trend is of course a source of hope.

In the course of the crisis, faced with the testimony of medical staff denouncing the demise of the public hospital over the years, a wind of opposition to neoliberal reforms seems to have risen. Can it be beneficial to political change?

I hope everyone understands after this global crisis that a hospital cannot function as a profitable business and that a viable public health system is vital for humanity. This diffuse awareness will be a lever, a fulcrum to organize future political action in forms that are yet to be invented - inasmuch as we cannot go onto the

streets. However, twenty years ago, after 11 September 2001, New York's reaction was similar. A lot of firefighters, a category of poor workers, died trying to save people. This spontaneous reaction lasted two weeks, then a chauvinist wave paved the way for a war, and a new cycle of xenophobia and racism. I think then that we should entertain neither a cosmic pessimism, nor a naïve optimism.

Besides, from what I read in the French press, the emergency measures taken by Macron go in the direction of widening inequalities. The state of emergency, for him, is not about demanding exceptional taxes from those who can pay them to face the crisis, it is about removing paid holidays in the name of the sacred union and the national effort. So far, the social dimension of the emergency plan decided by Trump is much more consistent than that of the measures taken by Macron.

What do you think of the management of the crisis by the public authorities in France?

I think that the French reaction is hampered by the centralist and authoritarian political system of the Fifth Republic. We need a New Deal; but French political institutions are the most impervious to changes in society and Emmanuel Macron is "genetically" neoliberal. We cannot expect a turn towards a solidarity-based economy, a plan to nationalize public services that have been privatized, to revive the public health system and so on. The situation will therefore be frozen for another two years, even if it is very unpopular. It would take a social leap, but its forms are to be reinvented. There are social codes and a political anthropology that make collective action involve physical contact between people, a public space that is not entirely reified. Networks and the media, even the ones doing the best job of providing information and thinking at the moment, were designed as a tool for democracy, not as a substitute for civil society. How can we organize a breakthrough of this kind without having the possibility of meeting? All of this has to be done at a distance, and it involves transformations that

are not that simple to implement. Perhaps a threshold will be crossed, and a new way of practising public life and politics will emerge.

Is collective action made more difficult by the "contactless" society which is developing?

Yes. If we detach ourselves from the contingent to think of this crisis in a broader perspective, by trying to detect historical trends, this pandemic risks reaching the extreme limits of liberalism: the society shaped and transformed by the pandemic makes us isolated monads. The model of society that emerges is not based on common life, but on interaction between isolated individuals, with the idea that the common good would only be the final result of these interactions, that is to say the final outcome of individual selfishness. It's the idea of freedom that someone like Hayek defends. In the post-crisis, we can anticipate that distance education will develop, as well as distance work, and that will have considerable implications, both on our sociability and on our perception of time. This articulation of biopower and authoritarian liberalism opens a rather frightening scenario.

Do you fear the grip of the digital giants on our behaviour, in this new framework that is taking shape?

Certainly, and this is not a discovery. It reminds me of Razmig Keucheyan's book "Nature is a battlefield". He showed how the military, industrial and financial powers think long term and plan strategies to deal with an ecological disaster. Capitalism will survive any crisis; it will not die a natural death! I do not believe in the theses of its collapse because of its internal contradictions. It can adapt, we see it before our eyes, even if it involves adjustments.

Is this part of what you call the "triumph of biopolitics"?

Yes. What I mean by that is that the biopolitical functions of the state will develop. Once this crisis has been overcome, it will be a question of installing long-term measures aimed at preventing new crises. Measures

adopted as exceptional thus risk becoming permanent. The state which, from a justified concern for public health, becomes a state which rules our lives, is what we can call the affirmation of a biopolitical paradigm. Power becomes biopower, and if politics becomes "immune" politics, designed to protect everyone from others, then it will become much more difficult to produce the "common", our lives will be affected as a whole.

Some people point to the relevance of the quote from Rosa Luxemburg: "Socialism or barbarism". Do you still hope that positive lessons can be drawn from the current pandemic?

From a general historical perspective, I think that this diagnosis remains more valid than ever. But this slogan dates from 1914 and we cannot be content to repeat it indefinitely. After Rosa Luxemburg, we had the experience of a century in which socialism itself was transformed into one of the faces of barbarism! However, from a historical point of view, this is the alternative in front of us. How will it translate politically? Difficult to predict. As for the way out of the pandemic, I think all the premises exist, on a global scale, for better or for worse. There may be a turn to the left capable of radically challenging the model of society that has emerged over the past forty years; but there may also be, as I said, a new xenophobic and authoritarian wave: a permanent "state of emergency" which is linked to increased social inequalities, where despair drives a search for scapegoats.

As an observer of American political life, did Bernie Sanders embody hope for the left for you?

Certainly, but unfortunately the coronavirus coincides exactly with the weakening of hope that had arisen around him. He remains very popular, he was able to create a movement behind his candidacy and this movement remains. But he failed before an absolute mediocrity like Joe Biden, before whom even Hillary Clinton appeared as a political giant. He failed for various reasons that are now being discussed, in particular his inability to capture the African

American vote, despite the Black Lives Matter movement and the fact that many very popular African American personalities supported him. He mobilized a movement of young people who do not vote! (laughs) The discussion now is whether we can make a difference by going through the electoral process and the Democratic Party primaries. What is certain is that in the United States a new left has been born, which may experience setbacks, but which goes beyond the campaign of Bernie Sanders. Imagine the impact that the candidacy of Alexandra Ocasio-Cortés could have in four years! For ten years there has been an extraordinary

ebullience in the United States. But this left cannot succeed if it is not articulated in social, political and cultural movements outside the institutions.

How do you imagine the world after this? What do you hope for?

Everyone has understood that the problems in front of us have no national solutions. We must move towards global action. Alas, the European Union has proven once again that it is useless: it is not even able to produce and distribute masks to countries that lack them. Italy and Spain buy them from China; Macron

announces that France will be self-sufficient towards the end of the year. On the other hand, the German, Dutch and Austrian finance ministers exclude any "tax gift" to the Mediterranean countries; we are on the way to a new Greek crisis on a much larger scale. The New Deal was born out of a shock comparable to the one we are experiencing, but for now, everything indicates that our leaders are going in a completely different direction.

*Source: Translation by **International Viewpoint** from original French transcript supplied by Traverso of the interview published in **Les Inrocks** (France).*

The Pandemic Coronavirus COVID-19 and Disabled People

23 April 2020, by Bob Williams-Findlay

In recent weeks Disabled people of all ages have voiced their anger and frustration at the apparent disregard of their needs and interests by the Johnson government during the current pandemic. Sadly, the lack of regard for the needs and interests of Disabled people is not new; it needs to be placed within a historical context where disablement is understood as an outcome of capitalist economic and social conditions. The unequal and differential treatment of Disabled people has to be recognised as a systemic issue.

Reclaim Our Futures Alliance in the Forward to the Independent Living for the Future report, ROFA:

"So long as we live under a system that puts profit before people, we will need to struggle to secure the resources required to support Disabled people to access the same rights and opportunities as non-Disabled people. That struggle will take different forms at different times depending upon the attacks we find ourselves facing and the reforms we consider most urgently needed under

particular circumstances". [43]

At this particular moment in time the support required by Disabled people to access the same rights and opportunities as non-Disabled people is absent as a direct result of the government's inability and failure to address the medical, socio-economic, and political issues that have arisen due to the COVID-19 pandemic.

Disabled people of all ages who require social care or independent living support for their daily living arrangements and the workforce, families and friends involved providing these arrangements are experiencing growing fear and anxiety due to the complacency of the government. Disabled people of all ages, who as a result of pre-existing medical conditions or the ageing process, are seen as being most at risk during the current pandemic. However, apart from instructing them to self-isolate for three months, national and local government have presented no strategic plan for safeguarding them.

Daniel Kraemer from the BBC Political

Research Unit, on 25th March reported that:

"The bill gives the government wide-ranging powers unlike any other recent legislation. Mr Hancock has stressed that the powers in the bill would only be used "when strictly necessary" and would remain in force only for as long as required to respond to the crisis." [44]

Kraemer went on to say:

"Labour's shadow Health Secretary Jonathan Ashworth said no MPs 'came into this House' to give powers of this kind to the executive, 'curtailing some of the basic freedoms our forebears fought for and we take for granted'. While Labour believed unprecedented measures were now needed to 'save lives and protect our communities', he said the measures would 'chill every Liberal in the House' and only offered its support with a 'heavy heart'.

However, he said the bill required careful scrutiny to ensure the 'quite extraordinary' powers were not abused, particularly in changes to

rules on mental health sectioning and the provision of social care.”

Whilst recognising the difficult circumstances that the Coronavirus has thrown up, and the need to address the shortfall in staffing levels, alongside inadequate resources, this piece of legislation is nevertheless extremely draconian. It is an assault on basic Human Rights, especially for those with mental ill health.

Disabled people are also particularly unimpressed by the fact the bill gave councils the power to “downgrade” care and support to Disabled people of all ages, and the fact this should be subject to a review by the Equalities and Human Rights Commission offered no comfort whatsoever.

Perhaps what illustrates quite well the ignorance of MPs around the issue of meeting the needs and interests of Disabled people is the comment by Jonathan Ashworth in relation to the suspension of the Care Act.

He said, “While councils should be able to prioritise those with the greatest needs in the event of staff shortages, ‘what no-one of us wants to see is the legal minimum of support become the default’.

Sorry, ‘prioritise those with the greatest needs’ has nothing to do with meeting ‘the legal minimum of support’; it gives a green light to withdraw care altogether for some groups. I was informed by the local Home Care Service that I should stock up with essentials and there may be times when no support would be available, therefore, cope the best you can.

Health and social care obliteration bill

Meanwhile, as the bill was going through the House of Lords, Baroness Grey-Thompson said “part” of the legislation was needed, but raised fears over:

* Hard-pressed local authorities no longer assessing whether people require care, once the legal

requirement is lifted.

* Disabled children turning 18 and finding their care help will “just stop”.

* That it will be possible for a single medical professional to section someone under the Mental Health Act.

* A lack of support for victims of domestic violence, who “will be at greater risk”.

* TV advice on the epidemic being broadcast without “a sign language interpreter so that everybody can understand what is going on”.

Explaining her presence in the chamber, despite increased personal risk from the virus, she added: “This is a health and social care obliteration bill by a different name.” It was also reported that, Baroness Jane Campbell, former head of the Disability Rights Commission, echoed the fears, tweeting: “Disabled people must not be invisible in the survival planning process.” [45]

Many disabled activists believe Disabled people are already being made invisible during this pandemic in a variety of ways. We have witnessed distorted stereotyping of our lifestyles and having the dangerous and inappropriate label “vulnerable” attached to them. Disabled people of all ages are at risk during this pandemic, but what creates their vulnerability is not who or what they are; it is the failure to put in place appropriate advice, support and resources.

What this current pandemic shows is there is no infrastructure in place at national, regional or local levels to support groups of people who are potentially at risk. Community based support ought to have been a priority from the first day of recognition that a crisis situation was on its way.

Talking about appropriate advice, over the last few weeks, poor and misleading advice has been issued. Prior to the national ‘lock-down’, there were guidelines put out on self-isolation which covered Disabled people of all ages, who as a result of pre-existing medical conditions or the ageing process, were considered to be most ‘at risk’. By the 22nd March, the

public was being told that ‘up to 1.5 million people in England identified by the NHS as being at higher risk of severe illness if they contract coronavirus should stay at home to protect themselves’. [46] What people did not realise is that the medical conditions listed for this group were far smaller than were covered previously as it now targets the ‘extremely vulnerable’.

As I write, I have seen no evidence that ‘a raft of new measures, including a helpline for the most in need of support, have been set out for those considered to be extremely vulnerable due to their medical conditions, so people know exactly how to care for themselves and others in the coming months’. Neither have I been approached about ‘a new Local Support System [that] will make sure those individuals self-isolating at home and who are without a support network of friends and family will receive basic groceries’.

As my impairments are not listed, I have little choice other than to go shopping; even though they appeared within the original guidance!

What I am arguing is that the overarching Public Health England advice, for example, on self-isolating has been woefully inadequate because it sidesteps many of the complexities involved in the lifestyles of Disabled people of all ages. There are Disabled people who would find self-isolating both difficult and highly dangerous; many are already isolated or struggle with barriers which could do additional harm if they cannot shop or receive adequate medical or social support.

Low income, stockpiling of food, hygiene products and medicine all have serious implications for Disabled people’s health needs. As the Reclaim Social Care campaign pointed out, little attention has been paid to the implications behind the advice given to care staff or personal assistants that, “a risk assessment should carry out before they visit a person and ascertain if they are symptomatic.” [47]

What if they are; stating a face to face visit should not take place, and the

person should be left in their room with the door closed, and then a 111 call made does not address what could or should happen next. What is meant to happen while waiting for a COVID-19 test?

It is unrealistic and highly questionable to expect people to be hospitalised; it would violate human rights to abandon people, so how would their support needs be met? There is no indication what would happen to the person if they are found to be positive but not critically ill.

Ideally by now, we should have seen local authorities co-produce with Disabled people's organisations, contingency plans for safeguarding Disabled people who may be at risk of not receiving the care and support they need as a result of COVID-19 or any future emergency.

This situation has not been assisted by a decade of austerity with a reduction within or the privatisation of services, an acute and largely ignored crisis within social care and the utter contempt successive governments have shown for Disabled people's representative bodies.

I advocate a social approach towards disablement which sees the structures, systems and organisation of society as maintaining the restrictions which exclude or marginalise Disabled people. For many Disabled people, our lifestyles are impacted upon by various forms of disabling barriers at the best of times, however the pandemic is likely to compound the situation.

Adapting our lifestyles is never easy and inadequate information and

unrealistic expectations could result in increased isolation. Disabled people of all ages will face uncertainty over the next few months and the advice to limit human contact puts people at greater risk.

Recruiting support is always difficult, but with the possibilities of staff contracting the virus, I am deeply concerned that little or no attention is being paid to Disabled people's lifestyles, be that a disabled child who may have infected parents, through to the older disabled individual without a phone, internet, television, radio or ability to obtain shopping.

If the risk is face-to-face fifteen minute interaction, how could that be mitigated against to ensure Disabled people have adequate support? If the vision within Independent Living for the Future was implemented, an embryonic infrastructure would be in place, a one-stop Centre for Independent Living where information, advice and guidance would be available. A local CIL would co-ordinate emergency cover and community based support.

The Disabled People's Movement raised the slogan, "Nothing About Us, Without Us", because it represented the desire to take control and responsibility of our lives and to collectively work together for betterment, inclusive praxis and for the transformation of society into one that serves humanity and the planet, not wealth creation.

The current crisis however clearly demonstrates how little power and consideration is given to Disabled people of all ages. I feel Disabled people are being made invisible or

symbolically placed in a black bin liner with the label "vulnerable" tagged to it.

I have joined those who are voicing anger and frustration because as activists we know the history of Disabled people which is one of abuse, neglect, oppression and murder via euthanasia.

Within the discussions around COVID - 19, we have already heard eugenic-sounding rhetoric from medical professionals and others. The alarm bells have been ringing around the NICE rapid COVID-19 Guideline on Critical Care because the first draft read as denying care to many groups of Disabled people. [48]

In case we forget, in 1920 long before the Nazis took power, Binding and Hoche, when speaking of those with impairments, and explicitly advocating involuntary euthanasia, wrote:

'Their life is absolutely pointless, but they do not regard it as being unbearable. They are a terrible, heavy burden upon their relatives and society as a whole. Their death would not create even the smallest gap — except perhaps in the feelings of their mothers or loyal nurses.' [49]

As a Marxist, I know history does not repeat itself exactly, and we are conscious that the pandemic will result in untimely deaths, but the words spoken by Prime Minister Johnston are being heard differently by Disabled people who already believe they are disregarded by the present government. During this COVID - 19 pandemic, Disabled people should be neither silenced nor ignored.

Covid 19: Greek government boasts hide reality

22 April 2020, by Thanasis Antoniou

IVP: What measures has the Greek government taken against coronavirus? Do you think it is enough?

Thanasis Antoniou: There are two ways to address this question. The first is the official one. That includes schools and university lockdowns, the ban on “pointless wandering” (unnecessary travel) in the whole Greek state, the strict quarantine (no one allowed to go out of his/her house, mainly in some villages in the countryside with a lot of cases), travel bans etc. The second one is the “laissez-faire” for some parts of the economy, like supermarkets, food, transports, industry, parts of the public sector and private companies.

In these sectors working conditions have deteriorated significantly (longer working hours, less wages, lay-offs, insufficient protective equipment-if any) etc. It is striking that many of the private companies, start-ups etc ,which were awarded prizes for the working conditions they were supposedly offering during the previous years are now considered to be the worst employers around, laying people off or changing terms of contracts on a daily basis. The most striking examples are Teleperformance [50] and TaxiBeat [51], whose examples are being followed by a significant (and rising) number of employers.

As well as that, the State has done little to press the Orthodox Church to shut down its public activities, as they refuse that the Holy Communion can help spread the virus. Churches shut down after repeated public outcry and much later than most other public spaces, although there were virus victims in people going regularly to churches from early March on. This scandalous tactic included priests giving the Holy Communion in some places to as many people as they could before the ban, even inside a Child Cancer Treatment Center in one of the biggest pediatric hospitals in Athens.

The government is boasting that it has followed a “fearless” and “successful” tactic, implying that they were not afraid to close down big parts of the economy, hire people for the public health care sector and subsidize both

companies and workers which were struck by the paralysis of the economy. The truth is that some governmental members have diverted public money for highly debatable purposes, for example the Ministry of Health (MoH) gave 11m € for the advertising of the quarantine campaign “Stay home”, despite the fact that the Constitution obliges all media companies to advertise such events for free. A similar tactic was followed by the Ministry of Education and Religious Matters (yes, we do have one in Greece, as there has been no State-Church differentiation), with diverting big sums to start-ups (founded a few days before) for advertising or e-education planning.

In February, the Minister of Health blocked the hiring of almost 500 doctors which was prepared by the previous government by not signing some essential documents on time, on the pretext of arguing on the planning of this move and its addressing to “false needs” in the health care systems (note that most of the were emergency doctors). Then, in early March the MoH called for 2000(!) positions in the health care system and they boast every now and then that they hired so many people. The truth is that most of the 2000 are administrative and nurse staff, who are much needed, but no doctors. In the central coronavirus center of Athens, Sotiria Hospital, only a couple of doctors have been hired so far, and their specialties are not directly linked to the needs. There has been a second call for doctor positions, but this contains 4-month contracts on a self-insured basis and no further motives, like long-term contracts or bonuses for a future public health care position contract, thus producing little outcome. [52]

So, the government forced doctors from the primary health care and smaller hospitals to move to emergency departments, especially in regions with many cases and a lot of the medical staff exposed to the virus and in quarantine, like Kastoria hospital. This move has stripped primary and secondary health care of doctors, leaving a big part of the population unattended. Lastly, they voted for a much faster way to hire junior doctors (trainees), though this

also did not produce much, as most of the medical school graduates work in the primary health care sector with yearly contracts or are abroad.

The hardest part of the measures has to do with the quarantine tactic and special populations. First, the MoH used a public organization called National Organization of Public Health (NOPH - ΕΟΔΥ) and founded a telephone line for information. This line was manned by 10 people at first, 20-30 later, which gave info on an algorithm basis, without medical training or supervision. Night shifts were even covered at first by bank telephone support centers! Their tactic called for everyone to stay at home and not go to the emergency unless they had serious symptoms or medical history. The line actually collapsed (people waited for hours for counsel) and a lot of patients deteriorated or even died because no private doctor went to see a suspected case at home and the NOPH did not allow them to go to hospital. Public outcry led to a better organization, but the line is now infamous.

The hospitals have strict instructions not to test people for coronavirus unless absolutely needed, so no quarantine can be actually imposed. We actually face a “Catch-22” condition. If you have symptoms, you have to stay at home. If you are too bad, you won’t be admitted to the hospital, so you won’t be tested. If so, you have to go to work after 3 days (that’s the maximum duration of recovery leave without doctor’s notice, and no doctor signs without positive testing). Private testing costs around 150€, while basic salary is around 450-500€.

So working people have to answer the question “will I go to work and possibly contaminate everyone or should I stay at home more and possibly get fired?”. The latter has led to a serious spread of the virus, all repercussions of it as well. This is a very common problem, but not the only. Banking loan payments, rents etc continue and in May there will even be auctions for non-performing loans! [53]

Students staying in student residences have been evicted from them and sent

to their families (if they have any) and hotels (if they do not have). This move was conducted because the MoH copied strategies from other countries, which transformed student dormitories into hospital beds. In Greece they did not do that though, so they evicted the students for no reason, as high-ranking public officers admitted recently. This not so sane move has created outrage among students, many of which were working at the time (e.g. delivery or other). Things became worse when they completed their relocation to hotels (sometimes under treat of police taking action), which proved to be of extremely low quality, having bed insects etc. The fact that the government forced the students to move from their cities of studying to their home cities actually helped the spreading of the virus has been a main point of criticism.

The worst though is now appearing in prisons and refugee camps. There has been at least one death so far, in a female prison in Thiva, of a relatively young person (40y) who was deprived of the right to medical care although she appealed for it repeatedly. Refugee camps have started to have also cases, and stricter (if possible) quarantine has been imposed. Lastly, Rom populations have also cases and have started to be victims of racism, although the MoH tried to protect them by sending there some high-ranking officers and doctors to organize the quarantine. And of course we have to keep in mind that the "pointless wandering ban" means 150€ fines to those arrested, which almost always are low-class people, old people, immigrants, refugees etc. There have been reports on fines on shepherds in small villages for instance. The general idea is that the police has been working "too well", giving fines to people that should not be fined for a series of reasons (psychiatric conditions, age, lack of cell phones), while the media distort videos of public places to seem crowded so as to create a feeling of public rage against the "pointless wanderers" who spread the virus.

For the moment, the victims are not many, so the government can continue boasting about how effectively they treated the pandemic so far. However,

most people now know that without testing, the case number is false, and that the tactic has some of the above mentioned problems. Of course, we have to keep in mind that Greece has been exposed to much less virus cases than Italy or other European countries, as only few people travel during winter time and there is not so much winter tourism. This is the reason that most Balkan countries, with different levels of strict measures, have much fewer cases than the rest of Europe. And we have to keep in mind that most people have treated the situation in a serious way, helping reduce the possibility of virus spreading. The true question lies ahead: if they applied a strict quarantine and thorough population testing, having those positive stay at hotels for 14 days for instance, there would be a practical elimination of the threat for the moment.

Now we do not know how many people are infected and can spread to others, so when the pressure of the economic disaster becomes obvious, the government will have to lift the ban. This will lead to a further spreading, be it through the tourist sector or else, leading to a second wave of mass infections. The government has no solution for this possibility, leaving its hope on the discovery of a cure. The working class though cannot support such a tactic, for it is they who will bear the burden of it.

IVP: What are the reaction towards the epidemic across the political spectrum?

TA: There are no significant differentiations for the moment for most parties. Nea Dimokratia (the right in power) has been running a mainly moral campaign, calling doctors and nurses "heroes" and so on. The wife of the Prime Minister, Mareva Grapowskis-Mitsotakis, even called for a balcony applause for the health care workers. Doctors who posted on their facebook pages that "we don't want to be heroes, we want equipment to do our job correctly," were laughed at by government affiliated media. SYRIZA former health ministers are making constructive criticism to the MoH tactic, while one of them volunteered for the task force

or the front line if needed, as he is an Intensive Care specialist doctor.

Kinima Allagis (formerly PASOK) has not said much different than ND, while the far right is mainly spreading conspiracy theories and fake news on Erdogan spreading the virus, the virus being fake and so on. KKE has called for increased staffing of the public health care sector, though they are considering the national unity tactic for the pandemic to be the only way for the moment. They were the only political organization which made public appearances on the World Health Care Day on 7 April, with Dimitris Koutsoumbas, the General Secretary of the party, to appear with KKE member and unionist doctors in a big public hospital of Western Attica. The radical left has some significant forces in the public health care and has been trying to force its agenda against government propaganda, creating some serious debates, sometimes with KKE unionists and sometimes without.

KKE and ANTARSYA hold the leadership of the Federation of Public Hospital Doctors and called for small rallies on 7 April 7 in support of health care workers and for an increase in public spending on the health care system, which has been degrading seriously in the last two decades. Activist action on 7 April was massive in some hospitals, although it was faced with mixed feeling by many health care workers who considered the rallies a possible way to spread the virus. Doctor activists argued that the lack of protective equipment even in emergency departments is of course a much more serious threat.

Anarchist and autonomous groups have been trying to organize some solidarity groups in neighborhoods along with the radical left or on their own, some of them have managed to do some important solidarity work. It is notable that even footballs ultras fans have been carrying their banners of support to hospital workers, showing that the health care question is becoming important to a lot of people. Some examples of solidarity work include "solidarity boxes" in flea markets (which are very common in Greece and are organized on a weekly basis in every neighborhood). The

concept is to leave to the box (or take from it) things for passer-byes who need them. Other examples are networks distributing food or medication around the center of the city, although the prohibition has hindered this significantly, whereas other groups use to post stickers with emergency phones or deliver fliers with contact detail for people in need of anything, ranging from alimentation to psychological support or counsel. Radical networks are struggling with internet coordination, as activists may have internet connections and time to discuss, but people in need do not. Note that activism like hanging banners or giving away leaflets which criticize the government can easily be fined with 150€ for “pointless wandering”, if not worse, as rallies have been banned and their organization is considered a serious offence.

One thing is that the “explosive” working conditions imposed on the private sector have proved to a lot of employees the need to unionize, thus helping to create new unions and even bringing about some successful strikes (as in TaxiBeat as mentioned above). The radical left has been playing a role in this effort, as well as the effort to prove how the neoliberal policies which have been applied in the past decades have created such a dysfunctional system. Internet use has been central in the diffusing of all kinds of ideas at present and ideological battles are raging. Due to the ban, though, it is really difficult to make an assessment of the depth of the radicalization brought about by the crisis at the moment.

IVP: What are the conditions in your hospital? Does the staff have enough Personal Protective Equipment?

TA: My hospital is supposed to treat only confirmed coronavirus cases, so most clinics have been reformed in this way. For the moment, some departments are burdened and some

are not, and there are even a few available ICU beds. Colleagues have been wondering why, because most expected a rise in the pandemic victims, but as I said before Greece has less cases for a variety of reasons, and since surgical operations rooms shut down, emergency operations and cardiology emergencies are much less (heart attacks are rare these days, as are vehicle accidents) so ICU admissions for other causes are few and cases may not be transported to other hospitals than the ones they were admitted at first for further treatment. Of course, the situation is dynamic and can change any time. As far as PPE is concerned, there have been serious allegations by staff members that the masks distributed are not suitable for ICU use, as they were distributed in PPo2 boxes, but their serial numbers indicated other, non-medical use. The MoH addressed these accusations indirectly as “fake news”, although they match similar accusations made by colleagues throughout Europe. Note that the State has issued a statement recently (9 April) saying that the PPE suggested are much less than what is proposed by international guidelines.

A few days after the accusations, Mitsotakis himself made a brief appearance at the hospital, to show support and supposedly brought with him some donated equipment. We still however have only one surgical mask per person for 7 hours of duty for doctors and 8 hours of duty for nurses. We are supposed not to have quarantined colleagues yet because the hospital is spread in many small buildings, making it difficult for staff to interact and cases, if any, are contained. All around Greece, however, the tactic imposed by the MoH allowed for a serious spread of unconfirmed cases in hospitals, which were not tested and thus contaminated a lot of health care workers, with more than a hundred of them being quarantined so far. The problem is that our lines are thin: most senior doctors are older and thus, if infected, could be in grave

danger, junior doctors are also few and less than a handful of new colleagues have appeared for service so far. Imagine that for 120 pneumonologist trainee positions (the hospital used to be a tuberculosis center in the past and still has 12 pneumonologist clinics, including a university clinic), only 20 are covered at the moment. So, if the situation worsens, there are no serious doctor reserves.

IVP: What are the conditions in your service? What is the future of your service?

TA: I am an intern in the psychiatric clinic, which for the moment is free of coronavirus cases. All staff members have been listed by the hospital administration for emergency plans and some of the nurse staff has already volunteered and moved temporarily to the ICU. Our clinical psychologists have formed a plan of answering to other staff members’ possible need of support, which has started to have its first meetings with colleagues of other clinics. We are considered second-line for the moment and it seems that our work will be significantly increased in the next months, as the repercussions of the crisis will start to be clearer.

For the moment our main work is focused on our pool of patients, as our clinic has multiple external patient treatment units which are not allowed to function. We have to tend to a lot of their needs, from more basic ones (like linking them to social services if they need ready meals or medication for instance) or changing medication schemes, to simpler ones, like helping them adjust to the “pointless wandering” ban and so on.

The sad thing is that the way the media handle the condition creates a climate of general anxiety and, given the ban, a lot of people are exposed to much more stress than they should be, so some conditions relapse faster. It is not the time to discuss these trends though.

Governance and Social Conflict in a Time of Pandemic

22 April 2020, by **Cinzia Arruzza, Felice Mometti**

This was one among many strikes of varying shades of legality that workers across multiple sectors have staged around the globe. A wave of strikes in March forced the Italian government to stop non-essential production, though the battle is still far from being entirely won. Amazon and other logistics workers have staged protests and strikes in France, Italy, the United States and other countries to protest against unsanitary conditions and lack of personal protective equipment, while workers in non-essential production have walked off, sicked out, or simply not shown up to work, refusing to risk death in order to increase companies' profits. [54] As one of the organizers of the Staten Island Amazon protest who was later fired by the company in retaliation, Chris Smalls, put it in an open letter to Jeff Bezos: "because of Covid-19, we're being told that Amazon workers are 'the new Red Cross'. But workers don't want to be heroes. We are regular people. I don't have a medical degree. I wasn't trained to be a first responder. We shouldn't be asked to risk our lives to come into work. But we are. And someone has to be held accountable for that, and that person is you." [55] Workers in the healthcare, food, sanitation, retail and public transportation sectors increasingly resist being sent to slaughter and are staging various kinds of protests to remind the rest of the world that celebrations of the new working class heroes are not enough: they are no martyrs to be sanctified, they want protections and better working conditions and wages.

Workplaces are not the only theater of struggle in these times of pandemic. Tenants, many of whom have lost income and jobs and live in areas with various kinds of shelter-in-place orders, are organizing to stop rent payments and resist evictions. Inmates

are rioting and protesting, from Iran to Italy to the United States, in fear that prisons will quickly turn into death camps due to the virus. Mutual aid efforts and organizations are mushrooming, intensively using social media to coordinate efforts and cater to people in dire need. While some of these struggles and strikes have been staged or coordinated through pre-existing political and social organizations, many are in excess of the previous organizational infrastructure and are rooted instead in spontaneous behaviors of refusal, resistance and solidarity, and in the emergence of self-organization from below as a response to an unprecedented crisis.

In the surreal, suspended atmosphere characterizing our current predicament, it would be easy to focus our attention only on the catastrophe unfolding in front of our eyes, on the relentless cry of sirens breaking the silence of our emptied cities, on the counting of deaths and contagion, and on the looming economic depression. But this strange, anxious time we are experiencing is also filled with struggles, acts of solidarity, and processes of class composition and self-organization.

What all these struggles have in common is the simple refusal to let oneself or others die for capitalism, a refusal that lays bare what the Marxist Feminist Collective in a statement about the pandemic has labeled the contradiction between profit-making and life-making or social reproduction at the very core of capitalism. [56]

By refusing to put profits over lives, these struggles are opening at least two main frontlines of confrontation. The first involves the immediate management of the pandemic and its class, racial and gender dimension;

the second with longer-term social transformations. At a moment when a number of countries are putting in place some version or another of neo-Keynesian measures to avoid economic collapse and social unrest, the burning question we are facing is whether these measures will mark the definitive end of the neoliberal era and austerity or not: an outcome that will largely depend on political and social struggle.

On the governance of the pandemic

The pandemic is creating a global conjuncture in response to which various forms of struggle are emerging and proliferating. At the same time, its management is far from being homogenous across national contexts: national political dynamics have their own specificities and generate significantly different contexts for processes of struggle and subjectivation, though against the background of a global conjuncture connecting us all.

From this viewpoint, one of the main limits of the "state of exception" discourse, which focuses on the dangers of authoritarian political turns connected with the suspension of freedoms entailed by lockdowns, is that it simplifies the enormous complexity of the current situation into a night in which all the cows are grey. It also misidentifies the real terrain of struggle in many countries today. [57]

First of all, it is not the case that governments rushed to adopt harsh emergency measures and to suspend liberties. The opposite is rather true: in many cases governments have hesitated and even initially refused to

suspend what passes as capitalist normality. This delay is having dire consequences in Italy, Spain, the United States, the United Kingdom, and Sweden, among other examples. When executives did finally decide to institute lockdowns, they did so because they were pressured by healthcare experts, because of fears of the risk of a collapse of the healthcare systems (largely due to the depletion of the healthcare sector caused by decades of austerity cuts and privatizations) and because of protests from below, especially from workers refusing to go to work. In fact, the notion that capitalist states would have an overriding interest in keeping people at home is rather bizarre and factually contradicted by the numerous attempts to envisage a quick return to some form of "normality" that would allow people to go back to work (and to consume). [58]

Within this context, the pandemic has indeed been the occasion for some authoritarian-leaning governments to further concentrate powers within the executive, as is happening in countries like Israel, Hungary, or India. But even this is not a linear and automatic process that applies to all countries governed by an authoritarian far right. In Brazil, Bolsonaro is sticking to denialist positions, even as he is increasingly politically isolated as a result and spurring regional appropriation of emergency powers. In the United States, Trump refused to declare a federal shelter in place order and is insisting in granting gubernatorial autonomy and flexibility in deciding what measures to adopt. China is a case apart, as the management of the pandemic relied on the mobilization of an already existing authoritarian power apparatus.

Rather than imposing abstract formulas upon a complex reality, it is more useful to pay attention to the experimentation with diverse forms of governance, both novel and ageold, in the management of the pandemic. For example, the current undeniable concentration of powers within the executive in Italy or Germany is causing tensions with the executives of regions and Länder, and both of them are in a tense relation with

European transnational institutions. In the United States, not only is there no significant transformation in the distribution of powers among federal institutions, but state administrations' policies differ among each other and are at times in tension with the Federal administration's incoherent approach. One notable example are the several clashes between Trump and the governor of New York State, Andrew Cuomo, who has risen to the status of Trump's counterpart, in spite of not being the Democratic candidate to the Presidency. Several European states and the United States are adopting forms of governance that include specific stakeholders in decision making processes: sectors of the national scientific community, big corporations, financial institutions and national business councils. The pandemic has also presented the opportunity for the United States and China to pursue and redefine their geopolitical strategies. It has become an occasion for the Trump Administration to push for regime change in Venezuela and ratcheting up the already abominable sanctions in Iran. [59] China, meanwhile, is adopting a soft power strategy that aims at expanding its international hegemony, sending much needed medical supplies and experts to dozens of countries, an initiative the United States are now eager to imitate: Trump has boasted that he would send Italy \$100 million worth of medical supplies even while the United States struggles to find basic face masks for its frontline healthcare workers.

But even these experiments in governance are not going smoothly, challenged by the continuous antinomy between normality and exception: the normality of the working of a mode of social production and the exception imposed by the pandemic upon the social reproduction of life or the normality of the circulation across public spaces – which cannot be entirely eliminated – and the exception of the immobility within private spaces. These experiments in governance are continuously changing, having to face the limits of the current welfare systems, healthcare first of all, and having to navigate the articulation between local, national, and

transnational powers. An example is the way in which the autonomy of U.S. state governors is amounting to them bidding against one another for ventilators. Competitions for resources are also taking place in Italy among regional governors. It is impossible to predict now how these experiments will evolve, for the variables at play are numerous, from the conflict between different state institutions to the level of intensity and reach of social conflict from below.

The staggering rise in unemployment, the disruption and delinking of global value chains, and the necessity of reorganizing social reproduction have forced the U.S. and E.U. institutions to take massive economic measures in order to avoid not only economic collapse, but also the explosion of social unrest in response to the looming depression. The features these measures have in common could be defined as a sort of provisional and very partial Keynesianism or "Keynesianism with an expiration date." As Bue Rübner Hansen wrote: "These policies are ad-hoc and designed to be short term measures, like the doctor of Hippocratician medicine whose decision (krino) acted on the turning point (krisis) in the patient's health. However, in all likelihood, Covid-19 isn't a temporary exogenous shock." [60]

For example, in his daily briefing on Friday April 3rd, Trump declared that the Administration is planning to use money from the stimulus package to pay for the costs of the hospitalization of COVID-19 patients without insurance coverage, rather than extending coverage or reopening enrollment in Obamacare markets. [61] Meanwhile the large majority of the Democratic establishment, including the leading primary candidate, Joe Biden, continued to dismiss Medicare for All even in the face of the epidemic. [62] The \$2 trillion of the U.S. stimulus package and the 750 billion Euro allocated by the European Union with the subsequent addition of \$100 billion to supplement workers' incomes are measures that, in spite of their astonishing magnitude, do not challenge the neoliberal framework. In addition to this, no significant

provisions are being made for victims of domestic abuse for whom sheltering in place is not synonymous with safety; nor is the increased burden of domestic labor for women being addressed in any way. Moreover, these interventions are often predicated on anti-immigrant and closed border policies, and nothing is being done to free detainees in migrants detention centers and refugee camps where access to healthcare is close to zero and the virus could take thousands of lives.

The clear aim of these measures is the reconstitution of the conditions for the reproduction of capitalist social relations, and certainly not their radical transformation. An intervention in the Financial Times by the former President of the European Central Bank, Mario Draghi, may be taken as an illustration of the logic behind this massive cash give away in the United States and the European Union. [63] According to Draghi, the current crisis is not cyclical but rather due to exogenous factors. Hence, his proposed recipe is to increase national debt in order to allow big private companies to weather the emergency and then get back to business as usual. And in fact, most of the funds will go to private companies, but without any serious policy in place to save jobs and avoid layoffs, for the mistaken assumption is both that companies will avoid layoffs if they get the cash and will recreate lost jobs once the emergency is over. This is also the logic of the temporary suspension of the Eurozone Stability Pact, which the German government, among others, does not want to become a precedent for a structural transformation of the economic policies of the Eurozone toward the abandonment of neoliberal austerity. Whether the aim of reconstituting the conditions of capital's reproduction will be achieved or not will depend on a number of factors, including political dynamics and social power relations.

Subjectivation and self-organization

in a time out of joint

The present conjuncture is filled with tensions and contradictions. Time is out joint, both dense with events and suspended. Contradictions and ambivalences also characterize forms of sociality, combining social isolation with a surplus of connectivity and communication through an array of social media. We cannot predict now how social life will be transformed as a consequence of the pandemic, but it is entirely possible that forms of what Foucault would label "technologies of the self," of subjectivation, and of communication will become even more hybrid than in recent times, in the direction of a greater convergence of "real" and "virtual" encounters and languages.

These forms of sociality within the context of the macro-dynamics at play and described above could also have effects on a potential new class composition. To name just a few salient factors: rising mass unemployment; fear of contagion in the workplace and spontaneous behaviors of refusal; the increasing visibility and social recognition of low-wage, racialized and gendered service workers; social isolation; and the blurring of the lines between production and reproduction for those who work from home and have to jostle between increased domestic burden, cramped living spaces, and the times and constraints of waged work.

In this context, diverse processes of struggle and political radicalization are starting to take place. But there are no easy recipes on offer for how to exploit these potentialities opened by the new conjuncture. Lockdown measures themselves pose new challenges to organizational processes and demand the ability to reinvent ways of organizing, protesting, and being effective: how can we make social protest visible at a moment in which traditional ways of doing so – mass marches, rallies, etc. – are out of the question? How can we connect the new wave of legal and wildcat strikes to other forms of resistance and conflict, such as rent strikes and the

organization of mutual aid and alternative forms of social reproduction? How can these social struggles become increasingly politicized, rising to the level of the current challenge, which means confronting the power of the state and of transnational institutions?

Inquiry into the new potential processes of subjectivation and struggle would be a first step for trying to give an answer to these burning questions and avoiding the mechanical re-proposition of old organizational models and political strategies which do not take into account historical discontinuities and variables. Inquiry here should be understood not merely as a sociological investigation, but as a process of self-knowledge, self-organization, politicization, and common creation of a new shared understanding of who we are, and why and how we are fighting back.

This is an urgent task for being able to address both frontlines of struggles mentioned above, namely immediate management of the pandemic and long-term transformation of social relations of production. As argued by Rob Wallace and others, modelings of the virus and predictions concerning the duration of suppression measures, such as the report by the Imperial College – which has become the point of reference for the United States and the United Kingdom – are predicated upon the implicit assumption that the neoliberal frame cannot be challenged. [64] As Wallace et al write: "Models such as the Imperial study explicitly limit the scope of analysis to narrowly tailored questions framed within the dominant social order. By design, they fail to capture the broader market forces driving outbreaks and the political decisions underlying interventions. Consciously or not, the resulting projections set securing health for all in second place, including the many thousands of the most vulnerable who would be killed should a country toggle between disease control and the economy." [65] Yet, it is precisely this frame that needs to be overcome, with two goals: limiting as much as possible the number of lives that will be taken by the virus, and opposing the strategy of "Keynesianism with an

expiration date,” fighting instead to end neoliberal austerity and to transform altogether the capitalist relation between production and social reproduction, which subordinates people’s lives to the accumulation of profits.

One of the memes circulating on Italian social media during the long weeks of lockdown was: “We’re going to be fine.” While this is an understandable wish, it is precisely nothing more than that. Moreover, it implicitly takes the status quo before

the pandemic as the normality to which we should aspire to return. Let us be honest: there is no certainty that it’s going to be fine, and the way we were living before the pandemic was neither fine nor “normal” at all, for the current crisis is a consequence of capitalism as a form of social organization and life.

We may yet end up being fine. But that will depend on us, on our ability to prevent a return to business as usual. If the task sounds daunting, and

it is, we might remind ourselves that we are not entirely powerless. As Chris Smalls said with absolute clarity: “And to Mr Bezos, my message is simple. I don’t give a damn about your power. You think you’re powerful? We’re the ones that have the power. Without us working, what are you going to do? You’ll have no money. We have the power. We make money for you. Never forget that.”

9 April 2020

Source [Viewpoint Magazine](#).

Ireland flattens the curve, but socialist policies needed

22 April 2020, by **Jessy Ní Cheallaigh**

No Borders News: Please describe the state of the pandemic in your country or city. How many people are infected? How many have died? What do experts expect in the coming weeks in terms of how fast the contagion will spread.

Jessy Ní Cheallaigh: As of April 20, the total number of confirmed cases in the Republic of Ireland is 15,251 and the Covid-19 death toll has reached 610, including more than 200 hundred more deaths in the last week. [66] In Northern Ireland, 2,645 cases have been registered and 194 people have died from Covid-19. [67] This means there are 17,896 confirmed cases on the island with a death toll of 804. Overall, Ireland has made a decent effort to flatten the curve as the spread is not as rapid as it is in other countries. The government announced that there has been a “very high level of compliance” with restrictions on non-essential travel over the Easter bank holiday weekend. However, there is still concern amongst experts over the “clusters” of the virus present in nursing homes around the country where very few healthy/qualified staff are working to help prevent spread.

As of Saturday 11 April, there have

been 6.5 deaths per 100,000 people in Ireland. These figures however are definitely not 100 percent accurate as there have been problems with testing owing to the lack of available testing kits as well as a huge backlog in test results that have yet to be processed. When testing was first opened up it was under the understanding that anyone who suspected they had the virus could be tested, when large numbers of test were coming back negative they changed it so that the only people who were referred for testing were those who had two or more of the most common symptoms of the virus or those who were high at risk such as immuno-compromised, underlying conditions etc. This resulted in over 40,000 people being taken off the waiting list who then had to reapply. Lots of reports state that some of these people still haven’t received results and that was just under a month ago.

NBN: What practical measures has your national government taken to respond to the crisis? Have they acted responsibly or were they unprepared? Briefly describe measures your government is taking now to contain the virus and treat people infected with

Covid-19. Is there a state of emergency, are schools closed, etc.?

JNC: Currently the Republic of Ireland is in lockdown with restrictions on travel. At the start of the crisis the government was hesitant to act. Currently, there is a coalition caretaker government, led by the center-right Fine Gael party because a new government has not yet been formed since the last General Election on Feb 8, 2020. On March 3, despite the fact that 3 coronavirus cases had been confirmed, it was planned for the St. Patrick’s Day Parade to still go ahead because there is big focus on the tourism industry and the impact it has on the economy. However, events developed rapidly and 3 days later (March 9) all parades were canceled as confirmed cases rose to 24. On March 12, it was announced that all schools, colleges, and childcare facilities would close until March 29. Indoor gatherings of more than 100 people and outdoor gatherings of 500 were banned on this day as well. On March 15, the government asked all pubs and bars to close and strongly advised against house parties as cases climbed to 169 along with the first 2 deaths. On Friday March 27, a full

lockdown was announced to last for 2 weeks - until Sunday April 12. The announcement stated that everybody in Ireland was being asked to stay inside their homes in all circumstances with the exception of the following purposes:

? Travel to and from work only when the work is an essential service and can't be done from home

? To shop for groceries/medicine

? Vital family reasons

? Visiting those who require care

? 1 daily outing for exercise that can't exceed 2km radius from home

The following groups of workers were deemed essential under these restrictions:

? Healthcare and social care

? Public and civil service

? Utilities

? Necessary goods, foods and medicines

? Financial services

? Transport

? Communications, including journalists

This lockdown period was renewed to last a further 3 weeks on Friday April 10 with the new set date being May 5.

The restrictions in place now are necessary but as I said, there was a delay in implementing all of them at first. The government's hesitation in the face of clear danger showed the priority it places in profits over lives. RISE called for the closure of all non-essential workplaces before the government announced such measures. We also called for sufficient PPE (Personal Protective Equipment) to be provided for workers, a necessity that still has not fully been provided. A hospital in the rural county of Cavan for example is the worst off in the country currently as the majority of workers and health providers in the hospital have contracted the virus due to a lack of PPE.

NBN: How has your health care system responded to the crisis? What are your health care system's greatest weaknesses? What are its greatest strengths?

JNC: Ireland's healthcare system was in a weak position going into this crisis, moving towards greater privatisation and private insurance-based healthcare. Due to years of underfunding there has been a trolley crisis in the hospitals for years with a record numbers of patients stuck on trolleys (or gurneys) in hallways due to a lack of beds being announced every few months. There have been numerous cases of patients dying because they were left on a trolley and did not get a bed in time. We have one of the lowest numbers of ICU beds per 1,000 people in all of Europe.

There is also a crisis present due to the lack of healthcare workers in this country, especially nurses. Due to low wages, a large number of trained nurses have emigrated in search of a better quality of life, currently most hospitals around the country are understaffed as a result. INMO (the nurses and midwife union in Ireland) called for strike action in February last year due to the understaffing, underfunding, and lack of safe staffing in hospitals. 95 percent of workers voted to strike and 40,000 went on strike for 3 days. The INMO leadership called off the second round of 3-day strike action after a weak deal was agreed on pay rises for some but not all staff, a decision which was praised by Fine Gael ministers at the time.

NBN: Describe the official political response to Covid-19 in your country from the far-right and conservative parties, to liberal and social democrat parties, and the parties of the left if applicable.

JNC: The far right does not have a strong presence in Ireland, especially not electorally, but amongst the unorganised layers of the far right in Ireland the main focus has been put on both Chinese racism and the need to harden borders. Additionally, there has been more wide-spread hysteria over 5G wifi services that are being introduced with certain far right commentators spreading conspiracies

that these 5G masts are the cause of the coronavirus. This is mostly dismissed as a wild conspiracy however there was an arson attack on one of the 5G masts in the county of Donegal last week which shows that this conspiracy has gained some traction.

The conservative parties Fine Gael (FG) and Fianna Fáil (FF) have had similar reactions to the pandemic - so much so that it was announced this week that they are prepared to form a "stable" coalition after years of being in opposition to each other (although their policies have no major differences) and weeks of vehemently denying that it would be a possibility. Even though the most recent election was an unprecedented break from the 100-year-old two-party system, with Sinn Féin (a center-left, nationalist party) making huge gains and the result being a three-way tie between these 3 parties, FF and FG are pushing to keep the power, sharing it for the first time. [68] Interestingly however, the language used by FG as it deals with the crisis has made a massive swing to the left, with words like "solidarity" being used in public addresses and, of course, praise for key sections of "essential" workers.

FG's approval rate has gone up in recent weeks as Taoiseach (Prime Minister) Leo Varadkar (who is a licensed medical doctor) pulls various PR stunts, such as returning to work on the frontline doing contact tracing calls one day a week. Sinn Féin and other liberal, capitalist, centre/centre left parties such as the Greens, Social Democrats, and Labour have not played a huge role in the crisis so far and have not provided many concrete opposition proposals to the FG-FF government so far. Sinn Féin being the most vocal out of all of them. The Green leader, Eamon Ryan, actually suggested that we should all start to grow vegetables at home in case that the chain of production collapses.

The left-wing parties - [Solidarity](#), [People Before Profit](#), and ourselves in [RISE](#) - have been making calls for workers' welfare throughout the pandemic with a lot of our demands being taken up by FG days or weeks after we've made them. These include a demand we made early on for the

shutting down of non-essential workplaces and building sites as well as demanding full pay for workers, including the student nurses who were recruited to the front lines for the duration of the pandemic. We have also raised demands in favour of price controls to tackle the price gouging that has started to appear by certain businesses on essential products such as hand sanitizer and face masks. RISE's public representative, Paul Murphy TD (Teachta Dála in the Irish language, a member of Ireland's parliament, the Dáil Éireann) put out a call for people to submit examples of this price gouging when they come across it. We received hundreds of messages and we publicised them, naming and shaming the companies responsible. These posts have resulted in a lot of these ridiculously high prices being lowered back down. There has also been a lot of focus put on the aftermath of the pandemic: Who's going to pay for it? The oncoming recession. We can't go "back to normal" etc.

NBN: How have trade unions responded to the crisis? Especially public sector, education, and health care unions?

JNC: Trade Unions in Ireland have a history of being quite bureaucratic and with less than genuine leadership, however, they have been making demands during the pandemic. [The Irish Congress of Trade Unions \(ICTU\)](#) have played a really weak and detrimental role so far. They have not led the way calling for non-essential workplaces to shut down, nor for full pay for workers. The main demand on their website is for "workers to wash hands with care." The trade unions have a huge opportunity in front of them to unionise massive numbers of essential workers in low-wage industries with historically poor working conditions, but we've yet to see any efforts to do this.

The [Irish Nurses and Midwives Organization's \(INMO\)](#) main demands have been for healthcare staff to receive regular and detailed updates as they occur, to ensure all staff have necessary PPE and safe working conditions and that pay for healthcare workers is maintained or improved during the crisis. Student nurses were

asked to come to work prior to receiving their qualifications due to lack of staff and many are still not being paid currently although INMO made a demand that this be rectified and was agreed by FG, workers are reporting that payment is on the way but still hasn't come through.

[UNITE](#) made a call for all construction sites in the country to be closed when the lockdown was first introduced and construction workers were classified as necessary at first.

[F&A RSA](#) (union covering workers across the civil, public, private, voluntary, and semi-state sectors) has made the following demands:

1. Volunteers should be sought for higher-risk tasks and work areas wherever possible;
2. For the protection of patients, clients, the public and workers themselves, staff must have the training and qualifications required to undertake their allocated tasks and functions safely and effectively;
3. Adequate personal protective equipment (PPE), and training in the use and disposal of PPE, should be provided, along with any other necessary supports (e.g., mental health support) that can reasonably be expected;
4. The individual family circumstances of staff should be taken into account when people are being allocated to higher-risk tasks and functions. In particular, those living with - or whose caring responsibilities demand contact with - elderly and other high-risk groups should not be obliged to work in high-risk areas except in very exceptional circumstances; and,
5. Wherever possible, such workers should also receive other practical supports from their employer, including childcare supports.

And [ASTI](#) (Ireland's main secondary level teachers union) has supported the controversial call by the government to reschedule the leaving certificate (end of school exams for second level students) for the end of the summer rather than cancelling it like other countries have done. They encourage teachers to continue online teaching throughout the summer.

NBN: How have social movements (student, feminist, ecological, immigrant, indigenous, etc.) responded to the crisis?

JNC: My impression has been that social movements have generally slowed down due to the crisis as traditional forms of face-to-face organising obviously isn't possible at the moment. However, some groups within different movements are doing a lot online during the pandemic. The most prominent environmentalist group in Ireland, Extinction Rebellion, are currently looking to put pressure on the Green Party leadership to not compromise on yearly emission reductions and no new fossil fuel infrastructure. The Greens were considering going into the coalition with FG and FF but it's looking like the younger and more radical membership are going to block this.

The movement for rights of asylum seekers and against the system of Direct Provision Centers that is currently in place for immigrants is playing a key role in highlighting the inhumane conditions that asylum seekers have to endure and how they are incompatible with the social distancing rules. [69] Currently, in Direct Provision Centers across the country, there may be up to 8 or 9 people to one room. The [Movement for Asylum Seekers in Ireland \(MASI\)](#) have been writing open letters to the government signed by hundreds of experts, raising awareness about the inhumane conditions that exist in the system.

There was an attempt to roll back abortion rights in Northern Ireland, that were won earlier in the year. [70] This stemmed from the lack of remote access to abortion pills that were accessible in the rest of the UK and in the Republic but for a few weeks were not available in the North. Petitions were shared by local pro-choice groups online and remote access was made available.

It's clear that without the prior existence of these movements and the dedicated work of these activists, these issues would in all likelihood not be addressed.

NBN: Are there any efforts to

make demands for social justice, national health care, emergency economic measures for unemployment pay, stopping rent and debt payments, etc.?

JNC: Currently in RISE we are making many of these demands and are releasing regular articles and social media posts regarding them through RISE TD Paul Murphy's office to spread these demands. Other left wing parties such as the Socialist Party and People Before Profit are making similar demands.

NBN: How do you think the Covid-19 crisis will impact national politics in the coming weeks and months?

JNC: I think that a deep and long-lasting recession is on the cards as we entered this pandemic already at the breaking point of an economic crisis in

the capitalist system. I've already outlined how the two big establishment parties, who received an historically low vote in the recent elections, are now scraping together a "stable" coalition government to carry us through the crisis. However, I predict that their incapability of offering real concrete relief to ordinary working-class people - when the effects of this pandemic become clear and their fake acts of "solidarity" have been seen as disingenuous - will reinforce the shift to the left in Ireland we have seen previously. It will hopefully grow stronger and the left can make real gains in terms of a rise in consciousness amongst working people.

At the same time, I do believe that there will be a period of real hardship and recession to struggle through before we can get to this point. One

important difference between this crisis and the last in Ireland is the fact that the workers movement has 6 revolutionary socialist TDs - Paul Murphy (RISE), Brid Smith (PBP), Richard Boyd Barrett (PBP), Gino Kenny (PBP), Mick Barry (Solidarity) and Joan Collins - as well as 2 other left TDs, Catherine Connolly and Thomas Pringle, elected to the Dáil (parliament). From this position our movements are better positioned to fight against any attempts at austerity and for the radical socialist policies needed to improve the lives of working people. We can also prove the limitations and contradictions of the capitalist system, especially when faced with a crisis such as this, and guide them in the direction of Marxist ideas as a way of organising society.

20 April 2020

Source [**No Borders News**](#).

Lift the blockade against Cuba to strengthen the fight against Covid 19

21 April 2020, by Fourth International Bureau

On 19 April 2020, Cuba had 1035 patients infected by coronavirus, 34 have died of since the beginning of the epidemic. The authorities warn of the danger of the epidemic spreading and do not adopt a triumphalist attitude.

The number of deaths is likely to increase considerably, and the blockade against Cuba is an aggravating factor because it hinders the import of certain equipment and medicines needed to respond to the epidemic.

It is clear, however, that the allocation of resources in Cuba is much more egalitarian and efficient than in other countries. Moreover, the tradition of internationalist solidarity of the Cuban people has been expressed, particularly in the area of health, thanks to a 100% public system. Recently, some European countries

have had to resort to Cuba's help in combating the pandemic. Italy, which has around 4 doctors per thousand inhabitants and a per capita GDP of EUR 29 610 per year, or Andorra, with a per capita GDP of EUR 35 975, have been obliged to ask for help from the Caribbean country because of the inability of neighbouring countries to help them and the paralysis of the EU.

According to official data, in 2019, Cuban health personnel abroad exceeded 28,000 in 60 countries.

To date, Cuba has sent 21 brigades of health professionals to join national and local efforts in 20 countries that have recently requested Cuban medical assistance to combat coronavirus. These 21 brigades are in addition to or reinforce the medical collaboration brigades in 60 nations, where they were already providing

services.

Over the past 50 years, Cuban medical personnel have carried out missions in 164 countries in Africa, the Americas, the Middle East and Asia.

Cuban health personnel have accumulated a great deal of experience in the fight against the dengue fever that periodically shakes the island, as well as the Ebola epidemic in Sierra Leone, Guinea Conakry and Liberia (2014-2015) and the cholera epidemic in Haiti. It has also intervened effectively to help the victims of several earthquakes in this Caribbean country as well as in Pakistan (2005) and Nepal (2015); against floods and hurricanes in Central America and the Caribbean. The World Health Organization has recognized the importance and quality of Cuban medical aid at the

international level.

Cuba has also developed a production of highly effective medicines and treatments against several epidemics. Although there is currently no preventive vaccine or specific treatment for the new coronavirus SARS-CoV-2, which causes COVID-19, the Cuban pharmaceutical industry guarantees the production of proven and highly effective drugs such as interferon alpha 2b, in addition to other drugs that are part of the treatment protocol for patients with this disease and all the complications that may arise.

The embargo imposed by the United States against Cuba is a criminal act because it attempts to hinder free health cooperation between Cuba and the various countries that have requested its assistance or that wish to strengthen collaboration with the Caribbean island.

The Cuban authorities stated correctly in a statement by the Ministry of Foreign Affairs on 16 April: "If developing countries are not guaranteed access to technologies that are mostly available in highly industrialized nations, especially in the area of health, and if they fail to share science developments and their products in an unimpeded and selfless manner, the vast majority of the world's population will be as exposed or even more exposed than today in an increasingly interconnected world."

The same statement is also quite right in saying: "If politically motivated coercive economic measures against developing countries are not lifted and

if they are not exempted from the payment of the burdensome and unpayable foreign debt and freed from the ruthless tutelage of international financial organizations, we cannot delude ourselves into thinking that we will be in a better position to respond to the economic and social disparities that, even without a pandemic, kill millions of people every year, including children, women and elders." (Official Ministry website in English [here](#).)

The coronavirus crisis has shown that the backbone of an adequate response to the coronavirus epidemic is the public health system. The neo-liberal policies of the last 40 years in general, and the last 10 years of austerity in particular, have been responsible for heavy loss of life. Where the cuts have been most severe, the collapse of the health system has been most dramatic. In the United States, the chaos is greater than in other countries, not only because of the ultra-reactionary nature of the government, but also because of the absence of anything resembling a free, universal public health care system.

Moreover, the United States has not only rejected Cuban aid in a criminal act - which will cost hundreds or thousands of lives - but it is also pressuring countries that have asked for help from Cuba to give it up. The reactionary governments of Brazil, Ecuador and Bolivia, for their part, have expelled Cuban medical missions.

As if all this was not enough, Trump decided on 15 April 2020, to end the U.S. contribution to the WHO, at a

time when the U.N. agency is playing an important role in the fight against coronavirus.

In view of this, Cuba maintains that an international effort, without political prejudices, is absolutely necessary to develop and share scientific research and to exchange the experiences of various countries in the areas of preventive work, protection of the most vulnerable and social conduct practices. That will make it possible to reduce the duration of the pandemic and the rate of human losses.

Therefore, the Fourth International calls on all revolutionary, progressive and democratic forces to strengthen the struggle against the blockade of Cuba and to intensify solidarity with the Cuban people. We fully support the foreign aid provided by Cuban health workers. The only way out of the crisis is international solidarity and the development of internationalism among peoples. Down with reactionary governments that despise the lives of their own peoples and promote nationalism, racism and war as a way out of the crisis.

Let us intensify the struggle to lift the blockade against Cuba!

Solidarity, self-determination and internationalism!

Our lives are worth more than their profits!

20 April 2020

Executive Bureau of the Fourth International

Germany and Austria: the good European pupils of the Covid-19 crisis?

20 April 2020, by Dima Rüger

The first country to have transmitted the virus onto European soil, Germany was at first distinguished by

uncoordinated and chaotic reactions taken regionally, without national measures. Since then, the model

adopted boasts of being almost equivalent to South Korea (vaccinated in a certain way by the SARS

epidemic): many tests, and measures of physical distancing. By Sunday 12 April 2020, there were indeed “only” 2,871 dead for 125,000 cases, against more than 12,000 out of 130,000 in France!

Figures to be handled with care

These figures are, however, to be handled with care, when we see that France passes ahead of or behind Germany according to the upswing or otherwise of cases in residential care homes for the elderly. As German virologist and government adviser Christian Drosten explains, the “low” mortality rate is mainly due to the number of tests, which swells the confirmed cases. We are far from a massive Korean screening, especially since PRC tests are unreliable if they are only done once. German rail workers are astounded at the disinfections of Wuhan station or Korean buses, which is far from the DIY that they experience on a daily basis.

If the dismantling of the health system also affects Germany, with 39% fewer public hospitals between 1991 and 2007, there are still eight intensive care beds per 1,000 inhabitants,

against six in France (which, in addition to the wealth of the country, is probably also explained by a stronger demographic decline). And beware of optimism: if we take the hundred confirmed cases as day 1, the German curve follows that of Italy, eight days late, with proportionately fewer cases, but far from good mirrored management.

In Austria, the situation seems to have improved for several days. While the country experienced its first cases at the same time as France, the first containment measures were taken when there were still only a thousand known cases, which made it possible to trace the contagions.

The small size and relative wealth of the country probably helped, but the unemployment curve jumped: in two weeks, 200,000 unemployed workers were counted, an increase of 50% (which brings unemployment to 12.7%), to which are added around 400,000 people in partial employment. Losing your job so you don't lose your life: is this all that capitalism can offer?

Who will foot the bill?

As is the case everywhere else, the Austrian government has committed itself to gifts to the bourgeoisie, first unlocking 38 billion. In Germany, 550 billion (an amount subsequently increased) has been made available to employers. Hundreds of thousands of workers in large companies, disrupted by supply chain breaks, are on short-time work, paid between 60 and 67% when companies do not supplement. In many sectors which continue to operate, trade union rights, derogations from working time and leave rights are commonplace.

So there is a question mark hanging over the good crisis management of these countries. What is certain is that the leaders of these countries, if they boast - albeit still cautiously for Germany - of a relatively good management of the mortality of Covid-19, are passing on the cost so that workers - and they alone - should pay, losing their jobs and their wages. Not to mention that the widescale breaches of employment law may be precedents, heralding a worse outcome. And without forgetting either that the same bill of billions given to employers will soon be presented to the German and Austrian working class. Enough to provoke one hell of a backlash.

15 April 2020

A Crisis of Vast Unknowns

19 April 2020, by **Against the Current** Editors

We are acutely aware that the situation prevailing as these lines are written, in early April, will look enormously different in days. Our society and the world have entered a crisis of vast unknowns. Most important to state at the outset, the class struggle isn't “self-isolated” or quarantined.

Taking the form of protests, wildcat strikes or stay-at-homes, resistance has begun at this writing among the front-line fighters for our lives and their own — medical workers, grocery

store workers and deliverers, Amazon warehouse workers without basic safety protection, bus drivers and more. We have little doubt that the examples will significantly multiply over the coming weeks.

These workplace and community actions signal the start of the fight that will be needed if working people and communities of color aren't ultimately to be burdened with the full cost of a looming and unfolding disaster.

Suddenly Bernie's slogan of “Medicare for All” seems the most obvious answer to the medical emergency we are facing. As other extraordinary measures are rolled out — expanded unemployment benefits, paid sick leave and moratoriums on utility shutoffs and evictions — working people see how political will made the impossible a reality. Why not demand they be made permanent?

It's critical to understand that the reality of race in America isn't on lockdown either. Statistics are

inadequately compiled, but every reporting city and state shows death rates among African Americans at nearly three times their proportion of the population. People of color are working disproportionately in the health care and service sectors. These are vital jobs especially in this moment of the pandemic, yet these workers are doubly exposed. First, at work, and then in communities with higher rates of air pollution and less access to clean water.

National and Global Emergency

The mess that Donald Trump and his army of sycophants made has brought irreparable harm, including potentially hundreds of thousands of lives. The spectacle of the government's own medical experts — and the embattled state and local authorities — scrambling to compensate for federal indolence is simultaneously comical and terrifying. But here we won't dwell on the precious weeks lost and the public disorientation caused by the big twit's assurances that "the Chinese virus" wouldn't hit the United States, that it would magically disappear, and then that he had known from the beginning that it was "a very serious problem."

All that has been well-covered in major media. The damage is done, and Trump's daily rambling, shambling, dissembling pronouncements make matters worse. But there are deep systemic issues to be explored in what's still the early phase of a global emergency, with good reasons to fear that it might be apocalyptic.

The ultimate human cost of the pandemic can't be known at this time — whether only severe, or extreme, or possibly apocalyptic. Will tens of millions die globally, and millions in the USA — or luckily only some hundreds of thousands around the world and tens of thousands here, or somewhere in between?

The extent and duration of the economic collapse is a grim prospect, but another unknown. Trump's promise of a short recession followed by a "fantastic reopening" is less likely

than a more protracted downturn, or the onset of a global Depression. Upbeat pronouncements coming from the White House team of kleptocrats don't deserve to be taken seriously, but underlying weaknesses of the economy pose a more fundamental problem.

Financial markets fell, over just a few weeks, by the 30% or so that would have been expected over the course of a recession that was looming already before the coronavirus outbreak. Their continuing wild gyrations tell us only that "the market" doesn't know what to expect.

The stability of political institutions is a big question mark. Will they emerge largely intact, or sharply altered in some ways? Globally, authoritarian regimes (India and Hungary in the lead) are trampling basic human and democratic rights. Here in the USA, what would the November look like if the virus infection rate curve hasn't "flattened" well before then? What new dirty tricks or voter-suppression schemes might emerge in states controlled by the right wing? Clearly the insistence of the Wisconsin legislature to hold the primary at the height of the pandemic — forcing voters to choose between staying at home and forego their right to vote or waiting in line and risk exposure to the virus — illustrates how far Trump's acolytes are prepared to go.

The potential for violent social panic can't be totally discounted if the public health crisis is protracted. The episodic, ugly violent harassment of Asian Americans walking the streets could become more systematic attacks on targeted (Chinese, Asian, or immigrant) communities if ignorance and desperation turn toward finding scapegoats. Trump's "Chinese virus" ravings are calculated to buttress his pseudo-populist nationalist appeal, not to provoke mob action, but racist demagoguery is a notorious enabler of nativist and white-supremacist violence.

We don't have to imagine full societal breakdown to envision the potential bankruptcy and disappearance of millions of neighborhood businesses, restaurants, non-chain grocery stores and the like. That's an acute issue, for

example, in Detroit — where in early April the confirmed infection rate has doubled every three days.

Will food deserts in our cities become even more severe? One commentator on CNBC suggested that at the end of the pandemic, the only retailers left might be Amazon, Walmart and Costco. That might be the logic of capital concentration in an extreme crisis, but is it a place where we'd enjoy living?

A Diseased System

Conventional coverage treats the coronavirus pandemic as an external shock to the system — something like an asteroid striking the earth. Quite the contrary, it's very much embedded in the functioning of the system itself.

What's technically called the "SARS - Covid 2" pathogen, like the avian and swine flu, HIV, SARS, MERS, Zika and Ebola viruses of recent years, as well as the 1918 flu virus (which may well have originated in southwest Kansas) and probably the more familiar viruses of distant origin, are the result of animal-to-human transmission. That the current one began in a Wuhan live market is a happenstance that tells us nothing about where the next one comes from.

These outbreaks are a product of both the way present-day industrial agriculture is organized with mass concentrations of animals in the most horrific conditions, and increasing human encroachment into the natural habitats of nonhuman animals with which we share the planet. Already in the 19th century, many thinkers including Karl Marx and Friedrich Engels were concerned with the consequences of the capitalist transformation of agriculture and destruction of nature, so it's not as if the problem just suddenly jumped up.

Meanwhile, the escalating crisis of the medical system is the inevitable product of applying the "lean production" and "just-in-time" regimens of today's production system, together with the stripping of social budgets under the prevailing global regime of neoliberal capitalism.

That's why, for example, the backup supply of N95 masks in the United States depleted in a previous epidemic wasn't restored. It's why it wasn't only Donald Trump's stupidity (although that didn't help) dictating that we don't want "extra doctors and nurses" around when they aren't immediately needed, as if trained medical personnel could be conjured up like auto parts on demand.

We are left with doctors and nurses reusing personal protective equipment in ways that were never intended, with retired health care workers returning to the front lines. Thousands of DACA recipients work as health care workers, risking their lives but still in the danger of deportation! Ordinary people, many perpetually demonized by the right wing, are performing miracles of community mutual aid and solidarity.

The system's bankruptcy, not only Trump's arrogant ignorance, lay behind the cynical dismantling of the cross-agency pandemic response unit the Obama administration had constructed. And the neoliberal neglect of elementary public health practices is not only in America: The British National Health Service was resource-starved under successive Conservative party governments. Italy's medical service was cut for years, just in time for the coronavirus disaster.

Focusing on the U.S. situation, the urgent necessity of universal health coverage and Medicare for All has never been so obvious — except of course to the insurance industry, the political establishment, and in particular Joe Biden, who scolded Bernie Sanders that "they have that in Italy, and it didn't help."

Some 35% of all Americans remain uninsured or underinsured — with millions more losing their coverage as they become unemployed. This patchwork coverage has a lot to do with why hospital emergency rooms were stressed before the coronavirus emergency, and why so many people in this country have inadequately managed conditions like diabetes, asthma and coronary disease that contribute to making Covid-19 disease all the more deadly.

The lack of adequate medical care for tens of millions interacts of course with the prevalence of poverty, pollution, shortages of rural medical resources, and other consequences of inequality that aggravate the crisis. In Detroit, thousands of people had their water turned off. Although the Michigan governor has ordered an emergency restoration of service, the Water Department lacks the capacity to quickly implement the order.

There are even worse impacts on the most vulnerable populations — those in the overcrowded prisons and immigrant detention centers, the 1.5 million who live in nursing homes that are frequently understaffed. Then there are 11 million undocumented immigrants who get nothing from the multi-trillion-dollar relief bill and may be terrified of seeking medical care, survivors of domestic violence forced to "shelter in place" with their abusive, sometimes murderous partners.

Looking Ahead

We haven't begun here to contemplate what will happen to nations in the Global South — countries in Africa, Asia and Latin America with wholly inadequate health infrastructure. In India, migrant workers are starving as they walk hundreds of miles home. In Brazil, the pandemic-denying lunacy of far-right president Jair Bolsonaro in defiance of his own government experts makes Donald Trump look like a sober statesman.

There are absolutely desperate circumstances facing refugee populations — in Syria, on the U.S.-Mexican border, in Bangladesh with the Rohingya flight from Myanmar — or the situation in Gaza, the world's largest open-air prison where there isn't even clean drinking water.

For imperialism, the coronavirus crisis is no occasion to "shelter in place" — exactly the opposite, it's a moment to unleash greater class and race violence on the world's poor. The U.S. government's murder-by-sanctions policies haven't abated. Washington's squeeze has tightened on Iran, where the import of medical supplies is crippled by the twin scourge of

sanctions and collapsed oil prices. The U.S. Justice Department's indictment of Venezuelan leader Nicolas Maduro ramps up Washington's attempt to foment a military coup and civil war in that shattered country.

On the other side of this immediate crisis, the class war at home will be hardly less brutal. Right now relief packages are desperately required, but afterward the public will be lectured that those trillions of dollars thrown at bailing out the Boeings and other distressed corporations must be "paid for" — by austerity for the working class and non-affluent population, of course. Look for big attacks on Social Security, on Medicare and Medicaid and food stamps and public education and every social program that actually benefits people.

The capitalist class, whose blind pursuit of profit and stock market gains did so much to create the present misery, will insist on society drawing all the wrong conclusions. Don't even think about Medicare for All now, let alone nationalizing (horrors!) the pharmaceutical industry whose profit drive is essential to developing and marketing the critical vaccines and therapeutic drugs for this pandemic and the coming ones.

Don't raise taxes on the corporations and the rich at the time when their "enterprise" is required for the economic recovery — or at any other time for that matter. And above all, this is no time for action on climate change and the environmental collapse. How can we even imagine indulging in a Green New Deal when our most precious airline and oil industries are going belly-up?

Any alternative course will have to come from an aroused working class public, not from corporate America and most certainly not from the entrenched establishment in the Democratic Party. And it will have to be global, an expression of outrage over a system and government policies that have universally failed to meet basic human and ecological needs.

The resistance of those heroic frontline workers for their own sake and ours can be the start of mass,

anti-austerity social solidarity. We don't want to predict here outcome of a long, bitter struggle. As a statement by the National Committee of Solidarity early in the crisis stated, the present pandemic and economic crash "is not (fortunately) the end of

civilization, nor is it (unfortunately) the end of capitalism."

Having said that, the world that emerges afterward will look considerably different, in ways that partly depend on social movements

and political intervention. Whether, when and how that response emerges is among the great unknowns.

18 April 2020

Source [May/June 2020 ATC 206](#).

Slovakia: panic and discipline at the edge of the EU

18 April 2020, by **Mark Johnson**

Describe the state of the pandemic in Slovakia. How many people are infected? How many have died? What do experts expect in the coming weeks in terms of how fast the contagion will spread.

Eleven people have died: two per million inhabitants. This is one of the lowest rates in the world. Six of the deaths so far are linked to a single care home, where 55 of 93 residents and 9 staff tested positive. Similar local clusters are likely in other care homes and among Slovaks returning from Western Europe. [71] Many migrant workers are Roma, and there is a particular risk of community transmission in overcrowded Roma ghettos, some of which lack water supply or even electricity.

Testing data is unreliable, because of the low rate of testing. Until last week, the public health system did about 2,000 daily, the last few days have seen 3,000 tests. [72] There are 1,089 confirmed cases. Tests are only done on people with serious symptoms associated with Covid-19. Since care home residents are not tested, infections are undetected until a hospitalisation or death occurs. A recent cluster of six deaths in one senior care home may provoke a change in testing strategy. Health administrators in the capital Bratislava are promising to test all care home residents with high temperature.

Some deaths outside hospitals are

surely not counted, as elsewhere in Europe. But such deaths must be few in number, since total senior citizen deaths in March 2020 are only 1% higher than the same time last year. [73]

Just before Easter, the government sent army and police to quarantine six of Slovakia's 800 Roma ghettos. The government was hoping to find a 10% infection rate, which has been defined as the trigger for quarantining a residential area. Only a handful of cases were detected, but these communities remain surrounded by police. The cops were caught on camera threatening to shoot escapees. Fortunately the only failed 'escape attempts' so far have been by children, without a violent response. The government insists that it will test the remaining ghettos and is ready to lock them down. Those locked down will stay that way: no further tests are planned there, and no additional health or social workers have been dispatched. The poorest quarantined ghettos have been provided with piped water, but there are no opportunities to collect firewood.

Private health providers do 200-300 tests daily, for anyone willing to pay 70 EUR (the minimum wage for a day). Almost no infections have been detected by private testers: those tested are mostly healthy working-age adults who want to be sure they will not infect their aged relatives.

Lockdown measures have slowed the

contagion rate. The government considered but rejected a strategy of eradication. Because of the low rate of testing, the authorities project a gradual increase in infections over the next two months mostly via undetected community transmission. With most of the deaths so far linked to a single senior care home, the worse case scenario is a multiplication of undetected clusters in care homes and Roma ghettos. But in any case, the health system faces a much lower burden than in Western Europe, thanks to the low number of cases. There are currently only 10 covid-19 patients in intensive care, of which three are receiving breathing assistance.

Please describe measures your government is taking now to contain the virus and treat people infected with Covid-19. Is there a state of emergency, are schools closed, etc.?

Slovakia's very low infection rate is the result of early and significant changes in public attitudes, which politicians responded to. The public became widely concerned with the pandemic in nearby Italy and other countries, leading to a spontaneous reduction in socialisation.

Schools, places of entertainment and most retail outlets were closed indefinitely in early March. Any gradual reopening is expected to start with retail outlets and schools. Physical distancing measures and

restrictions on places of entertainment are expected to continue until a vaccine is available.

On 11 March, a time-limited 'exceptional situation' was declared. This gives the executive and police additional powers, though less than in a 'state of emergency.' Only parliament can renew the 'exceptional situation' or upgrade to a 'state of emergency.'

Employers have been advised, but not obliged to ensure sanitary conditions. In fact most workplace inspections have been cancelled as the civil service switches to remote operations.

Borders were closed, except for citizens and permanent residents. Those crossing the border daily for work or study were initially exempt, also because the Austrian government pleaded with Slovakia to facilitate the passage of thousands of Slovaks working in Austrian social care and health providers. These exceptions have been gradually cancelled and border crossing is now difficult and time-consuming. A covid-19 test certificate and 72 hour prior registration is required except for truck drivers, who spend 12-18 hours at the border. This has created shortages and bottlenecks across the economy, which is highly integrated into the EU core.

Citizens and permanent residents returning from Western Europe (where infection rates are significantly higher) were initially advised, then required to self-quarantine at home. Following concern with a perceived lack of self-discipline, the authorities imposed 14 day quarantine in hotels (at full cost) or in government camps (free of charge).

School graduation tests and entrance exams will be held virtually. Other end of year tests have been cancelled. Most secondary schools are now working several hours daily on-line. A large minority of secondary students have no home access to computers and high-speed internet, but most have telephone access. Most pupils without telephone/internet access are Roma. Public TV is broadcasting several hours of primary school materials to support parents and

pupils.

In the capital Bratislava, and some other cities, the authorities have opened emergency residential centres for the homeless, with compulsory testing. State-subsidised charity providers mostly closed their operations in the first weeks of the crisis.

How has your health care system responded to the crisis? What are your health care system's greatest weaknesses? What are its greatest strengths?

The equipment, management and human resource capacity of the health system has not yet been tested, since the infection rate remains extremely low.

Motivation among health workers has been low for decades because of underfunding. During the 30 years of capitalism, oligarchs gradually took control of parts of the health system via privatisation. The level of basic care declined, and the middle-classes increasingly purchased supplementary health insurance. Bribes and 'presents' to doctors and nurses have always been widespread. Slovakia spends less of its GDP on healthcare than most EU countries. Nevertheless, the number of hospital beds remains adequate, and health staff are well trained.

Health workers have increasingly emigrated to western Europe over the last 20 years, partially replaced by mostly Ukrainian immigrants. Earlier this year, the former (left-populist) government floated a proposal to require reimbursement of study costs for those who leave the country within the first years after graduation.

Shortages of health equipment are compounded by a lack of strategic reserves. The Ministry of Health has struggled to source new supplies in a crowded market. West European countries have repeatedly outbid their Slovak counterparts on global marketplaces. Like other EU countries, Slovakia has prioritised local producers and restricted export of health materials. Local production of masks and breathing equipment seems adequate, although local

breathing equipment does not meet the specifications previously required for intensive care units. Oligarchs have promised to develop and donate 100,000 free tests starting from the end of April. [74]

Local oligarchs are maneuvering to avoid state coordination of private healthcare providers, which would be allowed under the 'exceptional situation'. The oligarch group J&T, which secured a dominant position in private health under the previous government, is struggling to build relationships of cooperation and corruption with the new government. Their official offer of support is a 4m EUR donation of personal protection equipment and ventilators.

Care homes are increasingly recognised as a weak link in public health care. Visits were banned in mid-March, but there has been almost no provision of personal protection equipment. Fortunately, more Slovak seniors live with their children and grandchildren than is common in West Europe. Less of the older generation are dependent on collective care, with the associated infection risks. [75]

How is the unemployment and health insurance system coping with the crisis? What special welfare programmes have been introduced in response to Covid-19?

The government adapted an existing regulation allowing one parent of of sick children under 12 (or disabled children under 18) to claim sick leave. School closure is now sufficient justification for such a claim, covering the period until the end of the school year (30 June). Parents (usually mothers) are massively using this benefit, which was introduced during the socialist period.

Workers and self-employed who are out of work because their workplace was ordered to close may be eligible for 80% of their previous income. So may workers and self-employed if they lose their livelihood because their business turnover drops at least 40% during the Covid-19 crisis. Some subsidy may be offered to employers who maintain employment in similar conditions, probably through a

kurzarbeit system (working hours reduced to 70%, wages reduced to 80%, of which employer pays 80% wages and state pays 20% from the social insurance system).

Deadlines for tax, social and health insurance payments by self-employed and small businesses have been extended for several months, to ease their cash flow problems.

However most of these measures remain untested, because the government has been slow to introduce specific regulations, and those approved so far have tough eligibility conditions (all previous taxes and contributions must be paid up to date) and the administrative requirements for applicants and for the processing of applications are high. In the first week of applications, only 7% of eligible claimants were processed. In half the cases, applications were rejected because of missing scanned documents or incorrect completion of the forms. For the lucky 3.5% whose claims have been accepted, money has still not been transferred.

Unemployed workers will continue to be covered by health insurance, but self-employed may still be required to pay their compulsory contribution even if they have no income.

Within a couple of months, the health insurance and social insurance systems, and probably also the private health insurance companies, are likely to be insolvent. The government will borrow to replenish the state funds, but the accumulated debts of these state and private funds will be the subject of debate in future years. Privatisation of the public insurance system, or nationalisation or sale to foreigners of the private insurance funds?

Migrants and cross-border workers are mostly registered in the social insurance system in the country where they were working. Many face difficulties in claiming their welfare benefits.

Describe the official political response to Covid-19 in your country from the far-right and conservative parties, to liberal and

social democrat parties, and the parties of the left if applicable.

The 'state of exception' was introduced in the final weeks of the outgoing left-populist government of Smer-Social Democracy. The incoming coalition of right-populists, conservatives, liberals, and Christian fundamentalists was elected on an anti-corruption programme. So far, they appear inexperienced and incompetent, particularly the narcissistic Prime Minister Igor Matovič. Like Donald Trump, he seems addicted to rambling press conferences, and late-night social media posts insulting those who question his decisions.

Matovič claims to be led by his scientific advisors, but is also obsessed with his personal popularity. For a few weeks, he was tempted to lockdown even more, with a goal of eradication of the virus. He is now insisting on indefinite maintenance of current measures. The economic liberals in his coalition are pushing for a gradual relaxation of restrictions on retail commerce and facilitation of trade with EU neighbours. The right populists and christian fundamentalists have avoided public disagreements with Matovič, and remain focused on occupying key positions. The right populists of Sme Rodina (We are Family) are maneuvering for control over public procurement and investment. The christian fundamentalists (a faction inside Matovič's loose OĽaNO party) have successfully taken key positions in the ministries of health and education. Their medium-term agenda is to restrict abortion, education about sexuality and reproductive health and reverse what they call the 'gender agenda' or 'culture of death'. In the short term, if access to non-urgent procedures is restricted, they will maneuver to remove abortion from any list of urgent medical interventions.

In opposition after 11 years, Smer - Social Democracy affects a concern with human rights and privacy, quite inconsistent with their own record. Slovakia has more police per 100,000 inhabitants than any country in the EU. Also in opposition, the fascist ĽSNS struggles to distinguish itself from the other parties, in parliament

and on social media.

How have trade unions responded to the crisis? Especially public sector, education, and health care unions?

Private sector unions are weak, with only a handful of companies employing more than 250 people. The auto producers who dominate the export sector closed down temporarily and are gradually reopening. Many civil servants are 'working from home' but without computers. A proposal to open schools during the normal summer break was quickly abandoned. The government's welfare promises have reassured workers, although many worry they face long-term unemployment.

Strikes are forbidden in the health sector during the 'exceptional situation.' There is no public pressure, via social media for example, to increase pay for health workers. The population only demands that health workers receive adequate personal protection equipment.

Amazon has set up several facilities in recent years, including the European centre for processing returned goods and a multilingual call centre. Unfortunately, these workplaces have been slow to join the worker protests that have impacted Amazon in the last few weeks.

Slovaks providing senior care in Austrian families have begun to organise, faced with the failures of the social insurance system and private employment agencies. 50-60,000 mostly female workers can no longer operate their two weeks on, two weeks off home care shifts, now that the border is closed. This care work is the main form of employment in some smaller towns and villages where socialist-era factories have closed.

How have social movements (student, feminist, ecological, immigrant, indigenous, etc.) responded to the crisis?

The population, rather than politicians, can take credit for Slovakia's early response to the pandemic. Politicians responded to public concerns by closing schools,

borders and workplaces. Belgium and Slovakia closed their bars and restaurants within a few days of each other. But on the eve of closure, Belgian bars were full while Slovak bars were empty. People began making their own face masks; by mid-March these were the norm. Then transport providers and shops began refusing service to those without masks. Politicians and public figures became careful not to appear without masks.

Volunteerism has increased, from a very low base, and there are numerous local initiatives to support isolated seniors and other vulnerable groups. There has been an increase in civil society support for victims of domestic violence.

However, the dominant dynamics in civil society are panic and prejudice. The police has requested citizens to stop informing on neighbours who don't wear masks, because the switchboard is overloaded. Some people who tested positive for Covid-19 were harassed by their neighbours. There is no (white) public backlash to the quarantining of Roma ghettos, only complaints that once again the 'Gypsies' are getting preferential treatment.

Can you discuss the impact of the Covid-19 crisis and how you think it will impact national politics in the coming weeks and months?

The right-populist government took power only a month ago. The crisis is

dominating the internal maneuvering of the government coalition, which still has to produce a government programme. There are still no proposals for medium- and long-term reconstruction, beyond repeated promises to 'finally tackle corruption.'

The government has promised to introduce a phone application to monitor compliance with the lockdown. Police have so far preferred to issue warnings rather than penalties or arrests. The automatised control may lead to increased range and number of penalties, and a civil liberties backlash from a population whose patience is exhausted.

Source [ESSF](#).

Bolsonaro's necropolitical solution

18 April 2020, by **Mats Lucia Bayer**

Since the quarantine situation began to be generalized, two concepts have come to the surface. On the one hand, the tremendous vulnerability of societies in the global North (which believed themselves relatively immune to major catastrophes) has been revealed. On the other hand, the extent to which the death of a part of the population can be included in calculations and political management (a practice called "necropolitics").

As JÃlia MartÃ indicated in the debate organized by *Anticapitalistas* on 12 April, "Ecosocialism or pandemics", the use of this term to explain what is happening in the European context is novel, since up to now the system seemed to reserve this type of political management of death to the social and geographical margins of our societies. In other countries, such as Brazil, necropolitics has been part of the DNA of large parts of the Brazilian state in recent decades, and the so-called "margins of society" are much broader than European societies. To give an idea of the magnitude of the effects of this policy, in 2019, 1,810 people died in police

interventions in Rio de Janeiro alone (the number of people killed in relation to Covid-19 on April 14 was 1,335). This was the biggest such death toll for two decades, and Governor Wilson Witzel welcomed the fact that the security policy "was bearing fruit". Bolsonaro's delusional statements are not, therefore, an isolated case in Brazilian political history, but are part of decades of segregation of and attacks on the most precarious populations (the black and indigenous population, women, and sexual minorities).

Like in other countries, in Brazil, the epidemic is accompanied by the harsh impacts of a global recession that has been brewing for years. Forecasts indicate that the country will lose 5% of its GDP, and the number of unemployed people will become double the current number, standing at 12 million, with a 15% drop in income for the entire population (obviously this setback will have an impact on the different layers of society equivalent to the already existing tremendous inequalities). To mitigate these effects, the government

has put forward a proposal to create a minimum income of R\$ 600 (which is equivalent to €100) for informal workers and 2,000 for formal workers, when the average wages are 1,400 and 2,300 reais respectively. In the framework of the debates on the need for a basic income, the Brazilian solution clearly falls within its most neo-liberal aspect.

The erratic management of President Bolsonaro and the "ideological fraction of the government" (which includes Bolsonaro and his associates as opposed to more "pragmatic" sectors) has undermined the already battered confidence that his allies (especially the sector originating from the army). In the current crisis, the president's denialist position regarding the pandemic has delegitimized his own Minister of Health, Luiz Henrique Mandetta, whom he no longer invites to meetings of the crisis group responsible for monitoring the pandemic.

Meanwhile, the health emergency catalyses the precariousness and existing inequalities in society. In

2017, more than 150,000 people died from poor medical care and 50,000 from lack of access to the public health system. In addition, 35 million people lack access to running water. In this context, what is the real possibility of the sanitary instructions of the confinement being applied, such as physical isolation or basic hygiene gestures? What is the possibility of having adequate medical attention in the event of a health emergency? According to various studies, the estimated number of victims ranges between 44,000 (in the event of all the sanitary measures dictated by the WHO being respected) and 530,000 if the instructions proposed by Bolsonaro himself to isolate only the elderly (over 60 years old) were followed. It should be noted that the

life expectancy of the black population is precisely around 60 years, so that a criterion apparently as innocuous as that of age has a purely racial component. In fact, the available figures confirm what is also being observed in the USA: the majority of victims are racialized. While Bolsonaro opposes any measure that results in confinement, Mandetta is committed to highly flexible confinement. The reality is that in most federal states, a confinement similar to that existing in European countries is already being applied, at the initiative of the governments of these same states, preferring to avoid having to a bloodbath of the dead.

In the event that the coronavirus

pandemic spreads throughout the Brazilian territory, we may expect one of the most reactionary managements of the health emergency. A policy that, in order to defend at all costs the privileges of a minority, will not hesitate to take advantage of the situation to attack the most vulnerable, justifying the death of thousands of people. We realize in the current context of the epidemic that links of solidarity from below must be strengthened more than ever, as well as giving them a political content, in the face of the atomization imposed by confinement and the authoritarian temptations of the states. This solidarity will have to be even stronger with those activists who, tirelessly, continue in their resistance to the criminal Bolsonaro government.

Pandemic lays bare Israel's systemic racism

17 April 2020, by Diana Buttu

As I sit in my house in Haifa, quarantined, like others around the world, I cannot help but recall a previous experience under Israeli-imposed curfew.

Eighteen years ago, during March and April of 2002, the Israeli army re-invaded the West Bank, including the city in which I was residing at the time, Ramallah. For months, we remained under lockdown as Israeli tanks, jeeps and soldiers terrorized our streets and homes.

We spent the days hearing about the rising death toll and worried about what the future would hold. While the initial action was met with international condemnation, soon the lockdown – and the terror of Israel's army – became "normal." Few raised their voices at Israel's collective punishment of Palestinians and all of the accompanying land confiscations and home demolitions undertaken by the army.

Today is no different. While the world is rightfully focused on "flattening curves" and "physical distancing,"

with coping under a halted economy and worrying about loved ones, Israel's occupation and systemic racism continue to guide policy – just as they have throughout history.

I live with my elderly parents, one of whom has a number of serious health issues, including respiratory problems. Like others, I worry about them, and, of course, my young son.

But I also have to think about my friends in the West Bank, at the mercy of the whims of the Israeli military as well as unrestrained and violent settlers living in occupied territory in violation of international law. [76]

I have to worry about my friends in "hiding" because Israel has never allowed them to live normally in their country because they hold West Bank identity cards. I worry about whether they will be picked up while on the way to the grocery store and whether they will be allowed access to care, if needed. [77]

And, of course, I cannot take my mind off Gaza, terrified that coronavirus will

infect thousands and watch helplessly as the numbers rise. [78]

Lockdown under occupation

I take comfort in the initiatives that Palestinians have taken to support one another during this period – as we have during other periods of closure and lockdowns – knowing that despite everything, we will take care of one another, even when others want to see us disappear.

In the occupied West Bank, Palestinians have been quarantined for a month, at time of writing, with schools and businesses closed. The state of emergency declared by the Palestinian Authority has already been renewed for another month, Palestinians not only fearing what will happen to an already dependent and fragile economy but also that an outbreak cannot be contained.

These fears are not unwarranted: Israel has long held control over the

Palestinian public health system. It prevents basic equipment like radiation machines not only from entering Gaza but also the occupied West Bank outside East Jerusalem.

And while restricting access to health facilities in Israel, occupation authorities also make it difficult or impossible for Palestinians to get permits to East Jerusalem's relatively better equipped hospitals.

But Palestinians do not only have to fear loss of life, a collapsed health care system and economy: They also have to fear Israel's daily actions in occupied territory.

Since the state of emergency was declared, Israel has carried out mass arrests (detaining 85 people, including 10 children) and demolished, forced people to self-demolish or seized more than 40 places of business and homes as the world is being told to "stay home."

Israeli settlers continue their attacks - on both people and properties - with impunity. [79] Gaza remains blockaded, even as the health sector is on the verge of collapse as a result of Israel's 13-year closure. [80]

Palestinian prisoners in Israeli detention are among the most vulnerable.

Since 15 March, emergency regulations have granted almost unrestrained powers to the prison authorities. [81] They bar prisoners from meeting with families or lawyers and allow telephone consultation only if a court case is imminent.

For those of us living inside Israel's 1948 boundaries, the picture is just as bleak.

Israeli racism guides policy on coronavirus. Since the start of the

outbreak, Israel has both promoted an image of equality by showing Palestinian doctors on the frontlines of treating coronavirus-infected patients to mask its bigotry. Simultaneously it has castigated only Palestinians for not "following the rules," at least at first, even while the majority of those who have tested positive to date hail from religious Jewish communities. Israel has issued fines against imams for holding prayers while allowing synagogues to continue their services uninterrupted. Mikvahs - ritual baths - remained open until the end of March and yeshivas continued to operate long into the shutdown, though the continued flouting of rules by some ultra-orthodox communities may bring a comprehensive end to that soon. [82]

Systemic discrimination

Worse still is that Israel had tested a mere 4,000 Palestinian citizens of Israel for the virus up to 2 April. This is the same as the number of Jewish Israelis tested every day. Public health and safety orders were in the beginning provided in Hebrew and sometimes Russian and English, but nothing in Arabic.

Efforts to provide Arabic-language guidance have since been stepped up though such information is still not transmitted in real time. [83]

With the exception of hospitals that existed before 1948, and in cities with mixed populations, there are no hospitals in Palestinian towns - certainly none capable of handling volumes of coronavirus patients - and disaster may be imminent. [84]

But while testing remains elusive, tracking does not. Israel is attempting to use Shin Bet surveillance

mechanisms to track coronavirus patients, a measure temporarily halted due to the intervention of rights group Adalah. [85]

As always, it has only been the civil society of Palestinian citizens of Israel and their legislators who have pushed back against the actions of the state, including by pressing for increased testing in Palestinian towns, increased funding for Palestinian hospitals and demanding an end to state surveillance.

Some may believe that the coronavirus is an equalizer - that it affects Israelis and Palestinians alike. While the virus has the potential to affect everyone, treatment for it is hardly egalitarian. Rather, owing to systemic discrimination, the approach taken by Israel has been to prioritize Israeli Jewish lives over Palestinian lives. Should this virus spread widely in Palestinian communities, the consequences will be disastrous.

In short, Israel's approach to the coronavirus is the culmination of historical racist and colonial policies - not separate from them.

In the aftermath of Israel's 2002 invasion, a number of things became "normal:" nightly Israeli raids, endless Israeli blockades, radical restrictions on movement due to "security" and the demolition of homes with barely a protest.

My fear is that once this coronavirus threat passes, some measures will also be normalized this time: from racism in health care, to holding Palestinians and their health care system hostage, to surveillance, to home demolitions and blockades - all in the name of "public security."

8 April 2020

Source [*Electronic Intifada*](#).

Let's build the transition to ecosocialism

now!

16 April 2020, by Fourth International Bureau

1 ? We are in a crisis full of dangers, a crisis of capitalist civilization, the most serious since the world wars of the twentieth century. We are combatting the coronavirus pandemic, which affects all peoples. Against it, there are (as of now) no vaccines or proven and safe antiviral treatment; today we can only resort to physical distancing to mitigate its impact, breaking the virus's chain of contagion. Our only protections, when we are forced into isolation, are public health systems, guarantees of income and rights, and solidarity. While many entrepreneurs are seeking only to secure their profits, amid a recession that is becoming a depression, the rulers of each country are attempting to secure their interests at the expense of their neighbours. But there is no way out of the long pandemic that we have ahead with inequality, xenophobia and racism, in the fight of all against all, in the search for scapegoats; we will only overcome this crisis by affirming the interests, the rights and the solidarity of human society as a whole. This is the time of internationalism, of social, racial, gender and environmental justice, of the defence of the common destiny of humanity.

2 ? COVID-19 is a pandemic of neoliberalism, a product of this globalized neoliberal phase of capitalism. Capitalism, driven by neoliberal globalization, has extended its mantle over the entire planet. Global production chains, which are provided for corporations to increase their profits, make each country vulnerable to the slightest crisis, and the hypermobility that sustains them has eliminated any health and ecological security mechanism. A predatory relationship with nature, based on the use of fossil fuels and large capitalist agriculture, with its green deserts, destroys both the balance of the fundamental cycles of the Earth system (carbon, water, nitrogen) and the relationship of

human beings with the biosphere, with the web of life of which we are only a part. It is an unsustainable model, which aims for infinite growth on a finite planet, which goes beyond all the Earth's limits, creating an ecological alienation and a demand for consumption incompatible with the rational use of common goods.

3 ? If the so-called "natural" disasters are the consequence of the climate crisis, SARS-CoV-2 and its possible mutations are also the result of attacks on the Earth's biosphere. Deforestation, environmental degradation and commercial/"recreative" hunting of wild animals continuously creates conditions for new diseases against which there is no immunological resistance in humans. The accelerated increase of meat consumption is inextricably linked to most recent virus outbreaks as the meat industry involves the confinement of a huge number of genetically similar animals. It is also the major driver of deforestation and loss of genetic variability in many parts of the world: Agriculture occupies already half of the habitable land, and 77% of the agricultural area is dedicated to grazing land or arable land to produce animal food. A profound transformation in our food production system and diet is required to overcome this industry of pandemics!

4 ? All humankind is attacked by the virus. Exploited classes and oppressed sectors are the most affected. Families living in precarious housing, poor sanitation neighbourhoods, precarious workers, those who have hunger wages. Health workers (doctors, nurses), truckers and transporters who cannot stop the supply, and all those who must move the gears of the world for everyone to live, suffer. In other words, the pandemic affects everyone, but not in the same way, depending on their social class. But there is also a generational impact; it

kills the elderly of all classes. In this range of all human society, the poor elderly are the ones who die the most. And the crisis is hitting women hard, who are responsible for most of the work of social reproduction, and who, confined in their homes, have an even greater burden of work and are suffering another epidemic, that of domestic violence.

5 ? Even more serious is the situation in the countries of the global south. Under different conditions and circumstances, the countries of Latin America, Africa and the Middle East, East Asia and the Indian sub-continent have been affected by the pandemic. Still at an early stage in these countries, everything demonstrates that the combination of the pandemic with the poor sanitary conditions, the absence of basic sanitation, extremely dense cities and neighbourhoods and local governments and ruling classes unwilling to take social security measures must cause a real humanitarian catastrophe with proportions still to come. not seen in this pandemic. The way in which the epidemic is expanding in some countries in Africa like Algeria, Egypt and South Africa, in Peru, Ecuador, India and especially over the favelas of large Brazilian cities demonstrates the much greater danger that non-white people are running, who are subordinated in multiple ways to the logic of capitalist domination which puts billions of people in poverty. It is now necessary to focus energies on a call for economic, social and humanitarian solidarity with the countries of the global south as a way of preventing the spread of racist genocide epicentres on indigenous people, peasants, poor workers, blacks, Dalits, all those who remain racialized. and ethnically excluded under modern neo-colonial forms.

6 ? Much attention is still needed to the authoritarian measures taken especially by far-right governments on

the periphery of capitalism and the global south. The measures of repression and authoritarianism sponsored by the governments of India, the Philippines and Ecuador are examples of how the COVID pandemic is being used to deepen authoritarian measures and to further close political regimes. Duterte has been declaring that he will shoot those who do not comply with the quarantine, in Ecuador the homes of poor workers have been invaded by the police.

7 ? The virus highlights the contradictions and evils of the entire capitalist system and shows that the only way to solve them is with another system that establishes another relationship between people, and with nature. Everything is in question; the system is in question ...

? In its neoliberal phase, capitalism abandoned the services that the State had to provide to guarantee the productive strength of workers, the social rights hard won by workers throughout the twentieth century. Neoliberalism privatized these services, made the state more unable to meet the human needs of the population. It is impossible to respond to this crisis without attacking the whole system and its behaviour.

? The privatized health systems of neoliberalism that serve essentially those who can afford their services cannot meet the human needs of life. It is necessary to socialize health.

? Neoliberalism disorganized labour relations and made them more precarious. So, mechanisms for guaranteeing the income of employees, as well as of self-employed people, those who work on their own, alongside the development of income redistribution mechanisms, are central demands today.

? By making obvious the destructive character of globalization and the vulnerability of societies hostage to companies and their global productive chains, the crisis reopens the possibility of questioning the general organization of the current international division of labour, which is socially and ecologically unsustainable.

? Neoliberalism has deepened, through consumerism, individualist behaviour. But society is relearning, with the crisis, that social solidarity is necessary for its survival.

? Anti-scientific ideologies, obscurantism and religious fundamentalism have resurfaced to justify and sustain this domination with the ideologues of Ronald Reagan and Bush and now continue with Trump, Bolsonaro, Duterte, Modi... But their denialist actions have clash more and more clearly with scientific assumptions, becoming demoralized. Governments have been forced, with different timescales and methods, to take measures to mitigate the crisis, sometimes combined with authoritarian actions. However, some leaders, like the presidents of Brazil, Bolsonaro, of Turkmenistan, Berdimuhamedov, and Belarus, Lukashenko, resist, sustaining obscurantism and denialism.

? The crisis calls everything into question. The (often insufficient) emergency measures that governments are adopting to contain the pandemic have to objectively challenge the current format of capitalist society; to save lives we must attack the entire capitalist structure. Humanity and the planet will be saved if this is assumed with all energy.

8? Workers and people were facing this system with energy before the emergence of the pandemic. In Chile, Lebanon, the United States, India, Hong Kong and many other places, the masses rose throughout the year 2019. The movements of women, young people and the environment have been rebuilding a strong militant internationalism - it is, in fact, the strongest impulse to internationalism since the 1960s-1970s. They face increasingly authoritarian and totalitarian governments, products of the crisis of traditional bourgeois regimes and the need to establish an increasingly destructive capitalism, predator of lives and nature. It is such regimes who seek to lead the masses to trust not in their strength and solidarity, but in the saving messiahs who proclaim anti-science. At this very moment, these are those who want to take advantage of the pandemic to

strengthen totalitarianism. Street action is now frozen, but the fight is not just on the streets. New forms of protests, the use of new methods to gain public opinion are growing in the context of a sense of solidarity.

9 ? In this situation, the vast majority of governments have been forced to take extreme measures. We must defend measures that attack the form and substance of neoliberalism and the capitalist system:

? sanitary measures to address the pandemic and save health;

? guaranteed work despite physical isolation: 100% assumption of responsibility by enterprises and/or the State for the wages of workers who have suspended their activity, including precarious workers, temporary workers, domestic workers, self-employed workers and seasonal workers, without any obligation to take days off or to subsequently recuperate the hours not worked;

? for workers in the informal sector, for the unpaid unemployed, for students, for everyone who needs it, the state must provide a guaranteed minimum income which must be sufficient to live decently.

? prohibition of all dismissals and the reinstatement of employees dismissed since the beginning of the pandemic,

? refusal of any authoritarian and exceptional measures to suspend social rights, including the right to strike;

? right to information and communication;

? provision of adequate social care for the disabled, the elderly and all those socially isolated by lockdown,

? establishment, particularly in countries where confinement has been decided, of immediate emergency protection measures for women and children who are victims of violence, with rapid decisions to remove violent spouses or provide alternative housing for the victims,

? vulnerability aid

? equal treatment for the entire

population

? immediate conversion of suitable industries (cars, aircrafts, weapons, ...) to productions helping society to handle the health crisis: ventilators, monitoring, intensive beds, protective equipment;

? free distribution of medicines, prevention supplies and price fixing

? better working conditions in essential areas

? socialization of the health services and their reconstruction, under the control of public interest, where they have been dismantled by neoliberalism;

? nationalization of the pharmaceutical industry;

? defence of the popular economy and housing;

? immediate suspension of the payment of public debt with audit of public debt with citizen participation, in the perspective of the repudiation/abolition of the illegitimate part;

? freeze bank debts of families, microcredit and rents, and ensure water, electricity, gas and internet for everyone;

? put the banking system under the control of public interest by the expropriation of the Banks with no compensation to the big shareholders and socialization of the banking system under citizen control

? tax the big fortunes.

10 ? We cannot wait with our arms crossed for governments to act, we must act collectively to develop self-managed initiatives of the working people, from the territories in resistance, in the countryside and in the cities. There are examples of these initiatives from the population or organized sectors, such as peasants, indigenous peoples, unemployed, people and communities on the outskirts of large cities, the networks of feminist solidarity, among others. These initiatives are forging very interesting alternatives, such as the collective manufacture of fabric masks

to donate to the population in order to ensure the prevention of contagion, the donation and alternative production of food, the defence of the public health system and the demand to access it universally, the requirement of guaranteeing labour rights and the payment of wages, the denunciation of the increase in the escalation of violence against women and the gruelling work of care done by them during isolation at home, among others. Now, more than ever, we must generalize these initiatives and direct these daily alternatives of autonomous self-organization as part of the eco-socialism and well-being that we propose as concrete alternatives to capitalism that destroyed life and the planet, a genocidal and ecocidal system.

11 ? While respecting the necessary physical isolation, and the emergency measures creating the conditions to comply with it, workers and the mass of the population have the means to act, to fight. In Brazil, the "cacerolazos" and the petition with more than a million signatures for the impeachment of Bolsonaro, president of Brazil, are examples of the feeling of solidarity being transformed into a solidarity consciousness, which leads to the struggle for the necessary measures to be taken by the people. If food is not enough, we organize ourselves by neighbourhoods through the telephone and the internet, with crops in community gardens, conscious consumption of food produced by peasant cooperatives. In addition, popular restaurants can be turned into distribution centres for cooked or raw foods. If income guarantee policies are not enough, it is possible to require bonuses from municipalities. Popular creativity should be encouraged in all its forms.

12 ? Despite its severity, the Covid-19 pandemic is far from a "perfect storm". Our food system and our predatory relationship with nature can eventually generate outbreaks from viruses that might be more contagious and/or lethal than SARS-CoV-2. In addition, violent outbreaks may occur concurrently with extreme events driven by climate chaos. The eventual occurrence of severe floods or intense hurricanes/typhoons that impose the sudden evacuation of thousands or

even millions of people is able to totally disrupt the necessary social distancing/quarantine measures to fight a severe pandemic. The conjunction of sanitary and climate crisis can produce unprecedented humanitarian disasters. At the same time, pandemics and climate/ecological emergency have similarities: acting soon is crucial, exponential growth (both of contagion and emissions) must be harshly contained and only just, equitable, anticapitalist solutions serve as an alternative to save the largest number of lives.

13 ? There are giant geopolitical shifts in progress, which will reconfigure the face of the world. But now a demand is imposed: that of a truce in wars around the world. It is time to strengthen the solidarity of the peoples!

14 ? It has been noted that the crisis resulting from Covid-19 has had a positive impact on the environment. A reduction in the concentration of short-term air pollutants such as aerosols and nitrous oxides is observed, especially in metropolitan areas, which leads to better air quality, visibility, etc. But in terms of long-lasting pollutants such as CO₂, the SARS-CoV-2 crisis just scratches the surface. More than half of international aviation is now grounded and decreased energy use, including electricity and transportation is estimated to reduce the global emissions by about 5%, the largest ever annual fall in global CO₂ emissions. However, this is still below the annual reduction rate needed to keep the climate system in a trajectory in which global warming is limited to 1.5°C above pre-industrial global mean surface temperature (in order to halve the emissions by 2030, annual emission cuts of 6-7% would be necessary). But the expectations of capitalist corporations are to resume the previous situation and economic growth as soon as possible... Moreover, in some countries, such as Brazil, where the main source of CO₂ is the change in land use, there is evidence that the disarticulation of environmental surveillance during the SARS-CoV-2 crisis is leading to increased deforestation and emissions. Only a consistent and organized effort

to reduce energy demand, protect forests and indigenous lands, and bring down emissions can be an appropriate response to the climate emergency. Illusions on possible "positive environmental effects" of the SARS-Cov-2 crisis are at best naive, at worst, they may open the door to misanthropic, eugenic, ecofascist discourses. A deep reorganization of human society is needed.

15 ? If in the beginnings of neoliberalism, there were aspirational movements and social sectors that came together to say, "another world

is possible", today we must unite to say, "another world is necessary and urgent"!

Through common internationalist action that points us towards paths towards a world where life is worth more than profit, where nature ceases to be a commodity. The current crisis shows clearly that a significant part of capitalist production is purely predatory, totally superfluous and wasteful. The crises also shows that significantly decreased working hours can produce essential goods and that wage and income guarantee and

universal access to health and educational systems are totally viable in a transitional regime, in which the energy and productive systems are totally replaced, and enormous contingents of workers are shifted to different economic sectors compatible with an ecosocialist transition; and that a massive industrial readjustment can be done in a relatively short timescale depending on political will.

There is no future without a transition towards eco-socialism. Let's come together to build and conquer it.

Fighting COVID-19: Why and How to Suspend Debt Repayment Immediately

16 April 2020, by **Éric Toussaint**

There is a simple way to free up financial resources: it consists of immediate suspension of public debt repayment. The savings made can then be directly channelled to priority health needs. There are other measures that are quite easy to take to free up financial resources: establishing a crisis tax on the wealthy and very high incomes, imposing fines on companies responsible for large-scale tax evasion, freezing military budgets, putting an end to subsidies to banks and big companies ... We come back to the suspension of debt payments because it is in most cases the central lever that can very quickly improve a state's financial situation.

States may unilaterally declare the suspension of debt repayment on the basis of international law and in particular on the following grounds: State of Necessity, fundamental change of circumstances and force majeure.

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basis of international law and in particular on the following grounds: State of Necessity, fundamental change of circumstances and *force majeure*.

The suffering and the death toll have clearly been aggravated by underfunding of public health in both Southern and Northern countries. States, with very few exceptions, have systematically, under the pretext of repaying debt and achieving a reduction of budget deficit, imposed restrictions on public health spending. If they had rather strengthened the key instruments of a good public health policy in terms of staffing, infrastructure, medicine stocks, equipment, research, production of medicines and treatments, and health coverage for the population, the coronavirus crisis would not have reached the current proportions and would not be developing so drastically.

What has happened in China, where the authorities were slow to take containment measures and increase tests, then in several European countries (Italy, Spain, France, Belgium, the Netherlands, Great Britain), in the United States and

elsewhere, indicates what is likely to happen in other countries as the virus continues to spread. In the richer countries, with much more developed public health systems, the combined effects of 40 years of neoliberal policies and the lack of preparedness of public authorities have had tragic effects. It is easy to imagine what this can lead to elsewhere. Countries in Africa, Latin America and the Caribbean, and Asia have begun to be heavily affected by the health crisis.

Urgent action is needed to build the capacity to fight the coronavirus and, beyond that, to improve the health and living conditions of populations.

Governments and major multilateral institutions such as the World Bank, the IMF and regional development banks have used public debt repayment as a tool for applying policies that have deteriorated public health systems: job cuts in the health sector, precarious employment contracts, reduction of hospital beds,

closure of local health centres, increase of health care costs and of prices of medicines, under-investment in infrastructure and equipment, privatization of various health sectors, under-investment by the public sector in research and development of treatments for the benefit of the interests of large private pharmaceutical groups.

Even before the outbreak of the COVID-19 epidemic, these policies had already resulted in enormous loss of life and protests by health workers around the world.

Urgent action is needed to build the capacity to fight the coronavirus and, beyond that, to improve the health and living conditions of populations.

The call for suspension or the cancellation of debt payments has come to the fore again in the context of the global health crisis. In mid-March 2020, a dozen former Latin American presidents launched an appeal to this effect (See the english version on <https://www.celag.org/la-hora-de-la-condonacion-de-la-deuda-para-america-latina/>). On 23 March, a large majority of members of the National Assembly of Ecuador called for a union of Latin American governments to suspend debt payments (<https://www.cadtm.org/Will-Ecuador-again-set-an-example-of-courage-in-the-face-of-creditors>). At the end of March, representatives of CEMAC (Economic and Monetary Community of Central Africa, which includes 6 countries) asked for the cancellation of their countries' external debt (<https://www.businessincameroun.com/economy/3003-10143-cemac-ministries-of-finance-and-economy-suggest-cancellation-of-external-debts-to-deal-with-covid-19-and-relaunch-post-pandemic-economies>). On 4 April, Senegal's President Macky Sall called for the cancellation of Africa's public debt (<https://www.en24.news/n24/2020/03/macky-sall-seeks-cancellation-of-debt-owed-by-africa-due-to-coronavirus.html>).

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The United Nations Conference on Trade and Development (UNCTAD) has just published a report in which it warns about the scale of the fateful impacts of the crisis, particularly in economic terms. In a passage of this document, UNCTAD argues, in diplomatic language, that indebted countries should be able to unilaterally and temporarily freeze their debt repayment. It also states that creditors can't be the ones to decide whether or not indebted countries have the right to suspend debt payments [87]

The Student Tribunal for International Dispute Settlement (STIDS), composed of international law students intending to apply their theoretical knowledge to a real situation, issued the following opinion in the case of Greece in 2016: *"Greece is facing an extreme financial situation that does not allow it to provide essential medical services to its population, whose mortality is consequently increasing substantially. Accordingly, the Tribunal considers that Greece is indeed in a material situation which constitutes a grave and imminent peril within the meaning of Article 25 of the ILC's Draft Articles, and that it may therefore legitimately invoke a state of necessity."*

Fundamental change of circumstances: The performance of a debt contract (or international treaty) may be suspended if circumstances change fundamentally beyond the debtor's control. Case law on the application of international treaties and contracts recognises that a fundamental change of circumstances may prevent the performance of a contract. In the case of the current crisis, in the last two months, circumstances have changed fundamentally:

- a very serious epidemic is in full swing;
- commodity prices are collapsing (oil prices have halved in a month)

and a whole series of debtor states are dependent on the income from raw materials exports to earn dollars needed to pay off their external debts;

- economic activity is dropping sharply and very rapidly;
- the countries of the South are victims of the decision of large companies and investment funds from the North to withdraw their capital from the country to repatriate it to their parent company and put it into a tax optimisation scheme.

Force majeure: the circumstances described above are examples of *force majeure*. A state may invoke these circumstances which prevent it from executing a contract.

It is fundamental that an audit of the debt with active citizen participation be organised in order to identify the illegitimate, odious and illegal parts that must be cancelled definitively

When a state invokes a state of necessity, fundamental change of circumstance or *force majeure* to suspend payment of the debt, it is irrelevant whether the debt is legitimate or not. Even if the debt claimed from the country is legitimate, that does not prevent the country from suspending payment. What is fundamental, then, is that the population ensures that the money actually saved by the non-payment of the debt is used to fight the coronavirus and the economic crisis. This implies that people must exercise strict control over the government's action, that they must mobilize and be ready to express their discontent strongly if the government does not act in their best interests, and be

ready to overthrow it if necessary.

Furthermore, from the point of view of the majority of the population, it is fundamental that an audit of the debt with active citizen participation be organised in order to identify the illegitimate, odious and illegal parts that must be cancelled definitively. It is also necessary to audit all state expenditure to check whether it is really justified in the fight to overcome the health, economic and ecological crisis.

Statements by current heads of states or heads of international organizations on the necessity for debt cancellation should, obviously, not be taken seriously. Their sole purpose is to get public visibility. The heads of states will always be able to resort to the excuse that they tried to obtain debt cancellation, but were unsuccessful, so payments will have to continue. As for the IMF, it has used the same old refrain for decades: it periodically states that creditors must cancel part of the debts, but at the same time it says that, as an international institution, it cannot forgo the recovery of everything owed to it. This is not the first time that the most powerful institution has made fine speeches but each time, there has been zero effect on the well-being of the population.

Actions speak louder than words: immediate and unilateral suspension of debt payments

This is the primary means that a state can use to find, under popular pressure and control, the financial resources needed to combat coronavirus and the brutal effects of the worsening global economic crisis.

Indeed, a radical increase in public health spending will also have very important beneficial effects in combating other diseases that are plaguing mainly the countries of the global South

Reorienting debt repayment and other expenditures (military spending, expenditure on luxuries, mega-infrastructure spending that must be abandoned or can be postponed) by giving priority to public health can kick-start fundamental and healthy change.

Indeed, a radical increase in public health spending will also have very important beneficial effects in combating other diseases that are plaguing mainly the countries of the global South.

According to the latest World Malaria Report, published in December 2019, 228 million cases of malaria were detected in 2018 and an estimated 405,000 people died from the disease. In addition, tuberculosis is one of the 10 leading causes of death worldwide. In 2018, 10 million people contracted tuberculosis and 1.5 million people died from it (including 251,000 with HIV). These diseases could have been successfully combated if governments devoted sufficient resources to them.

Other complementary measures could also combat malnutrition and hunger,

which destroy the daily lives of one in nine human beings (more than 800 million people worldwide). Approximately 2.5 million children worldwide die each year from undernourishment, either directly or from diseases related to their low immunity due to undernourishment.

Similarly, if investments were made to massively increase the supply of drinking water and sewage disposal/sanitation, there could be a drastic reduction in deaths from diarrhoeal diseases, which amount to more than 430,000 per year (source: WHO 2019).

As a reference point of comparison, as of 7 April 2020, the official estimate is of approximately 75,000 deaths caused by the coronavirus since the beginning of the epidemic in December 2019. It is high time to act, using as a priority the powerful leverage of suspension of payment or cancellation of debt.

It is essential that the various organizations and activist networks mobilize to obtain the suspension of debt payments. We must collectively reflect on new ways to consolidate and broaden our struggle in the current exceptional circumstances.

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Danish government reopens schools, immigrants left out

15 April 2020, by **Peter Saxtrup Nielsen**

No Borders News: describe the state of the pandemic in your country or city. How many people are infected? How many have died? What do experts expect in the coming weeks in terms of how fast the contagion will spread.

Peter Saxtrup: Writing from Denmark on April 15, the number of infected people is impossible to guess, since government testing has only recently sped up. Nevertheless, this means that around 4,000 tests are carried out daily for a total of just under 75,000 to date.

The lockdown measures have slowed the infection, so that each patient is believed to have infected just 0.6 other people. State authorities see this as an argument for loosening the lockdown.

NBN: Please describe measures your government is taking now to contain the virus and treat people infected with Covid-19. Is there a state of emergency, are schools closed, etc.?

PS: The government was unprepared for the scale of the threat, even after WHO issued severe warnings during January. No programs for securing protective gear or sanitizers were adopted. No plans for testing or containing a possible outbreak were initiated. Starting on March 12, the government invoked a new iteration of Denmark's epidemic laws, initiating a far-reaching transfer of power to executive although it still governs through parliamentary means. These measures will be assessed regularly by parliament and are set to expire after one year.

The initial success in curbing the spread of the virus stems from social distancing measures initiated by the government. Health authorities have thoroughly publicized advice on hygiene and personal health safety, although they are not recommending masks. Schools, daycare, malls, and the like have been closed. Public transportation is running by observing

special measures with regards to safety. Gatherings of more than ten people both inside and outside are prohibited.

However, workplaces in the productive sector have been running through the lockdown despite being non-essential. Especially in the construction sector where we are experiencing growing dissatisfaction with lack of safety measures and the lack of hygiene. PPE is in very high demand in general, including at hospitals.

NBN: How has your health care system responded to the crisis? What are your health care system's greatest weaknesses? What are its greatest strengths?

PS: The healthcare system has entered into an emergency mode. Hospitals have created extra infection wards, volunteers are being mobilized, and non-acute operations have been delayed. Staff are running separate shifts so as to minimize spread of the virus inside the hospitals.

For many years, Denmark has had a well-developed public and free healthcare system. Unfortunately, it has been subject to years of austerity and "just-in-time" production. The consequence of this is that the hospitals are not prepared for a sudden influx of patients as all their resources are meant to be continually in use. Also, as described above, the healthcare system was not prepared for the pandemic in due time and is still in need of basic necessities despite the slowing infection rate.

Fortunately, the Danish Serum Institute has developed a cheap and fast test and have made the method freely available. Yet Danish vaccine production capabilities have been hampered by the selling off of production facilities in 2016. To this day no additional funds have been directed to the health services. For this reason, all medical measures have been paid for by rearranging health budget priorities and hospitals are

supposed to move towards normalizing their activities in the near future.

NBN: Describe the official political response to Covid-19 in your country from the far-right and conservative parties, to liberal and social democrat parties, and the parties of the left if applicable.

PS: All parties in parliament have adopted an official position of legislative peace, almost all measures so far have been accepted in unanimity. One exception was a measure increasing punishments for certain crimes during lockdown and a measure removing guaranteed days off for retail workers.

The far right has been attempting to cater to racist and nationalist sentiments, casting specific blame on Muslims and foreign workers. This in spite of the fact that the virus was brought to Denmark through wealthy tourists in Austria and northern Italy.

The Liberals and Conservatives have started a cautious campaign to restart production and end emergency measures, arguing that the remedy must not be worse than the disease, as they say.

The center left has backed the government, moving quickly to secure protection for specific groups in their electorates.

The Red-Green Alliance has backed government measures and the approach to national unity while calling for measures to include all people living in Denmark. This has meant calling for public shares in banks that are receiving funds from the government and calling for corporations that receive such funds not to pay dividends to stockholders. The Red-Green Alliance has also opposed measures increasing punishments and a bill to keep shops open during Easter.

All parties have so far agreed with the government's strategy which relies on

natural herd immunity through controlled infection by slowing down societal functions. All parties are supporting the government's strategy of opening child care, schools, and workplaces.

NBN: How have trade unions responded to the crisis? Especially public sector, education, and health care unions?

PS: Trade unions have backed the government, but have called for raising unemployment subsidies during the crisis. They have condemned poor sanitary and safety measures in the building sector, while teachers and educators unions have called to protect their members' safety during the reopening of schools and daycare.

However, the trade unions have accepted a plan whereby workers must use their own vacation and saved overtime to cover the reduced work hours in the public and private sector.

NBN: How have social movements (student, feminist, ecological, immigrant, indigenous, etc.) responded to the crisis?

PS: Social movements have been pacified for the time being. We have seen the emergence of specific movements related to the crisis, such

as the #Coronaknibe mutual aid campaign - where we are also active - which aims to gather and organize people not included in the government health packages. Immigrant movements have pointed to unsafe conditions in camps and inmates have also organized a call around the equally unsafe conditions in prisons. In general people without citizenship have been left out of the government's responses and granting citizenship has been postponed indefinitely due to the ceremony requiring a handshake.

Smaller examples of direct solidarity are beginning to emerge, but these are very local and immediate. Several ecological movements have brought attention to the reduced pollution due to the lockdown and have started arguing for an ecological transition post-corona. Women's movements are calling attention to the vulnerability for people in violent relationships. The student movements have called for information about the status of exams and the consequences for their members. And parents of young children have expressed concern about the reopening of daycare and youth classes.

NBN: Can you discuss the impact of the Covid-19 crisis and how you think it will impact national politics in the coming weeks and months?

PS: The crisis has moved the political discussion to the left, but has stopped short of becoming a class issue. The political life of the parties, including the Red-Green Alliance, has been brought to a halt and normal branch meetings have been scarce. Instead, political debates have taken place on the basis of presentations by members of parliament. The national leadership of the Red-Green Alliance have yet to make a political statement on the crisis.

Without a proper class-based response, the debate will continue down the path of securing the interest of the "Danes," clearly meaning those with citizenship. Meanwhile, more than 4 billion euro have been allocated for companies which means that tax money is being used to cover all losses incurred during the crisis. If we don't come to grips with these facts, the left will end up demobilized against the biggest transfer of wealth to corporations since the financial crisis.

Since all parties have accepted the strategy of the government, they will all be judged by its outcome. For this reason, the specific strategy to deal with the epidemic will most likely only benefit the ruling social democratic party.

Source No Borders News.

Class and Race Inequality, Health, and COVID-19

15 April 2020, by **Kay Mann**

Sociologists, social epidemiologists and other researchers have long noted the close connections between class, race, and health. However, the two cases for which most data have been reported on COVID-19, China and Italy, gives us little guide to class or race in the current crisis because data on incomes or other measures of class have either not been collected or not have been released, and both are

countries without the type of stratified racial structure as the US. While the virus spreads through human contact via close interaction with people and infected surfaces ignoring class distinctions, patterns of those who do become ill, their recovery rates and those who die will very likely be connected to social class. More research may very likely reveal a clear class divide in China and Italy. We can

expect clear social epidemiological patterns along race as well as class lines in the US as the epidemic unfolds. We can see the connections between class structure and class inequality on the one hand, and health and illness rates on the other, by comparing data on income with data on measures of health such as infant mortality and life expectancy. These are general estimates in part because

income is an imperfect measure of social class.

Increasing Class Divide

Over the last few decades, income inequality in the United States has sharply increased. While this has obviously created increasing hardship, especially for the lower levels of the eighty percent of the wage-earning population that experienced a reduction of their slice of the national income since the 1980s, the increasing gap between the top and the bottom income strata is itself a further aggravating factor in the degradation of quality of life measures such as those associated with health and illness. Sociologists like Richard Wilkinson argue that it is the degree of inequality in a society more than GDP that most determines measures of human well-being (Wilkinson, 1996; (Wilkinson and Pickett, 2008). Researchers often use the Gini coefficient to measure inequality across countries. It calculates income inequality on a scale of 0-1; a society with complete equality would have a score of 0.0, and one with complete inequality, that is, with all wealth going to top strata would score 1.0. The US currently scores .49, the greatest overall income inequality among the world's global north countries (China scores .55, Italy scores .33).

Since the 1990s, the one to twenty percent has taken increasing percentages of total income and wealth in the US. This is due to tax breaks to upper income strata, declining rates of unionization, neo-liberal deregulation, and continued gains in labor productivity, almost all of which have accrued to capitalist profit rather than higher wages. At the same time, wages and salaries have stagnated for at least three fifths of the income earning population since at least the 1990s.

Income data collected by the federal government divides the wage-earning population into twenty percent segments, often referred to as the "fifths", which show percentages of total income for each segment.

Speaking generally, since the 1990s the percentage taken by the top 20% of wage earners has grown precipitously, the bottom two have shrunk, and the middle has stagnated. Workers can roughly be said to occupy the first three fifths of the income ladder. The lowest fifth received 4.3% of all total income in 1980 and 3.6% in 2000. The Occupy Wall street movement called attention to class inequality by focusing on the 1%. The 1% have indeed gobbled an increasingly huge percent of income-17% and wealth, 34% in recent years. But the top ten and top twenty percent have increased their share of wages wealth as well. The top fifth took 43.7 % of all salary and wages paid in 1980. By 2000, their share increased to 49.6%, and by 2010 slightly more to just over 51%. At that point the most substantial gains went to the top one percent.

Let's take a quick look at the bottom strata of the income hierarchy, those occupying the bottom fifth, especially its lowest earning levels. Poverty is calculated by the U.S. government on the basis of food and other living costs in relation to income (a very faulty formula that vastly underestimates true food and living costs). Currently, the poverty line is around \$25,000 for a family of four. The official poverty rate in the US is currently around 12%, or about 36 million people. A more reasonable estimate would be around 25-30% (25% would represent 88.5 million people). Many of these are children or retired people who would not be in the labor force. There are also millions barely above the poverty line whose actual life conditions resemble those under the poverty line, but yet who do not count as such in government statistics and do not qualify for public assistance. For those that do qualify, assistance payments have been slashed by successive waves of "welfare reform" from Clinton's deep cuts in the 1990s to the latest round of cuts announced by the Trump government just before the pandemic hit the US. Among the working age poor are long term or intermittently unemployed workers, while many others are low wage workers in fast food or retail, members of the informal economy, or "gig" workers. Many of these low-wage workers earn less than the

poverty line and have no sick days, pension, or health insurance. Although Obama care added millions to the ranks of the uninsured around 20 million remained uninsured.

Class and Health

Against the backdrop of this quick look at the U.S. class structure, we can take a look at health data in relation to class. Overall, the middle and upper-class self-report good and excellent health in far greater percentages than lower income strata. According to a report by the Center for Society and Health, "(p)oor adults are almost five times as likely to report being in fair or poor health as adults with family incomes at or above 400 percent of the federal poverty level . . . and they are more than three times as likely to have activity limitations due to chronic illness . . . Low-income American adults also have higher rates of heart disease, diabetes, stroke, and other chronic disorders than wealthier Americans (Woolf et al, 2015).

Health in a society can be measured by looking at several factors such as infant mortality, life expectancy, obesity rates, and more, not to mention multiple mental health factors. Here we take a brief look at two of these, infant mortality rates, and life expectancy, (both of which correlate with many other factors). Studies published as early as 1901 in York, England showed clear patterns linking class distinctions, living conditions, and infant mortality. A study conducted in York, England that collected data on infant mortality rates from three distinct working-class populations. The three groups differed according to living conditions and income with the poorest living in the most cramped and crowded conditions.

The infant mortality rate was highest at 247 per 1,000 live births in the poorest areas, 184 per 1,000, and in the highest, 173. The study noted that the infant mortality rate among servants living in the cleanest and least crowded neighborhoods and homes was 94. Research on 21st century populations reveals the same correlations. According to a study

published in 2001, "In England and Wales infant mortality in 2000 was 3.7 per 1,000 among infants born to fathers in the top social class and 8.1 among those born into the bottom class. Among single mothers, the rate was 7.6. . . " (National Statistics, 2001).

Life expectancy is also a prime measure of overall health in a population. Globally, the average life expectancy is 72 years according to the World Health Organization (WHO.) All of the countries with the longest life expectancies are in the global north with Japan and Hong Kong at the top with 84 plus, while all of the countries with the shortest are in the global south. Average life expectancy in the Central African Republic is 52.8 years.

In the US," (a)mong men born in 1960, those in the top income quintile could expect to live 12.7 years longer than men in the bottom income quintile" according to a report by the non-partisan Congressional Research Service (Isaacs and Choudary,2017). All of this suggests that in general (individual exceptions aside), the poorer one is, the worse health they can expect; while, the richer one is, the better health they can expect. There is even evidence that the top half of the one percent have better health than the bottom half of the one percent.

Race and Health

Race also correlates closely with health and disease but less so than class. African Americans have much lower life expectancy and higher infant mortality rates than whites. Overall life expectancy in the US is around 78 years. Most studies find a 4-5-year gap between whites and blacks in general. Black men live around nine years less on the average than white men. In the US, according to the Center for Disease Control (CDC) the infant mortality rate (percentage) (measured as the number of infants who do not survive until their first birthdays), for African Americans is 11.4%, while the rate for whites was 4.9%.

Part of the poor health picture of

communities of color reflects the overlap of race and class among blacks, Latinx, Asians, and Native people, all of whom are overwhelmingly working class and overrepresented in the ranks of the poor. Blacks and Latinx according to standard data collection are three times more likely to live in poverty than whites (the poverty rate for blacks and Latinx has been around 25% for most of the past few years, as opposed to 8% for whites). Blacks have far higher diabetes rates than whites, and diabetes puts one at a distinct risk for the coronavirus. Research has shown that the connection between race and health is weaker than the relationship between class and health. In other words, ". . . higher-income blacks, Hispanics, and Native Americans have better health than members of their groups with less income, and this income gradient appears to be more strongly tied to health than their race or ethnicity. (Urban Institute,2015).

The high incarceration rates among African Americans will also result in higher infection and mortality rates in the black community since prisons are hotbeds of communicable disease transmission and prison hospitals are much less equipped to handle a sudden influx of patients. The myriad ways that people of color experience cultural racism in their interactions with health care workers at all levels including with physicians will continue to aggravate conditions for people of color during this crisis. And, all of the problems associated with poverty, malnutrition, and inequality will likely be magnified in unsanitary, closely packed Immigrant detention centers.

Class, Race, and COVID-19

The particularities of coronavirus will accentuate class and racial differences. For example, although people of all classes use public transportation in big urban centers, working people are more likely in some areas to take public transportation and less likely to have the option of driving their own cars, making them more vulnerable to infection. The automobile ownership

rate per household in Milwaukee's poor black neighborhoods for example, is 20-30%, while it is 90% in the white and wealthier areas. An article in the March 30 New York Times suggested that the use of long-distance public transportation that people in sprawling Detroit use to get from crowded neighborhoods to work may be factor in the sudden spike in coronavirus infections in that heavily black, working class, and poor city. Drive-up testing will be less effective in cities and counties where larger shares of the population do not have access to vehicles.

Data on the relationship between class, occupation, and the ability to self-isolate and therefore stay safe, during the pandemic is already being assembled. Information on fifteen million smart phone holders' movements reported in the New York Times online edition on April 3, shows a clear occupational and class divide (the New York Times article did not discuss sampling issues). "(A)cross America, many lower-income workers continue to move around, while those who make more money are staying home and limiting their exposure to the Coronavirus". For example, "The wealthiest people, those in the top 10 percent of income, however, have limited their movement more than those in the bottom 10 percent of the same metro areas."

According to a study by the Data Center, a research group in southeastern Louisiana, "(i)ncome and poverty measures can indicate the extent to which a community may be able to successfully adhere to COVID-19 mitigation measures (such as "stay at home" and "quarantine family members who are sick"). (Data Center, March 25, 2020)." Allison Plyer, The Data Center's chief demographer told the New Orleans Sun Herald (April 3, 2020) that "(w)hen people live in poverty, they live in much closer quarters, with potentially four people in a one-bedroom house," said "That means it's very hard to quarantine. A major way the virus is spread is among family members." On the other hand, middle-class white-collar workers on the other hand, often live in larger living spaces. During the 1990s, newly built home size jumped from 1,800 feet to

2,400 feet, giving more room to quarantine a sick household member (Frank, 2015). These homes were most likely bought by those in the upper reaches of the third and lower levels of the fourth fifth.

Being poor, a person of color, or both makes one more likely to be homeless, or to live in a homeless shelter in close quarters. The vast and sudden unemployment and low wages, particularly in high rent areas, increase the likelihood that people will live in crowded living spaces making maintaining social distancing especially difficult. Living in close quarters during this stressful time is also putting women facing domestic violence at greater risk according to numerous sources that have documented a surge in violence against women and LGBTQ people specifically connected to the COVID-19 crisis (Guardian, April 3, 2020).

<https://www.theguardian.com/us-news/2020/apr/03/coronavirus-quarantine-abuse-domestic-violence>.

Likewise, blue collar workers often work in closer quarters than white collar workers (some “pink collar” jobs in jobs gender-typed occupations such as secretarial work have also been moved to remote, while others such as house cleaning work, have not). In the current situation large swaths of the work performed by white collar employees has moved to online in comfortable homes (highly paid physicians working with Coronavirus patients are an exception), while working class and most people of color work in blue color jobs that can’t be performed at home, which has led to unemployment for some and the prospect of working under dangerous conditions for others.

The digital divide puts many poorer and rural working people and people of color without access to internet or quality internet or computers, smart phones, tablets, etc. in danger of not receiving the best and most up to date health related information. It also compromises their ability to follow school work that has now been shifted to a remote online format, which will further aggravate educational inequalities along class and race lines. Twelve percent of all US households

lack internet access according to the US census. Only 61% of all households in New Orleans, a city with an overall poverty rate of 23.8% (2018), and one of the worst hit by COVID-19 have broad band. Twenty percent have no internet connection whatsoever (Data Center, 2020).

According to the Data Center in Louisiana, early studies of morbidity rates in Wuhan, China “have identified high blood pressure, diabetes, . . . coronary heart disease, chronic obstructive pulmonary disease (COPD-often associated with smoking), chronic kidney disease, and cancer as pre-existing health conditions that may increase the likelihood of severe outcomes for people who get infected with COVID-19” (Data Center, 2020; Yang, 2020). African Americans, and to various extents low income people of all races, suffer from these. Approximately, one third of all African Americans in Detroit suffer from asthma and diabetes.

Education, which overlaps with class, though it is a somewhat independent factor in health, is another fault line of health and social inequality linked to class. Currently, 12% of the US population does not have a high school diploma and 65% do not have a college degree. While 32% of white adults have a college degree, as opposed to only sixteen percent of blacks and nine percent of Latinx.

Poverty, however measured, is usually accompanied by malnutrition which in turn has a negative effect on many if not all measures of health. It certainly affects infant mortality and ultimately life expectancy. Malnutrition, with its connection to class and race inequality could very well be a significant factor regarding Coronavirus. Even some of the guidelines for who to prioritize in case of ventilator shortages will reflect class and race inequalities. An article published on CNN online on March 27, reported on a letter that held that “patients with severe heart, lung, kidney or liver failure, severe trauma or burns, or terminal cancers may be ineligible for a ventilator or ICU care. These patients will instead receive “pain control and comfort measures.” These conditions are far more prevalent in lower income strata

and communities of color.

Access to Health Care

The United States is the only country of the global north without a universal health care system.

In the US the poor and near poor are most likely not insured as most people in the US receive health insurance at workplaces with over 250 employees, and workers of color are more likely to work in smaller businesses that do not offer insurance. Theoretically, unemployed, underemployed, and workers working in small businesses exempt from the ACA would qualify for Medicaid, but many are excluded in part because Medicaid has been cut and Republican governors have refused federal offers to expand it.

Since lack of regular access to health care compromises overall health and likely weakens the immune system, layers of the population without regular access to health care can be expected to be more susceptible to getting sick from the virus and to experience its worst effects.

Restricted access to health care would seem therefore to be a major reason for health inequalities along class lines, and certainly plays a big part in class and health disparities. However, sharp health inequalities exist in other highly stratified capitalist countries of the global north, all of whom have some sort of universal health system. It was recently reported In England, a country with universal health care and GINI index lower than the US (.35 as opposed to the United States’s .49) but still substantial, that the high-income strata in England live ten years longer than working people and the poor. The reasons for this are multiple and cannot all be analyzed here, but the English example points to the great depth and breadth of the destructive nature of and deep unfairness of class inequality.

The lack of a universal health care system in the US is both an expression of the great class inequality in the United States and a cause for the poorer health of the working class and

poor. But, the example of England with its ten-year life expectancy gap from rich to poor attests to the depth of inequality in the sharply stratified societies of contemporary neo-capitalism. All of this means that being poor, a person of color, and/or a wage earner is an occupational health hazard in “normal” times, and even worse in the current crisis, a deep indictment of neo-liberal capitalist society. The much-touted high-quality Italian health care system had been subject to neo-liberal style cuts to public health for years in ways that badly aggravated the COVID-19 crisis.

According to a recent article on the crisis in Italy:

Our health care system was ravaged by a decade of funding and provision cuts, leaving it a shadow of its former self. 37 billion euros were cut and more than 70,000 beds vanished into thin air. ICU beds amount today to just 5,090, while the Ministry of Health states 2,500 more ICU beds are needed to tackle the crisis. The beds to population ratio is currently 3.6/1000, down from 5.8/1000 in 1998. ...

Last but not least here, as neoliberal cuts were being implemented, the system was increasingly fragmented into regional management, breaking up state management and hampering national funding system. This resulted in economically stronger areas getting more resources while weaker areas fell behind. Worse, in recent years, public financial support has flowed into a growing private health care system. Thus, the Italian healthcare system was not well equipped to respond to the crisis when it hit. Even after all this, the Italian health system’s greatest strength lies in still being a single-payer system... (Zecca [“Covid-19 opens up a new political period in Italy”](#)).

Similar deep budget cuts to public health systems have also happened in Britain, France and elsewhere in

previously social democratic “cradle to grave” welfare states that are now overwhelmed with Coronavirus patients.

The deadly combination of deep social inequalities, structural health care inequality, and neo-liberal cuts to the health care systems in the richest countries of the global north that the COVID-19 epidemic has revealed, powerfully underlines the necessity and timeliness of the central points of Bernie Sander’s program in his presidential campaign: universal health care and a redistribution of wealth and income through progressive taxation of the 1, 10, and 20%. His proposal for free college education is also essential because as has been suggested here education is also closely linked to health.

While a social democratic program would address the twin problems of income inequality and lack of a universal health care system, the tight connections between class inequality and health outlined here show that it is the existence of class divisions and therefore class society itself that inevitably denies the majority of society the means to healthy lives. The class inequalities that the COVID-19 crisis will expose means that only the elimination of penury and the drastic shrinking of social inequality, conditions which can only occur under socialism, can provide safe and healthy lives for all of the planet’s peoples.

8 April 2020

(Source [News Politics](#).)

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Murder by Sanctions

14 April 2020, by **Solidarity National Committee**

Among many underpublicized issues are the crippling, constantly tightening U.S. punitive sanctions against “enemy” governments including in particular Iran, Venezuela and Cuba. These sanctions were murderous before the coronavirus outbreak, particularly in regard to public health. Under present conditions, such measures border on genocidal.

It appears that Cuba, which has been under U.S. imperialist blockages for close to six decades, is avoiding the worst impact. Cuba has actually sent doctors to assist some worse-hit countries. (Trump’s near-total U.S. ban on tourism to the island may have been a medical lucky break, although economically ruinous.) But along with the collapse of oil prices, U.S. prohibitions of financial transactions are particularly catastrophic for Iran and Venezuela.

In the Iranian case, European promises to construct a bypass for commercial transactions in order to save the multi-party nuclear deal have fallen flat. It’s been an almost total, although largely predictable, failure of Europe’s ruling classes and governments to stand up against Washington’s dictates. Desperately needed medical supplies are simply unavailable, especially in rural Iran.

It can be argued that the Iranian regime was irresponsible, complacent and cynical in its early dismissal of the coronavirus disaster – particularly in the religious authorities’ refusal to close the shrines in Qom and mass gatherings there, which appears to have been an epicenter for the pandemic spread to Pakistan, Afghanistan and the Middle East.

But this says only that Iran’s rulers are (almost) as ignorant and bankrupt as Donald Trump himself – an impossibly difficult standard to match – and that some of its religious “leaders” are as criminal as those godly U.S. pastors who keep their megachurches open, and state governors who call churches “essential services” while forcing the closure of abortion clinics.

In the case of Venezuela, imperial criminality goes beyond even economic sanctions. Following the failure of last year’s abortive military putsch against the Nicolas Maduro government, the U.S. Department of Justice – a title George Orwell couldn’t have dreamed up – chose this moment to indict Maduro himself of drug trafficking.

Never mind, for example, the drug connections of the Honduran president and U.S. ally Juan Orlando Hernandez. The only purpose of the Maduro indictment can be to incite a second military coup attempt, with the incentive of a big reward for his extradition – which would provoke all-out civil war in a country already in a condition of medical and social near-collapse.

Imagine the refugee crisis in such a scenario. Isn’t that just what Venezuela and Latin America need at this moment of a spreading global pandemic for which many of their health services are desperately underprepared?

While the U.S. assault on Iran has a material geopolitical “logic” in terms of controlling oil supplies, Washington’s alliance with Saudi

Arabia and other strategic state interests, the anti-Venezuela campaign appears to be driven mainly by rightwing ideology run amok. It’s not a conflict that most of U.S. capital particularly wants or needs.

Nothing about Venezuela (sadly) is a “threat” to U.S. power in its ruined condition. If anything, history teaches us that wars and threats of war driven primarily by ideology are even more dangerous than those based on naked state interest, which are bad enough.

It’s important here to call out the bipartisan U.S. complicity in Israel’s blockade of Gaza, which – long before coronavirus – has destroyed the medical infrastructure serving Gaza’s desperately crowded population. While imposing brutal sanctions on other countries, Trump and much of the Congress are trying to criminalize the BDS (boycott/divestment/sanctions) campaign supporting Palestinian rights. The looming explosion of the virus in Gaza is an indictment of the so-called “international community” that deserves close attention in its own right.

In the present terrifying global circumstances, the deliberate destruction by sanctions of whole nations’ economies and health infrastructure is not only an attack against the peoples of those countries. It will have a horrific blowback effect on the entire international struggle against a deadly pandemic. The phrase “crime against humanity” has never been more apt.

14 April 2020

Source [Solidarity](#).

Coronavirus in the Netherlands

14 April 2020, by **Pepijn Brandon**

No Borders New: Why has the coronavirus spread so quickly, and Covid-19 deaths been so high proportionally, in the Netherlands? How many people are infected? How many have died? What do experts expect in the coming weeks in terms of how fast the contagion will spread.

Pepijn Brandon: Currently, on 11 April, the official death toll stands at 2,643 with a total of 8,386 patients having been admitted to a hospital with a proven Covid-19 infection. Slightly under 25,000 people have tested positive. Given the overwhelming numbers that we are faced with here in the US at the moment that might not sound as much, but you have to keep in mind that the Netherlands is a country of only 17 million inhabitants.

I think we should be very careful drawing conclusions based on the partial figures we now have, especially when making country to country comparisons. For one thing, we are still in the middle of developments. Also, it is clear that different countries have radically different approaches to testing and recording death rates. However, it is noteworthy that on both accounts, the official figures presented by the Netherlands are on the conservative side. Contrary to the WHO's advice of "testing, testing, testing," the approach in the Netherlands remains to test on a far more limited scale than most other rich countries. The official death rate of the National Institute for Public Health and the Environment (RIVM) in turn only includes those who have been clinically tested for the coronavirus. Meanwhile, the national statistical bureau (CBS) has measured a spike in excess deaths that is far higher than the official figure for the number of coronavirus-related deaths, admitting this weekend that the actual

death toll might be twice as high as the RIVM figures suggest.

NBN: What practical measures has your national government taken to respond to the crisis? Have they acted responsibly or were they unprepared? Briefly describe measures your government is taking now to contain the virus and treat people infected with Covid-19. Is there a state of emergency, are schools closed, etc.?

PB: The Dutch government has been notoriously slow in its initial response to the crisis. The first 12 cases were detected in February, and by mid-March the number of people hospitalized had passed one hundred with 13 people dying from the disease. Still, by that time the Dutch government was still advocating the controversial "herd immunity" strategy, keeping schools and large sections of the economy open. It only started backtracking on this strategy when the number of infected started to escalate rapidly, opting for what has been described as a "lockdown light." This included closing schools, bars and restaurants, and non-essential businesses that require personal contact, and restricting travel, but no restrictions on traveling inside the country or visiting public places. These followed only at a later stage.

NBN: How has your health care system responded to the crisis? What are your health care system's greatest weaknesses? What are its greatest strengths?

PB: There is no denying that the Dutch health care system has been overwhelmed by the coronavirus crisis, to the point where Dutch patients had to be transported to Germany where the ICU capacity is larger. There is a serious case to be answered here, which is not just about

government policy during the present crisis, but about the ravages caused by successive governments' extreme neoliberalism. Of course, we didn't need the coronavirus crisis to prove the dangers of combining market fundamentalism with the provision of an indispensable public service such as health care. In October 2018, two large hospitals filed for bankruptcy. When the then-Minister of Health Care Bruins, who belongs to Prime Minister Mark Rutte's center-right People's Party for Freedom and Democracy, was asked why he was not willing to save the hospitals in the same way that the Dutch government had earlier saved banks by injecting billions in tax money, his blunt answer was that "a collapse of the Dutch system of payments is incomparable to the care for patients, so I will not go there." The result was that from one day to the next, the two hospitals put a stop to necessary treatment of patients. Last year, an official committee concluded that the cold and business-like dealings with the hospital bankruptcy indeed had posed an acute danger to patients' lives.

It is incredible to see the Dutch government's reluctance to abandon this approach even in the face of an actual global pandemic. The most obvious case has been the lack of testing capacity. Until last week, even nurses and doctors in hospitals did not have access to sufficient tests. This was at first presented to the public as the natural result of the rapidity with which the crisis developed until it became apparent that the real reason was that almost all hospitals in the Netherlands were contractually bound to one particular pharmaceutical multinational, the Swiss company Roche, for an essential testing fluid. Only under great public pressure, and after losing much precious time, was the Dutch government willing to put pressure on Roche to make the method for manufacturing this fluid public. It did so at the same time as

installing a special task force for increasing testing capacity headed by Feike Sijbema, former CEO of the Dutch health multinational DSM which under his leadership worked in close partnership with Roche. It is not hard to predict that the “solutions” this task force now implements will be guided by the same underlying principals that produced the problem in the first place.

NBN: Describe the official political response to Covid-19 in your country from governing parties.

PB: The most remarkable aspect of the Dutch government’s response to the crisis, even in comparison to most of its nearby neighbors, is its absolute insistence on clinging to the most brutal expressions of neoliberal dogmatism, even in the face of this crisis. Overall, it has stuck to the deeply moralist, and shockingly ableist, line that stopping the spread of coronavirus is a matter of personal responsibility and individual behavior. The international response by the Netherlands has been especially cruel. This came to the fore during a sharp clash between the Dutch Minister of Finance Wopke Hoekstra and his Italian and Spanish colleagues over European Union (EU) loans to the most severely-impacted countries in Southern Europe. Reminding us of the despicable role that the Dutch government played in subjecting Greece’s Syriza government to EU financial dictates in 2015. Even in the midst of this pandemic, the Dutch government insisted on using emergency loans as a lever to enforce even more stringent austerity policies throughout the eurozone. Similarly, the Dutch government has put a series of extortionist demands on St. Martin and other Caribbean islands (territories that still have formal ties to the Netherlands) when they asked for financial support.

As the peddling of the notion of “herd immunity” shows, the internal policy of the Dutch government has hardly been geared towards saving lives. As in other countries, the economic rescue measures announced by the government are steeply skewed towards saving large corporations’ profits. For instance, the government is currently working on a rescue loan

of billions of euros for the Dutch airline KLM, while at the same time allowing the company to push through mass lay offs in the midst of this crisis. The government has also been reluctant to come to the aid of the self-employed, initially claiming that these workers were simply choosing not to earn a wage during a crisis. Yet successive governments in the Netherlands have pushed hard for the dissolution of standard employment relations in favor of self-employment, which often proves to be only a disguised form of extreme wage-dependency. For example, due to the state-led destruction of the public postal service, many workers in delivery nowadays are formally self-employed, while in practice they have become the new day laborers of the platform or gig economy. Of course, the Dutch government has not produced the Corona crisis. But it has produced the crisis behind the pandemic, a social breakdown that in all likelihood awaits us in the wake of the coronavirus.

NBN: What about the far right such as Geert Wilders’s Party for Freedom?

PB: The far right in the Netherlands, as their counterparts elsewhere, has from inception pushed the idea that the pandemic should be seen as a “foreign threat” that can best be fought by closing the borders and by a policy of “the Netherlands first.” Beyond that, the far right has in many ways been as erratic as the mainstream right, or as Trump for that matter, in veering from spreading panic and fake news to pandering to business demands to open up the economy as soon as possible. However, when tracing the impact of the global rightward turn on the politics of the coronavirus crisis, I think we have to look beyond formal responses and identify a deeper pattern. One of the most shocking aspects of public debates in the past couple of weeks in my view has been the extremely cavalier way in which politicians and media commentators are talking about the potential of mass death. The Dutch press at the moment is full of articles that unashamedly discuss to what extent rescuing the elderly and the sick is worth sacrificing the economy. I cannot see

this as separate from a global attack on the very notion of solidarity in favor of a deeply racialized, nationalistic rhetoric of “survival of the fittest,” that has been spearheaded by the far right globally. We are also seeing extreme economic liberalism, state repression targeting the control of individual behavior, and a far-right approach to the population are not at all mutually exclusive. But then, should that really surprise us? The particular kind of dystopia that we are currently facing has been long in the making.

NBN: How have trade unions responded to the crisis? Especially public sector, education, and health care unions? How have social movements (student, feminist, ecological, immigrant, indigenous, etc.) responded to the crisis? Are there any efforts to make demands for social justice, national health care, emergency economic measures for unemployment pay, stopping rent and debt payments, etc.?

PB: Overall, the scale of the crisis, combined with the notion that you should not politicize a national disaster, has made the parliamentary left all but invisible in the last couple of weeks. Nevertheless, I think we should not underestimate the degree to which the elements of a response that puts human lives above profits, one that is based on solidarity, exist everywhere. Even without a strong formal political expression, this has an impact. That the government had to backtrack on its “herd immunity” strategy is largely due to parents’ and teachers’ refusal to keep their children in school. Nurses and doctors are fighting for better equipment while fighting to save lives. Trade unions have been vital in highlighting the lack of testing in homes for the elderly and other non-hospital care facilities and exposing the government’s lack of responsibility. Even today the government’s policy means that around one million workers in “non-essential” tasks are still being forced to go to work. My Facebook wall is full of heartwarming examples of solidarity and mutual aid.

But it is also clear that the coronavirus has raised the stakes. We are facing a

crisis in our public health system combined with a pandemic, an economic crisis, a crisis of social reproduction and care, and a crisis in the valuation of human life in general. Even mainstream publications are now saying that it is unfathomable that post-coronavirus society will return to business as usual. However, unless we

collectively develop a politics that is capable of responding to the crisis at each level, the real danger is that we will be forced into a society that retains all the worst features of what went on before. And this will only be intensified by unprecedented levels of austerity to pay for the losses that big

business has suffered in the last couple of months by national governments wielding greatly enhanced powers, a far right preying on people's deepened fears, and massively enhanced techniques for exploitation outside the workplace.

Source 12 April [*No Borders News*](#).

Putin's Virus Moment

14 April 2020, by [*Ilya Budraitskis*](#)

Against this background, the measures announced were striking in their ambiguity: the following week was declared "non-working" – which in fact meant that the State refused to reimburse private enterprises. Instead of a countrywide state of emergency, local authorities were given the opportunity to determine the threat and impose restrictive measures themselves. Measures aimed at helping those affected by the loss of income and employment also seemed negligible (especially when compared to public expenditures in Europe and the United States). For example, small businesses were offered tax exemptions for the quarantine period (which meant that they would have to pay after the end of the pandemic), and unemployment benefits were raised to an officially established minimum subsistence level of 12,000 roubles (approximately 150 euros), which does not correspond to the real cost of living. All this happens in a situation where, according to official data, the majority of the country's citizens have no savings at all and live from salary to salary.

At the same time, local authorities in megacities such as Moscow, St. Petersburg and Nizhny Novgorod have introduced a system of restrictions on any exit from the house, including high fines for breach of quarantine (never announced at the national level).

The state of emergency was not declared by the sovereign, but actually

became a state of reality. This represents not only an interesting casus of political philosophy but also means that the state is completely unwilling to assume the social and economic costs of expanding its sovereignty.

On April 2, the president appealed to the nation again, saying that the regime of "non-working days" will continue until the end of April. There were still no one-time payments that could support the lives of people who had lost at least one month's salary and without receiving exemption from rent or loans. Employees of state enterprises, who are guaranteed to keep their salaries for this period, seem to be in a more protected position than those employed in small and medium-sized enterprises (which account for about 40% of all hired workers in the country).

Nevertheless, the collapse of oil prices, on which the Russian budget is fully dependent, and the subsequent depreciation of the ruble by 20% will inevitably lead to higher inflation and corresponding losses in revenues, which the government also does not intend to compensate. Even in the extraordinary conditions of the threat of a pandemic and the current standard of living, the Russian authorities are probably determined not to spend the so-called "National Welfare Fund", which over the years has accumulated excessive income from oil exports and which currently stands at \$123 billion.

Thousands of negative comments on youtube at the last speech of the president show that people have understood the meaning of the strategy correctly during the pandemic: the state takes a step back, relying on the instinct of minimalist survival in Russia during the crisis. At the same time, the costs of unpopular police control measures and restrictions should be borne by local authorities, without putting Putin's still high personal popularity at risk.

Surprisingly, the state's strategy during the pandemic has focused primarily on returning to the issue of constitutional change proposed by Putin earlier in the year, as if nothing had happened after. The most important point of these changes was the so-called "reset" of the presidential term, which would have enabled Putin to hold office for another 12 consecutive years after the end of his current term, initiating a de facto lifetime rule. The proposed amendments have already been adopted by Parliament and were to be approved by a special plebiscite to be held on 22 April, until at least its postponement owing to the pandemic. Nevertheless, at the end of March polls showed that less than half of Russian voters supported the nullification of presidential term limits. How these figures will change is difficult to say, but it is already clear that Putin's current position is unlikely to increase his support.

Instead of celebrating its twentieth

anniversary, his political and economic system is entering one of

the worst crises in its history.

Source [LeftEast](#).

6 April 2020

In Belgium too, the virus strips away the mask

13 April 2020, by **Mauro Gasparini**

A minority government ... with special powers

While Belgium was well on its way to achieving a new record for the absence of a full-fledged federal government, the Charles Michel coalition having fallen in December 2018, the coronavirus crisis exerted extreme pressure on the various parties who were in negotiations, which led to a compromise agreement that does not offer sufficient democratic guarantees. The Flemish Christian Democracy, which had been dithering for months in these negotiations by linking its fate to that of the hard-nationalist right of the N-VA, has finally accepted the idea of a coalition of crisis around the Liberal Prime Minister Sophie Wilmès, previously responsible for current affairs. Almost all the parties represented in Parliament, including the Social Democrats and the Greens (with the exception of the N-VA and the far right Vlaams Belang - the PTB abstained) have given a vote of confidence to the Flemish- and French-speaking Liberals and to the Flemish Christian Democrats who made up the outgoing federal government.

The same parties, with the N-VA this time, have granted special powers to this government, for three months, renewable once, which allow it to govern by decree, bypassing the agreement and control of Parliament. An executive that the Socialists and

the Greens refused in extremis to join and which is therefore ultra-minority in its representativeness in Parliament ... but responsible for " saving " the population from the epidemic. Having had bad poll results, which show it being overtaken by the Vlaams Belang, even more to the right, the N-VA zigzags, going from the quasi-denial of the epidemic to demands for curfews ... before Jan Jambon, minister-president of the Flemish region envisaged a rapid return to work, like Trump. The nationalists have lost a battle against the liberal "neo-federalists", with a clear strengthening of the central government in this crisis. The PTB, which abstained on special powers in Brussels and in Wallonia, maintains its position of left opposition to the government, but wants to be " constructive ", when almost all the parties are singing the chorus of national unity.

The government therefore has broad room for manoeuvre, including endangering provisions of the labour law, even though some safeguards have been provided on wages. It also enjoys the support of the media, and of a large part of the population as well: Wilmès, the first woman to lead Belgium, plays on a " benevolent " communication to better sow confusion in people's heads. But this well-groomed communication is beginning to crack as the weeks go by and the problems of the policy of neoliberal-authoritarian management of the crisis become more and more visible.

Confined of all lands, keep working

As Daniel Tanuro has summed up so well , the government is trying to limit the damage of the epidemic by minimizing the costs for capitalist enterprises and their activities (thus by exposing a large number of workers), remaining within the neoliberal framework, by making health workers and " families ", in other words women, bear the brunt of care work, while completely stopping social and cultural life. It is therefore a neoliberal, patriarchal and authoritarian capitalist response to the epidemic.

The government decided on March 12 to generalize containment a little faster than in southern Europe, but it is also the only (or almost the only) response to the epidemic. This rapid confinement, in an epidemic with an exponential curve, can make a big difference. It is impossible to say at this stage if that will be enough to avoid carnage, but there is reason to doubt it! The problem being that great vagueness has accompanied the measures of " social distancing " which have been adopted in several stages. And even after March 12, when all social and cultural activities were cancelled, priority was given to maintaining as the last and only activity at risk, productive economic activity. The words of warning and the contradictory injunctions of the Wilmès team are accompanied by threats of repression: the police,

clearly visible on the streets, have the power to impose immediately payable fines or criminal charges against those who do not comply with confinement. Young people from lower-income neighbourhoods, often trapped in buildings that are too small and unsanitary, are stigmatized, and informing on one's neighbours is becoming partly acceptable. Racism lurks in ambush behind "national unity". Belgian-Moroccans do not see any effort by the government to get them repatriated from Morocco and undocumented migrants are hunted down and dispersed by the police in a fairly violent fashion.

Faced with this, social struggles have multiplied in many enterprises (Audi, Volvo, Decathlon, Leonidas, Neuhaus, Brice, Bombardier, Safran Aero, Sonaca, Arcelor and many others) where protests and work stoppages have forced the National Security Council to tighten the screws on certain companies and sectors. The union leaderships have agreed with the bosses to establish a list of essential sectors where work can be authorized with fewer - and therefore more dangerous - measures of social distance. This list includes sectors that make sense (food, pharmacies and health care for example) but the devil is in the detail. For example, all petrochemicals are considered "essential", including those used to make perfume or plastic gadgets! The president of the FGTB (Socialist union) called for the union of "the whole of society. Politicians, employers, unions", also welcoming the unity of political parties. In the retail distribution sector, anger is raging at the lack of protection of the staff, at infernal work rates, at the hours that the government is proposing to extend from 7 am to 10 pm! Among home helps, there is also the anxiety of seeing their meagre wages cut even more or of risking working without protection in many cases.

Deep cuts in healthcare and

failure of the invisible hand of the market

"Now we give treatment, afterwards we settle our accounts," insists the collective "Health workers in struggle". Indeed, there will be accounts to settle! To start with, the fact that Wilmès was Minister of the Budget in the previous government, which carried out cuts in health (health insurance, hospitals, etc.) of more than 2 billion euros, while she spent 35 billion euros to order F-35 warplanes. But that is not all: not content with having weakened and undermined the health system, which is starting to show signs of deterioration, the same people who form the Liberal-Christian team of Wilmès, and in particular the Minister of Health De Block, haven't added a euro to the health care budget. Worse, since hospitals have had to postpone a gigantic number of medical operations to focus on Covid19, they might not receive any money (since they are funded according to the number of operations ...) and their government has ... lent (!) a billion euros so that they do not file for bankruptcy. A billion that will have to be repaid. So, settle the accounts, especially as the health sector has been fighting for almost a year for better working conditions and wages. The pressure from the mobilizations of the two unions and the collective "Health workers in struggle", combined with the absence of a federal government in recent months, had enabled Parliament to release a "health workers" fund of 400 million euros. Union officials have unilaterally given it to the government for the fight against the coronavirus, hoping that the government will remember it in the future. No comment!

The government has set up a daily public information session, every morning at 11 a.m., on the state of the epidemic in the country, but the country still does not have, two months after the first case was recorded in early February, the ability to conduct sufficient tests. While official figures show 12,775 cases, numerous testimonies pour in from

people with all the symptoms of Covid19 but who are not tested for lack of sufficient equipment. Epidemiological studies mentioned in the mainstream media indicate a probable figure of between 100,000 and 400,000 people infected in the country. Likewise, the government, which has taken the liberty of using geolocation data from telephones to trace movements, gives no clear idea of the areas most affected, or of hospitals that are near saturation point. Behind Wilmès' speeches, the reality on the ground is expressed by numerous statements in the media and on social networks, denouncing in particular the enormous health risk run by exhausted health personnel who are largely under-equipped in protective material, such as the 3000 workers from the Centre Hospitalier Universitaire de Liège who took the Prime Minister to task.

Our activists who are working in the health sector confirm: we've had enough, we are likely to reach risk saturation point in the coming days, the personnel work even when they are sick and some of them blame themselves for risking not only their own lives, but especially those of their patients and colleagues.

There are reasons enough to be angry. When doctors warned Minister De Block on February 28 about the pandemic, she amused herself by twittering against "drama queens" and "whining" journalists. The government has so much trouble obtaining FFP2 masks that it had to take responsibility from De Block and transfer it to an ad hoc minister, with so far still as little success. The neoliberal government, endowed with special powers, is counting on private initiatives to produce sufficient masks and disinfectant gel. The "invisible hand of the market" shows here all its ineffectiveness: the price of this material is soaring, and the people who need it most don't have it! Part of the population and prisoners are sewing masks to try to protect themselves. A distillery has begun to produce hydroalcoholic gel and the FGTB of the Metal sector (automobiles, etc.) has asked companies to produce respirators. The situation is also very bad in retirement homes and other health centres, not to

mention prisons, which have already experienced some riots, and detention centres for migrants. The fight against the prison state and for the regularization of all undocumented people is more relevant than ever.

It is a macabre style of management that the government is imposing: an ethics commission was mandated to establish criteria when health workers will have to decide who to try and save and who to let die. The Belgian geriatric society has recommended not to hospitalize residents of retirement homes.

Government solidarity with the bosses

The governments are endowed with special powers, notably to loosen the purse strings in order to support bosses struck by the cessation of their activities and who must recognise, sorry about that, that without workers, no wealth is produced. Bonuses have been granted to the sector of hotels, cafes and restaurants in particular. Although the cultural and sports budgets are being maintained in the short term, nothing is certain for the months and the year to come, given the historic scale of the recession which is beginning. More than a fifth of workers in the country, or 1,200,000 people, are today paid by temporary economic unemployment benefits (70 per cent of gross salary as against 65 per cent before the epidemic), that is to say by Social Security, which risks seeing its deficit also soar. Among precarious workers and the informal sector, it is social carnage. Many of them are left with little or no resources for the coming weeks and months. Stress increases with social isolation and family responsibilities, since most children are at home. The question of rents is posed with force. Some emergency measures have been taken by the government, such as the requisition of hotels for the homeless in Brussels, the creation of a Doctors without Borders centre in the capital and the suspension of evictions and water and energy cuts. But this is still largely

insufficient compared to needs, certainly when the crisis is going to set in and debts are going to accumulate.

In this context, the government does not for a second envisage going back on the billions of tax gifts given to bosses in recent decades, nor obviously creating a wealth tax: on the other hand neoliberal economists are flying kites by evoking cutting by half the annual holiday period for example, potentially offset by the distribution of bonuses to households. In some companies, the bosses do not hesitate to put their workers on temporary unemployment while demanding that they continue to work from home: the arrogance and indecency on the part of employers never take a break.

Resistance and solidarity

Faced with this crisis of unprecedented magnitude, which is developing at a speed that can become paralyzing, while confinement and the ban on assembly threaten to atomize the social body and the resistance, there are glimmers of hope. First, as in other countries hit by the virus, concrete and local solidarity is being organised: mutual assistance in the neighbourhood for shopping or meals, producing handmade masks, support for the homeless and undocumented, psychological support, solidarity funds, etc. Social media groups serve as an information exchange and support interface. In Brussels, more than 15,000 people have registered. A quarantine watch has also been set up to document repression and the risks of authoritarianism that exist today.

In many neighbourhoods people go out every evening to make noise, to make music, to chant slogans in support of the health sector. Unfortunately, although militant collectives like "Health workers in struggle" and "Spread solidarity not the virus" provide political content in solidarity with the popular classes that are critical of the government, the latter, well helped by the mainstream media, is trying to depoliticise and take over this initiative to make it a

simple "thank you to the health workers", so much so that some health workers have expressed their uneasiness with thanks that do not replace either protective material or inadequate staffing. And because it is not up to the resourcefulness of the people to systematically compensate for the blunders and failures of neoliberal governments.

Furthermore, social struggles have passed into virtual mode (15,000 people participated in a virtual anti-racist event, for example) and flyposting (on windows, balconies, walls, such as for the right to housing last weekend or even visuals of "Health workers in struggle". Activists organize themselves in videoconferences when the means are available, meetings, conferences and political education are organized in the same way and with the same possibilities and limits. Social and political life is certainly hard hit during a pandemic, but it is far from stopping. We also note that what had become inconceivable today for 99 per cent of political forces, such as the reconversion of factories for immediate social needs, the shutdown of non-essential sectors, price controls, emergency social measures, etc., is now of the order of the "realistic" or "conceivable" in particular by health workers, but more widely in society. The inequalities aggravated by confinement constitute another element of a possible radicalization of a part of the population in the face of a system which shows in a striking manner that it is not there to protect either human life or nature. It is starting from the resistance of workers to stop production, from the exasperation of workers on the front line (health, cleaning, food), from feminist demands for the care given to humanity and social life to come before profit, that the anti-capitalists and revolutionaries of Belgium and elsewhere are drawing up a programme of rupture, looking to the mass mobilizations which will have to resume as soon as possible. Because we really will have to settle our accounts.

Article 1 April 2020, figures updated 10 April.

The Triple Crisis - A Conversion Strategy From the Shop Floor

13 April 2020, by **Lars Henriksson**

Today all attention is understandably focused on the imminent threat of covid-19, but the crisis forces us to question the dogma that the market is supreme. Even firm believers of neoliberalism are forced to question the usefulness of deregulation and what it has produced.

* In Sweden a flabbergasted right-wing leader realizes that his party voted to establish a private pharmacy market ten years ago, resulting in abolishing the country's entire medical stock.

* In Great Britain a dazzled prime minister finds the country with a severe lack of ventilators and turns to the auto industry for help.

* And in the United States the Mad Twitterer claims that he has ordered General Motors to produce ventilators when in fact GM was already developing the supply line and design to produce them. GM projects manufacturing 30,000 ventilators by August. Another GM facility is producing Level 1 face masks and plans to produce 1.5 million a month. For its part Ford has already delivered a million face shields.

For the first time since World War II we can see Swedish industries convert their production to fulfill social needs, albeit on a tiny scale and under less than revolutionary circumstances: chemical plants making hand sanitizer, clothing manufacturers switching to protective equipment, truck companies sending employees to assist with logistics in the production of ventilators, cabin crews being quickly retrained to work in health care etc.

This is of course petty in comparison with what is possible and necessary. Despite all rhetoric about the state of war we are in, the difference between

government intervention over production today and then is telling. At that time the government took command over industry and it was placed on war footing. The division between corporations was torn down; those who failed to comply didn't receive the raw materials they needed.

Companies who had been in fierce competition, jealously guarding their secrets, were forced to share research data and technical knowledge. This saved millions of hours duplicating engineering work and was a blow to the generally held view that competition leads to efficient production. Above all this applied to the U.S. auto industry, the country's only sector wholly and rapidly converted to war production.

So too, within two years, the British economy was converted from an unregulated market to one with strictly planned production. Without nationalizing private corporations, the British War Ministry took de facto control over what was to be produced, by whom and when. There too the auto industry was at the center.

Today we need this same kind of a centrally organized conversion to stop, in the shortest span of time, climate disaster. Under the global financial crisis of a decade ago we could glimpse the possibility of taking common international measures. In April 2009, within months after the crisis hit, the G20-countries decided on emergency measures totaling 1 100 billion dollars to save the banks. This was a sum already dwarfed by the 1 500 billion bailout the U.S. government passed. There is no lack of means, knowledge or tools for such drastic measures. What's missing are political forces that dare to implement measures, no matter how necessary, contrary to the needs of capital.

Although we can now see examples of what is possible to do, it doesn't mean that this kind of decisiveness will be directed towards the climate disaster the minute the Covid-19 crisis subsides. On the contrary, strong forces will prevent attempts to draw these lessons. Instead, the actions of our governments will aim to return to "business as usual." They are willing to give market forces ever more leeway, increasing production and emissions as fast as possible. They are willing to jump start the economy to feed capital's restless quest for profit, and to do so at the risk of pushing climate justice further down on the agenda.

We have seen this scenario before. In 2007 the issue of the climate was on everyone's lips. After decades of scientists' increasingly hoarse cries and fifteen years after the world's governments had promised to stop global warming, the issue reached the front pages when The Intergovernmental Panel on Climate Change (IPCC) shared the Nobel Peace Prize with Al Gore. Gore toured the globe with his film *An Inconvenient Truth*.

Then the U.S. real estate bubble burst. The financial market went into a death spiral and dragged down the world economy. Suddenly the climate issue went out the window. All that seemed to matter was how to support banks and industrial corporations.

In most countries, the fundamentalist attitude of "let nature take its course" was quickly replaced by various support programs. Notably in the US after the auto industry's historic flagship, General Motors, collapsed into George W Bush's unwilling arms. On the other hand, the Swedish right-wing government was stuck to the dogma and let Saab Automobile

succumb. Ironically Volvo Cars was saved at the last minute by Chinese state capital, although wearing its private costume.

When the economic wheels eventually started spinning it was as if there had never been any climate discussion. Corporate globalization had its heyday, driven by an unparalleled increase in fossil fuels. The few of us who had talked about conversion during the auto crisis in 2008-09 found even more deaf ears.

Just as today the downturn of 2008 made a small dent in the global warming curve. Before the crisis the atmosphere stood at 380 parts per million of CO₂. Today it's at 414, a nine percent increase. Then, as now, one of the main drivers was the auto industry. In 2010, 750 million passenger cars were driving on the roads, today the billion mark has been passed.

No one can have missed the restructuring of the auto industry has come up as their magic bullet contribution to curbing climate change: electrification (and corporate power...) But it's not that simple.

First, electricity must be produced. In a country like Sweden this is largely done through hydro and nuclear power, although that's not the case on a world scale. Despite all reports about the expansion of renewables, two thirds of all electricity are still produced by burning coal, gas and oil.

Second, every car comes fresh from the plant with a heavy carbon rucksack, that is, the emissions production causes. Electric cars carry twice as much CO₂ in their boot as a car with a traditional combustion engine. Recently a Swedish study estimated emissions from manufacturing batteries amounted to 150-200 kilos of CO₂ per kWh of battery capacity. This means, for example, that it would take eight years driving a Tesla S to compensate for all those extra emissions! Just as the auto industry's earlier lines of defense - denial, fuel efficiency and agrofuels - the electric car is launched to save the industry's profits, not to solve the climate crisis.

For some time now the auto industry has had a decline in production; the covid-19 virus has pushed it over the brink into a free fall. The question arises once again of how to handle this central machinery of mass production. But neither death by neoliberal "creative destruction" nor continued subsidies are satisfactory for an industry that could be a major driving force to push the planet into a climate Armageddon.

In practice the world's governments have already chosen to tow the auto corporations up from the ditch and onto the highway again. Yet this will lead to global disaster. The question of transitioning auto industry is doubly urgent, not only to avert an unsustainable industry but to save the jobs of millions of its workers.

A solution to the climate crisis takes more than social distancing, good health care and a vaccine, it calls for a fundamental change in the driving forces of production. It means moving away from the short-term hunt for profit and devise a social use within the boundaries of nature. In other words, this requires a total confrontation with the mighty capitalist powers that increasingly control the world economy. We must stop discussing climate transition as a technical issue and see it for what it is: a question of politics and class struggle.

We need to create a strong and well-organized pressure that can realize this transition. That means it must be tied to concrete demands the majority see are necessary. This will provide it with the social weight that enables us to take on capital. Whereas governments and corporate leaders are in complete agreement on limitless rescue packages for banks, big corporations and the capitalist system in general, we can't hope for any climate rescue package from that. The shift must be initiated from below and carried forward by massive popular movements.

In my 2010 book *Slutskört*, I argued for a popular alliance based on the workers of the industry, on our need for safe jobs, our knowledge and the social power we possess. We would start by treating the auto industrial

complex as a commons instead of a source of private profit. Rather it is an enormous social asset that society can put to use in developing goods to make a rapid transition of the energy and transit systems. We would need to carry this out with the same determination as a war conversion - locally, nationally and internationally.

The strong, vested interests of auto workers could be the driving force in that struggle. We are both people with a long-term interest in a society able to stop the climate disaster and as workers with an immediate interest in saving our jobs. Even if the auto industry will rebound from the present crisis it will probably be with a smaller work force. We can't afford to put our trust in those who presently occupy the driver's seat. They are interested in one thing only, increasing profitability. If there is a future for our jobs and our planet, we can't be cheer leaders for the bosses. If we and the planet are to survive, we need to independently develop our own plans, ones that serve social needs, ones that respect the resources of the natural world.

That way the false contradiction between the jobs of industrial workers and the environment can be resolved. Instead of putting our faith in the bosses we could be the heart of an alliance for good, safe jobs and a sustainable society. In our dual capacity as members of society and workers we have the necessary knowledge and skill of the production process and are in a position to fight for a conversion.

The vision of a future society is in sharper focus than it was ten years ago and, unlike then, we today have a possible ally in the global climate strike movement. A conversion strategy could be the foundation of a powerful alliance between auto workers and this youthful movement, an alliance that would be able to hit capital where it is most vulnerable, in the sphere of production.

Today much of what has been unquestioned during the triumphant years of the right is falling apart and the need for common decisions and democratic control has become more obvious than for several generations.

This opens for politics and movements to drive through a conversion of the

same magnitude as during WW2. The

conversion that then was possible for death is today necessary for life.

The real epidemics are social inequality and capitalist globalisation

12 April 2020, by **Klaus Engert**

In the year of our Lord 1348, there happened at Florence, the finest city in all Italy, a most terrible plague; which, whether owing to the influence of the planets, or that it was sent from God as a just punishment for our sins, had broken out some years before in the Levant, and after passing from place to place and making incredible havoc all the way, had now reached the west.

(Giovanni Boccaccio, Preface to the Decameron) [88]

Since the plague epidemic of 1348, to which Boccaccio refers, and which forms the framework for his Decameron, which started around 1350, knowledge of what caused it has made significant progress, but science has so far been unable to stop the periodic outbreak of epidemics and pandemics. The current SARS COVID19 pandemic was just as unavoidable as the plague or smallpox of earlier times, even though there have been warnings across the years of the imminence of such an outbreak (see below).

Why is the (medical) struggle against the coronavirus so hard to wage?

There is more than one reason.

First, it is a novel virus that, according to currently available knowledge, started as a zoonosis (a disease of animals) and then "spread" to

humans. There is therefore no natural immunity - immunity has first to be acquired.

Second, the virus has a rather low manifestation index, as far as we know at the moment. This is the index that indicates how many of the people infected with the virus actually fall ill. Some scientists assume that the current number of people who test positive must be multiplied by ten to twenty in order to obtain the real number of virus carriers. Approximately 80 per cent of those infected show no or only slight symptoms - but they are still, of course, contagious. (By way of comparison, the smallpox virus, which was responsible for numerous devastating epidemics worldwide until its eventual eradication, had a manifestation index of approximately 100 per cent, so that it was clear who was infected and who not.)

Third, the symptoms of the disease, especially in people who are only mildly ill, are very unspecific and similar to those of other common colds such as the flu, a banal irritant cough (or the symptoms of malaria, which affects the countries of the global south). Here, too, the virus is decidedly different from plague or smallpox, where the symptoms were clear and also visible, and the diagnosis was correspondingly easy.

Fourth, there is no effective vaccine or real treatment - that is the case, incidentally, with most viral diseases. The treatment currently consists, in principle, of symptom cure: even when artificial ventilation is carried out, the aim is simply to prevent lung failure until the immune system has dealt

with the virus itself.

Fifth, for the reasons mentioned above, those affected can only be definitively identified after the development of a reliable test procedure, but testing capacities are still far from adequate. And last but not least, the make-up of a society has a decisive impact on the control options and the spread - but more on that below.

From an epidemiological point of view, there are only two options in such a situation, options that are currently being used in combination, so to speak: on the one hand, the identification and isolation of those potentially infected in order to interrupt the chain of infection, i.e., quarantine, and, on the other, the hope for the development of so-called herd immunity until such a time as an effective vaccine or medication reach the market. Broadly speaking, herd immunity means a distribution of immunity that protects a population from new infections. It is believed that around 60-70 per cent of the population must be immune to reach this point, i.e., 60-70 per cent must have come into contact with the virus.

The first option (quarantine) is currently being used to a greater or lesser extent, in the form of self-isolation, curfews, etc. etc. However, this cannot really bring an end to the pandemic. So far, stopping pandemics has only been possible in the case of diseases in which (as we have seen) carriers are clearly identifiable, and can in almost all cases be isolated.

The inherent contradiction in the second option is that rapid herd

immunity (always provided that the infection confers a lengthy period of immunity, which is not yet proven, but which is likely to be so, given experience with similar viruses) can only be achieved if you let the pandemic run its course, i.e., you do not practice isolation. However, this will naturally lead to a high number of deaths, even if, when analysing the relevant data (and taking into account the possible number of unreported cases - see above), mortality is lower than in the case of other viral diseases such as Ebola and (in my personal opinion) not so very much higher than that of the yearly bout of influenza. This view is supported by the fact that the mortality rate in various countries fluctuates strongly and that this correlates with the number of tests carried out: the country currently carrying out most tests worldwide is Germany (although even Germany is carrying out far too few tests to provide more precise figures regarding infectivity, morbidity and mortality - for better data, we must await the completion of current sample tests, including in Munich), and at the same time the mortality rate is significantly lower than elsewhere.

However, since, unlike in the case of influenza, there is no immunity in the population to COVID19, the absolute numbers would actually be very high. Assuming that 60 per cent of Germans become infected and the current mortality rate of around 1.5 per cent (in Germany) is confirmed, we can expect 720,000 victims. With a mortality rate of 0.1 to 0.2 per cent, as assumed in the case of influenza, there would still be 48,000 to 96,000 deaths.

Incidentally, epidemiologists also argue vehemently about whether masks should be generally required, given the contradiction I have just mentioned. From the point of view of herd immunity and taking into account the very different amount of risk of disease in different age groups, targeted protection of only the corresponding risk groups would be more appropriate under certain circumstances. But the current strategy follows a different course: it attempts to slow the spread of the virus, which cannot be prevented for

the reasons given, in such a way that on the one hand you gain time to develop vaccines and medication (a lot of work is going on both in that regard and also in regard to rapid testing procedures, which after all guarantee high profits) and, on the other, reduce as much as possible the burden on the health system, which has already collapsed in some regions and has been the subject of deep cuts in recent years.

Capitalism and pandemic

Thus far one might conclude that the disease that has affected the entire globe within a matter of weeks is a result of fate. But that is only partly true. Apart from the regularly rampant conspiracy theories that arise in such cases, for example at the time of the HIV and Ebola epidemics (for Boccaccio, it was the wrath of God, today the viruses are said to have been bred in secret laboratories - either by the CIA or Israel, and most recently as a result of radiation emitted by the new mobile communications standards), it remains to be said that the emergence of the pandemic, the problems in combating it and, in particular, the exorbitant speed at which the virus is spreading cannot be understood without looking at the current state of the global economy - i.e., capitalism.

Regarding origins, in the TAZ (31 March 2020), the biologist Simone Sommer of the University of Ulm, who has been focusing on "Ecohealth" since 2014, rightly pointed out that epidemics are more likely to occur in severely disturbed ecosystems with low biodiversity - together with a mutation, i.e., a genetic change in a pathogen, by means of which it is able to jump from a wild animal, e.g., a bat, to which it is adapted, across the species barrier into humans. This observation is also the basis for the warning by people like Bill Gates, in 2015, that new pandemics were imminent. The progressive environmental destruction caused by the destruction of the globe as a result of capital valorisation with, as a consequence, the extinction of species is one of the causes of the emergence

of epidemics like the current one.

However, factory farming also favours such developments, as we saw at the time of so-called swine flu, because the crossing of species boundaries happens not only between animals and humans but also between different animal species (quite apart from the fact that humans are, ultimately, just one vertebrate species among many). The individual components of the swine flu virus, for example, came from a North American swine influenza virus, the virus of a North American avian influenza, a human influenza virus and a swine influenza virus from Eurasia, which had not previously occurred in the USA. The evidence suggests that the virus originated in a part of Mexico that is home to huge pig and poultry farms.

As for combating problems, even the most ardent advocates of a globalized capitalist economy are beginning to see that the centralized production of medical supplies in low-wage countries such as India and China - be it consumables such as masks and protective clothing or drugs and vaccines - may be excellent from the point of view of maximizing profits but poses a high risk in times of pandemics: 80 per cent of the production of this material has so far been in China and every second vaccine dose worldwide was made in India.

The ridiculous attempt to remedy the situation by publishing instructions in all the tabloid media on how to make face masks illustrates the helplessness of the national authorities towards the normal mechanisms of international capital utilization and their consequences. Incidentally, side effects in the context of the current pandemic have also been recorded for medications that have nothing to do with the fight against the coronavirus, since the area affected most, Wuhan, is also home to some of the largest pharmaceutical factories, which produce a significant part of raw material for the entire world. (However, it is doubtful whether the currently announced intention once again to decentralize production, as soon as the gun smoke has dispersed, will ever be realized.)

The rate at which an epidemic or pandemic spreads depends on several factors, including: first, of course, the contagiousity of a pathogen, i.e., how easily it can be transmitted along the different, typical pathways of infection. Not all bacteria or viruses are equally contagious: not all are passed on directly from person to person. Some pathogens are only transmitted through intensive contact, while others are so highly contagious that staying in the same room is enough to produce an infection. The smallpox virus, for example, can trigger an infection by air up to a distance of 20 meters. Second, the extent to which a larger number of people will come into contact with the pathogen matters. And here we meet up with the problem of mobility. The global expansion of the capitalist mode of production is not only associated with a rapid growth of the population and its concentration in urban centres (which also plays a major role in the transmission of diseases), but also with an equally large increase in mobility. On the one hand, there is forced mobility (rural exodus, migration, displacement, migrant labour, etc.), and on the other there is voluntary migration, so to speak, in the form of mass tourism. Added to this is the mobility of goods traffic. (The ecological consequences of this process need not be dealt with at this point, but it should be pointed out that environmental degradation as a result of the expansion of the relevant transport infrastructure contributes significantly to the rapid extinction of species and, as mentioned earlier, the occurrence of pandemics like the present one.) Even if pandemics existed in past centuries, they spread rather slowly compared with today, and epidemics were often limited to a given area and over a longer period of time, unless additional factors led to an abrupt increase in mobility – usually as a result of wars.

To paraphrase a famous sentence by Max Horkheimer: If you don't want to talk about capitalism, then you should also stop talking about pandemics.

Pandemic, racism and the global south

The hype surrounding the corona pandemic cannot be explained by the absolute numbers of sick and dead. Let's venture a fictitious calculation: provided that the virus spreads unchecked globally without any measures to curb it until it reaches so-called herd immunity (see above), then a current global population of 7.75 billion people would have to have at least 4.65 billion infected. If one assumes a mortality rate of 2 per cent (which corresponds to that of influenza), 93 million would die worldwide until the pandemic "dried up", so to speak. If we take a mortality rate of 2%, 93 million persons would die worldwide, until the pandemic would "dry out". With a mortality like in influenza (0,2%) we still would have 9.3 million fatalities That would, mind you, represent the worst case, and would only occur if, on the one hand, no measures were taken and, on the other, no vaccines or medicines were developed in the foreseeable future – which is rather unlikely, since trillions of dollars are currently being spent worldwide on combating the pandemic and its economic consequences. On the other hand (as of 7.4.2020), we have had about 1.4 million infected and 82,000 deaths within 4 months of the outbreak of the pandemic. Even if these figures, especially with regard to sub-Saharan Africa, must be doubted (there is hardly any testing capacity, for example, in Nigeria, where there are currently nine laboratories for 200 million inhabitants), one should compare the efforts and funds currently in use to those expended in the fight against other global mass diseases.

The infectious disease with the highest mortality worldwide is still tuberculosis. According to the WHO's (World Health Organization's) TBC 2020 report, 1.2 million people who were HIV-negative died in 2018 from TBC as well as an additional 251,000 people who were HIV-positive.

Between 2010 and 2018, 4.26 million people died of malaria worldwide, an

average of 500,000 a year – 24 per cent of them in Nigeria alone (67 per cent of them children under the age of 5).

According to the WHO, around 228 million people were infected in 2018, which means that the mortality rate was (and still is) just over 0.2 per cent.

The two diseases mentioned have three things in common: first, they are actually easy to treat, second, the fatalities primarily affect the poor, and third, they are mainly located in the global south. Malaria has been eradicated in Europe since about 1950, while TBC also predominantly affects the south (mainly Africa), with the exception of Russia, where it is increasing.

The example of malaria:



The reason why the corona pandemic causes such excitement is simply that it affects the industrialized countries of the north. As long as diseases remain confined to the poor countries of the South, efforts to bring them under control are nowhere near as extensive. Global solidarity and the "we are all one world" will only be conjured up if a pandemic threatens to cripple those who benefit from the poverty of others. Every year, the WHO has to beg for the money needed to fight malaria, TBC and other diseases that can be treated and prevented in the regions of the south – if you compare this with the amounts now being used against the consequences of the pandemic, it is actually peanuts. And at the same time, people like Trump threaten to end payments to the WHO. This is the racist component of the current disease control strategy.

And there is something else too: the path of containment mentioned at the outset affects different regions very differently and with very different consequences for the individuals concerned. In the countries of the south, attempts are currently being made to copy the recipes used in the north, i.e., border closures, curfews and business closures. The difference

is that there is no money for accompanying measures (or if there is, it is not being spent). In countries where the overwhelming majority of the population have no unemployment insurance, and work mainly in the informal sector and have practically no financial reserves, such a strategy leads to (even greater) misery. In Lagos/Nigeria alone, 5 million people out of 20 million work as day labourers, and all the street vendors, taxi drivers, etc. who work in the informal sector also live with their families, from hand to mouth. The current curfew robs them of any

income. This will inevitably not only lead to hunger but also to increased crime and presumably to social unrest (which can already be observed in places). The unmistakable presence of the military on the streets of Lagos and in countries such as South Africa, Uganda or Kenya, where there have been several fatalities as a result of the curfew, shows that governments are well aware of the danger.

In view of this, it is fair to ask whether, in the end, more people will die from the risks and side effects of the control measures in such countries

than from the pandemic itself. To be sure, in such an event, there will be none of the daily updates complete with nice tables of the sort provided by the Robert Koch Institute or Johns Hopkins University.

I will leave it at that, except to close with the final sentence of Giovanni Boccaccio's Preface:

It pains me to linger in such great misery for so long.

Translated by Gregor Benton for International Viewpoint.

On Social Reproduction and the Covid-19 Pandemic

11 April 2020, by **Marxist Feminist Collective**

Thesis 1 Capitalism prioritizes profit- making over life- making: We want to reverse it

This pandemic, and the ruling class response to it, offers a clear and tragic illustration of the idea at the heart of Social Reproduction Theory: that life-making bows to the requirements of profit-making.

Capitalism's ability to produce its own life blood—profit—utterly depends upon the daily “production” of workers. That means it depends upon life-making processes that it does not fully and immediately control or dominate. At the same time, the logic of accumulation requires that it keeps as low as possible the wages and taxes that support the production and maintenance of life. This is the major contradiction at the heart of capitalism. It degrades and undervalues precisely those who make

real social wealth: nurses and other workers in hospitals and healthcare, agricultural laborers, workers in food factories, supermarket employees and delivery drivers, waste collectors, teachers, child carers, elderly carers. These are the racialized, feminized workers that capitalism humiliates and stigmatizes with low wages and often dangerous working conditions. Yet the current pandemic makes clear that our society simply cannot survive without them. Society also cannot survive with pharmaceutical companies competing for profits and exploiting our right to stay alive. And it is apparent that the “invisible hand of the market” will not make and run a planet-wide health infrastructure which, as the current pandemic is showing, humanity needs.

The health crisis is thus forcing capital to focus on life and life-making work such as healthcare, social care, food production and distribution. We demand that this focus remains even when the pandemic has passed so that health, education and other life-making activities are decommodified and made accessible to all.

Thesis 2 Social reproduction workers are essential workers: We demand they be recognized as such in perpetuity

While most commodity-producing companies lacking workers have seen their profits and stock values drop precipitously, they find themselves beholden to the people-making organizations, communities, households and individuals. But, given capitalism's need to prioritize profit-making over life-making, such organizations, communities, households and individuals are barely equipped to meet the challenge. It is not just that Covid-19 has taken a toll on healthcare, public transit and grocery store workers, various community volunteers and others. Years and years of dismantling essential social services in the name of austerity means that social

reproductive workforces are smaller than they used to be, and community organizations fewer and less well resourced.

To compensate for decades of neglect in a crisis, many capitalist states and corporations are shifting their priorities, but only partially and temporarily. They are sending cheques to households, extending unemployment insurance to precarious workers, ordering automakers to switch from producing cars to producing masks and ventilators. In Spain, the state temporarily took over for-profit hospitals; in the US, insurance companies are forfeiting co-payments for Covid-19 testing. Among other things, this shows just how readily available and plentiful are the resources to actually meet people's needs when there is political will.

We demand that workers in social reproduction sectors—nurses, hospital cleaners, teachers, garbage removal staff, food makers and supermarket employees—be permanently recognized for the essential service they perform, and their wages, benefit and social standing be improved to reflect their importance in maintaining society as a whole.

Thesis 3 Bail out people not banks

Our rulers are devoting far more resources to bailing out businesses, in the hope of staving off an utter collapse of capitalist value. The very profits produced, we remind you, by the labor power that social reproductive labor supplies. CEOs of hotel and restaurant chains, tech and airline companies, and more are throwing millions of workers off their payroll, while largely preserving their own hyper-inflated salaries and benefits. This is because the capitalist system requires that the contradiction between life and wage labour always be resolved to the benefit of capital rather than people's lives.

We demand that all financial resources and stimulus packages be invested in life-making work, and not

in keeping capitalist companies running.

Thesis 4 Open borders, close prisons

This pandemic is hitting immigrants and detainees very hard: those who are stuck in prisons or detention centers with indecent hygienic conditions and no health resources, those who are undocumented and suffer in silence for fear of seeking help and getting deported, those who work in life-making activities (health and social care, agriculture, etc.) and are more at risk of being infected because they have no choice but go to work (lacking adequate or any protective gear), those who are in transit between countries trying to reach their families, and those who cannot leave their countries because of travel bans and sanctions.

Pandemic or not, Trump will retain the sanctions against Iran (where infection rates and deaths are skyrocketing). And neither Trump nor the European Union will pressure Israel to lift sanctions that rob the 2 million people imprisoned in Gaza of much needed medical supplies. This differentiated response to the pandemic draws upon and reinforces the racist and colonialist oppression that is capitalism's underbelly.

We demand that healthcare needs take precedence over any immigration regulations, that those imprisoned for most crimes be released immediately and alternative compassionate sanctions are found for those who are sick, that detention centers and other carceral institutions aimed at disciplining rather than nourishing life be closed.

Thesis 5 Solidarity is our weapon: Let's use it against capital

The pandemic has revealed to the world how working people in a crisis

always get by through a wide and creative array of survival strategies. For most, that has meant relying on immediate friends and family. Some, however, are managing through mutual aid initiatives. For the homeless and those capitalist society has rejected as a burden, support has come from heroic initiatives of social reproduction volunteers who are offering to others nothing less than the right to life. Neighborhoods across the UK are creating Whatsapp groups to stay in touch with the most vulnerable and help them obtain food and medication. Schools are sending food vouchers to poor families with children eligible for free meals. Food banks and charities are seeing the number of volunteers rising. Social reproduction commons are arising as an urgent necessity. But we have also learned the lessons of the past: we will not allow capitalist governments to use social reproduction commons as an excuse for the state's withdrawal from responsibility.

As socialist feminists, we need to push this further, to work together to call for public provision of all that is necessary for human life to thrive. This means building solidarity across the different communities that are unequally affected and resourced. This means supporting the most marginalized and arguing for those with any social resources—trade unions, NGOs, community organizations—to share and support those without. This means demanding that the state recognize social reproduction work as the cornerstone of social existence.

We demand that governments learn from the people and replicate in policy terms what ordinary people are doing to help and support each other.

Thesis 6 Feminist Solidarity against Domestic Violence

The lockdown measures adopted by most countries to contain the spread of Covid-19, while absolutely necessary, have severe consequences for millions of people who live in abusive relationships. Reports of

domestic violence against women and LGBTQ folk have multiplied during the pandemic as victims are forced to stay indoors with violent partners or family members. Stay-at-home campaigns that do not take into account the specific plight of domestic abuse are particularly worrisome in a context in which years of rampant neoliberalism have meant that funds have been withdrawn from anti-violence shelters and services

We demand that governments immediately reverse years of defunding of anti-violence services, and provide the resources agencies need to operate and widely publicize their helplines.

Thesis 7 Social

reproduction workers have social power: We can use it to reorganize society

This pandemic can, and should, be a moment when the left puts forward a concrete agenda for how to support life over profit in a way that will help us move beyond capitalism. This pandemic has already shown us how much capitalism needs social reproductive workers – waged and unwaged, in hospitals and infrastructure work, in households, in

communities. Let's keep reminding ourselves of that, and of the social power that such workers hold. This is the moment when we, as social reproduction workers, must develop the consciousness of the social power we hold, in our national contexts, at the borders that divide us, and across the globe.

If we stop, the world stops. That insight can be the basis of policies that respect our work, it can also be the basis of political action that builds the infrastructure for a renewed anti-capitalist agenda in which it is not profit-making but life-making that drives our societies.

April 3, 2020

Source "Spectre".

Covid-19: the ecological dimension

10 April 2020, by **Alan Thornett**

Such pandemics, we have to be clear, are an integral part of the global ecological crisis we are facing, and must be seen and treated as such. They are not just happening at the same time.

They are on a par with the other existential threats to life on the planet that we face such as pollution (particularly of the oceans), global warming and climatic chaos, the mass extinction of species, the fresh water crisis, plus the melting of the ice sheets and the rising sea level. This pandemic joins those as a reflection of the age of the Anthropocene – a geological age defined by the impact human beings on the planet.

Pandemics of dangerous 'crowd infectious' diseases of this kind present a challenge that only well-resourced governments with well-developed social and economic policies can address. Free-market, small-state, neoliberal, capitalism has been exposed for the deadly and reactionary ideology it always was. Under this situation, ultra-right

ideology kills even more people than usual.

In Britain, Jeremy Corbyn – and by implication the Labour election manifesto – have been dramatically vindicated in terms of the need for massive investment in health and social services. Those on the right who ridiculed him in last year's election campaign (as well as Bernie Sanders in the USA) as the last of the big spenders have been forced not only to eat their words but to vigorously carry out many of the policies they vilified. Corbyn is absolutely right to insist on this.

Whilst all this creates important opportunities for the left – with the rise of grassroots collectivism and social solidarity – its response to the virus so far has, in my view, fallen short of the mark.

The left has rightly castigated governments for being unprepared, acting late, and causing thousands of unnecessary deaths. It has rightly challenged the capitalist system for

creating the social conditions under which such pandemics can flourish. It has also called it out for its pollution of the planet, its industrialised agriculture, its deforestation, habitat destruction, and its endemic mistreatment of animals both wild and domesticated.

It has rightly pointed (in Britain) to 10 years of deliberate and devastating Tory/Lib-Dem cuts which have left British society vulnerable to dangerous pandemics of this kind. It has denounced the breath-taking incompetence of the Johnson government, its criminal (and social Darwinist) herd immunity policy, its scandalous down-grading of testing at the time that it was crucial – plus its failure to provide basic life-saving protection equipment to millions of NHS and social care workers.

It is also clear that the economic impact of this pandemic is going to be massive. Low-paid, young, black, migrant and women workers will be the hardest hit by the shutdown of businesses including restaurants,

hotels, pubs, retailers and transport services. In fact, low earners are seven times as likely as high ones to work in a sector that has shut down. According to the Institute for Fiscal Studies a third of the bottom 10% of earners worked in the worst-hit sectors, against one in 20 (5%) of those in the top 10%. [89]

These are good responses from the left – but there is a problem. We as left ecologists cannot (or should not) reduce our analysis of this pandemic (or pandemics in general) to how adequately (or otherwise) various governments have responded to them once they are up and running. This is important but it is not fundamental.

Our starting point has to be where these pathogens come from in the first place, what drives them to become a pandemic, and why such problems are they getting more frequent. We have to have an exit strategy from such pandemics and we have to discuss the kind of societal changes that will have to be made if we are to reduce the risks from such pandemics in the future.

Pandemics not new

Pandemics (and endemics), it is true, have been around for a long time. They emerged with the development of agriculture, around 12,000 years ago – which led to a substantial rise in the global human population. Such infections had been restricted during the hunter-gatherer era by its lack of human population density.

The American anthropologist and writer Jared Diamond, in *Guns Germs and Steel*, puts it this way: “The build-up (of population) began with the rise of agriculture starting about 10,000 years ago and then accelerated with the rise of cities – starting several thousand years ago. He goes on: “Why did the rise of agriculture launch the evolution of crowd infectious diseases? One reason just mentioned is that agriculture sustains a much higher human population densities than does hunter gathering – on average 10 to a 100 times higher. In addition hunter gatherers frequently

shift camp while farmers are sedentary and live amongst their own sewage, thus providing microbes with a short path from one person’s body into another person’s drinking water.”

And further: “If the rise of farming was a bonanza for microbes, the rise of cities was a greater one. As still more densely packed human populations festered under even worse sanitation conditions... Another bonanza was the development of world trade routes, which by Roman times effectively joined the populations of Europe, Asia, and North America into one giant breeding ground for microbes.” [90]

The first recorded pandemic (bubonic plague) was the ‘Plague of Justinian’ – which took place under the Roman emperor Justinian the first, from 541 – 542 AD, in the Byzantine Eastern Roman empire. It hit Constantinople in particular, but also other port cities around the Mediterranean. It was attributed to the bubonic plague and wiped out 25-50 million people in a year. The Black Death (a type of bubonic plague) killed a quarter of Europe’s population between 1346 and 1352. It fed on urbanisation and the growth of European cities, some of which lost up to 70 per cent of their population. The development of trade routes between such cities globalised the problem.

The (misnamed) Spanish flu epidemic killed 21 million at the end of WW1. It was fostered in the overcrowded and disease ridden trenches of the Western front and then carried home by demobilising troops. This flu was also particularly destructive because food shortages during WW1 had further weakened the working class in particular who had been living in deprivation even before the war.

The first possibility of a medical fight-back against dangerous pandemics came with Edward Jenner’s discovery in 1798 that cowpox provided protection against smallpox, which led to a vaccine. In 1959, the World Health Organization (WHO) launched a huge campaign to globally eradicate smallpox. In 1980, smallpox was declared eradicated – the only human disease that has been eradicated to date.

Today, however, most of the pathogens are still winning, and despite the rise of modern medicine in the 20th century they are more dangerous today, in terms of the future of modern humans, than at any time in history.

The roots of the problem

Starting from this perspective, the left should pose the following questions:

- How do pathogens of this kind, particularly ‘zoonotic’ pathogens – diseases, viruses, bacteria and parasites – that cross the species divide from wildlife to human beings, arise in the first place?
- What is the driving force of such pandemics once the cross-over has been made?
- Why have such pandemics become more frequent and more dangerous during the 20th century and why is this trend continuing into the first part of the 21st century – despite the efforts of modern medicine to contain them?
- What societal changes would have to be made in order to reduce the likelihood and impact of such pandemics?

There are, in my view, four major factors driving this.

First – globalisation

The first factor is globalisation, not just of the world economy but of the totality of human activity, with mass transportation – national and international – providing a high speed transmission belt for pathogens and pandemics: air travel in particular. According to the International Civil Aviation Organization (ICAO) the total number of passengers carried on scheduled air services was 4.3 billion in 2018, which is 6.4 per cent higher than the previous year. The number of flight departures reached 37.8 million in 2018, a 3.5 per cent increase.

Second – our unacceptable relationship with nature

As ecosocialists we have to reject the totally unacceptable relationship that we (as modern humans) have with the rest of nature on the planet. In fact the impact is gigantic.

A sobering estimate, of this impact, is

contained in a research paper entitled 'Scale and Diversity of the Physical Technosphere: A Geological Perspective', published in the *Anthropogenic Review* of autumn of 2016. It was the work of a panel of 25 scientists, including Jan Zalasiewicz from Leicester University, who was its corresponding author. It shows that what it calls the total physical technosphere - the sum of the material output/physical infrastructure/waste (landfill for example) of contemporary human society, including power stations, roads, buildings, vehicles, plastics etc., weighs in at 30 trillion tonnes - or 4,000 tonnes for every living person.

The impact of climate change on dangerous pandemics this is addressed by Jem Bendell - the author of *Deep Adaptation: A Map for Navigating Climate Tragedy* (2018), in an article on his blog. He argues that climate change is making humanity more vulnerable to this and other viruses.

He argues that: "Prolonged changes in rainfall and temperatures, their increased variability and the shifting of seasons, aren't sustainable for trees and other vegetation. That means the insects and animals living in those ecosystems are suffering. Biodiversity loss is already huge, as we are living through a mass wildlife extinction event (Diaz, et al 2019). The reduction of the total number of wild animals like birds and bats has implications for our exposure to disease. Why? Because these are 'reservoir host populations' for pathogens, and the fewer birds and bats there are, then pathogen concentration and mixing tends to be higher (for reasons of lowered genetic diversity and easier spread). That increases 'spill over risk' for zoonotic infectious diseases to humans (Evans, et al 2020). [91]

It is a persuasive argument. Animals of all kinds, wild and domesticated, are abused by human kind beings on an industrial scale, not least in terms of industrialised agriculture - meat production in particular- which creates the best conditions for animal viruses to cross-over to humans. Some of the major killers of human beings in recent history - smallpox, flu, TB,

malaria, measles, and cholera - evolved from animal crossovers but are now mostly confined to humans.

Today, 70 billion land animals (i.e. excluding fish) are slaughtered every year for human consumption - often under appalling conditions. This figure has doubled in the last 50 years, and is set to double again by 2050. Two-thirds of these animals are reared by intensive methods - or concentrated animal feeding operations (CAFOs) as they are known in the trade.

The case that Bendell sets out may well be a part of the picture in terms of Covid-19. There is, however, in my view, another factor which in the end is more decisive in this: this is the numbers and density of the human species itself.

Third - urbanisation and population density

The source of today's Covid-19 pandemic, according to the WTO (and accepted by Bendell), is believed to be a densely packed "wet market" in Wuhan where multiple species of animals - mammals, fish and birds - both dead and alive, are held in vast numbers and in close proximity, including species not normally in close proximity. At the same time all this is taking place in a city with a large high-density population, factors which appear to have combined to create the optimum conditions to transfer of viruses between species.

Covid-19 originated from a virus carried by bats that mutated to humans using pangolins as a transition species - both of which were sold in the market and butchered on site. The SARS virus, in 2002, also an acute respiratory syndrome, was likewise endemic in bats in China and is thought to have transitioned to humans via civet cats.

Having jumped species, pathogens need a minimum threshold of human population density in order to survive. Jared Diamond points out that measles is likely to die out in any human population of less than half a million people in close proximity. What's true of measles is true of other infectious diseases throughout the world.

The policy of social spacing currently being carried out by governments around the world in both a recognition of the role played by population density and an attempt to find a temporary 'solution' to it. As the mayor of New York, Bill de Blasio, said recently, as Covid-19 cases multiplied and made the city the epicentre of the pandemic in the US: 'Our enemy is population density: we used to like it, now it is killing us.'

Northern America is the most urbanised region of the planet, with 82 per cent of its population residing in urban areas, whereas Asia is approximately 50 per cent urban, and Africa remains mostly rural with 43 per cent of its population living in urban areas in 2018 (United Nations, 2018)

In the early part of the 21st century the urban population outstripped the rural population of the planet. Since then two thirds of the annual global population increase, of 70 million people, goes to feed the growth of the big, mega, and hyper cities. Today 55 per cent of the global population is urbanised, which is expected to rise to 68 per cent by 2040. The 20th century is thus tailor made for infectious disease pandemics unless we are prepared to make major changes.

Ashley Dawson in *Extreme Cities* points out that in the period from 1900 to 2013 the density of the human population, via urbanisation and the emergence of mega-cities, far outstripped its numerical growth. [92] Whilst the size of the human population expanded 4.5-fold during this period- from 1.5 to 7 billion the global urban sector of this grew from 225 million to 3.6 billion - a 16 fold increase.

Fourth - giant cities

Rapid urbanisation has brought about ever bigger/megacities - like Wuhan, where the coronavirus started, which has 11 million inhabitants - the equivalent of London and Birmingham together. Big cities not only emit the most CO₂, they present the most advantageous conditions for pandemics to develop as well.

There are 33 megacities in the world

(with populations of over 10 million) – this is expected to rise to 43 by 2030. Within that there are 21 hyper cities globally – with over 20 million inhabitants. They are Tokyo-Yokohama with 37.9 million, Jakarta with 30 million. Delhi with 29.3 million, Seoul with 26.1 million, Shanghai with 25.4 million, Karachi with 24.3 million, New York City with 23.6 million, and Mexico City with 22.2 million.

These cities are socially and economically diverse. Some have advanced economies and facilities with high standards of living and good public services; others have vast impoverished shanty towns. They share one thing in common, however. Their high population densities make them more vulnerable to pandemics of dangerous pathogens than they would otherwise be. New York is a current case in point.

In *Planet of Slums* Mike Davis describes it this way: “Ninety-five per cent of this final buildout of humanity (population increase) will occur in the urban areas of developing countries, whose populations will double to nearly 4 billion over the next generation. Indeed the combined urban population of China, India, and Brazil already roughly equals that of Europe and North America. The scale and velocity of Third World urbanisation, moreover, utterly dwarfs that of Victorian Europe. London in 1910 was seven times larger than it had been in 1800, but Dhaka, Kinshasa, and Lagos today are each approximately forty times larger than they were in 1950. China – urbanising ‘at a speed unprecedented in human history’ – added more city dwellers in the 1980s than did all of Europe (including Russia) in the entire 19th century.” [93]

In terms of what this has meant for the expansion of slum dwelling, Davis

turns to the 1903 UN report UN-HABITAT, which concluded that Bombay (Mumbai) was the world capital of slum-dwelling with 10 to 12 million dwellers. It was followed by Mexico City and Dhaka, with 9 to 10 million each, and then, Lagos, Cairo, Karachi, Kinshasa, Sao Paulo, Shanghai, and Delhi with 6 to 8 million each.

Conclusions

The first thing is when in a hole; stop digging.

Reversing the process of urbanisation and population density is not going to be easy, but we have to start discussing it. As ecosocialists, this means putting a sustainable planet at the heart of everything we do. It means a new relationship with nature and a new model of society that does not result in ever bigger cities and ever more pollution. It means junking the throwaway society – and replacing it with one that is based on production for use rather than profit.

It also means stabilising human population growth. This means supporting a women’s right to choose, that is the right to access contraception and abortion facilities as well as opposing any enforced procedures or intimidation. It also means supporting impoverished women their fight to break free of poverty, to challenge the influence of religion and other conservative influences – such as patriarchal and religious pressure – and giving them full access to education and employment. (The right to choose, of course, includes the right to have children but evidence shows that given genuine choice the birth rate would fall.)

It also involves a revolution in the infrastructure, how we live; the size of

cities, how we travel, and what we eat. The task is gigantic but there is no alternative if we are to forge a sustainable future for the planet which resolves the contradiction between ourselves as modern humans and myriad of other none-human species we live alongside.

This involves many tasks: here are some of them:

- Zero carbon by 2030, with a new green energy infrastructure
- A massive extension of public ownership
- Ending deforestation and habitat destruction
- Reversing the pollution of the oceans
- Ending industrialised agriculture
- Localising agriculture to save food miles
- Eating a lot less meat
- Ending the trade in wild animals for pets, fake medicine or for bush-meat
- Curbing the growth in air-travel, introduce a frequent flyers levy
- Dramatically cutting back car use, particularly fossil powered cars

6 April 2020

Source [Socialist Resistance](#).

"We need to invent a collective re-appropriation"

9 April 2020, by **Olivier Besancenot**

How does the crisis that we are going through demonstrate the need to break with the current system?

Olivier Besancenot: It is now a question of survival. We could already sense how the liberal globalization phase of the past 30 years - a promise of stability for the financial markets - had reached its limits. Even globalized, capitalism has finished going round the world. It is not a bottomless pit. We saw it with the financial crisis of 2008, with the climate crisis and now with the health crisis. The system is dramatically confronted with its own contradictions. But, to use Walter Benjamin's formula, capitalism will never die a natural death. The challenge is to help it. Because the day after can, if we don't stop them, be worse than the day before.

How can the bill for the coming economic crisis not be presented to citizens?

Olivier Besancenot: The question is - who will have control over the production model in the world afterwards? A collective and public re-appropriation needs to be invented, in particular so that industry responds to social needs. It is not simply a question of reversing the privatization of public services, but of expropriating the private interests of certain sectors which are too important to be left to the crazy logic of the market economy. This logic now consists of forcing Airbus employees to manufacture war helicopters, while being unable to requisition a company, Luxfer, which is the only one able to manufacture oxygen cylinders. Otherwise, the workers, the oppressed, the exploited will surely pay a heavy social bill. This

is what is already starting with paid holidays and weekly working hours. The ecological consequences will also be catastrophic because the race for growth will resume. At the political level, liberal governments are already considering the strategy of shock to impose unpopular measures. Authoritarianism is only the flip side of the capitalist coin. There must be a shock of solidarity.

This shock of solidarity, through what measures will it concretely happen?

Olivier Besancenot: The day after begins now. The priority, particularly financial, must be given to solidarity. Starting with health services. Without delay, we have to make more beds available, take on the thousands of extra staff that are needed, get the protective equipment. The gap between what is promised and what is vitally necessary is intolerable. Just for the EHPAD (care homes for the elderly), we would need 2 million masks a day. Not to mention, in addition to the caregivers, all those whose work remains essential. The immediate challenge is to ensure that billions of public euros - taxpayers' money, therefore ours - are used for the health emergency. If we let them go to big business and the banks, they will be lost forever to the world afterwards. The government does not perceive the anger, silent but serious, that is welling up. To imagine for a single second that we could function as before with the dismantling of public health services, transport, education, social security, etc., is inconceivable. The government itself recognizes that the economic system will face a systemic crisis. It is admitting its flaws. This, from a government which, a few weeks ago,

invited, with its pension reform, the private insurance companies to take the place of our solidarity-based system.

This crisis demonstrates the concentration of power. What democratic ruptures are necessary?

Olivier Besancenot: It starts by lifting here and now the emergency law which allows the executive to govern by ordinances and decrees and to concentrate even more its power. At the political level, we are coming to a crossroads: either the temptation of the iron fist on the part of the ruling classes, or, on the contrary, the invention of a society that operates from the bottom up. This implies ending, among other things, the Fifth Republic and overhauling, in a constituent process, all democratic rules. But also changing things in the workplaces. Workers in both the public and private sectors have practically no say. The health crisis shows, for example, how they are best placed to know what protection they need.

After the historic social movement of this winter, how can we build the relationship of forces necessary for a "day after" that goes in the direction of progress?

Olivier Besancenot: If we hope for policies that impose a shock of solidarity and emancipatory, egalitarian, ecological policies, we must first be able to stop the steamroller of liberal and authoritarian policies. So, let all social, political and trade-union forces be united once and for all.

*Interviewed by Julia Hamlaoui for **l'Humanité** 7 April 2020.*

Faced with the Covid-19 pandemic, our lives are worth more than their profits

9 April 2020, by **Fourth International**

In 20 years, hospitals, doctors' and nurses' posts and tens of thousands of intensive care and resuscitation beds have been cut in order to comply with the rules of austerity budgets and the logic of liberal capitalism: to reduce the share of social protection in GDP. Apart from Austria, Belgium, Germany and Luxembourg, the other countries have only 4 to 11 intensive care beds per 100 000 inhabitants, with Portugal and Greece having the lowest figures. In these two countries, like in the Spanish state, France and the United Kingdom, the last decade has seen successive plans to abolish hospital beds. These policies, regularly denounced by health workers in recent years, have created a catastrophic shortage of resources to deal with the pandemic. Italy and France have already reached or exceeded their maximum capacity in intensive care units. Other countries will face the same situation in the coming weeks. Everywhere, governments have been slow to take steps to address this shortage with the necessary supply of protective materials (masks, gels, etc), essential equipment (beds, respirators) and emergency recruitment of hospital staff. Even in Germany, hundreds of thousand beds have been cancelled during the last two decades and the ratio of nurses for patient shows a lack of at least 110000 nurses.

At the same time, the primary obsession of governments and employers in Europe has been the spectre of recession and maintaining maximum production. When emergency measures to protect the population were imposed, several governments proceeded, and are still proceeding, with contradictory injunctions. Forced in several countries to decide on the containment of the entire population in order to slow down and reduce the

spread of the virus, they have continued to push for the maintenance of maximum economic activity, at the risk of workers' health, even in sectors such as automobile production, construction, the military industry or shipyards. Moreover, workers in the vital sectors (food production and distribution, roads, public transport, medical and nursing home staff) do not have enough individual protection equipment, and even the EU guidelines for safety -and health-legislation are widely ignored.

Some countries have issued decrees banning "non-essential activities", but always with the desire to maintain most economic production. France and Italy have banned certain redundancies, but these measures are limited in scope. In the Spanish state, workers affected by shutdowns will have to make up for hours not worked after the reopening of companies; although already in the last few weeks there have been 1.5 million redundancies, 500,000 of them in Catalonia. In Italy, pressure was strong from the bosses' organization Confindustria to continue business as usual in most economic sectors, but workers and combative trade unions have forced the government to partially reduce the number of sectors authorized to keep running. As of now however, even in hardest hit areas, a simple declaration to local police authorities allows many plants and factories to continue their activities. Workers' resistance is holding up too. In France it is often because of a lack of parts or immediate outlets that production has stopped. PSA and Renault are now trying to resume maximum activity. The French labour minister herself has exerted maximum pressure for the building and public works sector to resume its activity.

Millions of workers have been directly

dismissed or placed on partial unemployment with loss of wages. Precarious, temporary contracts have not been renewed. Millions of self-employed who did not have the status of employees have also found themselves without activity and without income. But for everyone, all expenses and loan repayments are arriving and have to be paid. All workers, regardless of their status (salaried, self-employed, unemployed, temporary, seasonal, etc.) must have their income guaranteed at 100%, with a minimum guaranteed for all based on the cost of living in the country. Profits and dividends should be used to finance this.

Workers living in precarious conditions, the homeless, and women are the first to be affected by the spread of Covid-19 and its containment. Precarious housing, cramped and unhealthy dwellings create one confinement for the rich and another for the poor. In Italy and France, the better-off have left the most exposed areas to isolate themselves in less exposed areas.

The Russian authorities have turned to repressive measures, imposing high fines for quarantine violations and strengthening the infrastructure of video surveillance and police control. At the same time, they have effectively refused any support for millions of workers in small and medium-sized businesses who have lost their income or jobs. However, three million labour migrants from Central Asia who cannot return home and many of whom have lost their jobs have found themselves in the most vulnerable position. The spread of the infection is threatening to result in large numbers of casualties, largely due to the brutal neoliberal hospital "optimization" programme that the Russian government has implemented in

previous years.

Similarly, domestic violence and feminicides are increasing everywhere in this situation.

In prisons, in many countries, prison populations and staff are also in overcrowded conditions without protective equipment.

Migrants, especially those stranded between Greece and Turkey, but also those crammed into camps, are at even greater risk because of their precarious physical condition. In most countries they were left without state or even NGO support, without food aid and crammed into centres where protection measures were inapplicable. Portugal has decided to regularize temporarily refugees present on its soil, but this concerns only those having already a regularization request confirmed by authorities.

Even more than other people, migrants are confronted with an unprecedented crisis in income, jobs, housing and hunger, and the "social support" sectors are collapsing for huge and diverse disadvantaged sectors of the population, national or non-national, migrants and refugees included.

At the same time migrants and those of migrant descent are very largely represented in the workforce of the essential sectors: health and care, public transport, food production and distribution, cleaning, just as these are also very largely feminized sectors.

The pandemic exacerbates class discrimination, and the popular classes, the most precarious, are those who are paying and will pay the heaviest price, especially in terms of deaths, for this pandemic.

At the same time, several governments, led by Italy and France, have tried to mask their negligence by a warlike posture, a recourse to the whole apparatus of nationalism: putting forward the army, the national anthem, the call for the Sacred Union, while class discrimination has never been so strong as it has been since the beginning of this pandemic. Similarly,

several governments have declared a state of emergency (Italy, France, Portugal, Spain), with the temptation to use this situation to limit social and democratic rights. Thus, in Germany, the Covid-19 crisis is being used to question or cancel different achievements of worker's movement: for example, in Bavaria, the Workers' Hours Act and in the whole of Germany, the Personnel Ratio Act in the nursing care sector. In France, a government decree has authorized companies to derogate from the rules on working hours and holiday entitlement, in the Spanish state and Portugal from the provisions prohibiting the right to strike in health and essential production or allowing bosses to break the strike. The Hungarian Parliament gave Orban full powers, shortcutting all democratic control.

This pandemic comes as no surprise, for many scientists and others. The massive growth of corporate agriculture with meat industry and deforestation, together with growing slums in megacities and global production chains, has created a ticking bomb of cultivation and global proliferation of new and unknown strains of viruses.

The European Union has made a sorry showing in the face of this crisis. The current situation is the result of many years of austerity policy: for instance, in the last decade, no less than 63 times, EU has demanded cutdowns on public health expenses in different countries. Far from setting up health coordination, pooling resources to combat the pandemic, governments started by closing national borders with "infected countries" and refused the help asked for by Italy, and took contradictory measures in a disorderly fashion. For weeks, Italy has received more help from China, Russia and even Cuba than from European countries. The lack of masks, tests and intensive care beds made a serious lockdown unavoidable in most countries, but even today there is no cooperation at European level to catch up. The only concerns of the European summits held in recent weeks have been to temporarily suspend budgetary rules and the ECB's granting of quantitative easing to save itself from the stock market and

financial crisis. Meanwhile, confronted to this demand, EU refused to loan coronabonds, directly guaranteed at European level, in order not to give low interest rate loans to Italy for instance. Cynically, the only proposal was to use the ESM, whose help is conditional on the austerity measures which have created the current catastrophic situation. At no time was cooperation in terms of health care, industrial resources and medical personnel envisaged and each State is pursuing its own safeguarding policy.

Emergency measures

The organizations and activists of the Fourth International in Europe are in favour of a programme of emergency measures:

- the injection of sufficient means for the mass availability of screening kits, the multiplication of resuscitation beds and respirators. Generalization to the entire population of suitable protective masks and biologic tests is the condition for confinement lifting. Immediate support for democratically controlled production of these means and for non-commercial research for medicines and vaccines against Covid-19.
- the cessation of all economic activities that are not essential to the daily life and health protection of the population,
- the 100% assumption of responsibility by enterprises and/or the State for the wages of workers who have suspended their activity, including precarious workers, temporary workers, domestic workers, self-employed workers and seasonal workers, without any obligation to take days off or to subsequently recuperate the hours not worked. Obligation for the state to pay the wages of employees whose employers refuse to pay them during the crisis. The government must then recover the cost of this intervention by fining the company guilty of not paying wages. For workers in the informal sector, for the unpaid unemployed, for students, for everyone who needs it, the state must provide a guaranteed

minimum income which must be sufficient to live decently.

- the prohibition of all dismissals and the reinstatement of employees dismissed since the beginning of the pandemic,

- refusal of any authoritarian and exceptional measures to suspend social rights, including the right to strike,

- provision of protective means (masks, gels, goggles, gloves) for all employees continuing an activity, allowing their protection and the immediate exercise of the right of withdrawal if the safety conditions are not respected.

- the halt of all evictions of tenants, the suspension of rents, personal loans and water and energy bills, the provision of proper housing for all those living in precarious or without accommodation, the requisition of empty dwellings.

- provision of adequate social care for the disabled, the elderly and all those socially isolated by lockdown,

- the establishment, particularly in countries where confinement has been decided, of immediate emergency protection measures for women and children who are victims of violence, with rapid decisions to remove violent spouses or provide alternative housing for the victims,

- the guaranteeing of timely access to contraception and abortion as vital medical procedures,

- immediate regularization of all undocumented migrants and refugees with immediate access to all social protection systems, an end to all expulsions. With coronavirus having already entered migrant camps, the immediate closure of the vastly overcrowded migrant and refugee camps, especially Moria in Lesbos, is imperative, along with the requisition of necessary hotels and apartments with basic hygienic and confinement conditions. The borders of Europe must be opened for the safe admission of refugees.

The situation also requires that the interests of the popular classes be put

at the forefront in a series of emergency decisions:

- the public reorganization of the health sector, integrating the whole private sector, with the immediate hiring of all the care workers needed to run the services within the reopening of beds, services and hospitals closed in recent years, opening of all necessary health structures and the increase in the salaries of care workers,

- the transfer into the public domain of the pharmaceutical industry and the production of the necessary medicines independently of patent rights.

- the transfer into public ownership of the main social media platforms. Facebook, WhatsApp, Amazon and Zoom which are benefitting massively from the lockdown, and will be gathering data which will generate huge future profits. They should be taken over (without compensation, they have already raked in too much), and run as not-for-profit, transparent, public services.

- in every country, transfer to public ownership of funeral services. Private companies should not be allowed to profit from death and attempt to manipulate people's grief in an attempt to maximize their takings.

- for a sustainable agriculture and global food justice.

- immediate conversion of suitable industries (cars, aircrafts, weapons, ...) to productions helping society to handle the health crisis: ventilators, monitoring, intensive beds, protective equipment. Workers could investigate their own workplaces and take measures for conversion in cooperation with health authorities.

- expropriation of private banks without compensation to the major shareholders and the socialization of the financial system under citizen control, the suspension of all bank charges on private accounts and the provision to the working classes of zero-interest loans to meet their immediate needs.

- immediate suspension of the payment of public debts must make it possible to mobilize sufficient funds to

meet popular needs during the pandemic. The suspension of debt payments must be combined with an audit with citizen participation in order to identify the illegitimate part and cancel it.

Sadly, this pandemic and the worldwide crisis ensuing are the beginnings of repeated crises produced by globalization and climate changes. Capitalism has created a world which destabilizes, despoils human societies and exacerbates risks of climate or health disasters. We have to bring an end to the old world of profits, pandemics, climate change, and halt the destruction of our planet.

More than ever, our lives are worth more than their profits.

8 April 2020

- Austria: Sozialistische Alternative (SOAL)
- Belgium: SAP - Gauche anticapitaliste
- Britain: Socialist Resistance
- Denmark: Socialistisk Arbejderpolitik (SAP)
- France: SFQI - Fourth Internationalists in France
- Germany: Internationale Sozialistische Organisation (ISO)
- Greece: OKDE-Spartakos
- Greece: TPT (Fourth International Programmatic Tendency)
- Ireland: Socialist Democracy
- Italy: Communia Network
- Italy: Sinistra Anticapitalista
- Netherlands: SAP - Grenzeloos
- Poland: Zbigniew Marcin Kowalewski
- Portugal: SPQI - collective of FI militants
- Portugal: Toupeira Vermelha
- Russia: Russian Socialist

- Movement (RSD)
- Spanish state: Anticapitalistas
- Sweden: Socialistisk

- Politik
- Switzerland: Bewegung für den Sozialismus/Mouvement pour le Socialisme

- (BFS/MPS)
- Switzerland: SolidaritéS
- Turkey: Sosyalist Demokrasi için Yeniyol

Covid-19 attacks the down-and-out in ultra-unequal South Africa

8 April 2020, by **Patrick Bond**

It's hard to imagine a more worrying place to watch Covid-19 hit a society than Johannesburg, South Africa.

This is, after all, the world's most unequal major city, serving as economic headquarters for the most unequal country. In spite of a poverty rate (at \$2.80/day) of more than 60 percent and a national unemployment rate of 40 percent before the current crisis, the labor movement is now considered (by corporate elites) to be the world's third most militant (although its political divisions are profound). And the capitalist class is rated (by PwC) as the world's third most crime-prone and corruption-riddled.

Is a social timebomb ticking here now? If so, the ruling elites - led by President Cyril Ramaphosa - appear not to be listening, much less worried. On March 27, the South African state's response to Covid-19 included harsh - albeit apparently necessary - public-health restrictions on movement and social interactions. They included a dramatic economic shutdown limiting business to essential services, healthcare and pharmacies, and food (but not restaurants, or even seeds to grow vegetables, apparently). Aside from a few categories of workers, everyone else in the country has been ordered to stay inside their homes until April 16, and probably even later, aside from grocery-shopping trips.

Many have praised the state for swift action, as a new stage of 'Ramaphoria'

infects the chattering classes. But since the 1990s, the state's ability to properly respond to the Covid-19 threat has been fatally weakened through habitual reinjections of neoliberal ideology, resulting in a profound healthcare crisis, pathetically-slow economic policy reactions and tokenistic welfare responses - while the security apparatus' brain has apparently weakened too, though its trigger fingers are oversensitive.

Necessary though restrictions on movement may be in a society with nearly eight million people living with HIV, with TB rampant, and with countless other immune-system threats, there is a genuine fear that Ramaphosa's March 27 lockdown order cannot prevent a profound calamity. The decimated and divided health system and the unreconstructed character of apartheid-era urban slums are obvious even here in the continent's richest city, below which half the world's historic stock of gold was dug up over the last century.

The disease and the ghettos

According to Housing and Water Minister Lindiwe Sisulu, South Africa today has 2000 densely-packed townships, inner-city areas and rural villages "urgently in need of assistance" merely for clean water provision. No doubt this is an

underestimate, but at least poor and working-class people are finally being targeted for urgent water relief. But it is mainly in the form of communal water tanks (and only 1000 have been delivered), creating potentially dangerous collection points for spreading the virus. (Installation of house taps and flush sanitation is the traditional demand of social movements, in part because of waterborne disease prevention and gender equity.)

As media commentator Ayabonga Cawe argues, while it is important for these communities to belatedly now get "tanks as an emergency measure, the real crisis lies in underinvestment in service infrastructure and state capacity"; hence no wonder there are ongoing water protests across the country.

Moreover, even in short-term crisis management mode, Cawe continues, the state's insensitivity to the needs of the masses is tragic: "The confrontations on the first morning of the lockdown between workers, the taxi industry and tavern owners on the one hand, and law enforcement officials on the other, indicate how inadequate the attention, communication and support are that have been extended to those outside the policy scope."

The lockdown and social-distancing mandates simply won't work in the overcrowded townships, which traditionally under apartheid were built merely as the urban holding cells

of a reserve army of migrant labor.

To illustrate, on March 29 SkyNews reporter John Sparks witnessed army brutality against residents of the impoverished community of Alexandra, a few minutes' drive from Johannesburg's luxurious financial district of Sandton: "'The police minister says you could go to jail for being out here,' I said to one man, who was drinking a beer in the street. 'I am staying in one room with five others, how can I stay in there all day? They must just come and arrest us,' he replied."

Nonchalant defiance against the lockdown in areas such as Alexandra could have been prevented with a proper public education campaign and generous social support systems, rather than futile episodes of mindless coercion. And to be sure, the urgent 'de-densification' of these slums is part of Sisulu's rhetoric. However, given the history of police brutality in post-apartheid South Africa, including the Marikana massacre, incidents of police and army overkill during the lockdown are inevitable.

The first two such murders were recorded on March 29, one by police tasing in Cape Town. The other was in a township southeast of Johannesburg, where according to a journalist, "41-year-old Sibusiso Amos was allegedly killed when Metro officers tried to arrest people who were found drinking in a local tavern, thus violating the lockdown rules. It is alleged that Amos and some community members attacked the officers and in retaliation, the police discharged rubber bullets. It is further alleged that the deceased Amos was followed up to the veranda of his home where he was fatally shot." Several children were also injured.

Even in the cosmopolitan Johannesburg suburb of Melville (supposedly "one of the world's 50 coolest neighbourhoods," as the municipality brags), the Financial Times reported on March 29 that city police invaded the home of lawyer Elisha Kunene, who simply had witnessed and objected to cops burning a homeless person's possessions: "They searched the whole house, pulled everything out of our

pockets, they berated us... It was very definitely a trespass and illegal search."

A pandemic of neoliberal violence

At the same time, it also appears likely that already-high domestic violence and petty crime will rise. One reason is a new onslaught of neoliberal financial violence from the Treasury. On February 26, Finance Minister Tito Mboweni - who in 2008 was named Euromoney's "Central Banker of the Year" thanks to his laissez faire philosophy - cut the health budget by a painful \$250 million, amidst other austerity hits, to please Moody's credit rating agency.

In subsequent weeks there was a massive flight of emerging-market capital to the United States in search of the safety of the dollar. As a result, on March 24, Mboweni's attempt to sell state securities to the private sector in Treasury's regular auction completely failed. No one was interested. And then on March 27, Moody's gave Mboweni the dreaded junk rating.

The next day, Treasury was "trembling in our boots about what might be in the coming weeks and months", said Mboweni. Then on March 29, his surreal response to an interviewer threatened further blows to society: "When I spoke to the president before Moody's announced their decision he said to me, 'We now need to move more boldly on the structural reforms programme.' I said, 'Hallelujah'. I've been preaching that agenda for a long time."

Egged on by the International Monetary Fund - from which he now threatens he might turn for loans - Mboweni's reforms mainly consist of predictable budget austerity, civil service cuts, higher levels of cost recovery and the privatization or closure of money-losing parastatal agencies.

But as political economist Duma Gqubule points out, helpful reforms would consist of the opposite: Keynesian fiscal stimulation, because

South Africa's "GDP growth is expected to drop by 5-10 percentage points during 2020. By comparison, GDP growth declined by 1.5 points in the wake of the global financial crisis. The economy lost 1-million jobs between December 2008 and March 2010. This time the collapse in GDP will be at least three times larger. SA could lose 3 million jobs."

In contrast, the United Kingdom's Treasury has offered a state-spending stimulus of nearly 19 percent of GDP to tackle Covid-19 even under Boris Johnson's right-wing rule. Mboweni's team could only come up with 0.1 percent.

Not just fiscal, but also monetary policy remains stuck within neoliberal quicksand. As the Covid-19 catastrophe moved from public health crisis to world economic meltdown during February-March, the SA Reserve Bank (SARB) cut its main interest rate by only 1.5 percent (from 6.75 percent) in spite of South Africa suffering the world's third highest rate among 50 countries regularly issuing state bonds, after Turkey and Pakistan.

Finally the SARB began to try unorthodox monetary policy, by issuing funds to purchase Mboweni's securities on March 24. It was a version of Quantitative Easing which SARB Governor Lesetjo Kganyago - who in 2018 began chairing the International Monetary Fund's main policy committee - had nine months ago sworn never to do unless inflation and the main interest rates were both at zero (they are 4.2 and 5.25 percent respectively).

The state's social policy response is also illustrative. Many workers and most of the massive unemployed precariat were immediately without income as the full lockdown began on March 27, just as the state safety net was fraying. Not only was there no capacity in the collapsing public health system, there was little availability of suitable Covid-19 testing kits, masks, protective healthworker garb, Intensive Care Unit beds and hospitals. Only 4000 ventilators can be located in a country with nearly 60 million residents. The number of cases soared past the 1000

mark on March 30, with thousands more expected this week.

There is no unemployment insurance or social grant provision for the informal sector. The monthly grant received by 18 million elderly people and children has shrunk dramatically, measured in US dollars: the vast majority of recipients are mothers who must raise their kids with \$24/month, down from \$38/month at the end of apartheid; while the elderly get a state pension of \$103/month. Now, standing in long queues to withdraw those funds represents an added threat.

So as Covid-19 has struck, the country's extreme inequality has been exacerbated, and the state's long-standing delivery shortcomings stand exposed. Even Ramaphosa's close allies in the SA Communist Party (SACP) were moved to confess, "We have been far too timid in driving forward a comprehensive National Health Insurance. We have allowed our public health system to be hugely overstretched long before the arrival of the coronavirus, allowing the bulk of health resources to be enjoyed by the 16 percent of South Africans with access to private health care."

The SACP further lamented, "If we can use decisive state power in the public interest to deal with the coronavirus pandemic, why have we not used state power to shut down massive illegal capital flows out of our country? Why did we not long ago build up a major, buffer sovereign wealth fund by imposing, amongst other things, a windfall tax on Sasol when it was still making super-profits out of its sale of petrol on our local markets? Why have we been so timid with urban land reform, perpetuating apartheid spatial patterns that will now expose millions of South Africans to crowded and potentially highly infectious minibus commutes?"

The answer, say traditional leftists such as those at Johannesburg's Khanya College, is that Ramaphosa's neoliberal regime has no intention whatsoever of doing anything the too-loyal Communists claim they want.

As one indication of service to corporate power, Environment Minister Barbara Creecy stunned anti-

pollution activists by doubling the allowable SO₂ emissions of big emitters on March 30, raising it to a level 28 times what China allows. Thousands of deaths a year are already attributed to SO₂ and co-pollutants from Eskom's massive coal-fired power plants, Sasol's gas-to-oil facility, other oil refineries and countless petro-chemical firms. ABloomberg reporter observed that Creecy's generosity comes "at a time when there is growing concern about the outbreak of the coronavirus, which is more severe for those who already have respiratory problems."

Social unrest, with nowhere to go

For many people suffering what were already recessionary conditions, coronavirus seems the least of their concerns. Social protests that erupted during the last week in March in Khayelitsha township of Cape Town, central Durban, Soweto and Nelson Mandela Bay's Westville township drew attention to lack of services that for communities are more pressing – although if they succeed their community strength to fight back against the virus will be much greater.

In Westville where out of 40 communal water taps only 20 are working, one activist told a local reporter, "We are aware that the coronavirus is dangerous, but it is here for a short period, while we have been living under these dangerous conditions since 2000. We are 1 625 households with no electricity. We do deadly illegal connections that have killed more than 20 people. Some of our people were electrocuted, others were killed in shack fires. On wet days, ambulances and the police don't come to our area because it is muddy. We have to push sick people in wheelbarrows."

Lockdown exceptions have been made for local "spaza shops" selling basic-needs groceries and consumables. Yet on March 24, the brutally xenophobic character of that policy was revealed by Small Business Development Minister Khumbudzo Ntshavheni: "We must indicate that those spaza shops that will be open are strictly those that

are owned by South Africans, managed and run by South Africans." The crucial context here is a series of brutal xenophobic attacks in 2008, 2010, 2015, 2017 and 2019, aimed at regional immigrants – including hundreds of owners of the tiny shops. This is the first time in more than a dozen years that a leading politician has been so brazen.

In Nelson Mandela Bay, township protesters defended immigrant spas shops from police closure, and they also demonstrated (in their hundreds) for long-demanded electricity supplies. And in Soweto, the national power supplier Eskom continued to cut off electricity to thousands of residents of Johannesburg's main township, generating more protests in late March.

In Cape Town, in spite of announcing a period of relief for water debtors on March 20, deputy mayor Ian Neilson would not even reconnect water to thousands of poor households because municipal supply was "restricted to a running trickle-flow after numerous warning letters have been sent to pay debt." Protesters from Khayelitsha amped up pressure against Neilson on March 25.

For workers everywhere in South Africa, the consumer debt load has continued to rise. In late 2019, 41 percent of the country's 22 million borrowers from the formal credit system – and millions more who borrow informally from 'mashonisa' loan sharks – were already more than three months in arrears, according to the National Credit Regulator.

Progressive precedent but an uphill struggle to rebuild the left

On a prior occasion, a progressive social movement organizing to resist economic oppression associated with a health crisis was exceptionally impressive. During the last pandemic, between 1999-2004 the Treatment Action Campaign fought to gain access to AIDS drugs for free (thus saving

\$10,000 per patient annually), and insisted they are produced locally on a generic (not Big-Pharma-branded) basis, and delivered to society via the public health system. The result was an increase in life expectancy from 52 to 64 years over the course of a decade.

Such a movement is desperately needed now, but impossible to locate given the adverse conditions. Opposition political parties are unable to mobilize, and in any case have mainly fallen lockstep into line behind Ramaphosa. The trade unions are desperately trying to react to terrifying news from one company after another, either firing workers outright or in a few cases (in retail and airlines especially) already declaring bankruptcy. The divisions between the pro-government Congress of SA Trade Unions and the left-oppositionist SA Federation of Trade Unions remain profound.

In March, efforts emerged from several quarters to forge progressive principles, analyses, strategies, tactics and alliances, of which two were at Khanya College, and another came from 113 civil society organizations endorsing an ambitious campaign statement. The SA Federation of Trade Unions offered tough critiques of

Ramaphosa, Mboweni and Kganyago, along with strong demands. On March 30, scores of progressive professionals organized by the Institute for Economic Justice made further progressive economic-policy suggestions.

Mostly these are occurring in online meetings of civil society strategists and allied intellectuals seeking a united front against government's stinginess. But Durban community activist Vanessa Burger is correct to warn, "Many NGOs' move to online virtual events because of the coronavirus is further marginalizing groups who don't have the know-how, tools or resources to participate: unlimited free/cheap data, reliable network connection, electricity, etc. If this trend becomes permanent and the existing digital access challenges are not addressed, it will become a further source of inequity, division and the widespread exclusion of real grassroots and poor communities' politics."

Because of the lockdown, the conditions for mass organizing don't exist. Lacking linkages to the necessary street-heat that should accompany all the new policy demands, most pro-poor advocacy has been directed at meekly persuading a

Presidency, Treasury and Reserve Bank to reverse course. But the ruling elites remain profoundly committed to neoliberal ideology, and recourse to the International Monetary Fund and World Bank for loans was Mboweni's latest suggestion.

In a country in which the 1994 transition to a better society should have been far more decisive, given the activists' death blow against apartheid, ambitions for socio-economic and especially health justice must be rekindled. Many now argue that between the Covid-19, climate and economic crises – to which here we would add patriarchy and residual racism – we are overdue for a socialist transformation, everywhere on earth. And political consciousness now requires that we take account of the ecological stresses we have placed on the earth which have resulted in the Covid-19 pandemic and its spread.

It is despairing, though, that in a country with among the most portentous objective conditions, the subjective conditions are made yet more miserable by a disease whose economic amplification is weakening everyone's ability to resist.

30 March 2020

Source [*No Borders News*](#).

Lashed by the Storm

8 April 2020, by **Dan La Botz**

Altogether 41 of 50 states, the District of Columbia, three counties, eight cities, and Puerto Rico now have stay-at-home orders, affecting a total of 311 of about 330 million Americans. Shutdowns and quarantines have put an estimated 12 million people out of work, which raises the unemployment rate to 12 percent, already two percent higher than during the recession of 2008—and the economic crisis is just beginning. The United States is entering another great depression that could be worse than that of the 1930s. At the same time,

millions of "essential workers," often low-paid service workers, desperate for a wage, continue to labor putting themselves in danger of contracting the disease.

Racial and economic inequality in American society mean that the virus is having a greater impact on people of color and the poor. The poor in America are more likely to have health conditions—diabetes, asthma, and cardiovascular disease—that make them more vulnerable to Covid-19. They also live in more crowded

conditions, meaning coronavirus spreads more rapidly. Maps show that black and Latino areas in New York and other cities are being harder hit, with proportionally more cases. White communities have had more access to testing than black and Latino communities.

The U.S. Congress will consider another bailout package beyond the two trillion already allocated principally to support big business, but also for health care, and financial support for workers. From laws

passed so far, millions of workers should receive the first of six weeks of payments on April 17 though others will get them later—but the rent for most was due on April 1. Worker will get \$600 a week above their state unemployment benefits, but those vary from \$275 to \$713 dollars.

The United States also has eight million undocumented immigrant workers, most of whom will be ineligible for any federal relief payment. And immigrants who have visas that allow them to work will receive unemployment and federal payments for only 60 days, after which they lose their visas if they are unemployed.

President Donald Trump has continued to provide misleading or confusing information in contradiction to health authorizes. When the

Centers for Disease Control has recommended that people wear a mask when going outside to prevent non-symptomatic people from spreading the disease to other, but Trump said it was voluntary and that he would not. Governors in Delaware, Florida, Michigan, New Mexico, Ohio, Texas and West Virginia have also confused the situation, calling for social distancing but allowing church services.

Workers—with or without unions—have carried strikes large and small, principally over health and safety issues raised by the pandemic. Autoworkers in Detroit, garbage collectors in Philadelphia, chicken processing workers in Georgia, shipyard workers in Maine, grocery warehouse workers in Memphis, and servers at a bar and restaurant in

Portland, Oregon have struck. At Amazon, a non-union company with 750,000 workers, there has been a series of strikes in New York, Chicago, and the Detroit area.

Those of us in Solidarity and in the Democratic Socialists of America, meeting through video conferences, are involved in organizing among teachers, nurses, warehouse workers, and other workplaces, as well as in communities. We are calling for legislation to protect everyone's health and well-being. We fight for reforms and we are fighting for socialism.

5 April 2020

Source **New Politics**. This article was written for *L'Anticapitaliste*, the newspaper of the **New Anticapitalist Party** (NPA) of France.

Workers Are More Valuable Than CEOs

7 April 2020, by **Mindy Isser**

Low-wage workers are on the front line in the battle against coronavirus. While many workers have started telecommuting “and many others have unfortunately been laid off” low-wage workers are busy cleaning our streets, making sure we have enough to eat, and, of course, nursing us back to health if we get COVID-19. Despite being linchpins of a functional society, these workers are often treated as expendable or dismissed as “unskilled.” But over the past few weeks, we’ve seen just how irreplaceable they are.

In California, New York, Illinois, Pennsylvania, New Jersey, and elsewhere, state governments have rolled out increasingly strict orders to enforce social distancing and close all businesses except those deemed “essential” or “life-sustaining.” While these lists vary from state to state, each includes grocery stores, laundromats, restaurants (serving takeout and delivery), factories that produce foodstuffs and other

products, gas stations, pharmacies, and hospitals.

What do all of these businesses have in common? They rely on the labor of low-wage workers who, in many cases, toil without benefits, unions, and workplace protections. Public workers are still on the clock, too, cleaning our streets, delivering our mail, and making sure we have access to utilities and other social services. While many government workers have unions, they are often accorded the same lack of respect as their low-wage, private-sector counterparts.

But imagine a global pandemic without postal workers or UPS drivers getting us our messages and packages; without cashiers and stockers keeping grocery stores up and running and full of food; without care and domestic workers providing life-saving medical and emotional support to some of society's most at-risk people; without utility workers making sure we have a supply of

water, electricity, and gas; without laundromat workers enabling us to clean our clothes, towels, and sheets; without sanitation workers collecting our trash and slowing the spread of germs.

While many individuals have expressed appreciation for these frontline workers “leaving hand sanitizer out for their letter carrier; calling for an increase in teachers' salaries after having to homeschool their kids for a few days” our society has long undervalued them, both monetarily and otherwise. That's starting to change, thanks to the crisis and worker organizing that has turned up the heat on bosses.

Minnesota, Michigan, and Vermont have all classified grocery store employees as emergency workers, making them eligible for childcare and other services. Stop & Shop workers have received a 10 percent pay increase and two additional weeks of paid sick leave. Safeway, Target, and

Whole Foods workers won a \$2-per-hour increase. And unionized workers at Kroger in Washington state have been given hazard pay, a demand taken up by many grocery and other frontline workers across the country. These victories, while small, have inched us closer to a society where low-wage workers finally get the remuneration and respect they deserve.

But what does it say about our country when the jobs that are most critical to sustaining life at its basic level are also some of the lowest paid and least

valued? Grocery store workers and first responders are exposing themselves to a massive health crisis in order to keep the rest of us functioning as normally as possible. Many of them work for minimum wage or close to it “and without health benefits” meaning that they could contract coronavirus and get stuck with either a massive bill or no health care at all. Meanwhile, with many school districts closed indefinitely, parents are missing the critical and challenging work done every day by nannies, childcare workers, and educators of all kinds.

These workers have a right to higher wages, full benefits, health and safety guarantees, and strong unions “just like every other worker.

Hopefully, this crisis will not only elevate the status of low-wage workers but spark a new wave of organizing to boost standards and build power across these “essential” industries. Because it’s low-wage workers “not bankers, landlords, or CEOs” who make our society run.

Source [Jacobin](#).

To confront capitalism’s multifaceted crisis the bankers must be expropriated and the banks socialised

7 April 2020, by **Éric Toussaint**

Governments and banking authorities systematically lie about the results of banks’ stress tests. Mainstream media relay the false information because it is dependent on the banks’ advertisement and moreover, certain bankers or their big shareholders are also shareholders in the media or in agencies such as Bloomberg which provides financial market analysis. The assistance schemes set up by central banks are not aimed at bringing urgent aid to the populations suffering from the coronavirus pandemic whether in Europe, the USA or Japan. The massive financial aids granted by the Central Banks are principally to save the big shareholders of the private banks and the capitalist system of domination in general.

It is fundamental to tell what is really happening in the banks and to convince more and more people about the necessity to expropriate, without indemnity, the big shareholders and to create a public system for savings, insurance and lending under citizens’ control. This is what CADTM calls the

complete socialisation of banks and insurance companies.

This measure must be part of a larger programme of urgent, radical and far reaching measures that include suspending and eventually the abolition of public and private illegitimate debt, closing down the stock exchanges, creating an authentic National Health System, expropriating, without indemnities, the pharmaceutical companies and private laboratories, energy sector corporations (in order to plan and manage the ecological crisis) and placing them under citizens’ control aimed at improving the populations’ living conditions.

The response to the coronavirus epidemic should become an opportunity to encourage an authentic deep rooted revolution in life styles, property structures, mode of production, in the values that inspire social relationships among human beings as well as between human beings and nature.

This can only happen if the victims of

the system mobilise themselves, self-organise and dislodge the 1% and their lackeys from positions of power to create truly democratic power structures. An ecological, socialist, feminist and self-management revolution is necessary.

Contrary to official announcements, the banks are in very bad health. Now, don’t get us wrong, the bad shape of banks do not prevent the huge incomes of their large shareholders, directors and top management. In fact, one of the reasons they are in such a bad shape is because they are being so thoroughly drained.

Over the last years the banks have been paying out very big dividends. Their directors are very well paid. But there is also an indirect way that shareholders make a lot of money from banks! Banks are buying back their own equity.

The banks are

repurchasing their own shares in order to make their large shareholders richer

One way used by major banks to increase shareholder income and wealth is to buy back their shares in the stock market. In recent years, they are doing this systematically and on a massive scale, particularly the US banks. If their share prices have, until the beginning of February 2020, rocketed, it is because the banks' directors, in agreement with the principal shareholders are buying back their own stock, and often with the liquidities made generously

available by central banks at derisory rates. And from whom do they buy back their own stock? From their own large shareholders; of course, who make huge money. Here's how it works. Take for example a large shareholder who acquired a block of shares, of his own bank, at say 70 each. If the value rises to 100 and the big shareholder sells back to his own bank at 100 he make a gain of 30 per share. In some countries "capital gains" on shares are not even taxed under the pretext that stock exchange activity must be encouraged!

This is all very profitable for the big shareholders who are invariably stockholders and customers of several banks. In fact they are on the make both ways - capital gains on the portion of shares that are bought back and dividends on those that they keep.

When corporations announce a buy back, the shareholders are

enthusiastic because they can expect a "bonus" in the form of a higher price per share from the closing price of the share. They are thus encouraged to hold onto their shares and accept the buyback offer. This in turn pushes the share price higher still. When a bank buys back its own shares at the same time it takes them out of circulation. This has another advantage. The price/earnings ratio (p/e) of the share is improved and this creates a higher demand for the shares that that are still in circulation and the value of the bank shows further increase.

As the *Financial Times*, says : "Stock buybacks are neutral, in theory, for a company's value as every dollar handed back to shareholders is a dollar less on its balance sheet. However, a reduction in the number of the shares outstanding increases earnings per share — which can often lift prices — while also boosting pay for managers" [