"… COVID-19 looks like one of those hackers hired by a tech company to find all its weak spots. As it has run through societies, it's brandished a torch shining a light on all the vulnerable spots in those societies."

The COVID-19 torch

I'm still thinking about coronavirus. For the most part, I'm thinking about how lucky I am. I live in a country that has managed to avoid the outbreaks we are seeing around the world. We've escaped through a combination of luck and just-in-time action. We're a very big island separated from the rest of the world by large distances, populated mostly in cities separated by large distances. It means our physical distancing can operate between populations, not just people.

From here, I watch unfolding coronavirus events around the world, without really understanding the experience you are all going through. However, COVID-19 looks like one of those hackers hired by a tech company to find all its weak spots. As it has run through societies, it's brandished a torch shining a light on all the vulnerable spots in those societies.

At its most obvious, the racial divide in mortality from COVID-19 in the UK and the US shows the privilege of better survival odds if you are white. That's not a biological difference. The chronic disease and multimorbidity that put them at higher risk is a consequence of living conditions and low incomes. These are the same differences that ensure people don't have the housing to enable crucial social distancing, or jobs that allow people to take time off if they are sick. None of this is new, but a world with COVID-19 in it doesn't allow us to say we can't see it any more.

Here in Australia, the same risks were identified by Aboriginal and Torres Strait Islander Australians, who were very active in ensuring their communities were protected and looked after. As a result, the number of COVID-19 cases in Indigenous Australians is very small, and none in remote communities.[1] The success here shows that the differences we see elsewhere aren't inevitable.

However, outside that success, there's a new outbreak in Melbourne. At the time of writing, Melbourne city has gone back in to major restrictions, just a few days after several high-density tower blocks of public housing were locked down without notice. And who lives in those tower blocks? People with insecure housing, insecure jobs, often migrant and Indigenous families. The police were called in to enforce the lockdown.

Only a month before there was some controversy that a Black Lives Matter rally in Melbourne might spread coronavirus. The organisers and attendees were very careful with their social distancing and hand hygiene, and there have been no cases associated with the rally. It is similar people who might be brutally treated by the police who are now being policed in those tower blocks. For them, vulnerability to coronavirus and vulnerability to the police is the same problem.

The Melbourne outbreak didn't come from protesters. It came from security at the quarantining hotels being undertrained or understaffed, likely a result of outsourcing and subcontracting to private companies. The Department of Health wasn't involved.

At every step, the coronavirus has shone a light on society's vulnerable spots — inequality, poverty, overcrowding, poor job security, outsourcing. This disease is not simply the effect of a small strand of RNA on biological systems. What we see is the result of the interaction of this viral RNA with the societies we have chosen to create. COVID-19 has not created these issues. But it has shown us so clearly that health is the sign of a functioning society.

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