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Covid-19: Fatal errors, not fatalism, created UK's public health disaster

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Was it fatalism that allowed 138 000 covid deaths in the UK? Were these deaths bound or decreed to have happened? The answer is, simply, no. Did fatalism kill people in social care, or differentially target people who are disadvantaged? Were ethnic minorities victims of "covid fatalism"—and is it "career fatalism" that means that they are less likely to be shortlisted and appointed to medical jobs, as a new investigation reveals (doi:10.1136/bmj.n2460; doi:10.1136/bmj.n2451)?^{1 2}

Was it fatalism that denied frontline health and social care professionals adequate personal protective equipment during the pandemic—and even now still exposes them to risks of airborne transmission and accusations of fakery (doi:10.1136/bmj.n2473)?³ The answers remain no. Fatalism, we're told, ignored pandemic lessons of history and lessons from other countries. Fatalism failed to implement adequate contact tracing and border controls.

Fatalism sidelined local public health teams and institutions, pumped billions into private hospitals and private contractors (doi:10.1136/bmj.n2471),⁴ and then disbanded Public Health England in the middle of a pandemic, creating a new body that has regrettably replaced "inequalities" with "disparities" (doi:10.1136/bmj.n2323).⁵ Fatalism, the villain of the piece, ignored advice from behavioural science experts and promoted a narrative of behavioural fatigue (doi:10.1136/bmj.m2982).⁶

Fatalism is the awkward conclusion of the joint inquiry by the House of Commons Health and Social Care Committee and the Science and Technology Committee into the UK's pandemic response (doi:10.1136/bmj.n2487; doi:10.1136/bmj.n2485; <https://blogs.bmj.com/bmj/2021/10/12/chris-ham-dithering-and-delays-hampered-the-uks-covid-19-response>).⁷⁻⁹ The verdict is damning, but the wording is a weasel explanation for the UK's calamitous pandemic failures. Negligence, incompetence, and dereliction of duty are closer to the mark. Indeed, the report skips over the government's misuse of billions of pounds of public funds to enrich associates.

Perhaps anything harsher was too much to expect from a committee chaired by a former health secretary who oversaw a number of pandemic preparation exercises without implementing their recommendations. Exercise Alice, for one, identified the very areas where the government has failed (doi:10.1136/bmj.n2485; doi:10.1136/bmj.n2475).^{8 10} Little wonder, then, that the existence of this exercise was concealed. If Jeremy Hunt knew nothing of this, as he mystifyingly claims, what of the medical officers, science advisers, NHS managers, and government officials involved in that exercise who sat on their hands and sealed their lips as the UK's death toll mounted?

The many premature deaths in the UK are put into sharp perspective by the low death toll and economic robustness of New Zealand (doi:10.1136/bmj.n2476),¹¹ South Korea, and China, for example. The UK's story is one of extreme dysfunction within government and its scientific advisory committees and of complacent disregard for life and suffering. The story is one of political victory at all costs and an absolute disdain for accountability and personal and collective responsibility. Even now, government ministers are trivialising these grave errors as wisdom in hindsight, while their leader is holidaying and partying like it's 1999.

Yes, the UK succeeded in procuring vaccines and evaluating drugs for covid-19 (doi:10.1136/bmj.m3379),¹² but those worthy successes of science and procurement should not be used as cover for the gross ineptitude that failed hundreds of thousands of people and their families. The human and economic disaster of covid-19 should not be shrugged off as scientific and political fatalism. The stark errors are not apparent because of hindsight; the government was challenged at each step and often forewarned of the damaging consequences of its decisions.

The alarm bells about the UK's inadequate response were being rung loudly by March 2020 (doi:10.1136/bmj.m1284).¹³ A few weeks later this had already become too little, too late, too flawed (doi:10.1136/bmj.m1932).¹⁴ When the state's scientists belatedly changed tack, the government dithered. Even today the UK is willing to accept 750 deaths a week as the new normality and is an outlier in policies of children's vaccination and school safety and ventilation. In our dystopian present, Jürgen Klopp, a football manager, speaks with greater public health wisdom than some scientists and politicians (doi:10.1136/bmj.n2472).¹⁵

Fatalism is a distraction and a disingenuous explanation for "one of the UK's worst ever public health failures." Leadership may have no magic formula (doi:10.1136/bmj.n2465),¹⁶ but what we need is for elected representatives and their advisers to accept responsibility, and it is this disregard for accountability that has proved fatal and prolongs the ordeal for the bereaved families (<https://www.theguardian.com/politics/2021/oct/12/covid-response-one-of-uks-worst-ever-public-health-failures>).¹⁷

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