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Labor ideas for a better Australia

lust what the doctor ordered: Dental care for COVID iabs

THE PROBLEM

An apple a day keeps the doctor or dentist away is an old saying. With a slight tweak it might also hit the sweet spot of public policy needed to help Australia reach national cabinet's in-principle COVID-19 vaccination target of 70 to 80 per cent of the eligible population (https://www.canberratimes.com.au/story/7364090/covid-19-freedom-when-australia-hits-80-per-cent-vaccination/) necessary for the 'four-stage plan roadmap' towards re-opening major sectors of our economy, easing domestic border restrictions (and perhaps international travel), each key to returning to some semblance of normal life. Those targets appear some way onto the distance. As of Wednesday (11 August 2021), just 18.9% of the eligible population (roughly 20 million people) are fully vaccinated five months into the vaccine rollout. (https://www.theguardian.com/australia-news/datablog/ng-interactive/2021/aug/11/covid-19-vaccine-rollout-australia-vaccination-rate-progress-how-many-people-vaccinated-percent-tracker-australian-states-number-total-daily-live-data-stats-updates-news-schedule-tracking-chart-percentage-new-cases-today)

In response, the last few weeks have seen much talk of vaccination 'carrots and sticks'. It comes as no surprise given that millions of Australians live under some form of COVID restrictions with little financial help given the withdrawal of the JobKeeper scheme. Businesses are struggling, people are once again losing their jobs, consumer confidence has been battered, and people's mental health is fraught. Australia's roadmap from living with the COVID-19 pandemic along the long, uneven transition to an endemic is paved almost entirely by vaccination rates. This is despite recent evidence showing that the Delta variant is necessitating third 'booster' shots even vaccination success stories such as Israel and increasing case numbers in nations with exceptionally high rates Iceland over 85 per cent. The latter country is now experiencing its largest weekly caseload since the pandemic began, although 97 per cent of infected people have no or mild symptoms. The idea that even developed countries such as the US, UK, Australia will achieve 'herd immunity' seems dead, buried and cremated. (https://www.theage.com.au/national/is-the-herd-immunity-dream-dead-20210809-p58h50.html)

Incentivising proposals include the Grattan Institute's idea of weekly million dollar lotteries to entice vaccine hesitant Australians to get the jab (https://grattan.edu.au/news/vaxlotto-where-everyones-a-winner/). For its part the John Curtin Research Centre has urged the Morrison government to adopt a five point 'carrot and stick' jab plan (https://www.theaustralian.com.au/commentary/pm-must-wage-war-on-the-antivaxxers-to-save-his-job/news-story/95c5570b2d3f918f64e529446a5fd0a5):

(1) Tripling-down on securing vaccine supplies and ensuring millions of locally-made, safe and effective Astra Zeneca are not wasted;

- (2) Super-charging mRNA production capability to rapidly respond to COVID variants and future pandemics thus reducing reliance on foreign supply chains for vaccines and essential medical supplies;
- (3) Incentives to vaccinate (issuing passports for quarantine free travel and entry to major events along with hospitality and entertainment venues) paired with a major public awareness campaign, the continued absence of which is a glaring commonwealth government failure;
- (4) The latter would be a significant implicit disincentives for not vaccinating but other options exist such as charging for jabs after a certain point later this year; and
- (5) Setting a clear date for an early 2022 re-opening with no or very limited lockdowns, something the prime minister has refused to name, unsurprisingly given that a federal election must be called by May of next year. The prime minister's recent claim that there existed a clear "roadmap to Christmas" whereby "everybody who has had the opportunity ... will have had it" and lockdowns will be a "thing of the past" (https://www.abc.net.au/news/2021-07-21/scott-morrison-covid19-vaccinations-one-million/100309906) fundamentally lacks such ambition and is far too openended.

THE PLAN

There are a number of practical things the government and the alternative Labor government can do to speed up our so-called "gold medal" run. Faced with vaccine hesitancy, fuelled by the Morrison government's own poor messaging, it is time Morrison confronted the anti-vaxxers, including MP George Christensen from his own ranks. These 'anti-vaxx' campaigners, are an eclectic combination of conspiracy theorists attending spurious and dangerous 'freedom' protests and citizens convinced by billionaire Clive Palmer's ongoing mass propaganda efforts. Palmer's United Australia Party, set to contest the next election, must be preferenced below Labor with Hanson and any other anti-vaxers on Coalition how-to-vote cards. (In the national interest, Labor's Anthony Albanese should reciprocate).

Failure to do so would completely undercut the national vaccination effort, which is our only roadmap out of this mess and method of navigating COVID's transition from pandemic endemic. It might cost the prime minister preferences, but it is the right thing to do. And it can only be done implementing a turbo-charged major public awareness campaign directed especially at migrant and hard-to-reach communities. Thus far, the Commonwealth's efforts in this direction have been desultory at best. There is an excellent example to follow. When the AIDS crisis hit Australia during the 1980s, there were shrill populist calls for the isolation of those with the disease, or worse. Led by the Hawke Labor government's health minister Neal Blewitt, public information campaigns targeted

the areas where gay men lived and socialised, and the community were central to spread a message of mutual responsibility and awareness of sexual health practices. AIDS was brought under control locally. Australia became a global role model.

Second, it is becoming clear that some form of financial incentive is needed. Federal Labor leader Anthony Albanese has put forward a plan to pay \$300 to adult Australians to speed up vaccination, including to those already jabbed, costing \$6 billion based on 20 million people. (https://www.abc.net.au/news/2021-08-03/anthony-albanese-proposes-\$300-jab-incentive/13481338) The plan has the added benefit of stimulating the economy at a time when many economists fear our nation is heading towards a double dip recession.

In rather kneejerk fashion, Scott Morrison rejected Albanese's proposal, instead pushing ahead with so-called 'freedom incentives' over cash payments. Revealingly, however, Lieutenant General John Frewen, the handpicked choice of the Prime Minister to run our vaccine roll-out, has left the door ajar for such incentives: "we'll look at all of the sorts of possible alternatives", he said, "there's cash, there's the ideas of lotteries". (https://www.businessinsider.com.au/scott-morrison-vaccine-incentive-300-coronavirus)

Albanese's plan has merit but there is scope for the policy to be more ambitious and more narrowly targeted. Another carrot, or rather apple, would involve refining the jab payment in terms of scale and content. We suggest keeping the payment of \$300 per person but run along the lines of a two-fold voucher system. Half of the payments would remain a cash voucher but on the proviso that monies can only be spent at small and medium sized businesses registered with the Australian Taxation Office – cafes and hospitality, hairdressers, local retailers, and self-employed service sector workers, in short those people hit hardest by repeated lockdowns, as well as tourist operators. This maintains the stimulus approach embedded in Labor's cash for jab plan, but in a more targeted manner which helps businesses most in need, not the pandemic's winners.

The last thing we need is mega companies such as retailer Harvey Norman – who infamously pocketed excess JobKeeper payments (https://www.theguardian.com/australia-news/2021/feb/26/harvey-norman-to-keep-22m-in-jobkeeper-despite-profits-doubling-to-462m-in-pandemic) – further fattening their profit margins. By way of comparison, the federal government was revealed this week to have sent more than 11,000 people Centrelink debt letters (in the period up to the end of April 2021) totalling more than \$32m, claiming they were overpaid JobKeeper (https://www.news.com.au/finance/11000-aussies-received-debt-letters-after-receiving-jobkeeper-payments/news-story/01b451456492b54e0d3dfebc88ef64a4), while refusing to retrieve money from businesses who got the wage subsidy and made big bucks.

The second half of the voucher should be reserved for monies spent on dental care in the next twelve months. As Nine Media reported in January, there is a significant risk of Australians developing long-term dental problems in the years ahead given the evidence of a dramatic drop in regular visits to the dentist in 2020 (https://www.theage.com.au/national/victoria/kids-oral-health-decays-after-

covid-restricts-visits-to-the-dentist-20210105-p56rxe.html), a trend likely to have been further exacerbated in 2021 by Australia's recent spate of further lockdowns.

Given the restrictions on their operations, dentists have not been able to attend to non-essential oral health check-ups, cleanings and preventive care, a problem compounded by patients putting off regular check-ups on account of financial pressures caused by unemployment or reduced pay-packets. Children and low-income earners are likely to suffer the most serious deterioration in dental health. A dental voucher system would address this problem and help leverage private sector capacity to reduce public waiting lists. If not, we'll all foot the bill for higher dental costs down the track.

The dental portion of the jab payment should be allocated on an income-tested basis, whereby individuals earning in excess of \$188,000 per financial year would not be eligible, that is 97% of Australians required to pay tax (https://www.abc.net.au/news/2021-06-09/typical-australian-wage-less-than-you-might-think-typical/100198488) would receive the payment along with welfare recipients. Not paying a dental jab incentive to the remaining 3 per cent of high earners (and many millionaires who pay no tax to the commonwealth each year) would free up tens of millions of dollars in aid of public awareness campaigning.

This fair and fiscally prudent policy would help the immediate challenge of boosting vaccination uptakes, provide stimulus for businesses which need it most and get ahead of a looming public health crisis, which will hit poor and working-class families hardest sooner than we think.

Looking further over the horizon, it might be the impetus required to push the commonwealth to move dental into Medicare, where it should be. Getting jabbed now will save millions of us from a more painful jab at the dentist later.

This cash for jabs sweetener is just what the doctor – or rather dentist – ordered.

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'The nation looked to Labor, and it did not look in vain.' - John Curtin, 26 July 1943

