

## Viewpoint: Great Barrington Declaration arguing for herd immunity ‘takes page from denialist propaganda playbook’

**W**hen you’ve been examining pseudoscientific and quack claims for over two decades, you start to recognize patterns in the strategies and technique used by those denying science to promote their pseudoscience or quackery. Those who don’t pay attention to these sorts of issues might have been surprised by or unfamiliar with these techniques, but many skeptics were not. I was thinking about this sort of thing when I came across the latest propaganda from COVID-19 deniers, conspiracy theorists, and grifters known as the [Great Barrington Declaration](#).

**[Editor’s note: Read David Gorski’s original article “[The Great Barrington Declaration: COVID-19 deniers follow the path laid down by creationists, HIV/AIDS denialists, and climate science deniers.](#)”]**

While I had heard rumblings of this “declaration” a few days ago, what really tweaked me to write about the Great Barrington Declaration in particular (and the history of such documents in general) was this Tweet from Herman Cain’s Twitter account:

So uh, why aren't the media listening to \*these\* scientists? <https://t.co/AnOibhGMU1>

— The Cain Gang (@THEHermanCain) [October 10, 2020](#)

**[Editor’s note: Read about the Trump administration’s support for the Great Barrington Declaration here: “[Controversial Great Barrington ‘focused protection’ herd immunity declaration finds support at the White House.](#)” Find more information about herd immunity at “[What does ‘herd immunity’ mean and why is it important?](#)” ]**

The thing about this Tweet that is simultaneously amusing and horrifying is that it comes from the Twitter account of a man who died of COVID-19 and whose account is being maintained by...whoever. To see such an account Tweeting a link that makes unscientific claims about COVID-19 under the slogan “Listen to the science” on Herman Cain’s actual website is horrifying:

“Listen to the science.”

That’s been the rallying cry of the left on a myriad of issues over the past several years: abortion, sex and gender, climate change and, most recently, the coronavirus.

Never mind the fact that objective science often disagrees with the left’s contentions.

So, they should be happy to reopen the country now that over 6,500 scientists and medical professionals have signed an anti-lockdown petition, according to the U.K. Daily Mail.

The petition, written by Dr. Sunetra Gupta of the University of Oxford, Dr. Martin Kulldorff of

Harvard and Dr. Jay Bhattacharya of Stanford, calls for the United States and the United Kingdom to end their lockdowns and promotes allowing the virus to spread among young people in order to build herd immunity.

The [Great Barrington Declaration](#) itself bemoans “lower childhood vaccination rates, worsening cardiovascular disease outcomes, fewer cancer screenings and deteriorating mental health,” claiming that these issues will lead to “greater excess mortality in years to come, with the working class and younger members of society carrying the heaviest burden,” the declaration advocates protecting the vulnerable (which the writers call “Focused Protection”) while basically letting COVID-19 race through the population in order to reach herd immunity:

Adopting measures to protect the vulnerable should be the central aim of public health responses to COVID-19. By way of example, nursing homes should use staff with acquired immunity and perform frequent PCR testing of other staff and all visitors. Staff rotation should be minimized. Retired people living at home should have groceries and other essentials delivered to their home. When possible, they should meet family members outside rather than inside. A comprehensive and detailed list of measures, including approaches to multi-generational households, can be implemented, and is well within the scope and capability of public health professionals.

Those who are not vulnerable should immediately be allowed to resume life as normal. Simple hygiene measures, such as hand washing and staying home when sick should be practiced by everyone to reduce the herd immunity threshold. Schools and universities should be open for in-person teaching. Extracurricular activities, such as sports, should be resumed. Young low-risk adults should work normally, rather than from home. Restaurants and other businesses should open. Arts, music, sport and other cultural activities should resume. People who are more at risk may participate if they wish, while society as a whole enjoys the protection conferred upon the vulnerable by those who have built up herd immunity.

On the surface, this sounds oh-so-reasonable. However, saying that we should aim for “herd immunity” is a common trope of COVID-19 deniers. While there are certainly valid concerns about potential negative effects of lockdowns and business closures on various health and economic measures and how society should balance the positive effects of preventing death from coronavirus infection versus the negative effects of restrictive measures designed to slow the spread of COVID-19, the statement above recommends a dangerous course not advocated by the vast majority of public health officials and infectious disease epidemiologists.

I’ll discuss why that’s the case in a moment, but first I’d like to take a trip down memory lane to revisit various examples of science denialists using similar “declarations,” “petitions,” and “open letters” to give the false appearance of strong scientific support for their positions. Why? Because declarations like this, although they can be used for good (such as when US climate scientists recently signed an [open letter to Congress](#) reaffirming the overwhelming scientific consensus that human activity is the primary driver of climate change and the overall warming of the climate), more frequently such letters are propaganda for

pseudoscience. Indeed, such “declarations,” “open letters,” and “petitions” signed by physicians and scientists represent a technique that goes back at least to the tobacco companies lining up lists of doctors to testify to the safety of cigarettes. (One particularly ludicrous example from R.J. Reynolds in the 1940s claimed that [113,597 doctors preferred their cigarettes](#).) The idea was (and is) to give the false impression of a scientific controversy where none exists and to appeal to the authority of scientists and doctors to support their claims. It’s a technique that John Cook has referred to as the “magnified minority”:

Magnified minority is a denial technique amplifying the contrarians' significance to convey the impression of expert disagreement. The Global Warming Petition Project uses this technique: it amounts to less than 1% of U.S. science graduates (full video at <https://t.co/RztsTyiyG9>) [pic.twitter.com/e9jHZH4qmg](https://pic.twitter.com/e9jHZH4qmg)

— John Cook (@johnfocook) [October 8, 2020](#)

In this, the Great Barrington Declaration is only a little different, but at its heart it’s the same technique from the same old playbook, with that “little difference” being that COVID-19 is a new disease and the scientific consensus regarding it isn’t as solid as the consensus is in the case of, for example, evolution, climate science, and vaccines. However, I’m quick to point out that that doesn’t mean that there aren’t wrong answers. The answers just have to be farther afield to be clearly outside of the wider range of scientific consensus, and that’s the case with the Great Barrington Declaration, as I’ll discuss. First, let’s start with my very first exposure to such propaganda, an example that I encountered around 14 years ago.

## Creationists against evolution

The first example of these “declarations,” “petitions,” or “open letters” (or whatever you want to call them) that I personally remember consisted of two such letters. The first was “[Scientific Dissent from Darwinism](#),” a statement against evolution (which creationists love to refer to as “Darwinism,” as though evolution science hasn’t advanced since the 19th century when Darwin lived) by “scientists,” and “[Physicians and Surgeons Who Dissent From Darwinism](#),” signed by, of course, physicians and surgeons going under the moniker of “Physicians and Surgeons for Scientific Integrity.” Of course, one thing that I noted right away about the latter letter is that physicians and surgeons are not experts in evolution and, alas, receive far less training in evolution than I personally think they should get. If you don’t believe me, just check out posts by our fearless leader [Steve Novella](#), [Harriet Hall](#) (although I don’t agree with [her conclusion](#) that there’s nothing in “evolutionary medicine” that wouldn’t be concluded anyway and therefore as a discipline it adds little of value), and, yes, [yours truly](#), that discuss the [importance](#) of evolutionary medicine.

What we see in letters like this can be demonstrated by quoting “[Physicians and Surgeons Who Dissent From Darwinism](#),” discussed in more detail [here](#):

As medical doctors we are skeptical of the claims for the ability of random mutation and natural selection to account for the origination and complexity of life and we therefore dissent from Darwinian macroevolution as a viable theory. This does not imply the endorsement of any

alternative theory.

Obviously, one difference here between this “dissent” and that of the Great Barrington Declaration is that this “dissent” doesn’t endorse any “alternative theory”, unlike the Barrington signatories, who endorse a specific different approach to the COVID-19 pandemic. On the other hand, in the case of this “dissent from Darwin,” the preferred alternative was implied, not explicitly stated. The group that promoted this list was the Discovery Institute, which has long promoted “intelligent design” creationism over evolution as the explanation for the diversity of life. This approach is rooted in the same sort of doubt and uncertainty being sowed about our current understanding of what the sciences of epidemiology and public health tell us about how to combat the COVID-19 pandemic. Moreover, if you look at the most recent [actual list of signatories](#) that I could find using the almighty Wayback Machine at Archive.org, you’ll soon see that none of these physicians show any evidence that they have any special expertise in evolutionary biology. Indeed, I always find it most telling that only five medical oncologists in the whole world signed on to the list. After all, if there’s any specialty that recognizes the primacy of evolution, it’s oncology, where physicians are always dealing with the evolution of resistance to therapy by tumors under the selective pressure of chemotherapy and other treatments. Of course, overall, only a few hundred physicians, at most, signed this statement; so even that’s not an impressive number.

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Amusingly and unsurprisingly, one of them was Dr. Michael Egnor, a creationist neurosurgeon whose nonsense about evolution I cut my skeptical teeth refuting even as I joked about putting a paper bag over my head in shame over how one of my “own,” a surgeon, could say such ridiculous things. None of this kept “intelligent design” creationism supporter Bill Dembski from [touting the doctors’ statement](#), even as these physicians bemoaned their “persecution” at the hands of those evil Darwinists:

Sadly, academic freedom is no longer assured in America and other countries. This is especially true when it involves espousing views contrary to the theory of Darwinian macroevolution. Numerous instances have been documented where scientists and teachers have been censored and even removed from their positions for facilitating open discussion of the empirical problems of the dominant theory. In fact, one scientist who simply followed procedures in allowing a controversial article to be peer-reviewed and then published in the journal he edited, was publicly vilified and relentlessly persecuted.[1]

As academia has suppressed freedom of speech in this area, another avenue needs to be available to promote accurate knowledge and the free exchange of ideas concerning the debate over Darwinism and alternative theories on origins. To accomplish that goal, Physicians and Surgeons for Scientific Integrity (PSSI) has been established. PSSI is a means for physicians and surgeons to be counted among those skeptical of nature-driven Darwinian macroevolution.

Because cranks always portray criticism of their pseudoscience as “persecution”.

The “scientific dissent from Darwinism” (which was a project of the Discovery Institute and, as hard as it is to believe, can still be found on the web [here](#), rather than requiring me to go to Archive.org) states:

We are skeptical of claims for the ability of random mutation and natural selection to account for the complexity of life. Careful examination of the evidence for Darwinian theory should be encouraged.

That's nice.

This statement and list are even more ridiculous. After all, one can understand that most physicians are not scientists, but rather highly trained and skilled practitioners who apply science to treat patients, but this second list is supposed to be made up of *real* scientists. Hilariously, Dr. Egnor makes another appearance on the list, and if you peruse the [list](#) you'll find that the vast majority of the scientists on the list are not evolutionary biologists or even biologists. There are a number of physicists, chemists, engineers, physicians, and the like, but a marked paucity of actual evolutionary biologists.

Amusingly, so ridiculous was this list, that the National Center for Science Education started a parody list called “[Project Steve](#)” that consisted of scientists named Steve who accept the science supporting evolution (in fairness, NCSE also accepted Stephens, Stevens, Stephanies, Stefans, and so forth and noted that Etiennes and Estebans would have also been welcome):

Creationists draw up these lists to try to convince the public that evolution is somehow being rejected by scientists, that it is a “theory in crisis.” Not everyone realizes that this claim is unfounded. NCSE has been asked numerous times to compile a list of thousands of scientists affirming the validity of the theory of evolution. Although we easily could have done so, we have resisted. We did not wish to mislead the public into thinking that scientific issues are decided by who has the longer list of scientists!

Project Steve pokes fun at this practice and, because “Steves” are only about 1% of scientists, it also makes the point that tens of thousands of scientists support evolution. And it honors the late Stephen Jay Gould, evolutionary biologist, NCSE supporter, and friend.

The [current count of Steves](#) who've signed the list is 1,470 as of August 12. NCSE also noted that it was not going to do similar lists for “Janes, Johns, and so on” because “it's only funny once.”

## **“Reassessing” HIV as the cause of AIDS**

This technique of compiling lists of scientists in order to give the appearance that the science being attacked is “in crisis” and the alternative denialists propose is scientifically legitimate is much older than 15 years. Indeed, the [oldest one I paid attention to](#) was first published a group called “The Group for the

Scientific Reappraisal of the HIV-AIDS Hypothesis,” whose most prominent member was Peter Duesberg:

It is widely believed by the general public that a retrovirus called HIV causes the group of diseases called AIDS. Many biochemical scientists now question this hypothesis. We propose that a thorough reappraisal of the existing evidence for and against this hypothesis be conducted by a suitable independent group. We further propose that critical epidemiological studies be devised and undertaken.

Of course, HIV was [identified and isolated](#) as the causative virus for AIDS in 1984, and by 1991 the evidence in support of this hypothesis was overwhelming. This group tried to get the statement published in a number of scientific journals, but failed; that is, until 1995, when, inexplicably, *Science* published a [version of it](#):

In 1991, we, the Group for the Scientific Reappraisal of the HIV/AIDS Hypothesis, became dissatisfied with the state of the evidence that the human immunodeficiency virus (HIV) did, in fact, cause AIDS.

Specifically, we have proposed that researchers independent of the HIV establishment should audit the Centers for Disease Control's records of AIDS cases, bearing in mind that the correlation of HIV with AIDS, upon which the case for HIV causation rests, is itself an artefact of the definition of AIDS. Since 1985, exactly the same diseases or conditions have been defined as “AIDS” when antibodies are present, and as “non-AIDS” when HIV and antibodies are absent. Independent professional groups such as the Society of Actuaries should be invited to nominate members for an independent commission to investigate the following question: How frequently do AIDS-defining diseases (or low T cell counts) occur in the absence of HIV? Until we have a definition of AIDS that is independent of HIV, the supposed correlation of HIV and AIDS is mere tautology.

Other independent researchers should examine the validity of the so-called “AIDS tests,” especially when these tests are used in Africa and Southern Asia, to see if they reliably record the presence of antibodies, let alone live and replicating virus.

The bottom line is this: the skeptics are eager to see the results of independent scientific testing. Those who uphold the HIV “party line” have so far refused. We object.

Of course, since even 1995, the evidence linking HIV to AIDS has become even stronger, particularly, as [Dr. Novella noted](#), given how anti-retroviral drug cocktails targeting HIV have resulted in the conversion of HIV infection from a virtual death sentence to making it a chronic, manageable disease whose sufferers can, with treatment, live almost a normal lifespan. Unfortunately, as with forms of denial such as antivaccine misinformation, HIV/AIDS denial has real-world consequences in the form of the unnecessary deaths of people infected with the retrovirus, people such as [Christine Maggiore and her daughter](#).



## And all the rest

There are a number of other examples of similar statements/petitions/declarations signed by scientists designed to give the impression that the pseudoscientific or quack viewpoint in question has major scientific support. Unsurprisingly, climate science denialists have made use of this particular propaganda technique; for example, an [open letter](#) to the United Nations by the Netherlands-based Climate Intelligence Foundation (Clintel) and promoted by “Friends of Science,” a Canada-based “non-profit organization run by dedicated volunteers comprised mainly of active and retired earth and atmospheric scientists, engineers, and other professionals, claiming that there is “[no climate emergency](#)“. This “no climate emergency” is a line that [Clintel](#) in particular has been promoting. Unsurprisingly, it has been widely reported that the Friends of Science is a [front group](#) funded by Calgary’s [fossil fuel industry](#), while, as is the usual case in these letters, very few the 500 or so signatories to the “no climate emergency” statement have any actual background in climate science, as noted by [Desmogblog](#), while many of the signatories are well-known climate science deniers. Several years earlier, climate science denialists sent a similar letter, signed by 125 scientist to the UN Secretary-General peddling the same discredited tropes. Again, few of the signatories had any background in climate science, with most of them being engineers, physicists, geologists, and the like and one being a professor of marketing (appropriate, given that this letter was propaganda).

There are multiple other such “petitions” and “open letters” by climate science deniers, including the [Oregon Petition](#), the [International Conference on Climate Change](#), and the [Cornwall Alliance](#), among [others](#).

Perhaps my favorite such letter is the [AE911Truth Petition](#). Yes, it’s a petition by a group adhering to the “9/11 truth” conspiracy theory that claims that the World Trade Center towers could not have been brought down by jet liners crashing into them and that the “conventional” narrative is wrong. They generally also claim that, because the crashes alone supposedly couldn’t have brought down the towers, there must have been explosives planted to result in a “controlled demolition”, perhaps as part of an “inside job”, and that’s what the petition states:

On Behalf of the People of the United States of America, the undersigned Architects and Engineers for 9/11 Truth and affiliates hereby petition for, and demand, a truly independent investigation with subpoena power in order to uncover the full truth surrounding the events of 9/11/01 — specifically the collapses of the World Trade Center Towers and Building 7. We believe there is sufficient doubt about the official story and therefore the 9/11 investigation must be re-opened and must include a full inquiry into the possible use of explosives that might have been the actual cause of the destruction of the World Trade Center Twin Towers and Building 7.

Sadly, it's signed by over 3,000 architects and engineers. AE911Truth contends that these are, unlike the case for letters "dissenting from Darwin" or "doubting climate science," supposedly actual experts who could make such a conclusion; other engineers point out a number of problems, [for example](#):

Only a handful of architects and engineers question the NIST Report, but they have never come up with an alternative. Although at first blush it may seem impressive that these people don't believe the NIST Report, remember that there are 123,000 members of ASCE (American Society of Civil Engineers) who do not question the NIST Report. There are also 80,000 members of AIA (American Institute of Architects) who do not question the NIST Report.

Although their field of expertise is not related to the construction of buildings – they don't seem to have a problem with that over at AE911truth – there are also 120,000 members of ASME (American Society of Mechanical Engineers) who do not question the NIST report. There are also 370,000 members of IEEE (Institute of Electrical and Electronics Engineers) who do not question the NIST report. There are also 40,000 members of AIChE (American Institute of Chemical Engineers) who do not question the NIST Report. There are also 35,000 members of AIAA (American Institute of Aeronautics and Astronautics) who do not question the NIST report. So who would you rather believe?

It's also noted that, although this group "questions" the "official 9/11 narrative", they don't present "any calculations that show how the NIST Report is wrong."

## **But where are the antivaxxers?**

One of the odd things that I realized as I was researching and writing this post was that I didn't remember any such declarations or petitions with lists of doctors and/or scientists like this promoted by the antivaccine movement, and I've been paying attention to the movement since at least 2000. This troubled me, because if there's a form of quackery and pseudoscience that I'd have thought would use the false authority of a list of scientists and doctors, it would be the antivaccine movement. There have been many "open letters" from "health freedom" and "medical freedom" organizations, for example this letter from the European Forum for Vaccine Vigilance to the World Health Organization. Yet the list of signatories appears not to include a single doctor or scientist, but does include Robert F. Kennedy, Jr. and a lot of antivaccine and "health freedom" organizations. There have also been [such "open letters" by lawyers](#) on the constitutionality of school vaccine mandates, but I was unable to find anything like the letters by creationists, HIV/AIDS deniers, 9/11 Truthers, and the like.



I can only speculate, but I suspect it's probably one or the other (or a combination of two) reasons. First, I suspect that the number of scientists and doctors who are antivaccine enough to be willing to sign their names to such a document is so small that it would not be very impressive or convincing. Second, many antivaccine doctors are into "autism biomed" quackery and grift. It's possible that they are reluctant to "go public" and draw the attention of the FDA or state medical boards to their activities. These reasons could be wrong, but they are all I could come up with.

This brings me back to the Great Barrington Declaration.

## **Herd immunity against COVID-19 is likely not achievable without a vaccine**

The Great Barrington Declaration basically argues these points (with my comments in brackets):

- Lockdowns are seriously impacting public health (arguable); and
- The SARS-Cov-2, the virus that causes COVID-19 is not as dangerous to the young as it is to the old (true but deceptive); therefore,
- We should protect the vulnerable, such as the elderly (which means basically those over 50 or 60 years old—which could include me) and those with comorbidities known to increase the risk of life-threatening disease from COVID-19, such as obesity, diabetes, and hypertension (not as easily done as implied); and
- The young should be allowed to go about business normally, with "simple hygiene measures, such as hand washing and staying home when sick" being "practiced by everyone to reduce the herd immunity threshold," as high-risk vulnerable groups are protected.

On the surface, it all sounds so reasonable, but there are a lot of issues with this proposed solution, as a number of epidemiologists have pointed out. Also, as is the case with most such letters, while a handful of the signatories are actual experts, the vast majority are not. Worse, those promoting the Declaration [haven't been too careful](#) about vetting their "expert" signatories:

The statement claims to have been signed by more than 6,000 medical scientists, but anyone can sign up claiming to be one (there are a number of [fake medical signatories](#) on the list, including a Dr Harold Shipman). When Sky News pressed one of the co-authors on this, he said: "We do not have the resources to audit each signature." Consider what this approach would mean for scientific endeavour were it applied more broadly. And what are scientists doing fronting a campaign whose back office is run by a thinktank that flirts with climate change denial?

Examples include:

Okay I take it back, some very big names have signed this Great Barrington Declaration.  
[#COVIDUK](#) /thread

[pic.twitter.com/iKCpwgWAJ1](https://pic.twitter.com/iKCpwgWAJ1)

— Dr Dominic Pimenta (@DrDomPimenta) [October 9, 2020](#)

COCONUTS [pic.twitter.com/M4yHMYaaao](https://pic.twitter.com/M4yHMYaaao)

— Dr Dominic Pimenta (@DrDomPimenta) [October 9, 2020](#)

Dodgy global tooth harvesting outfit [pic.twitter.com/pfllrdauug](https://pic.twitter.com/pfllrdauug)

— Dr Dominic Pimenta (@DrDomPimenta) [October 9, 2020](#)

Paging Dr Oakeshott [pic.twitter.com/0HoOZb6EEV](https://pic.twitter.com/0HoOZb6EEV)

— Dr Dominic Pimenta (@DrDomPimenta) [October 9, 2020](#)

I wonder what their DATA policy is ??? [pic.twitter.com/cYN7dTqltr](https://pic.twitter.com/cYN7dTqltr)

— Dr Dominic Pimenta (@DrDomPimenta) [October 9, 2020](#)

Lipup Fatty has been banned in the U.K. since 1992 [pic.twitter.com/YxYfEg7KGP](https://pic.twitter.com/YxYfEg7KGP)

— Dr Dominic Pimenta (@DrDomPimenta) [October 9, 2020](#)

Bernard Castle is actual British slang for “pathetic excuse”. (This is 100% true).  
[pic.twitter.com/7ITI9R1BK1](https://pic.twitter.com/7ITI9R1BK1)

— Dr Dominic Pimenta (@DrDomPimenta) [October 9, 2020](#)

But in all seriousness 20-30% of these signatories are clearly a joke, and there is no verification in place. This was only the first page.

These headlines are very misleading.

— Dr Dominic Pimenta (@DrDomPimenta) [October 9, 2020](#)

Hilariously, the admins for the Declaration claim that only 0.1% of its signatories aren't real:

The admins of [#GreatBarringtonDeclaration](#) have been working scrupulously all day and have

found a 0.1% false positive rate on signatures (mostly due to trolls who announced themselves on Twitter). The attacks are desperate at this point. <https://t.co/09sKNMeTLG>

— Jeffrey A Tucker (@jeffreyatucker) [October 10, 2020](#)

As amusing as it is to laugh at those behind the Declaration and their foolishness, basically [allowing anybody to sign it](#) claiming to be a scientists (indeed, apparently the website's admins have [removed the search function](#) from their website, so embarrassed are the scientists behind the Declaration over the fake signatures), let's look at the claims in the Barrington Declaration itself. I like to start out with this rebuttal by The Real Truther to the claim that lockdowns are causing missed vaccine appointments, cancer screenings, surgeries, and deteriorating mental health when ALL are actually consequences of the pandemic:

Hey [@MartinKulldorff](#), why does your [#COVID](#) "declaration" blame government lockdowns for missed vaccine appointments, cancer screenings, surgeries & deteriorating mental health when ALL are actually consequences of the pandemic & occurred in countries that didn't lockdown also? <pic.twitter.com/cc2fHwtlzG>

— TheReal Truther (@thereal\_truther) [October 9, 2020](#)

Not only did no government mandate restrict vaccine appointments, the CDC actually issued guidance in March to ensure parents don't skip vaccine visits because of the pandemic. <pic.twitter.com/0nmXwbqR8L>

— TheReal Truther (@thereal\_truther) [October 9, 2020](#)

While the US and UK issued guidance to urge parents not to miss appointments for vaccines:

Pediatricians were so concerned parents were cancelling appointments OUT OF FEAR OF THE VIRUS that they started house calls to boost vaccination rates. <https://t.co/uT1MCnvRVw>

— TheReal Truther (@thereal\_truther) [October 9, 2020](#)

It's not just the USA also. In the UK the government issued guidance to urge parents NOT to miss appts. <https://t.co/Oxb6hvpkUa>

— TheReal Truther (@thereal\_truther) [October 9, 2020](#)

More from the UK

"It is really important that parents know the vaccination programme for children is continuing, even at this time," she says." <https://t.co/0WfbveYeor> [pic.twitter.com/eR2bgtkpKp](https://pic.twitter.com/eR2bgtkpKp)

— TheReal Truther (@thereal\_truther) [October 9, 2020](#)

And the USA:

"It is critical for children to stay current on their vaccinations, especially during this global pandemic," says Dr. Gigi Chawla, chief of general pediatrics at Children's Minnesota." <https://t.co/J4uOry7NS1>

— TheReal Truther (@thereal\_truther) [October 9, 2020](#)

The Real Truther also notes that mental health issues derive more from the pandemic itself than from lockdowns. For instance, in Sweden, where the government instituted policies more in line with what the Great Barrington Declaration wants, people weren't spared the mental health effects, and calls for depression [increased 125%](#), while it was estimated that around one in eight cancer cases [might have gone undetected](#). (The same thing happened in Japan, which didn't lock down either, with [suicides increasing](#) and [screenings for cancer halted](#).)

Meanwhile, in the US:

Well put by [@DavidGauke](#). The idea that there is some simple tradeoff between health and the economy is wrong. <https://t.co/OQ8noXuKqb> [pic.twitter.com/XVVvKKh5iG](https://pic.twitter.com/XVVvKKh5iG)

— Jonathan Portes (@jdportes) [October 10, 2020](#)

An interesting paper here look at US evidence, concluding that most of the observed impacts resulted from individual/household/business responses, not government mandates.. <https://t.co/itMugpZYmu> [pic.twitter.com/djZB4n7u4v](https://pic.twitter.com/djZB4n7u4v)

— Jonathan Portes (@jdportes) [October 10, 2020](#)

A conservative in the UK named David Gauke actually [summed it up pretty well](#):

But there are a couple of problems with this argument. First, if the virus takes hold, it will not matter whether pubs have to close at 10pm, 11pm or 12pm. People will not want to go to the pub or restaurant, cinema, shop or office. Most of the economic damage caused by a virus is driven by people voluntarily changing their behaviour.

Precisely. To get the economy to rebound, we have to have the virus under control.

As for herd immunity, [listen to this epidemiologist explain](#) why, without a vaccine, trying to reach herd immunity is unlikely to be successful without massive death:

The main problem is something very basic — herd immunity requires IMMUNITY to the disease. When people are proposing herd immunity as an exit strategy for COVID-19, what they are implicitly arguing is that, once infected, you cannot get the disease again — you are immune.

Unfortunately, we know that this simply isn't the case. There are already widespread reports of people getting reinfected with COVID-19, and worryingly some of these people are having MORE severe infections the second time around. This makes herd immunity in the traditional sense largely unreachable, because some people can clearly get infected and transmit the virus on to others over and over again.

We also don't know how long the immunity will last even in people who get infected and are then immune. Some people may be immune for months, some for years, some for their entire lives — we simply have very little idea and won't know for sure for a while yet. If large swathes of the population are infected this year but do not develop long-lasting immunity, chances are we'll have epidemics in the future as well.

He also notes that this pretty much demolishes the Great Barrington Declaration's suggestion to have nursing homes staffed only with people who've recovered from COVID-19. Why? Because it's unknown how long their immunity will last, and that immunity might be very transient! He also notes what it would take to protect the "vulnerable":

This makes plans to protect the more vulnerable populations even more problematic —even if you staffed an aged care centre only with people who'd had COVID-19 before, you would expect some proportion of them to get sick the next time an epidemic broke out anyway, potentially infecting the vulnerable older people you set out to protect.

Yale epidemiologist Gregg Gonsalves has [been particularly brutal](#) in his assessment of "Focused Protection", noting:

Let's put this into some real-world context. In the United States, only a small proportion of older Americans live in nursing or care homes, where we have shown little ability to keep our elders safe over the past eight months. The bulk of older Americans are integrated into our communities, living alone or with their spouses or their families. Even if we could make nursing homes into impenetrable fortresses impervious to viral entry, it's not at all clear how we'd keep

the millions of elderly “safe” as they live around, among, and with us. In fact, data from CDC suggests that we haven’t done a good job at all on this, and when virus cases surge in young people, the elderly are next in line for transmission.

Another group of people to whom these three august academics give short shrift are the chronically ill in America. The CDC estimates that nearly half of all Americans (47.5 percent) have underlying conditions that predispose them to severe Covid-19 outcomes. If it is a challenge to think of sequestering the elderly, what do we do with almost half of our fellow Americans who may be at similar enhanced risk of complications and death from Covid-19?

I’m over 50 and have hypertension. That puts me in *at least* an intermediate risk, if not high risk, group for severe disease and death from COVID-19. Many of the readers of this blog fall into the second group, as obesity, diabetes, and hypertension are very common in our population. Gonsalves also notes that the young are not entirely safe either, particularly that for those hospitalized with COVID-19: 21% required intensive care, 10% required mechanical ventilation, and 2.7% died, while half of the young people hospitalized in this cohort were black or Latino. Also, the Great Barrington Declaration is based on a false premise, given that few, if any, epidemiologists are advocating lockdowns any more; instead, they are advocating more limited restrictions, social distancing, contact tracing, extensive testing, and the use of masks. Indeed, we aren’t in “lockdown” any more and haven’t been for some time, while even our “lockdowns” in the US have been nowhere near as drastic as they were in, for example, China early in the pandemic.

Interestingly, I noticed that, for all the recommendations to protect the vulnerable in the Great Barrington Declaration, nowhere does it mention the widespread use of masks, testing (other than for nursing home staffs), or contact tracing. I wonder why, given that masks work and are a relatively easy measure for people to use—or would be, if they hadn’t been politicized to the point where wearing or not wearing a mask is considered a signifier of one’s political “tribe,” and testing and tracing, although not adequate in and of themselves, are widely agreed to be an important part of any COVID-19 public health mitigation strategy.

To boil it all down, if you listen to epidemiologists and public health scientists, you’ll soon realize that it’s impossible to protect the vulnerable from a virus that’s rapidly spreading among the entire population, even if the risk of death or severe disease is much lower in the young. Thus, protecting the vulnerable is only part of a science-based approach to controlling the pandemic that won’t be enough on its own. Those behind the Barrington Declaration claim that they’re not advocating “locking up the elderly,” but in practice that’s exactly what they’re doing, and their plan [borders on eugenics](#):

We’re close to a turning point in the virus: Vaccines will arrive sometime in the next year, and when they do, they’ll put us on a much safer course toward ending the pandemic. “We’ll get herd immunity, but let’s do that with a vaccine, not by sacrificing people,” said Halkitis. “It’s not 1918, for God’s sake.” In the meantime, both Halkitis and Gonsalves agreed that it would be dangerously unwise to follow the Great Barrington Declaration’s advice. “The idea that you can keep outbreaks among the young away from the elderly is ridiculous,” says Gonsalves. “They



can spin it however they like, but they don't really have a plan—it's grotesque, and it borders on eugenics."

I would disagree with Gonsalves in that I wouldn't have used the word "borders". It *is* eugenics.

## **The final wrinkle: Climate science denial meets COVID-19 denial**

An interesting final wrinkle emerged on Friday, one that should surprise no one. That's when [it was reported](#) that the "think tank" behind the Great Barrington Declaration is a climate science denialist organization funded in part by the Koch brothers:

On 3 October 2020, the American Institute for Economic Research (AIER), a libertarian free-market think-tank in Great Barrington, Massachusetts, hosted a private gathering of scientists, economists and journalists to discuss responses to the COVID-19 pandemic. Among them was the distinguished Oxford University epidemiologist Professor Sunetra Gupta, among the most vocal proponents of a 'herd immunity' strategy.

The Great Barrington Declaration, after the town in which it was created, was drafted by Gupta with two other top US scientists, Professor Martin Kulldorff of Harvard University and Stanford Fellow Jay Bhattacharya. The Declaration itself – which calls for only the elderly and vulnerable to be quarantined while encouraging young people to contract the virus – was signed by an initial batch of some 35 scientists.

There's big money behind it too:

Indeed the AIER is not just a free-market think-tank. It receives a large bulk of its funding from its own investment activities, not least in fossil fuels, energy utilities, tobacco, technology and consumer goods. AIER owns a major investment firm, American Investment Services Inc., which harnesses the think-tank's research to help inform investment advice. Security Exchange Commission filings seen by Byline Times confirm that AIER's American Investment Services Inc. runs a private fund valued at \$284,492,000.

One notes that the scientists behind this Oxford professor Sunetra Gupta, Stanford physician Dr. Jay Bhattacharya (whose research interest is the economics of health care, not epidemiology), and Harvard professor Dr. Martin Kulldorff (who is a biostatistician, not an epidemiologist) stated in an [accompanying video](#) that their declaration should "sit outside politics." I had to laugh at that given that they were supported by AIER and launched their Declaration at an event hosted by the group, given that AIER is anything *but* apolitical.



Martin Kulldorff of Harvard Medical School, Sunetra Gupta of the University of Oxford and Jay Bhattacharya of the American Institute for Economic Research in Great Barrington.

One possible interpretation is that Drs. Gupta, Bhattacharya, and Kulldorff are politically very naïve (or, as I'd call them, useful idiots for AIER), which, I suppose, is possible. Many scientists are pretty clueless about the political ramifications of what they do and can be duped by ideological groups. However, I tend to doubt that they're *that* naïve. Instead, I believe that these scientists are likely being disingenuous and know exactly what they are doing. They almost certainly believe that they are doing good, but they are

also very likely ideologically aligned with AIER, leading them to genuinely believe that the FP approach is the best balance between harm due to public health interventions and harm and death due to COVID-19. My interpretation is that, whether they realize it or not, this trio is providing “scientific cover” and a “scientists divided” narrative to cast doubt on the science they don’t accept beloved of science denialists since tobacco companies first started casting doubt on science showing the harmful health effects of smoking in the service of a free market fundamentalist “solution” to the COVID-19 pandemic. Indeed, the fact that the trio behind the document [have met with](#) White House coronavirus advisor Scott Atlas, Health and Human Services Secretary Alex Azar, and Florida Governor Ron DeSantis, all of whom advocate for immediate “reopening” of business and against maintaining strong public health interventions against COVID-19. Not coincidentally, their preferred approach is much more in line with the approach advocated in the Great Barrington Declaration, strongly suggesting that these scientists are likely to be motivated as much by ideology as their interpretation of COVID-19 public health science. So does Dr. Bhattacharya’s recent claims that he’s being “[censored](#)” and “[silenced](#).” (As an aside, that [first link](#) was an interview with ZDoggMD, which disappoints me.)

Whether you want to call it the “magnified minority,” as John Cook does, or something else, to me the Great Barrington Declaration represents a variation on decades-old astroturf techniques. Just as those behind astroturf campaigns seek to disguise their campaigns as organically arising from grassroots efforts and activism, this form of astroturf seeks to cloak the agenda of business or ideological groups in the guise of science by portraying their agenda as organically arising from the science, using scientists ideologically sympathetic or aligned with them to spearhead their message and then gathering as many signatures as they can from scientists and doctors, regardless of whether they have actual expertise in the relevant sciences. It’s something that’s been going on for decades, which makes it unsurprising that it’s found its way into COVID-19 denial and provided fodder for [Fox News](#) and others to argue against various COVID-19 mitigation strategies.

**David H. Gorski, MD, PhD, FACS is a surgical oncologist at the Barbara Ann Karmanos Cancer Institute specializing in breast cancer surgery, where he also serves as the American College of Surgeons Committee on Cancer Liaison Physician as well as an Associate Professor of Surgery and member of the faculty of the Graduate Program in Cancer Biology at Wayne State University. Find David on Twitter [@gorskon](#)**

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