

Lockdown Politics — The Great Travesty

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Nearly one year into the COVID pandemic, even a modicum of critical thinking should tell us that lockdown politics as practiced in the United States is an unmitigated disaster, and with no end in sight. The reference here to lockdown politics is meant to signify a particularly assaultive, tyrannical set of government policies that in less than a year have brought severe harm to millions, more likely tens of millions of Americans and others across the world. Sadly, a Joe Biden presidency is only bound to aggravate this already intolerable repression and misery.

One grievous problem with the lockdown mania is that by obsessively fixating on the virus, a power-mad elite has ignored what must drive any public intervention: the need for a comprehensive, detailed cost-benefit analysis informing social policy. Stale rhetoric about “following the science” turns out to be not only one dimensional and useless, yet it remains a justification for continuing mass shutdowns, in state after state. The worst consequences include millions of lost jobs and businesses, escalating poverty, record numbers of bankruptcies, educational chaos, new health crises, a sharp rise in addictions and myriad psychological problems.

Meanwhile, it has become abundantly clear that lockdown rules – the very rules overlooked at times of street demonstrations and upheavals – apply only to Trump supporters, the great “super-spreaders”, wherever they gather. Those arbitrary directives have been cynically used by Democratic governors, mayors, and their health czars as a dictatorial political weapon – in part to bolster their own power, in part to subvert Trump’s second presidential run. For them, the pandemic is welcomed as a godsend, to be leveraged for a “global reset” on the road to maximum power, an incipient fascism. What we have here is what C. Wright Mills long ago called the “higher immorality” in his classic *The Power Elite*.

Entirely predictable fallout from months of destructive lockdowns were recently acknowledged by even the staid World Health Organization, which urged a worldwide end to the shutdowns – a message, however, never processed by an insular political/medical/media establishment in the U.S. The WHO projects a future of intensified global poverty, food insecurity, disease spread, and other health crises so long as the lockdown remains in place. Food-supply chains have already been harshly disrupted from the combined effects of COVID and harmful government controls. What leading Democrats such as Berkeley professor Robert Reich and California Governor Gavin Newsom commonly (and senselessly) refer to as an “inconvenience” will, as WHO leaders stress, bring added impoverishment to possibly hundreds of millions of people in lesser-developed nations already trapped in endless cycles of social misery. Such damage scarcely registers across the corporate media, where the horrors are casually written off as “collateral damage”.

The WHO warning has been reaffirmed by thousands of medical professionals and scientists

aligned with the “Great Barrington Declaration” – a well-grounded denunciation of the lockdown politics that retains a dogmatic hold on Biden and the Dems. The “Declaration” was orchestrated by three world-respected scientists: Jay Bhattacharya of Stanford, Martin Kulldorf of Harvard, Sunetra Gupta of Oxford. Their message, drawn from a painstaking assemblage of international research, is clear and urgent – end draconian restrictions in favor of “focused protection”, which sensibly allows those (the vast majority) at minimum risk of extreme sickness to return to normal social lives. Those least threatened (under age 50) have a 99.98 likelihood of surviving any bout with COVID – less risky than the ordinary flu. The “Barrington” scientists urge a shift toward what in fact has been the historical norm for virus-mitigation: policies taking into account the full range of economic and social as well as medical factors, logically necessary to curtail the amount of *total harm*.

The nonstop political/media fearmongering behind mass shutdowns assumes, wrongly, that this particular virus (unlike most others) can somehow be banished from human existence, never to return. They further believe, against all logic and experience, that lockdowns must be imposed until a vaccine is discovered and administered (by mandate?) to entire populations, the ostensible goal being some type of general immunity. Generally forgotten is the poor efficacy of so many vaccines that are promoted as uniform remedies. In fact a vaccine has long been available for influenza, yet the success rate hovers between 20 and 60 percent while hundreds of thousands of people die yearly (roughly 650,000 on average) across the world from that stubborn virus.

The lofty medical experts have little to say, moreover, about the state of public health in general. In the U.S., deaths for 2018 totaled nearly three million, with heart disease (655,000) and cancer (600,000) topping the list. What particularly stands out, however, are the mortality levels for all respiratory diseases, including influenza and pneumonia (both viral and bacterial): roughly 220,000, close to the yearly average and little more than the current COVID death toll. Never in 2018 nor at any time in the past has any government, health, or media figure called for mass lockdowns to either “flatten the curve” or “destroy the virus” in response to such health challenges. Not even a murmur in that direction, much less moral panic.

No moral panic either, when it comes to such health catastrophes as drug addiction, severe reactions, and overdose deaths. In the U.S., overdose deaths (the majority from pharmaceuticals) rose from 39,000 in 2010 to 70,000 by 2017, while opioid fatalities alone increased from 21,000 in 2010 to more than 48,000 by 2018 – trends met with deafening silence across the media, its revenues enriched by nonstop Big Pharma advertising. The journal *Lancet* recently (October 24th) reported that overdose deaths globally have risen more than 20 percent from combined mental and physical traumas resulting more from the lockdowns than the pandemic itself.

Just as revealing is the irresponsible failure of “experts” to consult the abundance of relevant historical experience. To start: what might we conclude from the great 1957-58 Asian flu pandemic – a horrific disease that, in the U.S., was greeted with . . . business-as-usual? It was said that this virus infected more people than even the 1918 Spanish flu, which killed up to 50 million people. While data collection in the 1950s was rather shaky, American deaths alone were estimated at 120,000 with a fatality rate of 0.67 percent, far worse than for present-day COVID. More shocking, global Asian flu deaths were reported in the range of between one and four million – now equivalent to possibly ten million deaths when considering a near tripling of the world population since the late 1950s. That could mean as

much as *nine times* the world COVID mortality count today (about 1.3 million, if that count is not wildly exaggerated). Do we need to mention here that the Asian flu provoked no moral panic, no mass lockdowns, few (and only very brief) school closings?

Nor does the lockdown fanaticism survive any serious present-day comparative scrutiny. Two of the strictest lockdown countries – the U.S. and Britain – rank among the very worst in deaths per million population. According to *Statista*, the numbers are 700 and 732 respectively. Other states with the most extreme authoritarian practices follow: Italy at 686 per million, France at 595, Spain at a world-record 824. Compare these dreadful numbers to those of countries that refused total lockdowns, that relied more on *compliance* than on *force*: Japan at 15 per million, Cuba at 12, South Korea at 9.4, China at 3.4, Vietnam at 0.36 (with no cases in the past 200 days), Taiwan at 0.25. Even much-castigated, lockdown-free Sweden, at more than 500 deaths per million (though few in the past month) ranks far better than the U.S. and most European countries. And Sweden's economy remains fully intact, with minimal social harm from power-hungry governing authorities.

In Japan, after somewhat brief and sporadic closures for an initial state of emergency, daily life has essentially returned to normal – shops, restaurants, bars, museums, cinemas, gyms, and schools now mostly open, internal travel restrictions lifted. In contrast to the U.S., there has been no media fear-based propaganda, thus no social or political overreach. In Tokyo, any talk of mass lockdowns has been fiercely resisted. With a population of 127 million settled in densely-concentrated cities, Japan has seen coronavirus deaths (early November) limited to 1600, fewer than most American states.

The Vietnam experience could be more impressive yet: with a large urban population of nearly 100 million, COVID deaths so far number only 35. After some initial travel restrictions and brief local quarantines, no serious nationwide lockdowns have been ordered. Relying on social compliance instead of institutional force – like many Asian countries – the Vietnamese have deftly and creatively managed disease outbreaks in much the same way they have routinely dealt with influenza. The availability of universal healthcare, as in Japan and elsewhere, offers resources far less expensive and more inaccessible than in the U.S., but that is hardly the full story. The lessons from Japan and Vietnam demonstrate that lockdown despotism is not only seriously misguided but drastically counterproductive, vastly more harmful than helpful.

Similar comparisons hold for individual states in the U.S. Thus New York, a Democratic state with probably the longest, most severe lockdown regime, has a disastrous record of more than 33,000 deaths for a population of roughly 20 million, exactly *double* the numbers for Republican Florida (16,900 fatalities) with its 22 million inhabitants. The media, however, has chosen to heap praise on New York and its brutally inept governor Mario Cuomo while bashing Florida and its Republican governor Ron DeSantis.

The lockdown mania remains an unmitigated calamity for American society – an avoidable travesty feverishly stoked by every major center of power: Big Pharma, the tech giants, deep state, Wall Street along with Democrats and their media publicists. With the likely ascendancy of Biden to the White House, surrounded as he is by a wide circle of Strangelovian medical “advisers” embedded in those very centers of power, any radical departure from the American pattern of coercion and failure now seems hard to imagine. Sadly, while these elites love to speak about “listening to the scientists”, they are among the least inclined to follow actual historical and comparative experience. Theirs is an oligarchic, authoritarian system of rule.

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