OPINIONCOMMENTARY

Fauci and Walensky Double Down on Failed Covid Response

Lockdowns were oppressive and deadly. But U.S. and WHO officials plan worse for the next pandemic.

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The Centers for Disease Control and Prevention belatedly admitted failure this week. "For 75 years, CDC and public health have been preparing for Covid-19, and in our big moment, our performance did not reliably meet expectations," Director Rochelle Walensky said. She vowed to establish an "action-oriented culture."

Lockdowns and mask mandates were the most radical experiment in the history of public health, but Dr. Walensky isn't alone in thinking they failed because they didn't go far enough. Anthony Fauci, chief medical adviser to the president, recently said there should have been "much, much more stringent restrictions" early in the pandemic. The World Health Organization is revising its official guidance to call for stricter lockdown measures in the next pandemic, and it is even seeking a new treaty that would compel nations to adopt them. The World Economic Forum hails the Covid lockdowns as the model for a "Great Reset" empowering technocrats to dictate policies world-wide.

Yet these oppressive measures were taken against the longstanding advice of public-health experts, who warned that they would lead to catastrophe and were proved right. For all the talk from officials like Dr. Fauci about following "the science," these leaders ignored decades of research—as well as fresh data from the pandemic—when they set strict Covid regulations. The burden of proof was on them to justify their dangerous experiment, yet they failed to conduct rigorous analyses, preferring to tout badly flawed studies while refusing to confront obvious evidence of the policies' failure.

U.S. states with more-restrictive policies fared no better, on average, than states with less-restrictive policies. There's still no convincing evidence that masks provided any significant benefits. When case rates throughout the pandemic are plotted on a graph, the trajectory in states with mask mandates is virtually identical to the trajectory in states without mandates. (The states without mandates actually had slightly fewer Covid deaths per capita.) International comparisons yield similar results. A Johns Hopkins University meta-analysis of studies around the

world concluded that lockdown and mask restrictions have had "little to no effect on COVID-19 mortality."

Florida and Sweden were accused of deadly folly for keeping schools and businesses open without masks, but their policies have been vindicated. In Florida the cumulative age-adjusted rate of Covid mortality is below the national average, and the rate of excess mortality is lower than in California, which endured one of the nation's strictest lockdowns and worst spikes in unemployment. Sweden's cumulative rate of excess mortality is one of the lowest in the world, and there's one particularly dismal difference between it and the rest of Europe as well as America: the number of younger adults who died not from Covid but from the effects of lockdowns.

Even in 2020, Sweden's worst year of the pandemic, the mortality rate remained normal among Swedes under 70. Meanwhile, the death rate surged among younger adults in the U.S., and a majority of them died from causes other than Covid. In Sweden, there have been no excess deaths from non-Covid causes during the pandemic, but in the U.S. there have been more than 170,000 of these excess deaths.

No one knows exactly how many of those deaths were caused by lockdowns, but the social disruptions, isolation, inactivity and economic havoc clearly exacted a toll. Medical treatments and screenings were delayed, and there were sharp increases in the rates of depression, anxiety, obesity, diabetes, fatal strokes and heart disease, and fatal abuse of alcohol and drugs.

These were the sorts of calamities foreseen long before 2020 by eminent epidemiologists such as Donald Henderson, who directed the successful international effort to eradicate smallpox. In 2006 he and colleagues at the University of Pittsburgh considered an array of proposed measures to deal with a virus as deadly as the 1918 Spanish flu.

Should schools be closed? Should everyone wear face masks in public places? Should those exposed to an infection be required to quarantine at home? Should public-health officials rely on computer models of viral spread to impose strict limitations on people's movements? In each case, the answer was no, because there was no evidence these measures would make a significant difference.

"Experience has shown," Henderson's team concluded, "that communities faced with epidemics or other adverse events respond best and with the least anxiety when the normal social functioning of the community is least disrupted." The researchers specifically advised leaders not to be guided by computer models, because no model could reliably predict the effects of the measures or take into account the "devastating" collateral damage. If leaders overreacted and panicked the public, "a manageable epidemic could move toward catastrophe."

This advice was subsequently heeded in the pre-Covid pandemic plans prepared by the CDC and other public-health agencies. The WHO's review of the scientific literature concluded that there was "no evidence" that universal masking "is effective in reducing transmission." The CDC's pre-2020 planning scenarios didn't recommend universal masking or extended school and business closures even during a pandemic as severe as the 1918 Spanish flu. Neither did the U.K.'s 2011 plan, which urged "those who are well to carry on with their normal daily lives" and flatly declared, "It will not be possible to halt the spread of a new pandemic influenza virus, and it would be a waste of public health resources and capacity to attempt to do so."

But those plans were abruptly discarded in March 2020, when computer modelers in England announced that a lockdown like China's was the only way to avert doomsday. As Henderson had warned, the computer model's projections—such as 30 Covid patients for every available bed in intensive-care units—proved to be absurdly wrong. Just as the British planners had predicted, it was impossible to halt the virus. A few isolated places

managed to keep out the virus with border closures and draconian lockdowns, but the virus spread quickly once they opened up. China's hopeless fantasy of "Zero Covid" became a humanitarian nightmare.

It was bad enough that Dr. Fauci, the CDC and the WHO ignored the best scientific advice at the start of this pandemic. It's sociopathic for them to promote a worse catastrophe for future outbreaks. If a drug company behaved this way, ignoring evidence while marketing an ineffective treatment with fatal side effects, its executives would be facing lawsuits, bankruptcy and probably criminal charges. Dr. Fauci and his fellow public officials can't easily be sued, but they need to be put out of business long before the next pandemic.

Mr. Tierney is a contributing editor to City Journal and a co-author of "The Power of Bad: How the Negativity Effect Rules Us and How We Can Rule It."

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