

COVID's End Is Nigh. We Need an Audit

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A man receives his second dose of the Moderna vaccine in Westbury, N.Y., May 6, 2021.(Shannon Stapleton/Reuters)

Before there is another pandemic, we're going to need to learn a bit more about the failures in this one.

'When your country asked you to get vaccinated, you did,' Joe Biden said when the CDC [revised](#) its guidance on masks last week. "The American people stepped up." For a second there, it almost sounded like a declaration of victory. And believe me, Biden wants this pandemic to end. Maybe not today, but before the natives and nativists get restless.

You may have convinced yourself that the emergency will continue until every household is bankrupted, and the unholy alliance of Jeffrey Epstein devotees among British Royals and tech-company founders buys up the whole earth with the plan of renting it back to you and your sterilized kin. But Joe Biden does want to declare victory. He's not going to wait forever for your vaxx-skeptical friends. He's not going to wait until New York governor Andrew Cuomo perfects the Excelsior pass, a sort of low-scale, state-exclusive vaccine-passport system, or turns it into the Excelsior forehead barcode. Probably before the summer is out, Biden will be under pressure to declare the pandemic over — with some caveat about monitoring variants as we head into winter.

The Biden White House knows it cannot bring Democrats through congressional elections or launch its own presidential reelection campaign without declaring such an end. Especially not if Red America is enjoying post-COVID life in Florida and Texas, while all the purple and blue states remain gagged, hiding their children behind plexiglass. The numbers in Israel and the U.K., and coming in from Texas and Florida, are very suggestive. Once a majority of adults get their shots and the summer weather comes in, case rates plummet and we are no longer anywhere near a health emergency, let alone one that justifies suppressing the reemergence of human society.

But as we come to an end, we have a lot of tough questions to ask. Were our interventions any good? Some of the incoming data is enough to make you wonder about any human plans. Texas opening, dropping mask mandates, and allowing a packed Opening Day of baseball was associated with no increase in COVID — a decrease continued apace. It was also associated with no serious economic or employment benefit. The [CDC's own 2020 study of mask mandates](#) claimed a “statistically significant” result in their favor; it was less than 2 percent. And the study didn't even do a great job of assessing all the factors that go into spread.

If U.S. pharmaceutical companies, with their foreign partners, hadn't produced massive amounts of massively effective vaccines, how would the pandemic have ended? At a certain point, a kind of existing pandemic investment seemed to determine the rest of this era's course. We had settled on a strategy of haphazard and not strictly enforced closures and distancing. Limiting, but not closing, travel. Declaring this strategy an outright failure, or just abandoning it as too psychologically and economically costly, would have been too painful. We probably needed the vaccines to rescue us from the sunk-cost fallacy.

Is public health just fake? The World Health Organization spent the early part of the pandemic trying not to embarrass China. Then it said that open borders would help us fight the disease. All public-health bodies outside of Taiwan and Hong Kong seemed to disfavor travel restrictions. By September, it was safe for the *New York Times* to point out that this disfavor had nothing to do with epidemiology, [it just reflected the overwhelming political ideals of public-health officials](#) who are dominated by progressives. Then again, the East Asian nations that did successfully control COVID with travel bans are now in danger of “[hermit risk](#)” — having an isolated population that is not motivated to take the vaccine, and that remains vulnerable even as America and Europe are discussing how to reestablish international travel.

Why didn't we choose to do mass, repeatable testing to learn more about asymptomatic COVID incidence and transmission? Should we have foregone the trials beyond Stage 1, and given Emergency Authorization to the vulnerable at a very early stage? Why are American public-health authorities uniquely hostile to the evidence that COVID is not especially dangerous to young children, and that young children with COVID aren't especially dangerous to others?

These same authorities said amateur masks were totally ineffective, and they would cause the untrained laymen who wore them to touch their faces more and spread the disease. They cited studies to this effect. This was before telling us to double and triple mask. Then they spun up a story about how their initial anti-mask guidance was a noble lie. Which itself seems like an ignoble lie.

The CDC took a year to update its guidance on surface transmission. The communication strategy from public-health bodies was poor. Recently, CDC director Rochelle Walesky explained that her vaccinated children wouldn't attend summer camp to avoid exposure. Two days later, she was tasked with announcing

that “new evidence” showed that the vaccinated could proceed indoors and outdoors without masks. There was no new evidence. All that changed was the sociology — the view that outdoor mask-wearing was stupid had penetrated respectable opinion.

The blowback against that revised guidance — from the hypochondriacs, a few virologists, and those who have embraced masking as a political identity — shows that it’s not just anti-lockdowners who have lost faith in American public-health institutions. We’re all making our way forward on our own.

This pandemic has exacerbated the polarization of elite and populist opinion. When populists got interested in certain COVID treatments, elites made up and fell for entirely fraudulent studies just to get the psychic satisfaction of owning the populists. This seems like a massive waste of energy, and a great way of confirming the untrustworthiness of the experts.

Maybe that’s the first action point going forward. The recognition that “expert consensus” is a guild’s conspiracy against the public. Real experts disagree, often violently. The public-health consensus against masks, then for them, [or against the lab-leak theory and then for it](#), has turned out to be nothing more or less than a profession closing ranks in a crisis. If everyone agrees, then nobody can be blamed, and we can all keep going to the same conferences and approving each other’s grant funding. Housing prices only go up. Europe can’t bail out Greece. Open borders are good during a pandemic.

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