


The Naked Absurdity of Global Public Health

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“Those Who Can Make You Believe Absurdities, Can Make You Commit Atrocities.” ~ Voltaire.

Something is fundamentally wrong with global public health. More accurately, something is fundamentally wrong with the mindset of global health professionals, particularly those in positions of leadership. It has become normal to speak, repeat, and defend complete absurdity, as if illusions and fantasies are real. There are no sanctions for operating in this way – indeed it is proving highly successful. Statements of demonstrable stupidity are becoming prerequisites for career advancement and the approval of peers. It is like living within a fantasy, except those it kills are real.

The world at large struggles to understand that they could be fed falsehoods on this level. Most people still consider the experts quoted in the media to be credible, serious people. They believe that those leading the health professions would not habitually lie. For

professionals to act like this, they would have to be deeply troubled, insecure people, or they would have to be quite malevolent. This does not fit the popular image of global health experts.

Beyond individuals, we now have entire institutions mocking reality. They lie to each other and the public, repeat these lies, and applaud each other for doing so. They can state obvious stupidity with impunity as a once critical media now sees its role as backing them unquestioningly, disseminating their pronouncements and suppressing any information to the contrary for a perceived public good. The emperor's obvious nakedness has become proof that he is clothed. Acknowledging the evidence of one's eyes as he parades his wares is tantamount to the crime of Galileo and must be treated accordingly.

The Opportunity of COVID-19

Over the last two years, the world's premier health institutions pretended that humans were unlikely to develop effective clinical immunity in response to coronavirus infections, despite experience with the four common seasonal coronaviruses and the SARS-1 confirming that we do. Despite established understanding of mucosal immunity and T-cell function, the public were asked to believe that antibody titers against a single highly-variable pharmaceutically-induced protein were the only valid measure of effective immunity. The leaders and staff within these health organizations knew this was frankly silly, and that the evidence on COVID-19 was showing otherwise.

All these institutions knew that, in time, the relative effectiveness of post-infection immunity would become obvious to all. But this did not stop them from stating that vaccines were 'the only way out of the pandemic,' as if established fact, denigrating those who thought differently and ignoring the natural resolution of prior pandemics. Despite accumulating evidence that the obvious is indeed obvious, this position of fallacy still drives the COVAX global vaccination program. Current evidence that post-infection immunity is more effective than vaccination is of no value— truth simply does not matter to these people anymore.

In 2019, the term 'genetic medicines' referred to pharmaceuticals based on introduction of genetic material into a body for therapeutic purposes. It is standard industry terminology for mRNA formulations such as those that induce SARS-CoV-2 (COVID-19) spike protein production. In 2020, institutions that previously used this term for COVID-19 vaccines decided that continuing to do so would equate to promoting a 'conspiracy theory' – a particularly severe transgression. These mRNA medicines work by inserting synthetic genes into a person's cells, using the host's intracellular machinery to translate the genetic sequence into a foreign protein that is expressed by the cell. These cells are then recognized as foreign by the host's immune system and killed. While this change to the definition of vaccine can be justified by the end result (an immune response), mRNA vaccines are indeed, as the pharmaceutical industry notes, genetic medicines.

It was considered necessary that the public consider such medicines to be indistinguishable from conventional vaccines that present proteins or other antigens to the immune system through an entirely different mechanism. The fallacy was formed to support the claim that if one type of vaccine was safe and effective, then the other must be.

The entire pharmaceutical industry knows this is an absurdity; mRNA injections may well be safe and effective, or they may not, but they are no more like injecting a protein or attenuated virus than riding a bicycle is to riding a train. If the department of transport told us that railways prove that bicycles are safe and effective, we would laugh. Except we wouldn't anymore.

We would, apparently, signal our agreement because to identify differences between bicycles and trains would be evidence of incorrect thinking (misinformation, or a conspiracy theory). Similarly 'incorrect' thinking regarding COVID-19 has been characterized in the *Journal of the American Medical Association*, with a nod to Nazism, as a neurodegenerative disorder.

Tedros Perfects the Art

Tedros Adhanom Ghebreyesus and the World Health Organization (WHO) he leads have perfected the art of mainstreaming the ridiculous through COVAX. With a budget several times higher than any prior international health program, it aims to vaccinate billions of already-immune people in age groups barely affected by COVID-19. WHO is aware that the vaccines do not significantly reduce spread, that post-infection immunity is effective, and that vaccinating people with post-infection immunity will provide minimal additional clinical benefit.

WHO promotes COVAX under the banner "No one is safe until all are safe." WHO thus wants the public to believe that vaccinating an individual does not protect them until everyone else is vaccinated, whilst simultaneously believing, as WHO insists, that vaccination against COVID-19 is highly protective for all those who are vaccinated.

The complete incompatibility of these claims, together with the absurdity of claiming that a vaccine that does not stop transmission could protect others and 'end the pandemic,' does not matter. The writers and designers of WHO's speeches and brochures know these opposing claims cannot simultaneously be true. They have found that stating absurdities is rewarded, and that if a young boy points to the emperor's nakedness he can simply be denigrated and excluded, while the emperor swaggers on.

A Pox On Us All

Tedros recently proclaimed monkeypox, a virus that had then killed 5 people globally, to be a public health emergency of international concern. His organization's last such pronouncement contributed to an increase of about 45,000 added malaria child deaths in 2020, over 200,000 additional dead children in South Asia in the same year, rising

tuberculosis, millions of girls forced into child marriage and sexual slavery, and the decimation of global education that will entrench future poverty for billions. Yet this man managed to concentrate the world on monkeypox, an outbreak of such tiny impact that annual mortality from bungee-jumping will likely be higher.

Whole countries followed his lead, global media ran headlines on how many people had this chicken pox-like disease, and the world pretended the emergency was real. Once this man would have been laughed out of office, but the world of 2022 considered this blatant absurdity normal and acceptable. It no longer expects or requires rational discourse from people in authority. Stupidity is expected and its dictates adopted.

The purpose of pointing out the above is not to single out WHO. WHO's fantasy statements are repeated and supported by its peer health organizations. Gavi (the vaccine alliance), CEPI (Coalition for Epidemic Preparedness Innovations), UNICEF (the UN agency that once concentrated on vaccinating children but now leads mass vaccination against a disease targeting the elderly) all apparently agree that 'No one is safe until everyone is safe.'

This needs to be understood as an entire industrial culture – global health is a business and its primary role is to support itself. Its members know their pronouncements are false or illogical, but dishonesty has become an important tool to achieve their goals. It fuels income and expansion, and therefore must be good. Many private corporations would act similarly if advertising standards were not enforced. These international health agencies operate outside of national jurisdictions, and so have no enforceable standards. The media, once a check on such malfeasance and misgovernance, has ceased to value truth.

The COVID-19 event has opened the gate to a new era in public health, and the absurdity of the monkeypox 'emergency' is an example of what is coming. A pandemic industry that has formed around these agencies, now with the weight of the World Bank behind it, is asking us to believe that pandemics are becoming more frequent, and that the world's diminishing wildlife poses an ever-increasing threat.

WHO's own publications may tell us that pandemics have occurred just 5 times in 100 years, with overall reducing mortality, but this is of no consequence. Fantasy, when repeated sufficiently in a matter-of-fact manner, can displace objective reality as a driver of policy. The removal of employment, disruption of supply lines, increase in mass poverty and the economic wreckage of the COVID-19 response is used to justify a call for repetition of the same, more easily and more often, by the same people who orchestrated it.

Killing by Killing Truth

Most health professionals, given a few minutes to sit down and think this through, can see that something is wrong. However, it is hard to hold onto this reality if the lie opposing it is repeated widely and frequently, echoed by all one's peers. People who understand infection control can still put on a mask at a restaurant door to remove it at a table just meters away.

Humans are fully capable of living a lie, of embracing absurdity in life and work, just to get along. We now have an entire international industry fully reliant on acceptance of such absurdity for its survival. Despite the risks, it works.

COVID-19 showed us how willing many people are to join the harming and denigration of others to defend positions they know are illogical and untrue. To see one's own profession indulging in such behavior is difficult to reconcile, when that profession is in some ways entrusted with the welfare of others. But we should not be surprised, we are all human and this promotion of global harm will continue as long as it reaps local rewards. People do not easily tire of wrong – they get accustomed to it.

This institutional self-delusion would be of little consequence, even humorous, if it only involved an emperor walking the streets of a children's tale. But many of the children in this tale are now dead from malaria and malnutrition, millions of girls are enduring nightly rape and tens of millions denied education will spend their lives in poverty. They did not ask these people in Geneva, Washington, or Brussels to remove their food security, education and healthcare to ostensibly protect elderly elsewhere from COVID-19.

They are not asking for a growing pandemic bureaucracy to gorge itself whilst entrenching further inequality. Our response to this level of institutional dishonesty and absurdity must not be one of amusement but rather of disgust, and concern for what could happen next.

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