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I had no choice but to speak out against lockdowns. As a public-health scientist with decades of experience working on infectious-disease outbreaks, I couldn't stay silent. Not when basic principles of public health are thrown out of the window. Not when the working class is thrown under the bus. Not when lockdown opponents were thrown to the wolves. There was never a scientific consensus for lockdowns. That balloon had to be popped.

Two key Covid facts were quickly obvious to me. First, with the early outbreaks in Italy and Iran this was a severe

with the early outbreaks in Italy and Iran, this was a severe pandemic that would eventually spread to the rest of the world, resulting in many deaths. That made me nervous. Second, based on the data from Wuhan, in China, there was a dramatic difference in mortality by age, with over a [thousand-fold difference](#) between the young and the old. That was a huge relief. I am a single father with a teenager and five-year-old twins. Like most parents, I care more about my children than myself. Unlike the 1918 Spanish Flu pandemic, children had much less to fear from Covid than from annual influenza or traffic accidents. They could get on with life unharmed — or so I thought.

For society at large, the conclusion was obvious. We had to protect older, high-risk people while younger low-risk adults kept society moving.

But that didn't happen. Instead, schools closed while nursing homes went unprotected. Why? It made no sense. So, I picked up a pen. To my surprise, I could not interest any US media in my thoughts, despite my knowledge and experience with infectious-disease outbreaks. I had more success in my native Sweden, with op-eds in the major daily newspapers, and, eventually, [a piece](#) in *spiked*. Other like-minded scientists faced similar hurdles.

Instead of understanding the pandemic, we were encouraged to fear it. Instead of life, we got lockdowns and death. We got delayed cancer diagnoses, worse cardiovascular-disease outcomes [deteriorating mental](#)

cardiovascular disease outcomes, [accelerating mental health](#), and a lot more collateral [public-health damage](#) from lockdown. Children, the elderly and the [working class](#) were the hardest hit by what can only be described as the biggest public-health fiasco in history.

Throughout the 2020 spring wave, [Sweden](#) kept daycare and schools open for every one of its 1.8million children aged between one and 15. And it did so without subjecting them to testing, masks, physical barriers or social distancing. This policy led to precisely [zero Covid deaths](#) in that age group, while [teachers had a Covid risk](#) similar to the average of other professions. The Swedish Public Health Agency reported these facts in mid-June, but in the US lockdown proponents still pushed for school closures.

In July, the *New England Journal of Medicine* published [an article](#) on ‘reopening primary schools during the pandemic’. Shockingly, it did not even mention the evidence from the only major Western country that kept schools open throughout the pandemic. That is like evaluating a new drug while ignoring data from the placebo control group.

Martin Kulldorff, a professor of medicine at Harvard University.

With difficulty publishing, I decided to use my mostly dormant Twitter account to get the word out. I searched for tweets about schools and replied with a link to the Swedish study. A few of these replies were retweeted, which gave the Swedish data some attention. It also led to an invitation to [write](#) for the *Spectator*. In August, I finally broke into the US media with a [CNN op-ed](#) against school closures. I know Spanish, so I wrote a piece for CNN-Español. CNN-English was not interested.

Something was clearly amiss with the media. Among infectious-disease epidemiology colleagues that I know, most favour focused protection of high-risk groups instead of lockdowns, but the media made it sound like there was a scientific consensus for general lockdowns.

In September, I met Jeffrey Tucker at the American Institute for Economic Research (AIER), an organisation I had never heard of before the pandemic. To help the media gain a better understanding of the pandemic, we decided to invite journalists to meet with infectious-disease epidemiologists in Great Barrington, New England, to conduct more in-depth [interviews](#). I invited two scientists

conduct more in-depth [interviews](#). I invited two scientists to join me, Sunetra Gupta from the University of Oxford, one of the world's pre-eminent infectious-disease epidemiologists, and Jay Bhattacharya from Stanford University, an expert on infectious diseases and vulnerable populations. To the surprise of AIER, the three of us also decided to write a declaration arguing for focused protection instead of lockdowns. We called it the [Great Barrington Declaration](#) (GBD).

Opposition to lockdowns had been deemed unscientific. When scientists spoke out against lockdowns, they were ignored, considered a fringe voice, or accused of not having proper credentials. We thought it would be hard to ignore something authored by three senior infectious-disease epidemiologists from what were three respectable universities. We were right. All hell broke loose. That was good.

Some colleagues threw epithets at us like 'crazy', 'exorcist', 'mass murderer' or 'Trumpian'. Some accused us of taking a stand for money, though nobody paid us a penny. Why such a vicious response? The declaration was in line with the many pandemic preparedness plans produced years earlier, but that was the crux. With no good public-health arguments against focused protection, they had to resort to mischaracterisation and slander, or else admit they had made a terrible, deadly mistake in their support of lockdowns.

Some lockdown proponents accused us of [raising a strawman](#), as lockdowns had worked and were no longer needed. Just a few weeks later, the same critics lauded the reimposition of lockdowns during the very predictable

composition of lockdowns during the very predictable second wave. We were told that we had not specified how to protect the old, even though we had described ideas in detail on our [website](#) and in [op-eds](#). We were accused of advocating a 'let it rip' strategy, even though focused protection is its very opposite. Ironically, lockdowns are a dragged-out form of a let-it-rip strategy, in which each age group is infected in the same proportion as a let-it-rip strategy.

When writing the declaration, we knew we were exposing ourselves to attacks. That can be scary, but as Rosa Parks said: 'I have learned over the years that when one's mind is made up, this diminishes fear; knowing what must be done does away with fear.' Also, I did not take the journalistic and academic attacks personally, however vile – and most came from people I had never even heard of before. The attacks were not primarily addressed at us anyhow. We had already spoken out and would continue to do so. Their main purpose was to discourage other scientists from speaking out.

In my twenties, I risked my life in Guatemala working for a human-rights organisation called [Peace Brigades International](#). We protected farmers, unionised workers, students, religious organisations, women's groups and human-rights defenders who were threatened, murdered, and disappeared by military death squads. While the courageous Guatemalans I worked with faced much more danger, the death squads did once throw a hand grenade into our house. If I could do that work then, why should I not now take much smaller risks for people here at home? When I was falsely accused of being a Koch-funded right-

When I was falsely accused of being a right-winged winger, I just shrugged – typical behaviour by both establishment servants and armchair revolutionaries.

After the Great Barrington Declaration, there was no longer a lack of media attention on focused protection as an alternative to lockdowns. On the contrary, requests came from across the globe. I noticed an interesting contrast. In the US and UK, media outlets were either friendly with softball questions or hostile with trick questions and *ad hominem* attacks. Journalists in most other countries asked hard but relevant and fair questions, exploring and critically examining the Great Barrington Declaration. I think that is how journalism should be done.

While most governments continued with their failed lockdown policies, things have moved in the right direction. More and more schools have reopened, and Florida rejected lockdowns in favour of focused protection, partly based on our advice, without the negative consequences that the lockdowners predicted.

Credit: Getty.

With the lockdown failures increasingly clear, attacks and censorship have increased rather than decreased: Google-owned YouTube censored a video from a roundtable with Florida governor Ron DeSantis, where my colleagues and I stated that children do not need to wear masks; Facebook closed the GBD account when we posted a pro-vaccine message arguing that older people should be prioritised for vaccination; Twitter censored a post when I said that children and those already infected do not need to be vaccinated; and the Centers for Disease Control (CDC) removed me from a vaccine-safety working group when I argued that the Johnson & Johnson Covid vaccine should not be withheld from older Americans.

Twitter even locked my account for writing that:

'Naively fooled to think that masks would protect them, some older high-risk people did not socially distance properly, and some died from Covid because of it. Tragic. Public-health officials/scientists must always be honest with the public.'

This increased pressure may seem counterintuitive, but it is not. Had we been wrong, our scientific colleagues might have taken pity on us and the media would have gone back to ignoring us. Being correct means that we embarrassed some immensely powerful people in politics, journalism, big tech and science. They are never going to forgive us.

That is not what matters, though. The pandemic has been a great tragedy. A 79-year-old friend of mine died from Covid, and a few months later his wife died from cancer that was not detected in time to initiate treatment. While deaths are inevitable during a pandemic the naive but

deaths are inevitable during a pandemic, the naive but mistaken belief that lockdowns would protect the old meant that governments did not implement many standard focused-protection measures. The dragged-out pandemic made it harder for older people to protect themselves. With a focused-protection strategy, my friend and his wife might be alive today, together with countless other people around the world.

Ultimately, lockdowns protected young low-risk professionals working from home – journalists, lawyers, scientists, and bankers – on the backs of children, the working class and the poor. In the US, lockdowns are the biggest assault on workers since segregation and the Vietnam War. Except for war, there are few government actions during my life that have imposed more suffering and injustice on such a large scale.

As an infectious-disease epidemiologist, I had no choice. I had to speak up. If not, why be a scientist? Many others who bravely spoke could comfortably have stayed silent. If they had, more schools would still be closed, and the collateral public-health damage would have been greater. I am aware of many fantastic people fighting against these ineffective and damaging lockdowns, writing articles, posting on social media, making videos, talking to friends, speaking up at school board meetings, and protesting in the streets. If you are one of them, it has truly been an honour to work with you on this effort together. I hope that we will one day meet in person and then, let's dance together.

Danser encore!

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