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Freedom Is Our Birthright, Not Dependent On Medical Status

BY [DAVID BELL](#) MARCH 10, 2022 [POLICY, SOCIETY, VACCINES](#) 8 MINUTE READ

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I received a request to sign a petition last week, already signed by 17,000 medical practitioners, many of whom have stood for truth over these past two years against strong pressure to conform. People for whom I have great respect. It stated that “we the undersigned” oppose Covid-19 vaccine mandates because many people already have natural immunity that is more effective than that provided by the vaccines. ‘Those already immune can only incur harm, not benefit.’ I completely agree, but I could not sign it.

The reason I could not is fundamental to the current public health debate, and in skirting it with pure logic we are digging humanity’s grave for those who would bury us. We are free, or we are not. Science is not the arbiter of that freedom.

The Covid-19 crisis should awaken, not enslave us

Covid-19 vaccine mandates have highlighted society’s creeping acceptance of the anchoring of basic human rights to medical status. Like many public health physicians, I accepted, even supported, mandating

measles vaccination for school entry. Measles does, after all, kill many globally. I was also fine with hepatitis B vaccination for my workplace. Both vaccines are considered safe, and very effective. My medical training had emphasized that those who were anti-vaccination were equivalent to flat-earthers.

Now the Covid-19 public health response is requiring injections as a prerequisite for adults and children to participate in normal community activities. ‘Vaccination status’ governs ‘access’ to basic human rights – the right to work, travel, socialize and access education – considered fundamental under the UN Declaration on Human Rights.

It can even govern the right to access healthcare. Medical coercion has emerged from the shadows. This is being fought with logic. Demonstrating the sheer absurdity of a general mandate for a disease that targets a well-defined population group (old age and comorbidities), that does nothing to stop spread (ie. no protection for others) and against which most are already better protected by natural immunity is an easy argument if people are listening.

Armed with such arguments, the growing movement opposing Covid-19 vaccine mandates, spanning truckers, restaurateurs, hospital employees and politicians, is making inroads in the rolling back of mandates in many countries, though this anti-science approach continues apace in others and, ironically, in many Western educational institutions. Only a desire for power, or deep ignorance, could justify such an approach.

But a tactical battlefield victory does not win a war. If we are to lock this new health fascism away with the Nazism of 1930s Germany, then highlighting a particular logical flaw will not be enough. Nazism was not sidelined from the political theater because it was illogical, but because it was fundamentally wrong. It was wrong because it did not treat all people equally, and it put central authority, and a perceived ‘collective good,’ above the rights, and equality, of individuals.

This is the hill on which we must stand, if we are to block the use of public health as a tool to enforce the corporate authoritarian society envisioned by the [Great Reset](#). This is a fight that goes beyond public health – it concerns the fundamental status of the human position. It must deny unequivocally the right of one group to control and abuse another. I do not have the right to mandate a high-risk non-immune diabetic 80-year-old to get a Covid-19 vaccine. Neither do you.

Freedom is a birth-right, not a reward

If we acknowledge that “all humans are born free and equal in dignity and rights” (Article 1 of the [UN Declaration of Human Rights](#)), and that there is something intrinsically valuable about being ‘human,’ then a number of consequences must follow. These are reflected in the declarations on human rights developed after World War II and that also underlay the earlier Geneva convention. They are reflected in many religious beliefs, but not exclusive to them. Their codification after WWII reflected the realization that repeated compromise, specifically justified through a public health ‘common good,’ rapidly eroded society. The road to

genocide was paved by doctors, who like all are prone to self-interest, fear and an ability to hate.

The alternative approach is to view humans merely as lumps of biology or a complex series of chemical reactions. In this case, an individual has no rights, and the future makes no real sense. This alternate approach makes all things rational, and nothing right or wrong. Picking some middle ground between the two – humans are a little bit special but that can be taken away when convenient (convenient to whom?) – does not stand well to deeper thought.

Genuine equality leads to the concept of bodily autonomy – I cannot override you on matters concerning you. If humans have sovereignty over their own bodies, then they cannot be forced to modify that body or have it violated by others.

Coercion involves threats to remove basic rights that autonomy and sovereignty provide, and is therefore a form of force, removing a birthright – a part of our being – if we believe that as humans we are born with intrinsic rights to, or ownership of, such freedoms. They are part of what makes us more than biological mass. This is why we require free and informed consent for medical procedures where a person is in any way capable of providing it.

In consequence, freedom cannot be conditional on medical status or choice of medical procedure. If we are born free, we do not acquire

freedom through compliance. Fundamental rights cannot therefore be restricted based on medical status (e.g. natural immunity) or choice of intervention (e.g. testing) or non-intervention. Promotion of such stigma and discrimination is contrary to recognition of these rights.

Opposing mandates based on science acknowledges authoritarianism

It remains tempting to take the easy route and oppose Covid-19 vaccine mandates by highlighting the obvious flaws in the science underlying them. This is a useful tool – the purveyors of illogic and lies should be exposed. But it can only be one tool on the path to a comprehensive solution, and must not feed the underlying disease.

Claiming natural immunity as a sole exclusion from vaccine mandates is no more logical than ignoring it. Immune members of older age groups are still at higher risk than the non-immune healthy young. Age-related risk varies several thousand fold, and neither vaccines nor natural immunity can bridge this gap. So how is fitness, age and likely exposure to be brought into the picture, and what is the justification for ignoring them? Do we mandate a young fit athlete to be jabbed because she happens to have avoided prior infection, whilst pretending an obese and diabetic retiree who survived a prior infection is exempt?

If we are to nuance the risk, what thresholds of age and fitness will be used, and who will set them? How will natural immunity be measured? What type of testing will be used and how frequently, at whose expense?

Who will be naturally immune from the next declared pandemic and will vaccine mandates be more acceptable then if the vaccine is rushed out before many become naturally immune? Who even decides what is a pandemic and what is not? Are we fine with the bureaucrats at the World Health Organization determining our risk, based on their own interpretation of their own changing definitions?

To solely invoke natural immunity as a way out of mandates, we will be coercing testing and consequent medical procedures as a basis for freedom. This is not freedom. However well-meaning, it is on the slippery slope that leads elsewhere.

Codifying human rights is the cost of freedom

Fundamentally, human rights cannot be dependent on compliance with public health officials. Or politicians. Or the whims of philanthropists and their favorite corporations. These rights must be an intrinsic part of being human, irrespective of the circumstance, irrespective of age, gender, parentage, wealth or health status. Or we are, indeed, just complex chemical constructs with no real intrinsic value. Society, and each individual, must decide.

The Covid-19 public health response highlights the need to reexamine much of what we took for granted in healthcare. Respecting individual sovereignty does not exclude sanctions on those who intentionally do harm, but the imperative to control society's response to this underlies thousands of years of development of law. Cases of malfeasance are

tested, transparently, in court. It also does not exclude protections from harm.

Certain high-risk countries require evidence of yellow fever vaccination for inbound travel as an outbreak could result in 30% mortality. Some countries have school mandates for measles vaccination, despite the vaccine protecting against further infection of all those who chose to be vaccinated. In the light of recent events we need to weigh such requirements transparently and carefully, preventing intentional harm to others, but keeping the natural law of the inviolability of humanness paramount.

On occasion the majority may need to swallow a risk for a time. Sometimes respecting the freedom of others will seem to cost us, but codifying human rights, and insisting on process, legalism, and law gives wisdom time to overcome fear. It is the insurance that keeps the members of a free society free. Insurance is the inescapable recurrent cost that protects from occasional, but inevitable, catastrophe. Enslavement in a medico-fascist society may become a catastrophe with no exit.

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