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On the Anarchist Response to COVID-19

The case against submission to arbitrary measures
in the name of Public Health

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has been largely ignored by the state and their technocrats, while also being blacked out by the media.

“Experts” can always be found to justify horrors. Indeed, we would likely be hard pressed to find a case in recent history in which massive crimes against humanity did not come packaged with a stamp of approval from some consortium of experts whom everyone else was asked to blindly trust. The Covid19 pandemic is no different, and as anarchists we just ask that you remember that debate, critique, and dissent are all essential components of societies that value liberation and autonomy. We ask that whatever you decide about the efficacy of lockdown measures, that you recognize no situation, no matter how dire it may seem, warrants edicts from on high that use the threat of force and violence to accomplish their aims.

Our steadfast commitment to human autonomy, and to our belief that no authority is valid without the consent of those it is exercised over, is what makes anarchism a thing apart from other political philosophies. We will not abandon this commitment, and hope that you will not either.

looked like, but we can safely presume that if there are antibodies within people on various continents in December of 2019, that circulation of the virus would have begun months prior to that. And we point this fact out, again, to emphasize that there was likely no lockdown measure that could have been implemented to snuff out the virus, as it had already gotten such an incredible head start.

On Principle

As anarchists, there are principles we return to as guiding stars in the dark night of the unknown, and these include freedom, autonomy, consent, and a deep belief in the ability of people to self-organize for their maximum benefit as individuals and as communities. No one knows one's needs better than they do themselves, and truly, most people have self-preservation instincts that cause them to select behaviors that lead to their own safety and survival, as well as that of those they care for.

At the outset of the pandemic, when information was scant, we very much witnessed people making choices to distance themselves from crowds and gatherings they did not believe were essential, while they also began efforts to support and care for those who might be more vulnerable to a circulating respiratory illness that did not have well established treatment courses within the medical field.

While we welcome information and data, even that which is unpleasant, that describes the continually unfolding circumstances, we also believe that people need to be trusted to analyze that information. The current paradigm has the state and their selected technocratic experts filtering the available data and only highlighting that which supports the policy decisions they already decided to implement without any public input. Information and analysis that can be considered "good news"

An anarchist analysis and critique of the current pandemic as an opportunity for State authority and capitalist relationships to solidify themselves amidst the pandemic. Originally published to *Montreal Counter-Info*.

The Covid19 crisis has presented a challenge to anarchists and others who believe in a fully autonomous and liberated life. We write this today because we feel too many people who in better times carry these political and philosophical banners are setting aside their core beliefs – or worse – twisting and contorting those beliefs in wholly disappointing ways, conforming to the mandates of technocrats and politicians, and are convincing themselves that doing so is some grand act of solidarity with the most vulnerable people in our societies.

We say loudly that if the political tenets you promote and encourage in the best of times whither and shrink in times of crisis, then your political tenets are worthless. Any system of organization or any belief about human autonomy that needs to be set aside when history lays a challenge at our feet, is not worth keeping around when the emergency subsides. For truly, it is times of difficulty and challenge that place our ideas on the scale of utility to tell us whether or not they are as robust as we may believe.

As anarchists, autonomy over one's own mind and body are essential to our values. We believe that human beings are intelligent enough to decide for themselves how to assess their surroundings and to make determinations on how to go forth living in a way that meets their needs and desires. Of course, we recognize that this autonomy comes packaged with genuine responsibility not only to one's self, but to those with whom they are in community – including the non-human world. We certainly recognize that individuals may be asked for their cooperation in achieving a collective goal. But we also recognize the fundamental importance of consent in such situations, and that force and punishment are antithetical to an anarchist worldview.

That is why we write today. To reach out to our friends, our comrades, our intellectual and philosophical allies to ask that if you haven't yet, that you please begin to seriously critique and question the state responses to the Covid19 pandemic that we are witnessing around the world. We have watched over the proceeding year, meekly, quietly, as other anarchists have toed the lines drawn by state bureaucrats. We have remained silent when witnessing anarchists act with hostility towards those who have pushed back against state mandated curfews and lockdown orders, only because those doing the most pushing are affiliated with right wing politics, unfortunately ceding this ground to the right wing, instead of forging their own critiques of state policy and thus providing an intellectual home for those who have in isolation grown antagonistic towards those in power who are trifling with our lives.

The impetus for this behavior amongst anarchists seems to be rooted in their desire to do well by those in need, and as this particular crisis is being caused by a virus, that seems to unfold as an enthusiastic willingness to accept state mandates and to shame those who would violate them. It is admirable to want to do well by the elderly and infirm, but that instinct is where the conversation should begin, not where we should resolve to set aside our fundamental principles and to justify this by taking technocrats and politicians at their words, using the pronouncements of sanctioned experts as a gospel by which to claim our lack of resistance to mandate is because the mandate makes such good sense.

Politicians lie. They select the analysis and the technicians who promote their agendas. Corporate executives line up to support them, knowing that the public purse is open to them when they do so. And the media, always wanting to be in the good graces of those with political and financial power, manufacture consent in twenty-four hour news cycles. We know this. We have libraries full of books that we have read and recommended explaining in detail the workings of this reality. There-

positive cases (>30%) in the second week of February 2020 and the highest number (53.2%) in Lombardy. This study shows an unexpected very early circulation of SARS-CoV-2 among asymptomatic individuals in Italy several months before the first patient was identified, and clarifies the onset and spread of the coronavirus disease 2019”

It was circulating in the UK in December:

“Professor Tim Spector, epidemiologist at King’s College London, leads the Zoe Covid Symptom Study, tracking symptoms reported by patients during the pandemic.

He said data collected “clearly shows many people had the virus back in December”.

It was also circulating in the US back in late fall of 2019:

“These confirmed reactive sera included 39/1,912 (2.0%) donations collected between December 13-16, 2019, from residents of California (23/1,912) and Oregon or Washington (16/1,912). Sixty seven confirmed reactive (67/5,477, 1.2%) donations were collected between December 30, 2019, and January 17, 2020, from residents of Massachusetts (18/5,477), Wisconsin or Iowa (22/5,477), Michigan (5/5,477), and Connecticut or Rhode Island (33/5,477).”

Other examples exist demonstrating that SARS-COV-2 was circulating in various countries around the world prior to confirmation of its existence coming out of China. As time unfolds, it is likely we will get a fuller picture of what this circulation

from hard-hit epicenters, IFR on a global level may be modestly lower. Average values of 0.15%-0.20% for the whole global population and 0.03%-0.04% for people <70 years old as of October 2020 are plausible. These values agree also with the WHO estimate of 10% global infection rate (hence, IFR ~ 0.15%) as of early October 2020.”

We also are aware of a common sentiment that lockdowns could eliminate SARS-COV-2 if only they were stricter, and if only every person participated perfectly. This is the sort of unfalsifiable thinking that politicians and pundits like to push to excuse the failure of previous measures to have the desired outcomes, as well as to target their opposing politicians who they like to insist “dropped the ball,” and who should therefore bear the blame for the pandemic’s toll. Any policy that requires 100% compliance is doomed to fail from the outset. Even ignoring our earlier point about the labor required to maintain society, there will never be 100% compliance from all human beings on anything.

We think it is also necessary to make plain that a new coronavirus is not something that would be detected immediately by doctors or researchers when it makes its first jump from animal to human. Because coronaviruses are common, and because they induce similar symptoms (as well as having a symptom course similar to other forms of respiratory viruses), and as SARS-COV-2 is not symptomatic in a third of people who contract it, it is not surprising that it was circulating the Earth before anyone knew to look for it.

It has now been confirmed that SARS-COV-2 was circulating in Italy in September of 2019:

“SARS-CoV-2 RBD-specific antibodies were detected in 111 of 959 (11.6%) individuals, starting from September 2019 (14%), with a cluster of

fore, to be critical of politicians who declare that their emergency violations of basic freedoms are warranted by crisis is always a necessity. To be critical of pharmaceutical executives who tell the public that only they hold the keys to a future of freedom and safety, and of the media who act as propaganda machines in service of official narratives, is always a necessity.

Anarchists seem to know all of this instinctively when the war politicians want us to wage is a war fought with literal weapons, when the victims are more obvious, when the propaganda is more nationalist, xenophobic, and racist. But with the Covid19 crisis, the war being waged by those in power is ostensibly a war to save lives, and this shift in presentation seems to have effectively hacked the hearts and minds of so many anarchists who at the bottom of everything, carry a deep and genuine care for others.

But we must pull back and think critically about our situation. It is forgivable when in the throes of a quickly unfolding emergency, while lacking the information necessary to make confident decisions, to want to go along with the experts that are put before podiums when they ask that we all pull together for the greater good. That is no longer the situation. Much time has passed since SARS-COV-2 was a mysterious new respiratory virus infecting tens of people in Wuhan, to being a virus with global reach that has infected probably 20% of the human population*. Data has been pouring forth from researchers around the world, and there is now no excuse for fear based decision making, for accepting as gospel the perceptions and prescriptions stamped by the state and distributed by their lackeys in the media.

We believe that this crisis is like all the crises that came before it, in that it is a period of time in which those with power and wealth see an opportunity to extend their claws and to steal more of both. It is a moment of collective fear and uncertainty they can exploit to seize more control and to enrich themselves at the expense of the masses of humanity. The only

thing that seems to separate the Covid19 crisis from those that came before it, is just how willing so much of the public (sadly including many anarchists) is to willingly and enthusiastically support the loss of their own autonomy.

**In early October The WHO reported an estimate that 10% of the global population had had Covid19. It is therefore reasonable that after a second winter in the Northern Hemisphere, that that number could have doubled.*

The Science

Right out of the gate we think it is very important to underscore the dangerous, quasi religious nature of how the media and state are pushing, and how the public is accepting, the notion of a unified scientific consensus on how to politically approach the question of Covid19. First and foremost, science is a method, a tool, and it's foundational premise is that we must always ask questions, and we must always try to falsify our hypothesis. Science is absolutely NOT about consensus, as the right experiment conducted by one person can absolutely demolish established dogmas with new information, and that is science at its most glorious. Further, SARS-COV-2 is a virus that has been known to humanity at large for now just over one year. To suggest that there is a total and irrefutable understanding of it's features and dynamics, and that all scientists and researchers and doctors everywhere are all in agreement as to what public policy should be to confront it, is absolutely false.

Also, we enter into very dangerous territory as a society when we allow, nay demand, that experts tucked away in labs using esoteric methods act as the only voices in the room to generate one-size-fits-all policy declarations for entire nations that span massive geographical terrain, for nations populated with vastly diverse groups of human beings who all have dif-

times even draconian, public health interventions, including widespread locking down of nonessential business, mandating masks, restricting travel and imposing quarantines. On the other side, some doctors, scientists and public health officials are questioning the wisdom of this approach in the face of massive unknowns about their efficacy and in light of the clear and growing evidence that such measures may not be working in some cases, and may also be causing net harm. As people are thrown out of work as a direct result of lockdowns, and as more and more families find themselves unable to cover their rent or food, there have been sharp increases in domestic violence, homelessness and illegal drug use.”

When justifying harsh lockdowns and curfews, many people lean into the danger presented by Covid19, without fully understanding the actual level of threat posed by the illness. Due to the alarmist posture of the media – an industry we know bases their success on capturing attention, and which also goes to great pains to push official political narratives – many people believe that an infection with SARS-COV-2 is far more deadly than it actually is. According to a study authored by Stanford's John P. Ioannidis, the Infection Fatality Rate globally is quite low:

“Infection fatality rate in different locations can be inferred from seroprevalence studies. While these studies have caveats, they show IFR ranging from 0.00% to 1.54% across 82 study estimates. Median IFR across 51 locations is 0.23% for the overall population and 0.05% for people <70 years old. IFR is larger in locations with higher overall fatalities. Given that these 82 studies are predominantly

isolation, and the shut down of people's usual outlets for social interaction and support, those costs are borne by the physical, mental, and emotional health of the public. We cannot destroy public health to save public health. This editorial from the British Medical Journal states:

“Lockdowns can also cause long term health harms, such as from delayed treatment and investigations. Delays in the diagnosis and treatment of various types of cancer, for example, can allow progression of cancer and affect patients' survival. A three month delay to surgery is estimated to cause more than 4700 deaths a year in the UK. In the US, delays in screening and treatment are estimated to cause 250,000 additional preventable deaths of cancer patients each year.

Furthermore, a sharp decrease in the number of admissions for acute coronary syndromes and emergency coronary procedures has been observed since the start of the pandemic in the US and Europe. In England, the weekly number of hospital admissions for coronary syndromes fell by 40% between mid-February and the end of March 2020. Fear of exposure to the virus stopped many patients from attending hospital, putting them at increased risk of long term complications of myocardial infarction.”

Despite the push by the people in power to present their preferred draconian measures as totally supported by “the science,” there is much disagreement amongst researchers and doctors as to how best to move through this crisis. Scientific American writes:

“In today's COVID-19 wars, the global scientific divide leans heavily in favor of active, and some-

ferent needs. This kind of technocracy is a great cause for concern, as are any pronouncements that those who are skeptical of such schemes of social manipulation are somehow intellectual dullards or that that are anti-scientific.

Science is a tool to illuminate humanity through the elucidation of cause and effect mechanisms. It is a process of discovery. What we do with that illumination, how we go about our lives with the information discovered, is up to us as individuals and as communities.

And finally, it is very easy to fall into a trap of finding competing experts. One side has an expert who says X and the other side finds an expert who says Y, and then we're at an impasse. This is not our intent, however, we feel we are in a double-bind if we do not at some level demonstrate that the narrative out forth by the state and their lap dog media is not as rooted in scientific fact as they would like us to believe. If we do not present some amount of counter evidence, we risk being dismissed out of hand as ignorant, individualists, whose true motivations are “selfish.” Cracking through a billion dollar narrative that has been crafted by state and private media around the globe for the better part of a year, all in service of generating an atmosphere of fear and thus compliance, is no easy task, and so, we will now point to some research below in an effort to help our readers build a reality-based, data-backed understanding of the current situation, not to position ourselves as possessing some secret alternative knowledge, but merely to demonstrate that there does exist research that makes many state mandates seem preposterous even from a scientific perspective.

Research

The underlying premise behind lockdowns, closures, and curfews is that these efforts can stop the spread of SARS-COV-2. But can they accomplish this? This is a nuanced question.

First, we would acknowledge that if you could isolate every human in their own bubble, yes, you could burn out probably many diseases (while causing a variety of new harms). But that isn't how a mandate functions in reality. Even excluding the shadowy scofflaws who are blamed for the failures of these lockdown efforts from California to London because of their failure to comply with perfection, the fact is that modern civilization requires a massive amount of daily labor in order to prevent its immediate collapse, and that labor requires human beings to come into contact with each other, and to travel great distances.

Everything from farm work, to long haul trucking. Power plant operation to plumbers making house calls. Doctors must go to hospital, as must the janitorial and kitchen staff. Fertilizer factories must keep producing for the following season, and so too must the sprawling data centers remain operational for all the white collar professionals to be able to meet via Zoom. Then there are the Amazon warehouses and Wal-Marts! How could we lockdown without our daily deliveries? The list of industries and institutions that cannot close if we expect to have heated homes, drinkable water, functional electric grids, drivable roads, and every other support system of modern life, is very long, and each of them requires human beings to keep them functional. This fact alone means there could never be a 100% lockdown of the population.

Of course, there is the obvious side note that a majority of the labor that must continue, is low wage and/or blue collar. This fact alone makes the very idea of lockdowns a classist enterprise, but this fact has been discussed widely, so we shall move on.

Remember too, these massive lockdowns were never intended (in most places, at the outset) to eliminate Covid19. They were intended to "flatten the curve," which translates to, "slow the spread" of SARS-COV-2 so that hospitals would not be overwhelmed. It should be noted that most hospitals

in most locales, never faced this threat, and that even if it is a good idea to prevent hospital overrun, plans to prevent such a scenario would need to be local, not national, or even statewide. As the year progressed, slowly, the perception of the intent of lockdowns has blurred, and politicians and their selected experts have been consistently extending shutdowns, now shifting the rhetoric to focus on the eradication of the virus. This is unacceptable in that it is likely impossible.

As to these lockdown measures and their efficacy, research has found that they do not have much of an effect when it comes to reducing total caseload:

"Conclusions: While small benefits cannot be excluded, we do not find significant benefits on case growth of more restrictive NPIs. Similar reductions in case growth may be achievable with less restrictive interventions."

Another paper concludes:

"Higher Covid death rates are observed in the [25/65°] latitude and in the [-35/-125°] longitude ranges. The national criteria most associated with death rate are life expectancy and its slow-down, public health context (metabolic and non-communicable diseases (NCD) burden vs. infectious diseases prevalence), economy (growth national product, financial support), and environment (temperature, ultra-violet index). Stringency of the measures settled to fight pandemic, including lockdown, did not appear to be linked with death rate."

We must absolutely understand that no intervention comes without its costs, and when an intervention involves distance,