



The Progressive Case Against Medical Mandates

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Part 1

MILLIONS AGAINST MEDICAL MANDATES
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PART 1

There is little doubt that the Covid vaccine issue is dividing the nation. The people are tired of Covid restrictions, and the Biden administration paints the Covid vaccine as a kind of savior - the "only way back to normalcy."

Often the Covid vaccine decision is framed as a Right versus Left issue. Those on the political right say it is an issue of freedom and bodily autonomy. Those on the political left say it is a question of protecting the vulnerable and necessary for the greater good.

But the Covid vaccine question is more complex than the media or the Biden administration would like to acknowledge. At its core, the vaccine decision is a civil rights issue.

People are intimately aware of their rights, and they have cause to be concerned when vaccine mandates threaten these rights and people's livelihoods. However, critical questions need answering: How far can the state go to ensure the public's safety? How much do we own our bodies in the face of state goals?

The public health and media rhetoric of "we must beat Covid at all costs" and "we need vaccine mandates to get back to normal" misses these crucial questions. Arguably, how the government responds is critical for ordinary people - it affects their daily lives.

The role of the progressive in answering these questions is critical here. The progressive individual cannot simply sit back and accept the war mentality of the powerholders as the solution. Historically, we have seen its outcomes in the ill-fated Vietnam War, George W. Bush's War in Iraq, and the rise of the surveillance state via the Patriot Act.

As we will see, medical mandates, including vaccine mandates and vaccine passports, raise critical civil rights concerns that threaten Progressivism's core values. At this time, we need progressives to provide the essential checks and balances on corporate power and government overreach. Complacency on the part of progressives risks undermining the achievements of 20th-century progressives.



HOW MEDICAL MANDATES UNDERMINE PROGRESSIVISM

The *Daily Kos* defined the spirit of Progressivism as the belief in human progress - the idea that "Things could be changed for the better. People could improve themselves. Life could be made better. The world could be made better. It was at the heart of the idea of the American dream."

At the heart of Progressivism lies the vital role of government. Government regulation can counter the laissez-faire dictates of business, address inequalities in society, and drive science and technology to improve people's lives.

The twin pillars of Progressivism are economic justice and civil liberties. Barbara Ehrenreich once said, "There are certain core things we stand for, and these include both economic justice and civil liberties, which you can't back away from."

Medical mandates threaten these twin pillars. Real economic and tangible benefits are being removed from daily life and making their receipt contingent upon vaccination status.

Employer-mandated vaccine requirements effectively produce compliance precisely because they threaten one's economic livelihood. How can a person support herself or her family if her employer requires a vaccine she does not want to take? How can free choice and informed consent exist when the threat of force is behind the offered choice?

Progressives, take note! Now we have the two horns of a dilemma - the Biden administration wants increased vaccination uptake via mandates, but

the measure's effectiveness rests upon undermining the twin pillars of Progressivism: economic justice and civil liberties.

The one-sided discussion from the media misses what is critically at stake here: individuals, not the state nor powerful health interests, have the final say on what happens to one's body.

Medical freedom has much in common with the women's choice movement. Former First Lady and presidential candidate Hillary Clinton once said, "I strongly support *Roe v. Wade*, which guarantees a constitutional right to a woman to make the most intimate, most difficult, in many cases, decisions about her health care that one can imagine."



It is hypocritical to advocate for specific issues like gay marriage and women's choice to access abortion while medical mandates threaten the underlying spirit. Moreover, the medical freedom issue is more inclusive than perhaps any other issue today, transcending gender, racial, religious, class, and political divide.

Enter the role of the progressive. Progressivism historically has fought for workers' rights from powerful business interests. However, with vaccine mandates, employers and state authorities are granted the ability to compel workers to surrender their right to decide their medical status. As such, many workers' unions now are **opposing the vaccine mandates**.

We need progressives to return medical freedom and the right of bodily choice where it rightly belongs: with the individual.



HOW MEDICAL MANDATES HEIGHTEN INEQUALITY

Inequality matters. Former President Obama once said, "Inequality is the defining challenge of our time."

During the COVID pandemic, these inequalities have increased in no small part due to the measures used to combat the disease. For example, CBS reports that the world's billionaires have gotten 54% richer, to the amount of \$4 trillion, during the first year of the pandemic.

The lockdowns have **avored big corporations** and have **hurt small businesses**. While millions of small businesses had to close, Black Americans **suffered the worst**, with 41% of black-owned businesses closing down. With this tremendous cost paid by the people, there is **scant evidence** that the lockdowns achieved their intended effect of stopping the spread of COVID.

In a similar line, vaccine mandates are **hurting real people**, and, as we will see in a later section, there is new evidence casting doubt on if these mandates are helping stop the pandemic. The end implication of vaccine mandates and vaccine passports is increasing inequality in novel and alarming ways.

There is the genuine creation of an underclass here in America based on vaccination status. This underclass is discriminated against, barred from public schooling, restaurants, doctor and hospital care, concerts and other public events, public transportation, etc. Furthermore, their freedom of speech is limited, and penalties, such as fines, are levied against them.

Critical to consider, medical mandates and vaccine passports disproportionately hurt the poor and working class.

They may have less ability to change jobs due to a lack of transferable skills, less flexibility in accepting a lower-paying job, and fewer savings.

These mandates disproportionately hurt minority communities too. For example, according to **New York City data**, as of Nov. 30, 2021, 56% of black adult residents in New York City are not fully vaccinated. The majority of the adult black community would be affected by these medical mandates.

Black Lives Matter of Greater New York leader, Chivona Newsome, warned that the **vaccine passport policy** is fundamentally racist. She stated, "We're putting this city on notice that your mandate will not be another racist social distance practice." Efforts to segregate the vaccinated from the unvaccinated via the **vaccine passport** hypocritically segregate the majority of its black adults.

But beyond economic **harms**, there are other harms to consider too. There is open ridicule from the media of the unvaccinated and those who question vaccination. Public shaming and humiliation have a mental health cost on their intended targets. Their concerns are not merely ignored but openly censored as "misinformation."

Historically, segregation efforts and targeted discrimination against certain groups have been a moral and complete failure. Examples of state-backed use of segregation have led to atrocious civil liberties violations (i.e., **the internment of Japanese-Americans**, **apartheid in South Africa**, and a series of Jewish **segregation efforts** enacted by the German government between 1933-1939 pre-World War II). It'd be a folly to think segregation based on health status would fare differently.

Now critics often say, "vaccination status is not a protected class." But this disregards civil rights history - not too long ago, neither race nor gender were recognized as protected classes. To dismiss the harms done to real people simply because they are not part of the traditionally recognized protected classes is a kind of hypocrisy. We, as progressives, should not stand for it.

Progressives are needed to call attention to these new inequalities and injustices created by medical mandates. They are required to bring the concerns of the minorities who are hurt to the forefront even if these concerns are inconvenient to current political lines. Conversely, the activist dictum "silence is violence" applies here when progressives fail to speak up against medical mandates.



RESTRICTING CIVIL LIBERTIES FOR THE GREATER GOOD NECESSARY FOR NORMALCY?

Progressives, take note! Any government's use of extraordinary measures that impede civil liberties should have extraordinary justification, and such measures should be temporary. If not, we risk the rise of authoritarianism, with elite interests wielding a weaponized government.

The Polemicist has a fantastic [article](#) that defines three criteria that medical mandates and vaccine passports must meet:

1. **Covid is an overwhelming, apocalyptic greater danger,**
2. **Covid vaccines are a necessary, effective, and the only or least oppressive solution to that danger, and**
3. **The vaccines themselves pose no serious risks, no possibility that they might cause other harms equal to or greater than the specific danger of Covid.**

As we will see below, the COVID vaccines have failed to meet each of these three criteria.



CRITERION #1 DEBUNKED: COVID IS AN APOCALYPTIC DANGER.

How dangerous would a disease have to be to be considered an "apocalyptic danger?" In the fiction book *The Stand*, author Stephen King posits a superflu that kills 90% of the people who contract it within two days. COVID-19 is most definitely not this scenario.

How about the initial pandemic models developed by Imperial College epidemiologist Neil Ferguson? His models were used to justify the worldwide lockdowns. For example, he predicted that by October 2020, without lockdowns, two million people would die in the United States. Even with lockdowns, his models predicted that one million people would die by October 2020.

In reality, these models turned out to be wrong. After real-world data started pouring in, the data showed that COVID-19, while concerning for the elderly and those with significant comorbidities, was not the killer it was purported to be. Moreover, while many people did die from COVID-19, a startling number of people exposed to COVID-19 never even got sick, and many people got mild cases equivalent to the flu.

The infection fatality rate (IFR) is a metric that shows the proportion of people who get an infection and then subsequently die. The current data for COVID-19 shows an IFR of around 0.15%. This IFR is around the same ballpark as the flu.

In a Dec. 2020 letter to the editor of the *British Medical Journal*, Cochrane founder Dr. Peter C Gøtzsche acknowledged the danger level from COVID was akin to the flu and warned about the effects of draconian medical countermeasures.

He wrote: "The infection fatality rate [for COVID-19] seems to be about the same as for influenza... The World Bank has just estimated that the corona pandemic has caused an increase of about 100 million people living in extreme poverty. This is not because of COVID-19. It is because of the draconian measures we have introduced. We need a better strategy."

Thus, COVID-19 is not an "apocalyptic danger" that warrants suspension of civil liberties and the use of unprecedented medical mandates. But, likewise, we need a better strategy than these medical mandates.



CRITERION #2 DEBUNKED: COVID VACCINES ARE NECESSARY TO STOP THE VIRUS.

Our leaders tell us: "We must fight COVID. We must get tough on COVID. The unvaccinated are standing in our way." But how can we trust such rhetoric when it is clear that the Covid vaccine neither prevents infection nor stops transmission?

CDC director Rochelle Walensky recently acknowledged that vaccinated individuals can still get the Covid infection (called a "breakthrough infection") and that they can still transmit the virus. In her interview, she stated, "But what they [Covid vaccines] can't do anymore is prevent transmission."

A new pre-print study found that there is no significant difference in COVID-19 viral load between vaccinated and unvaccinated individuals who test positive for infection, regardless of whether they have symptoms or not. The implication is that vaccination is not making a difference in preventing transmission.

Concomitantly, there are reports worldwide of vaccine failure, meaning that fully vaccinated individuals are coming down with COVID-19. Health officials announced that Pfizer vaccine effectiveness has dropped to 39% in Israel. Gibraltar, one of the most heavily vaccinated populations globally, has seen recent case increases concerning enough that they are reportedly canceling Christmas.

The reason for diminishing effectiveness is simple to understand: vaccine-induced antibodies wane over time. This finding has been validated by several studies. For example, a UK study found that COVID vaccine protection wanes starting at three months, and an Israeli study found a similar finding.

Given the problem of waning immunity and the fact that the vaccine doesn't stop transmission, even the CDC is now reporting that vaccine-induced herd immunity may not be a viable strategy - a euphemism for "herd immunity is not possible from the vaccine."

Since controlling COVID-19 via the vaccine has proven to be scientifically dead-in-the-water, it means that medical mandates are similarly dead-in-the-water.





CRITERION #3 DEBUNKED: THERE ARE NO SERIOUS RISKS FROM COVID VACCINES.

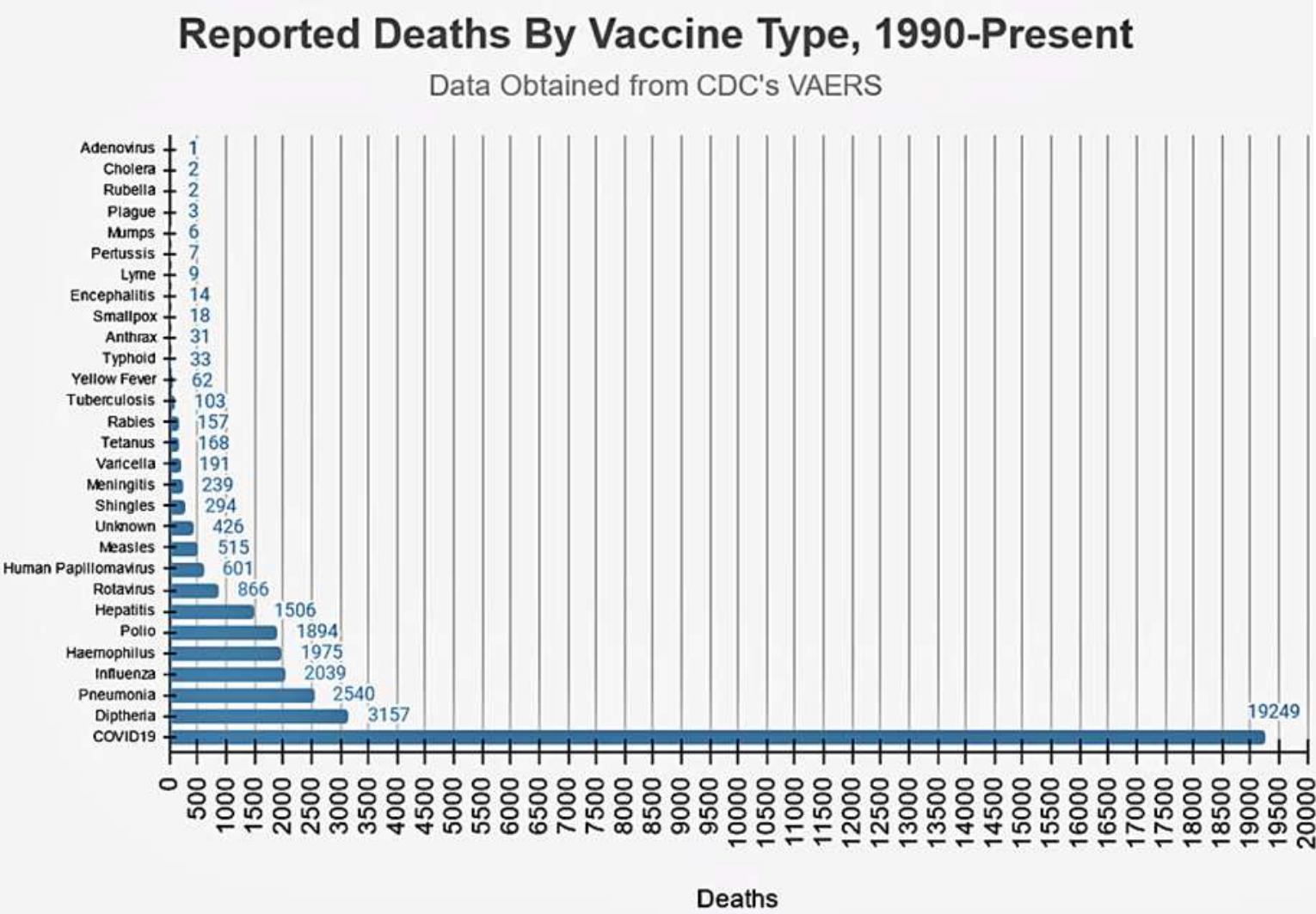
While any medical treatment, including vaccines, can have adverse side effects, the sheer amount of negative adverse reports related to the COVID vaccines raises red flags.

According to the [latest data](#), as of Nov. 30, 2021, 900,000 injuries related to the COVID vaccine (19,000+ of which were deaths) were reported to the Vaccine Adverse Events Reporting System. These are ordinary people like you or me. But why isn't public health acknowledging or investigating them?

Rather than acknowledge these harms, public health officials, doctors, and the media deny any vaccine injury exists and deride anyone criticizing vaccines, including those who are vaccine-injured, as being "anti-vaccine."

This derision serves to shift the focus away from vaccine safety reform (and its potential liability) to preserve the medical establishment's power. When presented with the phenomena of vaccine injury, vaccine proponents respond that VAERS reports are of "low quality" and "do not establish causality." Still, they omit additional facts that are important to the overall context.

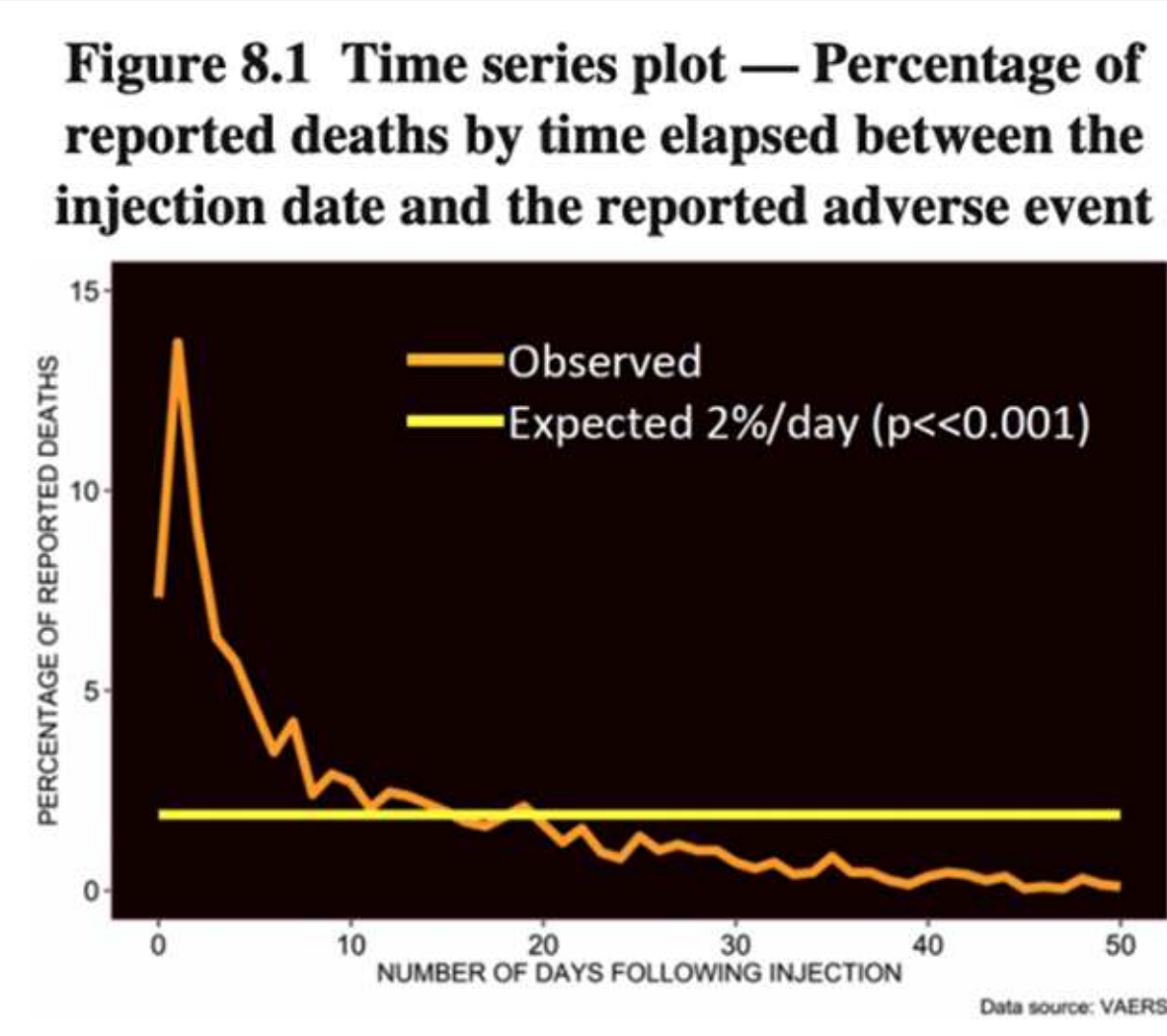
First, they forget to mention that the number of VAERS reports related to the COVID vaccine during its first year exceeds that of all the other vaccines combined over 15 years.



The large number of reported deaths from the COVID vaccine over a short reporting time-period sends a warning signal that we cannot ignore.

Second, they do not mention the adverse effects already known to be associated with the Covid vaccine, including heart inflammation (myocarditis), Guillain-Barré Syndrome, and [Bell's Palsy](#) in COVID vaccine recipients. Nor do they mention that these conditions have been seen in [VAERS reports](#).

Third, they do not mention the temporal association between the onset of severe medical conditions and receipt of the Covid vaccines. This [study](#) reported a suspiciously high number of serious events, including emergency room visits and deaths, clustered in the few days right after a person receives the vaccine.



If COVID vaccine injury reports were "mere random noise," we would expect a more uniform distribution in temporal reporting. But instead, we see a clustering of unfavorable adverse effects clustered around the time of vaccine receipt - thus implying a causal association.

Finally, vaccine proponents do not acknowledge research that brings up the possibility of harm from the COVID vaccines (for example, [here](#), [here](#), [here](#), [here](#), and [here](#)). Yet, these findings provide a biological rationale for how the COVID vaccines can harm and corroboration for the reported VAERS reports.

These reasons point to a more significant problem in medicine that needs addressing: the medical community is **not taking vaccine injury seriously**. A board-certified doctor stated: "It is devastating to me, not only that this happened, but that the medical community as a whole is not willing to acknowledge that this is happening."

Vaccine injury is the nail-in-the-coffin for the mandate argument. How can government officials willingly mandate a medical intervention, even if for the greater good, when it has the potential to harm innocents?

Moreover, the mandate argument dies when combined with the failure of the first two criteria. Government public health has not adequately met the public danger argument. Even if it had, it is clear that Covid vaccines are not the solution due to their inability to stop transmission.

Progressives are needed here too. Public health is misrepresenting the burden of proof criteria to protect the vaccine programs and prestige of the medical establishment. Vaccine injury is assumed not to exist unless the **person experiencing the injury can prove it**. Moreover, the government provides vaccine manufacturers significant liability protection.

It is fundamentally an unequal system that is adversarial to the needs of the ordinary people, and more significant reforms are needed. But, again, progressives are required to fight for the stifled voices and their concerns.





SAFEGUARDING CIVIL RIGHTS AT THE TIME OF THE “WAR ON COVID-19”

The "War on COVID-19" has become this generation's Vietnam War. It is a never-ending war in which vast financial and human resources have been used to fight an existential enemy, Communism in the former and the threat of infectious disease in the latter.

As government power holders and their corporate partners become more invested in "winning," the people's concerns are lost as civil rights are infringed upon.

Bluster about vaccine misinformation and conspiracy theory misses the point. Lost in the bluster are the real stories of people who are hurt by vaccine mandates, those injured by vaccines, and those whose lives are disrupted.

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Bluster about vaccine misinformation and conspiracy theory misses the point. Lost in the bluster are the real stories of people who are hurt by vaccine mandates, those injured by vaccines, and those whose lives are disrupted.

Like it or not, the decision of whether individuals or the state can coerce someone to take a medical intervention, such as a vaccine, is a human rights question.

What is missing in all the public discussions is the dialectic, the synthesis of two opposing ideas into something new. Instead, no actual debate exists - authorities use force and censorship to squash inconvenient ideas or questioning.

Arguably, dialectic is a necessary condition for Progressivism. After all, how can the people use the government to solve society's ills if we cannot accurately assess and discuss the state of reality?

We need you to step in! We need progressives to fulfill the true spirit of Progressivism. The weak and oppressed need representation. Civil rights need to be safeguarded. Government authoritarianism needs to be questioned.

Martin Luther King Jr once wrote from a jail cell in Birmingham: "Injustice anywhere is a threat to justice everywhere. We are caught in an inescapable network of mutuality, tied in a single garment of destiny. Whatever affects one directly affects all indirectly."