

Daniel Shutt – Written Evidence (LBC0025)

I am writing regarding the call for submissions on how to recover the UK economy, following the COVID-19 pandemic. I would like to put forward that the implementation of a lockdown policy was not only unlawful but will lead to catastrophic consequences in both public health and the economy.

The main justification for lockdown came from the fact that China dealt with their outbreak that way, and claimed success. However we cannot afford to look at this through a culturally-relative lens. China is a country which heavily restricts freedom of information, freedom of association, freedom of religion and freedom of press. China is a country which engages in forced sterilisation, forced organ harvesting and racial persecution. Whilst locking down a whole region in China may seem reasonable or even normal, we hold ourselves to higher standards in the United Kingdom

The United Kingdom has a great tradition of Freedom and Liberty, with the introduction of the Magna Carta back in the 11th Century. Throughout our history, men and women have sacrificed their lives in pursuit of freedom, from the Chartists and Suffragettes to the men who sacrificed their lives in two World Wars. Millions have died for the freedoms we hold dear today, and even if restrictions were used moderately in the current situation, any precedent that authorizes the restriction of liberty sets the clock back. All that our ancestors fought for can be undone in an instant, just at the claim of a microscopic pathogen.

The second justification given to lockdown was the modelling of Neil Ferguson at Imperial College London, who claimed a large number would die without lockdown. However further investigation would reveal that Professor Ferguson's models have been drastically inaccurate in the past, from Foot-and-Mouth disease through to Swine Flu. Investigation by independent experts has also revealed that Professor Ferguson's model is glitchy and fails to produce consistent results.

Further to this, the Government has failed to consult with other independent experts who have presented a different view. Professor Suneptra Gupta at Oxford University put forward a different perspective early on that the death rate was much lower, the virus had been in the country longer and herd immunity was already well on its way to being achieved. Day by day, more evidence is coming forward to support this view, yet Professor Gupta was not invited to be part of the SAGE committee or make recommendations. I would argue that being made up by a large number of people that receive research funding from the same collective of donors, the SAGE committee has been more of an echo-chamber for pro-lockdown researchers, rather than an impartial committee acting in the public interest.

The third justification for lockdown was public hysteria following sensationalised media coverage. We were presented with dramatic footage of ICU wards in Wuhan and Lombardy, claiming this would soon come to the UK. The media failed to put into perspective that Wuhan and Lombardy are both epicentres of pollution and industry, with a high incidence of respiratory problems amongst the population. The same trends were never going to be observed in the UK, and as we now know, hospitals have largely sat empty throughout this 'pandemic'.

We were told, and Government policy was based on the notion that this was a new Coronavirus with a 3% death rate, nobody was immune to it, anyone could catch it and anyone could die from it. I would suggest that the Government should have gone by the principle of Occam, and the burden should have been on the Scientific community to evidence these assumptions.

In the absence of any other evidence, the assumption should have been that COVID-19 was just a coronavirus, no different to many others in circulation including the common cold virus. Professor Michael Levitt has modelled that such viruses have an initial potent spread of about 10 weeks before burning themselves out and becoming much more minor infections (having correctly modelled the cycle of the outbreak in Wuhan, Italy and the UK based on this assumption). We also know that as with other coronaviruses, it is only the elderly and the chronically ill that are at risk. In the UK, the average age of death during the pandemic was 78.5 compared with 79.5 previously. Data from Italy showed that 99% of deaths had at least one other condition significantly contributing to the cause of death, and in many cases three or more. The reality is that we closed down our country and destroyed our economy for what is essentially just a common cold in its potent infancy.

Another problem that must be highlighted is the fact that the introduction of lockdown severely impeded our ability to understand the Coronavirus and potential treatments. By drastically altering the way in which UK citizens live on a day to day basis, it is no longer possible to draw a cause and effect relationship from the virus - we do not know that such changes are not down to lifestyle changes because of lockdown. For example, we saw deaths spike around 8th April, two weeks after lockdown was introduced, but one could argue that the media hysteria and introduction of lockdown severely depressed peoples immune system and caused such a spike. Similarly, we saw a rise in Kawasaki syndrome symptoms around late April/May which was described as being "linked to" the virus. However it could be argued that this is because more children were indoors, potentially spending more time in front of the TV, not exercising, not eating well etc. The introduction of lockdown means that we can only observe correlation and not cause-and-effect.

It's also indisputable that lockdown has caused many deaths from suicide, untreated cancer, heart conditions etc. We also have to consider the effect of lockdown in driving more long term conditions. I'm quite active normally and during lockdown I have continued to exercise regularly, yet I've noticed a decrease in my cardio and stamina, just from the fact that

Im not walking to-and-from work, around the office etc. If it can have such a drastic effect on me, what effect has it had on people who have not exercised, sat on the couch for three months, eaten junk food, drank, smoked etc. I predict that as a result of lockdown, we are going to see a dramatic increase in long-term health conditions such as obesity, diabetes and heart conditions, and part of the recovery plan must be to prepare the NHS with the resources to manage a growth in these conditions.

This brings me onto the superstition of Social Distancing and masks. There is no substantial scientific evidence to show that staying 2metres apart from one another or wearing masks does anything more significant than avoiding walking under ladders or in front of black cats. Professor Beda Stadler highlights that contracting a virus is very much dependent on the viral load you take in. In other words, you're likely to contract a virus in a hospital, an office or a carehome where you are in close proximity to the same person for a long, ongoing period of time, if they have a virus. You're not likely to contract it by sitting next to someone on the bus for 10 minutes or walking past them in a supermarket aisle or a gym or a cinema, or being on the next table from them in a pub or a restaurant.

As a species, we naturally socially distance ourselves in a way that protects us from viruses. When we are around someone that we are intimate with, we will stand close to them. When we are around a stranger, we will stand further away and if they come too close, we instinctively feel uncomfortable and take a step back. These instincts have specifically evolved to protect us from pathogens, and there really is no need to encourage superstitions and OCD like behaviour amongst the British public which is damaging to businesses, let alone present it as scientific truth.

So coming back to the question - how should the UK recover from COVID-19? I would suggest that the House of Lords should convene an imminent enquiry, calling for evidence from scientists, psychologists, businesspeople, economists etc who are critical of lockdown to review the data independently. When it is revealed, as the data clearly shows, that COVID-19 never posed a significant risk to the vast majority of the population and has been the most dramatic reaction to a scaremongering crisis in British history, the House of Lords should take the following action:

- Declare the imposition of lockdown in the United Kingdom to be unlawful, in contravention of the Magna Carta and the European Convention of Human Rights, ensuring that it may never be implemented again at national or local level.
- Call upon Prime Minister Boris Johnson to make a full formal televised apology to the British people, and carry out a full investigation into where the British Government went wrong.
- Remove all mandatory social distancing and mask-wearing policies at both National Government and local authority levels. Allow all businesses to return to operating as they did prior to March 2020.

- Make Government guidance available in an advisory capacity. There has been a lot of Cognitive Dissonance during the COVID-19 crisis, and a lot of people will continue to believe there is a deadly virus going round despite lack of evidence to substantiate this. People who wish to continue to self-isolate, socially distance etc should have the right to do so on a voluntary basis but not in an enforced capacity. Allow other people to make calculated, informed decisions about what level of risk they are comfortable with based on their individual circumstances.

- Provide additional support to those in high risk groups, by increasing pensions and Personal Independence Payments, for the elderly and the chronically ill.

- Encourage pro-health behaviours and choices amongst the British public. Supplement the price of superfoods in supermarkets such as fresh fruit and vegetables. Supplement the price of gym memberships for a 12 month period and make Council owned gyms and leisure centres free to use for the same length of time.

- Conduct a full enquiry into the treatments used regarding COVID-19, and the certification of deaths. If it is found that incorrect treatments were used, or deaths were classified as COVID when it was due to other causes, the families of the deceased should receive full compensation from the Government.

- Conduct a full enquiry into the media coverage of COVID-19, and potentially overhaul press regulation as a result. Implement tough sanctions against newspapers and journalists who deliberately sensationalise, mis-represent and overhype in a scenario which is likely to cause panic. Where a journalist is shown to have committed deliberate fraud (e.g. the publication of pictures of caskets from a movie on terrorism, claiming they are coronavirus caskets), the journalist responsible should serve time in prison.

The removal of the "new normal" and a swift return to normality, sanity and common sense will boost the economy far more than any half-hearted measures which also pay lip-service to the COVID-19 hysteria. We are living in a situation where the COVID-19 Emperor has no clothes and the longer we continue the charade, the more damage will be done. Sooner or later, the evidence will be so great that the Government will be forced to admit they got it wrong, and a swift, forthright admission and apology now will go a long way to restoring public faith and the economy in the future.

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