

The Great Barrington Declaration has nothing to do with...

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As the [BBC](#) has reported today:

Thousands of scientists and health experts have joined a global movement warning of "grave concerns" about Covid-19 lockdown policies.

Nearly 6,000 experts, including dozens from the UK, say the approach is having a devastating impact on physical and mental health as well as society.

They are calling for protection to be focused on the vulnerable, while healthy people get on with their lives.

In other words, they want the young to do what they want; and the economy to reopen along with all schools and universities, without constraint, whilst the more elderly (the 60 plus) are effectively locked down and cut off from the rest of society for as long as Covid 19 lasts for their supposed self-protection.

The so-called Great Barrington [Declaration](#) itself says:

As infectious disease epidemiologists and public health scientists we have grave concerns about the damaging physical and mental health impacts of the prevailing COVID-19 policies, and recommend an approach we call Focused Protection.

Coming from both the left and right, and around the world, we have devoted our careers to protecting people. Current lockdown policies are producing devastating effects on short and long-term public health. The results (to name a few) include lower childhood vaccination rates, worsening cardiovascular disease outcomes, fewer cancer screenings and deteriorating mental health — leading to greater excess mortality in years to come, with the working class and younger members of society carrying the heaviest burden. Keeping students out of school is a grave injustice.

It all seems such reasonable stuff. But then it adds this:

As immunity builds in the population, the risk of infection to all — including the

vulnerable — falls. We know that all populations will eventually reach herd immunity — i.e. the point at which the rate of new infections is stable — and that this can be assisted by (but is not dependent upon) a vaccine. Our goal should therefore be to minimize mortality and social harm until we reach herd immunity.

The most compassionate approach that balances the risks and benefits of reaching herd immunity, is to allow those who are at minimal risk of death to live their lives normally to build up immunity to the virus through natural infection, while better protecting those who are at highest risk. We call this Focused Protection.

But that's when the alarm bells ring.

First, I am reliably informed there is no such term as 'herd immunity' in public health medicine. The term only exists in veterinary medicine. So this is not a medical, epidemiological or public health declaration in that case.

Second, even if the term did exist, there is no evidence as yet that 'herd immunity' could be created for Covid-19. This is not a disease to which lasting immunity is created by having it once unlike, for example, mumps. Covid 19 seems like flu and the cold in this regard (which is unsurprising as the common cold is also a Covid), and herd immunity does not exist for either of them. In which case the claims made are based on an entirely false premise.

Third, no policy of this sort has ever been used in society. I'd offer this clip of Prof Trisha Greenhalgh as evidence:

https://www.youtube.com/watch?v=_lb9cidVAYs&feature=youtu.be

As Prof Greenhalgh points out, this is in fact not science at all.

To understand this it's important to note that this so-called Great Barrington Declaration was signed at the Great Barrington Headquarters of the American Institute for Economic Research, of which [Wikipedia](#) says (and on this occasion, I think quite reliably):

The American Institute for Economic Research (AIER)[2] is a 501(c)(3) economic research institute located in Great Barrington, Massachusetts. The institute aims to promote individual sovereignty, limited government, and "a society based on property rights and open markets." [3] It was founded in 1933 by Edward C. Harwood, an economist and investment advisor, with the intention of protecting individual rights.[4]

The current president of the institute is Edward Stringham, an Austrian School economist and a professor of economics at Trinity College in Connecticut.[5]

This is not, then, epidemiology at all. Nor is it science. It is far-right economics. And the logic that underpins it is that of that branch of economic thinking.

Over time I have formed the very firm opinion that many who adhere to that way of thinking are of the opinion that the elderly are simply a burden on society who do not add to economic production. If you look at how much the elderly do add to the production side of GDP this is, of course, a sustainable argument in a great many cases. It takes only a moment in that case to extend the argument and to argue that the elderly do, then, have no worth. And what this so-called epidemiological approach does is in that case provide is cover for what I think might best be called the cull of the elderly that many of this persuasion would, I think, like.

This cull - which they call 'harvesting' (because that sounds so much nicer) - would achieve are four things. The first would be a reduced size of the state because of reduced pension payments. Second, there would also be a reduced size of the state because of reduced medical spending. And third, the logic is that taxes could Then be reduced as a result. And fourth, as a consequence, the income of the surviving younger people would increase. It's easy to see why the right wing like this so much.

But it's still best described, in my opinion, as a cull.

And, come to that, it's also a deliberate policy to oppress the civil rights of the elderly.

And all that is being done in the interests of supporting the free enterprise economy to operate without constraints because it is assumed that the elderly are pretty much outside it.

So let's stop the pretence that this has anything at all to do with health issues. This is the economics of neoliberalism running riot, and revealing in the process its utter indifference to the interests of anyone but those who can 'add value' within that system.

As a result of which I add one final thought. If some can sign up to this what will they sign up to next? Remember, first they came for those they deemed to be the elderly..... You can fill in the blanks.

NOTE TO POTENTIAL COMMENTATORS: It's become pretty clear that a large number of comments are coming from right-wing sources, all of whom are obsessing on herd immunity, none of which discuss the issues raised in this post, and many of which are abusive. I am now getting bored by these as none now add value and as a result those offering them after 15.30 on 8 October can presume that they will be deleted.