

Dangerous Lack of Rational Information and Leadership

From: Adele Mercie [REDACTED]
To: mayorhiggins@xplornet.com
Cc: moorek@queensu.ca, kflaphi@kflaph.ca, Mayor of Kingston <mayor@cityofkingston.ca>, Gary <goosterhof@cityofkingston.ca>, Simon <schapelle@cityofkingston.ca>, Lisa <losanic@cityofkingston.ca>, Wayne <whill@cityofkingston.ca>, Bridget <bdoherly@cityofkingston.ca>, Robert <rkiley@cityofkingston.ca>, Mary Rita <mrholland@cityofkingston.ca>, Jeff <jmclaren@cityofkingston.ca>, Peter <pstroud@cityofkingston.ca>, Rob <rhutchison@cityofkingston.ca>, Ryan N. <rnboehme@cityofkingston.ca>, mayor_smith@centralfrontenac.com, rvandewal@southfrontenac.net, denisdoyle@kos.net, councillormartintwsp@gmail.com, billmacdo@outlook.com, councillorrevill@gmail.com, thehiggs100@hotmail.com, info@greaternapanee.com, Joseph Hickey | OCLA <joseph.hickey@ocla.ca>, Cheryl Robson <cao@northfrontenac.ca>, Kelly Pender <kpender@FRONTENACCOUNTY.CA>, Lanie Hurdle <lhurdle@cityofkingston.ca>, Brenda Orchard <borchard@lennox-addington.on.ca>, Marg Isbester <mayorisbester@greaternapanee.com>
Subject: Re: Dangerous Lack of Rational Information and Leadership
Date: Saturday, July 11, 2020 1:34 PM
Size: 84 KB

Dear Mayor Higgins,

I thank you very much indeed for your prompt and courteous response. (Others have not been so polite.)

I only represent myself. (My university signature is my usual email signature.) I am not a member of OCLA, although I follow what people post on their website, to gauge the pulse of (at least) that (important, I think) public.

Since your decisions are based on the best information you have at the time, I would simply request that you share it.

If one can *equally* find reasons to justify wearing a mask, as for not wearing a mask, then isn't the public allowed to know why our leaders have opted for imposing masks?

You say: to me it is quite simple – they work!

With respect, sir, an increasing number of reputable scientists disagree. Must everyone be forced to wear masks because “according to Mayor Higgins, they work”?!

The problem is that you are ignoring the scientists who disagree, in favour of the scientists who agree. You cannot accuse me of the opposite (although some have), because I read both, and I am merely seeking to know how and why our leaders choose which scientists to trust. In the absence of rational reasons to choose the one scientists over the others, the decision to impose masks becomes merely a political one. And the danger with that, is that it generates conspiracy theories. If you don't believe me, look up the comments on the OCLA site!

As I have said before, I do wear a mask. I would just like to have a rational answer to the people who ask me why. (Respectfully, "because the Mayor (or even the medical director) thinks they work" is not such.)

(it is uncomfortable for the short time you have to wear the mask

Some people are obliged to wear the mask all day long.

And for how long, or until when, shall we have to wear masks? Forever? If not, why not?

Thank you for allowing, rather than shutting down, the discussion (as others have done).

Adèle Mercier

On Jul 11, 2020, at 11:50 AM, <mayorhiggins@xplornet.com> <mayorhiggins@xplornet.com> wrote:

Although I am only copied on the original email I cannot sit on the sidelines and wait for a response from others when you take a pot shot at our leadership. I also do not know if you are representing yourself, OCLA or the University in your email? I am assuming the University as you used their info at the bottom of your email.

The following is my own personal perspective.

Your perception of the leadership is way out of line, as our decisions are based on the best information we have at the time, the same as we do for any other Council decision and this is not an arbitrary decree just to flex our leadership muscles as you seem to insinuate. Leadership is about making the tough decisions knowing we will not please everyone. I stand by every decision I make as a leader knowing it is the best decision for the community, if the decisions are wrong there is no need to vote for me in the next election but that has not been an issue for me so far. There will always be a few that will challenge decisions, such as you are doing here, but based on my 6 years as Mayor this is not an challenge that represents the majority of the community. In this particular case we assessed our Public Health information that was provided and made an informed decision based on what we felt would stop the COVID-19 second wave that happened at the nail salon. As you now know that decision did help to prevent further spread and clearly shows that wearing a face covering is very important for prevention and

curtailment of the COVID spread. Since then the rest of Ontario now realizes the benefit are also making face coverings mandatory. I guess you could say we displayed true leadership, being the first in Ontario to do so.

If you do not want to wear a mask you can find information, data and reports on reasons why not to.

If you do want to wear a mask you can find information, data and reports on reasons why you should.

Based on the fact that wearing a mask does allow for a level of protection for workers and the vulnerable, and wearing a mask allows people to get back to work, and allows our businesses to survive, all in a controlled manner, I 100% support the mandatory wearing of masks inside our businesses at this time.

This is not a big deal but it is uncomfortable for the short time you have to wear the mask, but knowing I could be an unknowing carrier or someone else is a carrier, knowingly or unknowingly, is enough for me to support the wearing of a mask. As a leader my job is to support the best options for the safety and well being of the community. It is also not a civil liberty issue as you have a choice to wear one or not. If you do not want to wear one, you can order online or have family, friend or neighbour pick up what you need. This allows others to ensure their civil liberties are considered as well. Judging by the amount of people shopping, and my discussions with them, it is appreciated and not a significant impact on their lives.

I have read pro and con studies and to me it is quite simple – they work!

I am sorry you feel this needs to be debated because you feel this is not voluntary, however the majority of feedback I get supports this order and I have been told we should have done it sooner. I and my peers were unanimous in our support of the order and I stand by that decision today.

As an FYI, I hate wearing a mask but I do so knowing the protection they provide.

I trust this provides you some rationale on our decision, even though you may not agree. I do not intend to debate this any further but wanted to provide some rationale from my perspective. Community safety is my priority for this pandemic even though I hate to make some of the decisions I had to make.

Sincerely,

Mayor Ron Higgins
613-884-9736
Co-Chair Eastern Ontario Leadership Council

From: Adele Mercier [REDACTED]

Sent: July 11, 2020 10:26 AM

To: moorek@queensu.ca; kflaphi@kflaph.ca; Mayor of Kingston <mayor@cityofkingston.ca>

Cc: Gary <goosterhof@cityofkingston.ca>; Simon <schapelle@cityofkingston.ca>; Lisa <losanic@cityofkingston.ca>; Wayne <whill@cityofkingston.ca>; Bridget <bdoherly@cityofkingston.ca>; Robert <rkiley@cityofkingston.ca>; Mary Rita <mrholland@cityofkingston.ca>; Jeff <jmclaren@cityofkingston.ca>; Peter <pstroud@cityofkingston.ca>; Rob <hutchison@cityofkingston.ca>; Ryan N. <rnoehme@cityofkingston.ca>; mayor_smith@centralfrontenac.com; rvandewal@southfrontenac.net; mayorhiggins@xplornet.com; denisdoyle@kos.net; councillormartintwsp@gmail.com; billmacdo@outlook.com; councillorrevill@gmail.com; thehiggs100@hotmail.com; info@greaternapanee.com; Joseph Hickey | OCLA <joseph.hickey@ocla.ca>

Subject: Dangerous Lack of Rational Information and Leadership

The City of Kingston website claims that one should address one's questions relating to the Section 22 order to wear face coverings to FKL&A: "Questions and comments relating to COVID-19 health measures, including the Section 22 order to wear face coverings, should be directed to KFL&A. You can view their FAQ online."

The FKL&A website, for its part, states:

"Due to the high volume of e-mail submissions and the re-assignment of staff to assist with the COVID-19 response, we are unable to respond to individual e-mails regarding COVID-19 at this time."

In other words, there is no one to answer questions.

If the medical officer and the mayor of Kingston are so sure that masks work as to impose them on the entire population, then they should easily be able to explain why, and to explain why all the serious studies in reputable journals are fallacious that show that they are not, and indeed that they can aggravate the situation rather than improving it, not only because of the false sense of security they provide.

I note that not one of the city leaders I, and others, wrote to on the matter has deigned to reply.

This absolute abandonment of leadership is dangerous in a situation inciting fear. Governance by decree, rather than by informed rational discussion, speaks dangerous conspiracy theories (in case you haven't notice, these currently abound). The Kingston public is intelligent and educated, and deserves rational answers to rational questions.

I call upon our "leaders" —those who would enforce radical changes to our behaviours— to explain to the Kingston public why and how it is that they continue to believe that masks protect anyone from aerosolizing viruses (as opposed to bacteria), in spite of all the growing evidence to the contrary. (And please don't answer the glib "South Koreans wear masks..." —South Korea practiced universal testing and contact tracing.)

If the scientific evidence supports your decrees, then produce it.

If you cannot produce the evidence (because it isn't there), then explain to us why we must all wear masks anyway, and for how long. (And please don't answer: "It can't hurt", because then you just sound like Trump on hydrochloroquine.)

Adèle Mercier

Dept of Philosophy, Queen's University, Kingston, CANADA K7L 3N6
tel (613) 533-2182; fax (613) 533-6545

LOGOS - Logic, Language & Cognition Research Group
Departament de Lògica, Història de la Ciència, Universitat de Barcelona, SPAIN

Begin forwarded message:

From: Adele Mercier [REDACTED]
Subject: Your reply to the OCLA re: masks
Date: June 30, 2020 at 8:34:28 AM EDT

Dear Jim,

For what it's worth, my family and I do wear masks in public ...as well as practice a healthy form of distancing, and a great deal of hand washing. Nothing I say below is to be interpreted as opposing current measures in Kingston.

Respectfully, Mr Councilman, your reply entirely misses the mark.

The OCLA letter cites numerous SCIENTIFIC studies from the most reputable journals showing nul effects of masks in reducing the spread of viruses; these are highlighted below.

The letter also warns against well-known biases that all too easily infect "the overwhelming opinion of medical professionals". A case in point: up until 1973, the overwhelming opinion of medical professionals was that homosexuality was a mental illness; the overwhelming opinion of medical professionals today is that it never was. Astronomical professionals were overwhelmingly of the opinion that Pluto as a planet, until 2006, under new evidence. WHO professionals were overwhelmingly of the opinion that the public should not wear masks, until lately, under no new evidence; that's not science, that's politics. You, Jim, know that.

What OCLA presents are not legal opinions as you dismissively put it, but scientific arguments. Please respond, or have your trusted medical professionals respond, to those. And if "legal opinions" are beneath reply, take it up with the WHO.

One thing you surely cannot disagree with, as a general supporter of civil liberties and of sound objective science, is that a government ought not, should not, and cannot impose measures on its citizenry based on bias, on a false sense of security, or on unscientific hunches, no matter how enthusiastically they are entertained by whichever professionals espouse them at the time. (This way lies bleach and hydroxychloroquine...)

Appealing to the better angels of our nature, we would wear masks in confined public spaces voluntarily, not because the science confirms they work (it doesn't, and nobody knows they do), but as a symbolic gesture of solidarity towards one another during these trying times, as a reminder that physical distancing slows down contagion, allowing health services to assist the sick and old to survive at very little expense (oxygen) who would otherwise die, and that we have a moral obligation to do that.

For your interest, see intelligent argument that Sweden has effectively engaged in *involuntary euthanasia*:
<https://www.youtube.com/watch?v=K4SQ-NOV-iU>

Sincerely,

Adèle Mercier

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- Xiao, J et al. (2020) "Nonpharmaceutical Measures for Pandemic Influenza in Nonhealthcare Settings—Personal Protective and Environmental Measures", *Emerg Infect Dis.* 5 May 2020;26(5):967- 975. <https://dx.doi.org/10.3201/eid2605.190994>
["Although mechanistic studies support the potential effect of hand hygiene or face masks, **evidence from 14 randomized controlled trials of these measures did not support a substantial effect on transmission of laboratory-confirmed influenza. We similarly found limited evidence on the effectiveness of improved hygiene and environmental cleaning.**"]
- Long, Y et al. (2020) "Effectiveness of N95 respirators versus surgical masks against influenza: A systematic review and meta-analysis", *J Evid Based Med.* 2020; 1- 9. <https://doi.org/10.1111/jebm.12381> ["A total of six RCTs involving 9 171 participants were included. **There were no statistically significant differences in preventing laboratory-confirmed influenza, laboratory-confirmed respiratory viral infections, laboratory-confirmed respiratory infection and influenzalike illness using N95 respirators and surgical masks. Meta-analysis indicated a protective effect of N95 respirators against laboratory-confirmed bacterial colonization.**"]
- Bartoszko, JJ et al. (2020) "Medical masks vs N95 respirators for preventing COVID-19 in healthcare workers: A systematic review and meta-analysis of randomized trials", *Influenza Other Respiratory Viruses*, 2020;14(4):365-373. <https://doi.org/10.1111/irv.12745>
["Four RCTs were meta-analyzed adjusting for clustering. **Compared with N95 respirators; the use of medical masks did not increase laboratory-confirmed viral (including coronaviruses) respiratory infection or clinical respiratory illness.**"]
- Radonovich, LJ et al. (2019) "N95 Respirators vs Medical Masks for Preventing Influenza Among Health Care Personnel: A Randomized Clinical Trial", *JAMA.* 2019; 322(9): 824–833. doi:10.1001/jama.2019.11645, <https://jamanetwork.com/journals/jama/fullarticle/2749214>
["Among 2862 randomized participants, 2371 completed the study and accounted for 5180 HCW- seasons. ... **Among outpatient health care personnel, N95 respirators vs medical masks as worn by participants in this trial resulted in no significant difference in the incidence of laboratory-confirmed influenza.**"]
- Offeddu, V et al. (2017) "Effectiveness of Masks and Respirators Against Respiratory Infections in Healthcare Workers: A Systematic Review and Meta-Analysis", *Clinical Infectious Diseases*, Volume 65, Issue 11, 1 December 2017, Pages 1934–1942, <https://doi.org/10.1093/cid/cix681>
["Self-reported assessment of clinical outcomes was prone to bias. **Evidence of a protective effect of masks or respirators against verified respiratory infection (VRI) was not statistically significant**"; as per their Figure 2c]
- Smith, JD et al. (2016) "Effectiveness of N95 respirators versus surgical masks in protecting health care workers from acute respiratory infection: a systematic review and meta-analysis", *CMAJ*, Mar 2016, cmaj.150835; DOI: 10.1503/cmaj.150835, <https://www.cmaj.ca/content/188/8/567>
["We identified 6 clinical studies ... **In the meta-analysis of the clinical studies, we found no significant difference between N95 respirators and surgical masks in associated risk of (a) laboratory-confirmed respiratory infection, (b) influenza-like illness, or (c) reported work-place absenteeism.**"]
- bin-Reza, F et al. (2012) "The use of masks and respirators to prevent transmission of influenza: a systematic review of the scientific evidence", *Influenza and Other Respiratory Viruses* 6(4), 257–267, <https://onlinelibrary.wiley.com/doi/epdf/10.1111/j.1750-2659.2011.00307.x>
["There were 17 eligible studies. ... **None of the studies established a conclusive relationship between mask/respirator use and protection against influenza infection.**"]
- Cowling, B et al. (2010) "Face masks to prevent transmission of influenza virus: A systematic review", *Epidemiology and Infection*, 138(4), 449-456. doi:10.1017/S0950268809991658, <https://www.cambridge.org/core/journals/epidemiology-and-infection/article/face-masks-to-prevent-transmission-of-influenza-virus-a-systematic-review/64D368496EBDE0AFCC6639CCC9D8BC05> [None of the studies reviewed showed a benefit from wearing a mask, in either HCW or community members in households (H). See summary Tables 1 and 2 therein.]
- Jacobs, JL et al. (2009) "Use of surgical face masks to reduce the incidence of the common cold among health care workers in Japan: A randomized controlled trial", *American Journal of Infection Control*, Volume 37, Issue 5, 417 - 419, <https://www.ncbi.nlm.nih.gov/pubmed/19216002>
[N95-masked health-care workers (HCW) were significantly more likely to experience headaches. **Face mask use in HCW was not demonstrated to provide benefit in terms of cold symptoms or getting colds.**]