

AIER

AMERICAN INSTITUTE
for ECONOMIC RESEARCH

— A —

SCIENTIST'S
PLEA

The World is
Not a Safe Space

BY ROGER W. KOOPS

Dear Younger Generations;

DI am writing to the younger generation. When you become an old-timer like me, anyone younger is of the younger generation. My focus is on the slightly more than half of the population of the U.S. who are younger than the age of 40, but this message is for those older as well. I write this because I, as a scientist, am very worried about what has become of the human species. In just a few short months, we have seen the species devolve into a panic-driven, irrational, hysterical species.

Much of this hysteria has been forced upon us by people who were elected to represent us, not dictate. Not all have gone this route but most have. They now seem to be only serving themselves. Theaters may be closed but we certainly get to see much grandstanding from these people on a constant basis. Their main message is that **THEY** will decide all risks for society.

RISK MANAGEMENT

As human beings, we live each day of our lives choosing our risks in life. Many risks we do not even think about consciously. Starting early in our childhood we are taught about risks and consequences by adults as well as our peers. We are taught that there are risks that we can manage to varying degrees and then there are risks that involve others to mitigate. Most risks fall into a combination mode; that is, we can have some control over the risk but we are still dependent on others. But, believe it or not, risks become mitigated by repetitive behavior, economics, and many factors.

All of which we balance in making our decisions. For example, flying in an airplane offers one little control over the risk. Yet, in making that decision you assume that the pilot and crew are well-trained, that the aircraft is maintained and serviced correctly, that it has been properly fueled, that the flight plan does not intersect with another aircraft, and so on – hundreds of people are now a part of the risk process; you are a nonexistent part of that risk. What allows you to make that risk decision is past performance and knowledge of those people assuming the risk. But, you always have the choice not to fly.

Risk evaluation and management, therefore, is completely an individual exercise in personal responsibility. This evaluation is so personal because it

fits with how we each will choose how to live our life. No one really wants any person to tell them how to live their lives and control those risks. Some people are willing to assume high personal risks in order to experience what they want to get out of life.

Sometimes, they will choose the high possibility of an early death if it means fulfilling an experience. Yet in the past few months, a very few people, with no real understanding of what they are doing, are now making those risk decisions for everyone. And while the health impact has been felt greatest on the elderly and impoverished, the life impact has been felt mostly on your generation and the less fortunate of all ages in society.

THE BATTLE WITH VIRUSES

Infectious diseases know nothing of risks or risk-taking. A virus is a molecule seeking the necessary chemical reaction to sustain its life cycle – PERIOD. It has evolutionary advantages beyond what we have been able to yet comprehend. It seeks out cells to survive like we consume food, or breathe air. Technically, viruses play no favorites. A virus will seek entry into a viable cell that it can then use to replicate itself. So, at the early stages of infection, the playing field is pretty level for all hosts. Yet, humans have done pretty well against them.

But, once infected, the battle is now very personal. Each individual will have a different array of weaknesses, strengths, and defenses when dealing with infection. The formula is essentially the same for all infectious diseases; your risk for serious disease increases with weakened immune systems, chronic or acute disease in critical organs of your body, physical and emotional stress, and age (because all of your body functions are weakening and slowing down).

The battle with viruses is thus a personal battle. It is between the individual and the virus. Humans have the ability to enlist additional help, mainly with your physician. This is what physicians train to do – deal with each individual

and their health issues. Governments have NO place in this battle.

Humans can influence the factors that will increase your risk. Viral load is always the key. So, poor building maintenance and sanitation can increase your risk. Lockdowns can increase your risk. Putting already sick people in with at-risk people REALLY increases their risks. But, the virus just acts like a virus.

Maybe during the past few months you understand your risks and potential outcomes. But, sometimes it may not always be clear because of all of the media hype. I can try to make it clearer for you.

ABOUT DISEASES

I, personally, do not like to dwell on morbidity. Unfortunately, viruses can cause serious disease in some people and they may not survive. Even rhinovirus, which is considered pretty mild, can lead to death in a person who cannot handle either the virus or the opportunistic infections that may arise. The media has so hyped the deaths that I almost consider it a taboo subject; well, almost. But, we can learn from it and we should. Since the hype has been about how everyone will die from this, we can truly learn a lot from the mortality data and your risk as a younger person. So, here it goes.

Of course, we all know about influenza. Influenza is not a bad word because we have become used to it. In December of 2017, the World Health Organization quietly updated their estimate for the annual deaths due to influenza to 650,000. For several years, they had reported between 250,000-500,000 deaths annually, and this included all related deaths, respiratory and nonrespiratory. In the new report, the 650,000 death figure was based upon a narrower definition using respiratory causes linked to influenza. Compare the WHO estimate for the annual toll from influenza to the current world situation with coronavirus.

Coronavirus has been around certainly as long as influenza, but it was never given much attention even though it is responsible for a fair portion of the

common cold. The underlying panic that has been induced since March has been directed at trying to convince people that somehow this virus will kill anyone who contracts the disease. Many people have bought into the hype but the facts do not support the message. At-risk groups are exactly that, at risk, but they are an extreme minority of the population. Additionally, immunity is a critical factor – the more healthy people experience the disease, the LESS the risk for the at-risk groups. The healthy people (that is mainly you, the younger generation) can protect the at-risk people.

The fact is that this virus is acting just like any other Upper Respiratory Infection (URI), despite the efforts to try and convince people that it is much worse than influenza. To some at-risk people, especially the elderly with poor health and impoverished people who live in difficult conditions with poor access to health care, it is very serious. But for healthy people within the population, especially you, it is a bump in the road.

YOU ARE THE KEY

No one wants to be sick, but most people experience mild disease, become healthy, and move on. In experiencing and recovering from this virus, people are developing important antibodies to help not only themselves, but others in society. These people are the heroes of our society. All should be feted. Once enough people have experienced this virus, it will begin to wane, but will likely not disappear. It will maintain a baseline level of activity and quite likely join the other seasonal virus strains of influenza and rhinovirus. Maybe next year it will return, maybe not. If enough people have experienced the disease, the chances of an immediate return are slim. Next year, maybe it will be influenza or some other virus causing a pandemic (is rhinovirus due to become a problem?).

But, as a younger, healthy person, you are the key. It is time to break the myths that have been so eroding our society concerning this disease. The following and all subsequent data is from the U.S. CDC (cdc.gov/nchs/nvss/usrr/covid_weekly/index.htm#age/andsex) concerning overall mortality in the U.S. since February 1, 2020, that is, the total number of people who have died from all causes compared to those who have died from COVID-19 or related causes.

U.S. Mortality by Age Feb. 1, 2020 - Aug. 1, 2020					
Age	Population (Million)	Total Deaths	Total Deaths % of Population	Covid Deaths	Covid Deaths % of Total Deaths
All	327	1,590,000	0.49	142,000	8.9
85+	6.5	484,000	7.4	45,800	9.5
75-84	15.4	385,000	5.9	41,000	10.7
65-74	30.5	314,000	1.0	32,600	10.4
55-64	42.3	206,000	0.49	19,100	9.3
45-54	41.6	89,400	0.21	7,100	7.9
35-44	41.3	48,100	0.12	2,700	5.6
25-34	45.7	34,000	0.074	1,100	3.24
15-24	43	16,400	0.038	225	1.37
5-14	41.1	2,611	0.006	20	0.77
1-4	16	1,690	0.011	10	0.60
< 1	3.9	8,832	0.23	15	0.17

What we can see first is that for the entire U.S. population, overall about 0.5% of Americans have died over that time, which is pretty much consistent with a modern death rate of about 1-1.5% each year. As one would expect, there is a direct age correlation to the risk of dying. Over the age of 65, the deaths increase in each age group and all of the groups above age 65 are above the national percentage of 0.49%.

Remember, the average life expectancy in the US is 78 years. Below the age of 65, the number of deaths within each age group decreases rapidly with decreasing age. In the U.S for all ages, of the almost 1.6 million people who have died from all causes during this 6-month period, less than 9% have died from COVID-19.

WHAT COVID IS NOT

COVID is NOT the major cause of death in the U.S, despite what you may be inundated with daily by the press on a minute-by-minute basis. In fact, it is not even close to the major cause. Further, school age children experience less than 1% of their deaths in their age group from COVID. That means that over 99% of school age children experience death from something OTHER than COVID!! Even college aged people experience a little more than 1% from COVID.

In the U.S. since February, there have been almost 260,000 confirmed cases of COVID-19 in the 0-17 age range (the actual case number is likely much, much higher, as you are probably aware). From the 0-14 age group data, there were 45 deaths. Let's assume that a total of 100 deaths can be figured for the 0-17 age group (sorry, the data presented by the CDC is not always correlated exactly to age group all of the time; they change their reporting structures, for some reason, probably because they contract out for their data). For an assumed 100 deaths in the 0-17 age group and 260,000 confirmed cases, that is a lethality rate of about 0.04% (the current lethality rate for the entire population based upon confirmed cases is about 3% (almost 100x more); if you calculate in the 10x factor from serology studies, it is 0.3%), if the 10x

factor for actual cases holds in your age group, the lethality rate is now 0.004%.

For people in the driving age, you are more likely to die from an automobile accident than from COVID. Virtually all of the deaths in this age group were with children who also had serious underlying medical conditions. By comparison to the last serious influenza season, 2017-2018, The New York Times, Oct. 1, 2018, reported that there were 180 deaths from influenza amongst young children and teenagers during that past season.

While it is difficult to draw a comparison with such low numbers, it certainly looks like young people handle this coronavirus pretty well, certainly equal to influenza, if not better. Certainly in 2017 there were no lockdowns, distancing, masking, school closures, border closures, or other disruptions. But you, the younger generation, are dealing with it well! I can relate, I experienced the Hong Kong flu in 1968 which was more lethal than this virus. It was not fun and I remember being sick, but I survived and my immune system became the stronger for it. I did miss some days of school but I have no recollection of the school closing.

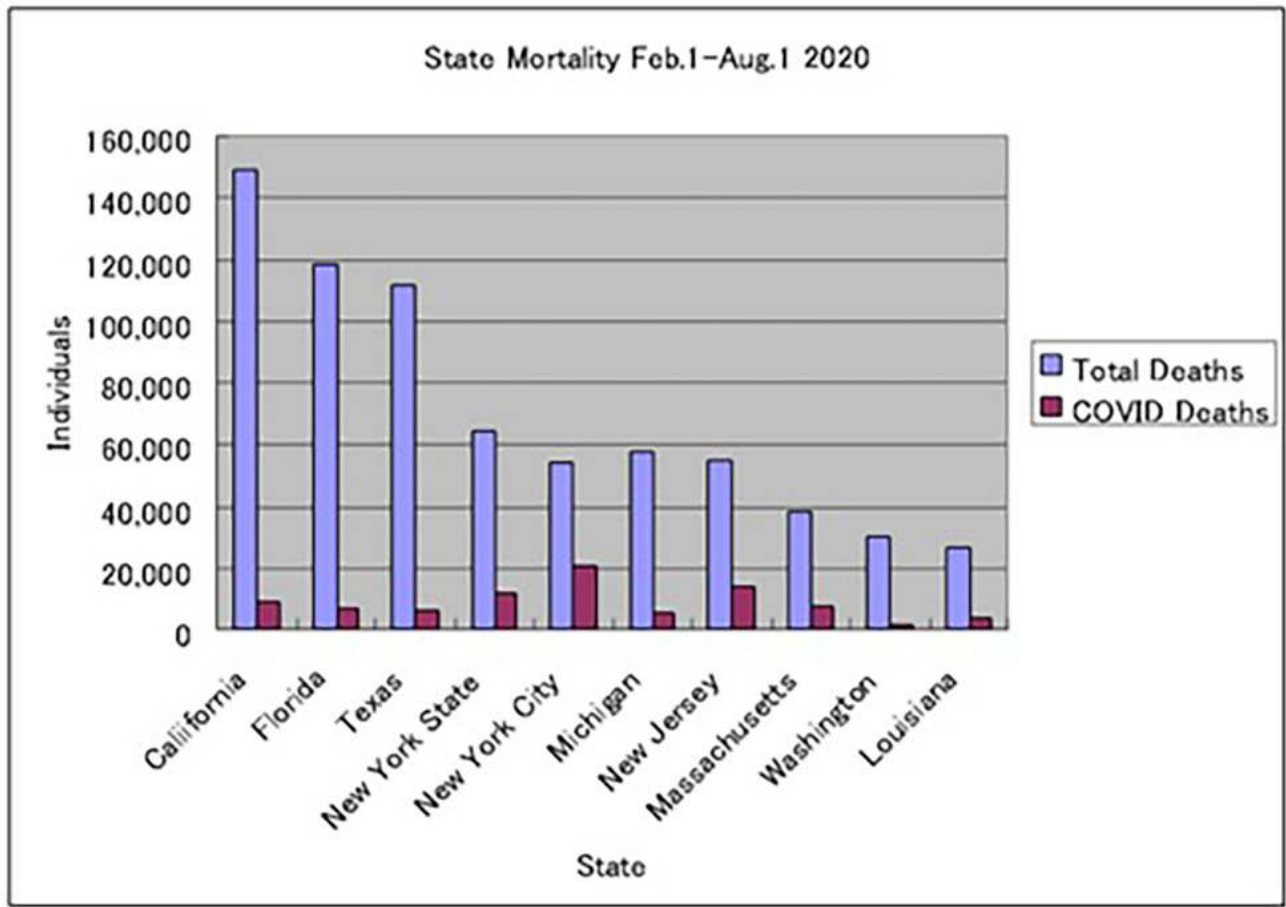
WHAT ARE THE RISKS?

Next, we can see that the population that has taken the big hit is the elderly population. About 84% of COVID-19 deaths are from the over 65 age group. If you factor in the over 55 age group, you now account for over 97% of the deaths (this is my domain). A large percentage, almost 50% worldwide, of these deaths occurred in care facilities (is that an oxymoron?). But, what is even as significant is that looking at the overall mortality in these elderly age groups, COVID deaths still only account for about 10% of all deaths.

Remember, the life expectancy in the US is about 78 years. So, even for elderly people, there are other greater risks for death besides COVID. The U.S. is not unique in terms of these percentages; the rest of the world is reporting similar numbers. The U.S. also has a society with a much higher percentage of at-risk people dealing with obesity (34% adult obesity), hypertension, diabetes, heart disease, lung disease, etc.

In the *New York Times* article cited above, they also reported that 90% of deaths from influenza during that season were in the over 65 age group. So, the 2017 influenza pandemic maybe even took a greater toll in the over 65 group. We have vaccines and antiviral medicines for influenza, yet still the toll was the same.

The data on mortality by each state in the U.S. is very interesting indeed. The following table shows the mortality rates in the states with the highest mortality numbers. Notice that for New York, there is a separation between New York City, and New York State. If you include New Jersey, and most of the damage was from Newark and surrounding areas, essentially a part of the New York metropolitan area, you get a very revealing picture. The mortality inflicted in this area of the country was devastating. Further, much of it was likely produced by the lockdowns when the virus was forced into the weakened populations. The mortality rate rose rapidly starting 2 weeks after lockdowns and peaked in mid-April.



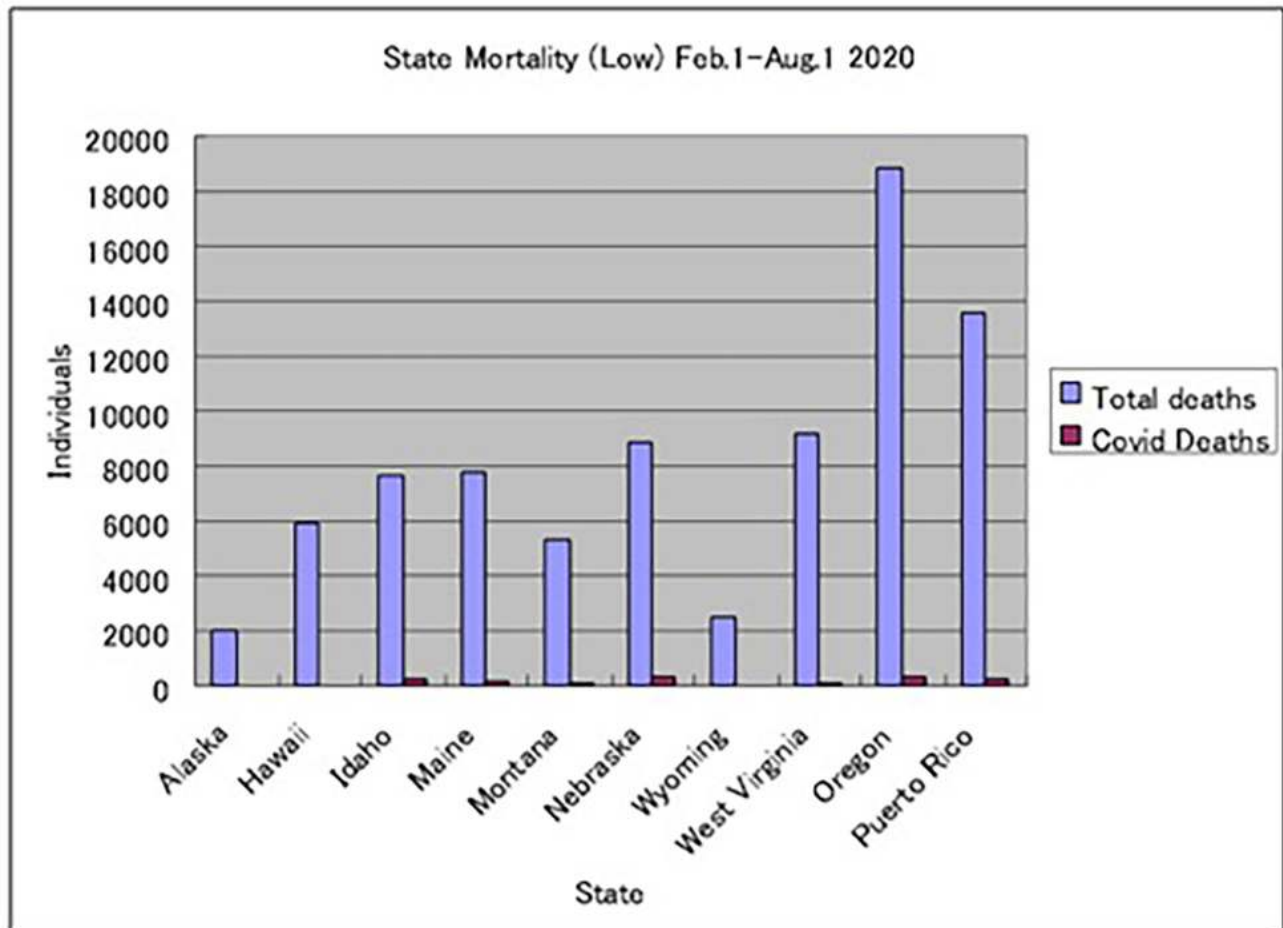
California has experienced the highest number of overall mortalities, which would be expected because they have the highest population. But check their COVID-19 death numbers. California has experienced a percentage of deaths from COVID far below that of New York, Michigan, New Jersey, and Massachusetts. California has experienced about 6% overall mortality from COVID compared to almost 38% for New York City and 18% for New York State. Look at the actions taken by New York State and City in terms of how they dealt with the virus and try to justify the statement by Dr. Fauci that they “did it correctly.” Is he aware of the data?

COMPARE THE DATA

By contrast, let's look at the states with the lowest morbidity data. The following graph shows how these states fared with overall mortality compared to COVID-19. Clearly, COVID was a minor player in these states. Please note that Alaska, Hawaii, and Wyoming experienced a few deaths, but they do not arise from the baseline on the graph.

Does COVID want to go only after New Yorkers or others? No! There are many factors that go into the differences in these numbers. Population densities, individual health, local sanitation, poor living conditions (such as tenements), population education, local policies, health care availability, and poverty, all play a role.

Lockdowns are devastating in a place like New York City. But, if people stay at home in Wyoming, you have a good chance of slowing infection and reducing the viral load on each individual; but even in Wyoming, an elderly person with underlying conditions is at serious risk of death if they become infected. So, putting sick people into rest homes is not advisable ANYWHERE (even though that was what was done in New York). That part of the equation does not change. What is clear is that you cannot apply a one-size-fits-all policy across the nation. Yet, authorities have tried to impose their view of risk restrictions on everyone.



Clearly, you can see from the Government's own data that you are the group of people who are capable of bearing the immunity load. The best advice that I can give is:

1. Keep yourself informed from multiple sources. Try to find the reliable information and test it. Recognize how the media has been corrupted and cannot be depended on to perform their expected function in our society.
2. Recognize how the governments, at all levels, have generally screwed this up (generally speaking that is, there are plenty of notable exceptions but far too few).

3. The electoral power is in your hands. The under 38 age group in the U.S. represents about 50% of the population. You have the ability to make the bad politicians pay the price for the misery inflicted. Do not be swayed by tribal loyalty. It is that tribal loyalty that has given the politicians the belief that they can get away with anything.

Look at some examples of what the older generation has done in the past few months to upend the future:

- We have created a fear and panic for a disease that falls into the normal realm of URI diseases that are experienced by humans.
- We have totally disrupted the lives and stability of billions of people over this panic.
- We have disrupted what should be normal medical functions in society. Hospitals turn away people if they do not have COVID-19. Is this really following the Hippocratic Oath? Doctors, nurses, and other healthcare professionals have generally been trying to do their best under difficult circumstances. But, they have had things imposed on them as well.
- Countless Autocrats have now risen, so-called leaders, who now impose restrictions on free societies unprecedented in history, without openly showing the sources of their decisions, and who themselves suffer no consequences and do not experience the results of their decisions.
- We have thrown aside decades of learning on how to handle viral epidemics to revert to ancient superstitions. In short, we have regressed.

- We have virtually disintegrated normal societal functioning where people cannot even begin to socialize outside of their home environments. People snitch on others and openly attack people.
- We have destroyed people's ability to fend for themselves. Livelihoods have been taken away. There is a false choice in choosing between economy and health – this is a myth being given much too much life. Both economy and health are interlinked. That is why it is called “livelihood.” Our existence is defined by what we do and how we choose to live our lives. That is living and it separates us from other species. Health by itself, with no other substance, does not equate to actual living. The opposite is also true. Dr. Stephen Hawking was stricken by ALS at an early age. He lived the majority of his life confined to a wheelchair, unable to move or communicate without technology. But, he lived almost a normal life span and contributed immensely to not only his field but to the human experience.
- We have created an environment where people fear every other person. Social distancing has become social phobia (This is why I prefer the term “physical distancing”). Social interaction or health is another false choice being presented to create fear.
- We have essentially eliminated what defines humanity. That is, the arts, culture, social engagement, sports, etc. have all become taboo because people are panicked that somehow they will all drop dead. Top world orchestras have resorted to demonstrating that playing their instruments is not going to cause the audience to succumb. I have played the trumpet

since I was 10 years old. I have never transmitted a disease to another person from playing the trumpet. Anyone who knows how these instruments actually work would understand. Yet, the panic has been instilled.

- Young people, your hopes and dreams for the future certainly have been crushed. No school experience, no colleges, no learning, no culture, no sports, no socialization, no jobs, and a complete fear of life beyond, if you can call it life. Many are forced back into their parents' homes and have sacrificed their independence. Speaking for myself, if that had happened to me, I do not know what I would have done.
- We have let the media and social media platforms control the messaging while their profits increase and the rest of the society crumbles. Are they giving back any of their profits to the people who have lost during this period?
- People have chosen political sides, whether rightly or wrongly only because that is their tribe. A medical condition that can afflict anyone at any time has suddenly become an Us versus Them symbol. This has not only worsened the situation in the US but has propagated bad policies.
- We have witnessed unprecedented levels of censorship imposed on any dissenting voices. Rather than doing what the U.S. was founded on, a principle of open debate and decision-making, legal processes, and individual liberty, officials and media have joined together in an unholy alliance to stamp out any dissent. Even when the dissent is correct.

DON'T LIVE YOUR LIFE IN A BUBBLE

It is clear that most governments, at many levels, have no clue what they were or are doing or how to retreat. Of course, they are in over their heads and to admit any mistake is unthinkable; therefore, they must continue with the sinking ship (while safely sitting in the lifeboat next to the ship). They are also panicked. They are panicked because if anyone dies, they think that they will be blamed; such is the fear that has been induced during this. Much of the government actions were out of panic and fear and ignorance and those actions did a lot of damage. But, this is a virus. It is a working of nature and evolution with which we are all a part. The person who can best protect you, is YOU, not your governor or some other official! Everyone has to recognize the value of their immune system and work to strengthen it.

We are heading in a direction where too many people are willing to accept living a life in a bubble out of fear. Well, excuse me but that is not human life. If those individuals want to live their life in a bubble, that is their choice; build your bubble but you had better not choose plastic because coronavirus survives on plastic. Maybe a glass bubble is good; but what if the glass breaks? They

will choose their risks and how they want to live their lives. But, that choice should not be imposed onto others either by individuals or governments.

Over half of the US population is under the age of 40. Yet, the country is run by a bunch of old-timers who have lost touch with what it means to lead all of the people. Where is your representation for the future, young people? My plea is for the younger generation to step up and start to take charge. It is time to send the ruling generation into retirement – and I mean EVERYONE. For several decades, people have avoided politics out of distaste.

Further, people have tended to ignore what the politicians are really doing to the country with the laws that they pass. Much of our problems with the press today can be traced back almost 4 decades ago to the weakening of antitrust laws. How did that happen? The large corporations wanted more through mergers and acquisitions and they made sizable campaign contributions and guess what, they got what they wanted. Well, this is now what we get as a result.

If you want a future, your generation needs to start getting the best minds behind leading. Your future and the future generations of humans now depend on it.



AMERICAN INSTITUTE FOR ECONOMIC RESEARCH
250 Division Street | PO Box 1000 | Great Barrington, MA 01230-1000

Visit [AIER.org/article](https://www.aier.org/article) for more AIER content.

Visit [AIER.org/about](https://www.aier.org/about) to learn more about AIER.