From: Roy McKenzie
To: srobertson@missoulacounty.us
Cc: Sandra Vasecka; Grp. City Council and City Web Site; Bryan von Lossberg; Heidi West; Jesse Ramos; JMohr@missoulacounty.us; Tyler Christensen; editor@missoulacurrent.com; news@kpax.com; bcc@missoulacounty.us
Subject: Health Board Overreach - Complaint - Thanks for responding...
Date: Tuesday, December 29, 2020 12:39:16 PM
Attachments: PastedGraphic-1.tiff

Mr. Robertson,

Thank you for calling me back. I very much appreciate it. I am a property-tax paying citizen of Missoula County in Brian von Lossberg and Heidi West's Ward. I'm going to provide just a few resources in this email as starting points for the County Health Department and County Health Board to use when making decisions about our lives. It would be good for them to adopt a contrarian eye to balance all of the obsequious lemming-like behavior coming from Board members (and proliferating into the staff). It would be good for the members of the City Council and County Commission that I have CC'd to please consider the following, as well, when making decisions regarding COVID-19 policy and about appointments to the Missoula County Health Board. I encourage members of the media who have received this information to also heed the letter. Most especially about the part about how they are misinforming / lying to the public about test results and manufacturing consent for the county health board actions.

Much of the board, as you know, is made up of unelected, appointed bureaucrats who invoke science in the abstract, but never in the specific to justify their draconian orders upon the public. You, yourself, suggested I just go to the CDC website. For what? They cannot provide to me direct justifications why the Missoula County Health Board made the decisions they did in the name of science. They should be required to point to the actual science they are following. Which mask mandate study did they read that indicates this actually works? There is a level of authoritative imprecision coming from the Health Departments that is brewing distrust among Missoulians against this institution.

The way COVID-19 cases are being amplified through imprecise language in press releases is example of this imprecision. Your tests do not test for COVID-19. They test for SARS-CoV-2. A positive test result for SARS-CoV-2 does not necessarily indicate a clinical infection of COVID-19.

Yet the health board is happy to trumpet this information to the public, which hypes the risk to the public, which creates a pretext for continuing to dominate our lives in an unconstitutional manner.

I, myself, am HIV positive. I am not so ignorant to not understand that just because someone gets a preliminary positive result for Human Immunodeficiency Virus from a health departments PCR test that they receive and Auto Immune Disease Syndrome diagnosis immediately (much less a positive confirmation diagnosis for HIV..without a blood confirmation test). Broadcasting this inaccurate statement "positive COVID cases" or any related phrase about what people have actually tested positive for to the public is imprecise and a lie.

This is a vicious cycle and it must end.

Masks don't work. Lockdowns don't work.
If masks work, why don't they work? If lockdowns work, why don't they work? Two case studies in Florida and California. California has a supposed high infection rate compared to Florida, yet Florida is open and not restricting its citizens and California is. This chart compares cases per one million between Florida and California. You can see the restrictions have not done much to decelerate the rate of infection.

Here is a chart of multiple studies showing that cloth masks provide "no significant reduction" in influenza like illness transmission:

Table 7. Description of studies included in the review of face masks

STUDY	STUDY DESIGN	STUDY PERIOD	POPULATION & SETTING	INTERVENTION	OUTCOME & FINDING	QUALITY OF EVIDENCE
Aiello AE, 2010 (20)	Cluster-randomized intervention trial	Nov 2006 – Mar 2007	1437 university hall residents (USA)	Mask; Mask + Hand hygiene; control	Significant reduction in ILI during weeks 4–6 in mask and hand hygiene group compared to control; No significant reduction in ILI in mask and hand group or mask-only group or control	Moderate
Aiello AE, 2012(23)	Cluster-randomized interventional trial	Nov 2007 – Mar 2008	1178 university hall residents (USA)	Mask; Mask + Hand hygiene; control	No significant reduction in rates of laboratory-confirmed influenza in mask and hand group or mask-only group or control group	Moderate
Barasheed O, 2014 (50)	Non-blinded cluster-randomized trial	Nov 2011 – Nov 2011	164 Australian pilgrims (Saudi Arabia)	Mask; control	No significant difference in laboratory-confirmed influenza in two arms; protective effect against syndromic ILI compared to controls (31% versus 53%, p = 0.04)	Moderate
Cowling BJ, 2008 (26)	Cluster-randomized intervention trial	Feb 2007 – Sep 2007	198 laboratory-confirmed influenza case and their household contacts	Mask; Hand hygiene; control	No significant reduction in the secondary influenza attack rate in control, mask or hand group	Moderate
Cowling BJ, 2009 (19)	Cluster-randomized intervention trial	Jan 2008 – Sep 2008	407 laboratory-confirmed influenza case and 794 household members	Mask; Mask + Hand hygiene; control	No significant difference in rates of laboratory-confirmed influenza in hand-only or mask and hand group	Moderate
Larson EL, 2010 (21)	Cluster-randomized intervention trial	Nov 2006 – Jul 2008	617 households	Mask + Hand hygiene; Hand hygiene; control	No significant reduction in rates of laboratory-confirmed influenza in control, hand, mask or hand group	Moderate
MacIntyre CR, 2009 (48)	Cluster-randomized intervention trial	Aug 2006 – Oct 2006 & Jun 2007 – Oct 2007	145 laboratory-confirmed influenza case and their adult household contacts	Surgical mask; P2 mask; control	No significant difference in rate of laboratory-confirmed influenza in control, face mask or P2 mask group	Moderate
MacIntyre CR, 2016 (49)	Cluster-randomized intervention trial	Nov 2013 – Jan 2014	245 ILI index case and 597 household contacts	Mask; control	Clinical respiratory illness, ILI and laboratory-confirmed viral infections were lower in the mask arm compared to control, but results were not statistically significant	Moderate
Simmerman JM, 2011) (22)	Cluster-randomized intervention trial	Apr 2008 – Aug 2009	465 laboratory-confirmed influenza case and their household contacts	Mask + Hand hygiene; hand hygiene; control	No significant reduction in rate of secondary influenza infection in control, hand, mask or hand group	Moderate
Suess (2012) (24)	Cluster-randomized intervention trial	Nov 2009 – Jan 2010 & Jan 2011 – Apr 2011	84 laboratory-confirmed influenza case and 218 household contacts	Mask; Mask + Hand; control	No significant difference in rate of laboratory-confirmed influenza in control, mask, mask or hand group	Moderate

ILI: influenza-like illness; USA: United States of America.

Health County officials continue to receive checks, workers don't.
Workers at bars and restaurants and other event spaces have had their hours and salaries cut because of the unscientific lockdown restrictions not based in science with regard to actual transmission rates. It is known that transmission rates are highest at home even in dense NY city and not significant in bars, salons, or restaurants. Workers have to suffer because Health Board officials are not acting on any scientific basis for their decisions. If they are, I encourage them to point to the exact science that shows that the virus is more of a threat after 10pm than it is after any other time of the day. What is the excuse here? Moralisms? About intimacy? How much pay did you lose because of the State executive actions? The county actions? I am going to guess none.

Cloak and dagger manipulations
I am not sure if the move was coordinated, but the Missoulian certainly protected the Missoula County Health Board from criticism when they said, "The new rule does not add new restrictions in Missoula County." with the new restrictions adopted by the board. This slight of hand obscures the fact that the boot is no longer just coming from the State Executive (which may end soon), but from our own neighbors and fellow citizens in our own County. The county health board has overreached their powers in extra-constitutionally adopting orders from the state executive that are currently being challenged by a complaint filed December 8th, 2020.

The Missoula County Health Department has a casedemic. It does not have a pandemic. The longer that every employee and member of the Missoula County Health Department and Board continue this power grab and stifling of citizens, the more they are complicit in the devastation of the virus, which is mostly in the form of the "cure" rather than the actual virus itself.

The least the county health board could do is cite the actual science they are using for these new restrictions for each rule in their COVID-19 related orders. From the mask mandates and conscripting businesses to enforce the rule to the early closing times. The best they could do is end the farce and end the restrictions.

There is much more to be said about the efficacy of the current Missoula County Health Board and Department's actions, but if the county health department and board is interested in learning more, they need only seek to find justifications for their own actions in order to locate the truth.

I'm going to forward my letter on to a few other parties as well.

Thanks for taking the time to read.

A very concerned and disgusted citizen,

Roy McKenzie
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