



## The dystopian vision of the health information police

### Description

When Assemblymember Evan Low, the principal author of California [Assembly Bill 2098](#), told the California Senate Committee that his bill was “really straightforward, very straightforward,” many of us in the gallery failed to restrain ourselves from expressing our incredulity.

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He delivered this statement at the conclusion of “a hearing that had lasted over an hour, during which it seemed no two Senators on the committee had the same idea of how the law would operate. Assemblymember Low had struggled to respond to questions from the committee and had often resorted to simply reading the text of the bill. That June 26 hearing presented the only time any legislators questioned the bill during its entire passage through the legislative process.

Assembly Bill 2098 would empower the Medical Board of California to go after the licenses of physicians who disseminate “misinformation” or “disinformation” regarding Covid-19. The bill in its latest iteration defines misinformation as “false information that is contradicted by contemporary scientific consensus contrary to the standard of care.” The inscrutability of this definition lies at the core of the bill’s opponents concerns.

No clear scientific consensus exists with respect to this novel virus, and even if it did, it may be proven incorrect later. Without clear guidance regarding what would constitute “misinformation,” physicians can only guess if they risk losing their licenses for expressing their good-faith disagreements with positions of public health officials. Even if in practice, the Medical Board only applied the law to speech that the First Amendment does not protect, the law’s vagueness would render it unconstitutional, because it would tend to cause doctors to censor themselves.

The million-dollar question remains unanswered: Who would be targeted by Assembly Bill 2098? On one hand, the California Medical Association, the bill’s sponsor, [cites the example](#) of doctors who call “into question public health efforts such as masking” as creating the need for this bill. Likewise, the taxpayer-funded lobbying group County Health Executives Association of California decries “a small minority of medical professionals” who have led some Californians to “reject public health measures

such as masking and physical distancing.”

The analysis of the bill from the Senate committee, in discussing the need for this bill, cited the example of the state of Florida refusing to take action against the license of Florida Surgeon General for, among other things, “question[ing] the value of face masks in preventing the spread of the pandemic.” The idea that the effectiveness of masks in preventing the spread of Covid is part of the “contemporary scientific consensus” confirms physicians’ fears that they would risk discipline for questioning any edict from public health on Covid.

On the other hand, when critics of Assembly Bill 2098 argue that questioning the effectiveness of masks falls well within the bounds of legitimate difference of opinions, proponents poo-poo their concerns about the law being applied in an overly broad way and insist that the law would only be used against truly “bad doctors.” But imbuing bureaucrats with power while trusting they will not exercise it would be incredibly foolish.

Some, such as Assemblymember Low, bill co-author Assemblymember Akilah Weber, and a representative of the California Medical Association, imply that this bill would only apply in cases of intentional harm. There is nothing in the letter of the law that limits the bill’s reach to situations where someone was harmed or where the information was disseminated knowing it was false. (Intentionally misleading would fall under the definition of “disinformation” as opposed to “misinformation.” An earlier draft of the bill mentioned harm to a patient as a factor for the Medical Board to consider.)

Members of the Medical Board of California itself have expressed confusion about how the law would be applied and withheld its support initially. MBC President Kristina Lawson, an attorney who has been a driving force behind this bill, claims to have clarity about how it would be applied but apparently is only willing to discuss the matter in private.

While most proponents say as little as possible regarding Assembly Bill 2098’s implications, one group is more vocal and less guarded in its statements. Two self-described “frontline” California doctors, Nick Sawyer and Taylor Nichols, formed No License for Disinformation (NLFD) in September 2021.

As its name suggests, the organization’s purpose is to promote policies that use the threat of medical license revocation to discourage doctors from spreading information it believes to be false. Sawyer has twice testified before legislative committees in favor of Assembly Bill 2098. NLFD’s prolific tweets and other public statements paint a dystopian picture that reflects opponents’ worst fears of the type of authoritarian regime proponents wish to impose.

NLFD pushes the idea that there is, as Sawyer described in his testimony before the Assembly committee on April 19, a “well-coordinated and well-funded network of doctors” who promote “anti-vaccine conspiracy theories, sow distrust in the Centers for Disease Control and Prevention, the federal government, and ultimately the Covid-19 vaccines.”

At the outset, note the irony that NLFD [frequently criticizes](#) “conspiracy theorists” while promoting its own conspiracy theories. And NLFD not only wants to silence those who undermine faith in public health measures, but anyone who “sows distrust” in the government. Let that sink in.

NLFD’s tweets elaborate on its conspiracy theories, which are, like most conspiracy theories, built on weak evidence that magnify tenuous connections. A recent tweet shared a long thread posted by one

of its founders that purports to uncover a web of right-wing “disinformation” purveyors funded by oil money. It implicates, among others, anyone associated with the Great Barrington Declaration or Brownstone Institute and specifically names UCSF professor and doctor Vinay Prasad, journalist and author David Zweig, and Johns Hopkins epidemiologist Stefan Baral as part of this cabal.

An August 13, 2022 tweet promotes a Substack article, written by NLFD “Research Consultant” Allison Neitzel, which calls America’s Frontline Physicians, Front Line COVID-19 Critical Care Alliance, the authors of the Great Barrington Declaration, and The Unity Project the “Big 4” responsible for a “physician-led attack on public health.” NLFD has often identified these four as its primary targets, sometimes adding the American Association of Physicians and Surgeons and Urgency of Normal to its hit list. NLFD asserts, without any basis, that these groups work together.

Some of NLFD’s targets, such as the Urgency of Normal’s leadership, are mainstream physicians. NLFD dismisses them as ranging from “formerly well respected immunologists to outright frauds.” It links to a long thread from one of its founders that accuses Urgency of Normal of being part of a right-wing operation to promote an “anti-mask narrative.”

It complains that CNN gave Dr. Jeanne Noble, Associate Professor at UCSF, a platform. It retweeted a tweet calling for Dr. Lucy McBride to be reported to the medical board for opposing mask mandates in schools and responded with a link directing the public on how to do so.

It dismissed every doctor who participated in a roundtable hosted by Florida Governor DeSantis, which included Dr. Tracy Høeg, as “Covid deniers” and “disinformation doctors” and warned that no one should accept medical advice from any of them. These attacks contradict any claim that NLFD claims only wants to silence doctors who peddle dangerously false medical advice rather than those who have good-faith disagreements with official Covid policy.

The inclusion of the authors of the Great Barrington Declaration—Sunetra Gupta, Martin Kulldorff, and Jay Bhattacharya—at the top of NLFD’s hit list is puzzling. Not only does the declaration espouse a conventional viewpoint, none of the Great Barrington Declaration’s authors is a practicing physician and therefore law like Assembly Bill 2098 would not affect them.

NLFD has called out the Great Barrington Declaration around a dozen times and frequently targets Stanford professor Bhattacharya in particular (he earned a medical degree but does not practice medicine or hold a medical license). NLFD doesn’t just accuse Bhattacharya of being wrong, it accuses him of intentionally lying, calling him a “disinformation doctor” and a “prominent purveyor of Covid-19 disinformation,” accusing him of telling lies that have killed people (along with Vinay Prasad), and insinuating he should be reported for perjury. In addition to its direct attacks, NLFD has retweeted dozens of criticisms of Bhattacharya and seemed to delight in a journalist getting Twitter to temporarily suspend his account for a minor oversight.

## Category

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