

Dear Commissioners,

**State your position:**

- I am opposed to the adoption of Resolution 2021-21 as a Health Ordinance in Charles County.

**Express your feelings:**

- I am dismayed/distraught/disturbed/disappointed/outraged/depressed to see the continued use of County resources directed toward the imposition of masks on private citizens.

**State why you feel this way:**

- St. Mary's, Calvert, Anne Arundel, Fairfax, and King George counties do not have mask mandates and there has been no significant difference in the trajectory of the pandemic in those regions compared to ours.
- The back and forth of masks-on, masks-off is causing confusion, division, and exasperation in our community.
- A return to masks, perhaps permanently, sends a signal to the community that we are only going backward in this nearly 2-year nightmare rather than moving toward real normalcy.
- This action seems to be a stubborn refusal to know when a government action is unpopular and the Commissioners seem oblivious to the true desires of their constituents. This is no way to govern.

**Offer justification for your feelings**

- I don't want Charles County to become a healthocracy. Our beautiful county should be known for our natural resources, welcoming citizens, and economic or educational opportunities. After two years of systematic dismantling of institutions we've come to rely on, I don't think that we can take another winter of restrictions. Covid will be endemic; it has already proven to be seasonal (Dr. Abney implied this in multiple briefings when she referred to "last year" rise in cases around the holidays and through the winter). We cannot continue to be so singularly focused on disease mitigation to the detriment of other pressing matters in our county.
- While we may disagree on whether masks even work at stopping the transmission of respiratory viruses but, we can agree that there are better and more effective ways to save lives in Charles County. September 2021 was the fourth deadliest month for our jurisdiction, with masks in place. Wouldn't focus on early treatment be a much better use of the Commissioners' time and resources? Making the availability of monoclonal antibodies widespread, advising physicians of which steroid treatments help relieve stressed airways, or even allowing physicians to prescribe off-label treatments under the principle of "Right to Try" would all respect the dignity of the human beings in our community and show true good-faith efforts to shield the vulnerable from adverse outcomes of the disease.
- Dr. Abney may be the Health Officer, but she does not seem to offer any expertise when it comes to masks and she offers unserious data-analysis in her presentations to the public. The community would like the chance to offer differing opinions on productive mitigation, prevention, or treatment options for COVID-19. For instance, Dr. Abney continues to make the false claim that "masks are proven to stop influenza". She seems to not understand the phenomenon of viral interference as a reason why influenza saw record low rates last year (globally!). This in turn contributes to her, and by extension the Board of Commissioners, grossly overstating the efficacy of masks during a respiratory disease outbreak. This actually puts people at much higher risk of catching SARS-CoV-2 since they believe donning a cloth mask will save them from an aerosolized virus. The Board of County Commissioners should appeal to the advice of industrial hygienists and other mask experts as to the long-standing truth about the efficacy of all types of face coverings.
- It has been nearly 2 years of restrictions, mask mandates, and general misery. The sense of community is lost. The trust in public health officials and our elected representatives is severely damaged. Implementing a mask mandate, passed with the force of law, right before Christmas seems punitive. Offering individuals a CHOICE to wear a mask is the only way to respect human freedom and understand your role as a representative. The Board of County Commissioners are supposed to implement the will of the people, not override it with their personal beliefs.
- Masks have been debated for over 100 years as a tool for pandemics. In each previous pandemic, their use was disavowed after the fact or rejected completely. Why? Because there has not been a discernible benefit in cases, hospitalizations, or deaths. In the 1918 pandemic after report, face masks were determined to be useless. In the

2009 H1N1 after-action report, the NIH wrote no fewer than 4 times that anything less than a N95 mask was powerless against a respiratory virus like influenza. In fact, at the start of the COVID-19 pandemic, masks were also rejected as a possible intervention because it was harder to teach the population at large how to properly use masks than it was to wash hands. There was a change, not in the data, but in the narrative in Spring and Summer 2020 when the public health officials at the CDC realized the failed policy of lockdowns and capacity restrictions did nothing to slow the spread of this highly infectious virus. You will not find one study conducted pre-COVID which should masks as efficacious against influenza-like illnesses. There was only 1 randomized control trial (RCT) in 2015 on the use of cloth masks ([A cluster randomised trial of cloth masks compared with medical masks in healthcare workers - PMC \(nih.gov\)](#)) which showed that healthcare workers wearing cloth masks were actually infected at HIGHER rates than the control group or the variable group. There have been only 2 RCTs done on masks DURING the current pandemic. The Danmask study which should *no statistically significant reduction in transmission between the mask and control group* and the Bangladesh study which should a paltry 10% risk reduction which translated to 11% decreased transmission with surgical masks and 7% in cloth masks. Is 10% effect on transmission a reasonable outcome for a population-level measure like forced masking? Would Dr. Abney or her colleagues give a treatment to a patient with only a 10% chance of a positive outcome? This is the true, authentic data concerning masks. Not the nonsensical comparing of case rates to our neighboring counties at random intervals that can prove or disprove mask efficacy from day-to-day.

- I have a bona fide health impairment or disability which makes mask-wearing difficult at best and excruciating at worst. I have been humiliated numerous times these past 20 months in public by ill-advised business owners who do not understand exemptions to a mandate. This causes anxiety for myself (or someone in my household). I expend more time and money to do business outside of the county where masks are not mandated and the people around me respect my personal decision to forego a mask.
- I am a business owner and can tell you that mask mandates and state of emergency and all the pandemic restrictions have hurt my business. I am losing customers to Calvert/St. Mary's/King George. My employees are unhappy, and morale is very low. I would quantify my business losses in 2021 to be \_\_\_\_\_ (or say "substantial", "ruinous", "extremely detrimental"). [Side note: business owners LAY IT ON THICK. Do not exaggerate but tell the truth about all you've dealt with these past 2 years! The Commissioners continuously tell Reopen Charles County and our lawyers that "no businesses are hurting due to a mask mandate in our county"]

#### **Ask for the withdraw**

- Commissioners, this regulation is bad for our county and bad for our future. I respectfully ask that you withdraw it from consideration or vote no on December 15.

Sincerely,

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