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# New Study Indicates Lockdowns Didn't Slow the Spread of Covid-19

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A team of Stanford University researchers recently published a study in the [European Journal of Clinical Investigation](#) concluding that harsh lockdown policies have had minimal impact on preventing the spread of Covid-19 compared to lighter policies.

I'm willing to admit I supported lockdowns in the beginning because they seemed to be good in theory. Sacrifice some freedom now to preserve long-term aggregate freedom and prosperity. Eventually, every intellectually honest and reasonable person needs to ask, where's the real evidence? After two weeks to flatten the curve turned into ten months and counting with a world undone, people are understandably skeptical of whether harsh lockdown policies had any benefit. Some studies such as [this one](#) published in Nature by a large team of epidemiologists state that lockdowns have drastically reduced the potential damage of Covid-19. However, such studies are unreliable as they rely on assumptions about what they think could have happened. They take the cases and deaths today and then make up a potential outcome for what would have happened without lockdowns, then claim that lockdowns worked.

Others simply point to the success of countries like New Zealand, which implemented harsh lockdowns. Of course, New Zealand has had its issues with [recurring lockdowns](#),



so let's call it a success for the purpose of this argument. The problem is that to justify a policy like lockdowns, you need to prove that it works consistently everywhere. This doesn't just apply to lockdowns; it applies to everything in life. Imagine if someone wanted you to buy a fat burning pill that worked on exactly one person out of a sample size of hundreds and that one person was a professional athlete (New Zealand is a small island that reacted very quickly). On top of that, most of the people who took the pill either stayed the same or got fatter. Just like how many of the [countries with the strictest lockdowns](#) ended up with the [most deaths per capita](#) alongside massive economic and social damage. You should be very skeptical about taking that pill.

## The Study

Of course, this is just a general observation and there could be many confounding variables as well as different policy combinations across different countries. We also need to be precise when we measure the impact of various policies on transmission rates of the virus and to the best extent possible, have a counterfactual comparison. That's exactly what the [study](#) titled "Assessing Mandatory Stay-At-Home and Business Closure Effects on the Spread of Covid-19" intends to do.

The study compares the impact of lockdown policies of eight countries in the Northern Hemisphere: England, France, Germany, Iran, Italy, Netherlands, Spain, and the US. All countries that have seen harsh lockdowns. It uses two counterfactuals: South Korea and Sweden, to serve as an example of how Covid spreads under relatively light public health interventions. Harsh lockdown policies would be defined primarily by business closures and stay at home orders. The light touch policies of Sweden and South Korea would be policies such as contact tracing, large gathering restrictions, targeted quarantines, and the use of general guidance. Essentially the study is comparing policies that completely shut down society to those that simply make life a little more inconvenient. If the former doesn't provide a clear benefit then we should all prefer the latter.

## The study explains its methodology



“The data we use builds on an analysis of NPI (Non-Pharmaceutical Intervention) effects and consists of daily case numbers in subnational administrative regions of each country (e.g. regions in France, provinces in Iran, states in the US, and counties in Sweden), merged with the type and timing of policies in each administrative region. We use data from a COVID-19 policy databank and previous analyses of policy impacts to determine the timing and location of each NPI. Each observation in the data, then, is identified by the subnational administrative region and the date, with data on the number of cases on that date and indicators characterizing the presence of each policy.”

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The researchers construct data models using the Covid data from the 10 countries to note the effects that various policies had on the transmission rates over time while controlling for various factors. They then conduct 16 tests comparing the eight lockdown countries to the two counterfactual countries and note the differences in performance. The end result was that



“In the framework of this analysis, there is no evidence that more restrictive non-pharmaceutical interventions (“lockdowns”) contributed substantially to bending the curve of new cases in England, France, Germany, Iran, Italy, the Netherlands, Spain, or the United States in early 2020. By comparing the effectiveness of NPIs on case growth rates in countries that implemented more restrictive measures with those that implemented less restrictive measures, the evidence points away from indicating that mrNPIs (major interventions) provided additional meaningful benefit above and beyond lrNPIs (light interventions).”

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Essentially, lockdowns, which are an unprecedented policy in the history of public

health, provide little noticeable benefit over the more traditional public health responses which are less intrusive. That is because generally speaking people act rationally and it's impossible to coercively push society beyond its natural limits without major drawbacks. For example, people generally understand that going out and mingling with others spreads the virus but at the same time life must go on. What the state can do to help is provide transparent information, stronger medical infrastructure, and targeted interventions to help manage the virus. However, there comes a point where nothing else will help besides a vaccine, natural herd immunity, or some other medical treatment. All lockdowns do is further disrupt society, causing traumatic damage while the virus still continues to spread.

The study indicates that public health interventions in general help slow the spread of the virus; there is no denying that. However it also notes,



"In none of the 8 countries and in none out of the 16 comparisons (against Sweden or South Korea) were the effects of mrNPIs significantly negative (beneficial)."

There is no denying that something must be done to stop the virus and that we have the tools to help slow the spread. However, as the cross country comparisons demonstrate, lockdowns have not shown to have a significant effect on stopping the virus. However, there is overwhelming evidence that they cause tremendous damage to society. In fact, the authors even note



"It is possible that stay-at-home orders may facilitate transmission if they increase person-to-person contact where transmission is efficient such as closed spaces."

This idea is actually supported by data and research that I referenced in a previous article regarding [restaurant closures](#). Furthermore, the study notes,

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“The degree to which risk communications motivate personal behaviors has been used to explain South Korea’s response to NPIs, where large personal behavior changes were observed following less restrictive NPIs...This may also explain the highly variable effect sizes of the same NPI in different countries. For example the effects of international travel bans were positive (unhelpful) in Germany and negative (beneficial) in the Netherlands.”

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Society tends to respond on its own and there is only so much it can do, which is why light-touch policies seem to have just as much if not better outcomes than harsh policies like business closures. People will make adjustments based on the information they are given alongside their own contexts. Eventually, there comes a point where people have done all they can to slow the spread. Lockdowns not only fail to push that limit forward, but they cause unnecessary damage that not only makes the situation worse but reduces patience for compliance.

## Key Takeaways

It's important to note that this study is imperfect as all studies are in some way. It compares hard data collected from various countries of a similar demographic and economic makeup, which is very important. However, testing and data collection are highly imperfect as well as incomplete, especially in the Spring of 2020. Furthermore, there could be minute cultural and contextual factors that cannot be captured with a quantitative analysis. For example, having [large concentrations of vulnerable elderly people in nursing homes](#) may cause spikes in transmission and death rates that skew results. Although the study seems convincing and supported by general observations

regarding current events, we must continue to be open to new information.

With that said, it seems to be the case that lockdown policies around the world have failed to produce the results that we were told they would. Countries that locked down the hardest like [Belgium and the United Kingdom](#) also have some of the [worst statistics per capita](#), even worse than the United States, the punching bag for lockdown supporters. Even if we count New Zealand as a success story of lockdowns working, how about the rest of the world?

The study seems to indicate what we have known for [decades](#). This is that there are a number of things that the state can do to help slow the spread of disease but closing down society is not one of them. Perhaps there is a sort of heroic romanticism about flexing the muscles of the state to stop a fearsome enemy that makes lockdowns so attractive. The only problem with this is that we are dealing with reality, and society is not a playset.

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