

Balancing Public Health and Fundamental Rights

Legal objections against the measures to contain the
Influenza pandemic (1918-1919) and the Covid-19
pandemic (2019 and ongoing)

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Abstract

In the Netherlands, the Covid-19 pandemic has had a substantial effect on everyone's day-to-day lives. In response to the restrictions imposed by governments to contain the virus, subgroups tend to direct their outrage at the government and voice their discontent through many different forms, such as protests, social media posts and legal procedures. A well-known Dutch organisation, which took legal action against the government regarding these measures, is Viruswaarheid. Two of the legal cases between Viruswaarheid and the Dutch State will be discussed. Roughly a century ago, another virus raged across the globe: the Spanish Influenza. During this pandemic, governments relied on similar measures in an attempt to stop the virus from spreading, dissatisfying certain groups within society. In San Francisco, this led to the formation of the so-called Anti-Mask League. Although the Anti-Mask League never sued the government for implementing measures, they expressed (legal) concerns, similar to those of Viruswaarheid. This thesis draws a comparison between the legal protests during the current Covid-19 pandemic in the Netherlands and those in San Francisco during the Influenza pandemic of 1918-1919. Although the resistance against the measures did not hold ground in front of a Dutch judge, the bachelor thesis concludes that health crises put our rule of law to the test.

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Introduction

Pandemics are hardly something unbeknownst to mankind. However, what sometimes tends to be forgotten is the effect that the measures to contain a pandemic have on people. Today especially, the Covid-19 pandemic has significantly changed life as we know it. Across the world, governments have implemented restrictions, such as lockdowns, curfews and face masks, in order to prevent the further spread of the virus. In the beginning of 2021, Australia, New Zealand and several countries in East Asia¹ were able to lift many of their restrictions. However, European countries remained to struggle to reduce the amount of people infected by the virus and keep the restrictions in place.² Whereas many states in the Asian-Pacific region aimed at eliminating Covid-19 entirely through what they referred to as a “zero covid strategy,” most European states focused on reopening the economy,³ implementing a strategy in which they aimed not to overload the healthcare capacity.⁴

As many countries discovered Covid-19 took longer than expected to eradicate or properly combat, it also took longer to provide some relief to the people regarding the restrictions. The dissatisfaction with Covid-19 policies increased over time, especially about lockdowns, curfews and face masks. In Spring 2021, when other countries, such as Israel, made great steps forward with their vaccinations⁵ and were thus able to provide relief, people in European countries became dissatisfied with their country’s vaccination strategy and the slow

¹ T Benson, ‘Oxford COVID-19 Government Response Tracker Regional Report East Asia Pacific’. 2021. Retrieved from: https://github.com/OxCGRT/covid-policy-scratchpad/blob/master/regional_reports/archived_regional_reports/EastAsiaPacificRegionalSummary1-28Feb2021.pdf

² A Griffith, Y Zhu, ‘Oxford COVID-19 Government Response Tracker Regional Report Europe and Central Asia’. 2021. Retrieved from: https://github.com/OxCGRT/covid-policy-scratchpad/blob/master/regional_reports/archived_regional_reports/EuropeCentralAsiaRegionalSummary1-28Feb2021.pdf

³ L Chadwick, ‘What is a zero-COVID strategy and could it be implemented in Europe?’, in: *Euronews*, 23 February 2021. Retrieved from: <https://www.euronews.com/2021/02/23/what-is-a-zero-covid-strategy-and-could-it-be-implemented-in-europe>

⁴ Ibid.

⁵ R. Holden, ‘Vital Signs: Israel shows how to do vaccinations right. It’s a race, and we’re behind’, in: *The Conversation*, 18 March 2021. Retrieved from: <https://theconversation.com/vital-signs-israel-shows-how-to-do-vaccinations-right-its-a-race-and-were-behind-157242>

speed with which citizens were being vaccinated.⁶ A deep political scepticism and distrust in vaccines raised a vaccine hesitancy and resulted in a marginal, but persistent anti-vaccination movement. In this thesis, we will focus upon the resistance against curfew and face masks. While some people voiced their concerns and disagreement online, others expressed their opinions through other forms of protests, such as the refusal to wear face masks⁷ and mass demonstrations.⁸ In the Netherlands, the implementation of the curfew even led to a string of violent riots in January 2021.⁹ For political leaders, it became harder to motivate people to obey the implemented measures.

The Influenza pandemic of 1918

As previously said, pandemics are not unbeknownst to mankind. Another pandemic that had sent the world in disarray and had a similar devastating socioeconomic effect on countries,¹⁰ is the Influenza pandemic of 1918. It took a long time before that pandemic was under control and, during that time, the “Spanish flu” took the lives of an estimated 17.4 million people.¹¹ Significant for this pandemic was its deadly effect on young people.¹² Luckily, this is not the case with the current Covid-19 pandemic, but both health crises are similar in the way they affect

⁶ ‘COVID-19 vaccine: French, Germans and Italians unhappy over rollout strategy, Euronews poll shows’ in: *Euronews*, 10 March 2021. Retrieved from: <https://www.euronews.com/2021/03/10/covid-19-vaccine-french-germans-and-italians-unhappy-over-rollout-strategy-euronews-poll-s>

⁷ E. Stewart, ‘Anti-maskers explain themselves’, in: *Vox*, 7 August 2020. Retrieved from: <https://www.vox.com/the-goods/2020/8/7/21357400/anti-mask-protest-rallies-donald-trump-covid-19>

⁸ ‘Thousands demonstrate against Covid-19 restrictions’, in: *SWI Swissinfo.ch*, 20 March 2021. Retrieved from: <https://www.swissinfo.ch/eng/thousands-demonstrate-against-covid-19-restrictions/46465314>

⁹ E. Schaart, ‘What you need to know about the Dutch coronavirus riots’, in: *Politico*, 26 January 2021. Retrieved from: <https://www.politico.eu/article/faq-need-to-know-netherlands-dutch-riots-covid-curfew/>

¹⁰ S. Ting Liang, L. Ting Liang, J.M. Rosen, ‘COVID-19: a comparison to the 1918 influenza and how we can defeat it’, in: *Postgraduate Medical Journal* 97, 2021, 273-274.

¹¹ P Spreeuwenberg, M Kroneman, J Paget, ‘Reassessing the global mortality burden of the 1918 influenza pandemic’ in: the *American Journal of Epidemiology*: 2018, 187(12), 2018. 2561-2567

¹² A Gagnon, M S Miller, S A Hallman, R Bourbeau, D A Herring, D J Earn, J Madrenas, ‘Age-specific mortality during the 1918 influenza pandemic: unravelling the mystery of high young adult mortality’ in: *PloS one*, 8(8), e69586, 2013. Retrieved from: <https://doi.org/10.1371/journal.pone.0069586>

people's day-to-day lives. In order to contain the Influenza virus, similar measures were implemented by governments. This thesis particularly focuses on the measures taken in San Francisco because it was the first city to implement a measure regarding face masks. The implementation of "the Mask Ordinance" in San Francisco and several other cities in the United States,¹³ such as Seattle, Oakland, Sacramento and Denver, resembles the face mask requirement during the Covid-19 pandemic in the Netherlands. The first city to have implemented a Mask Ordinance was San Francisco. The Mask Ordinance required people to wear a cover over the nose and mouth that was "at least four layers thick" in both outdoor and indoor public places.¹⁴

Already in the time of the Spanish flu, a division rose between people who wore the masks, and promoted wearing them, and those who strongly opposed wearing masks. People claimed that the masks were a violation of their freedom.¹⁵ In San Francisco, a group was formed amongst those who disagreed with the measures, the Anti-Mask League. The Anti-Mask League was formed to protest the ordinance to wear masks. One of their claims against the Mask Ordinance was that forcing people to wear face masks was unconstitutional.¹⁶

Today as well, a strong division between those that adhere to the measures and those that disobey them exists. Due to the overwhelming media attention and through the use of the internet to reach out to each other, the people who do not support the measures have evolved into a seemingly united front. Similar to the time of the Spanish flu, protestors argue that the measures imposed by the government to control the pandemic, are unconstitutional and violate fundamental rights.¹⁷

The aim of this thesis is to examine and assess the legal objections against the governmental measures to contain the Influenza pandemic (1918-1919) and the Covid-19 pandemic (2019 and ongoing). Answering this research question might provide lawmakers with insightful information in dealing with the current pandemic and preparing for future (health) crises. Furthermore, it provides a critical analysis of the use of power by states during a crisis. The bachelor thesis will focus on two specific case studies: the face mask obligation and the curfew. The timeframe for these measures during Covid-19 is January to late April 2021. In this

¹³ C Hauser, 'The Mask Slackers of 1918' in: the *New York Times*, 3 August 2020. Retrieved from: <https://www.nytimes.com/2020/08/03/us/mask-protests-1918.html>

¹⁴ Department of Public Health, 'Resolution to rescind mask resolution', 21 November 1918. (See Appendix, p. 31)

¹⁵ C Hauser, 'The Mask Slackers of 1918' in the *New York Times*, 3 August 2020.

¹⁶ Ibid.

¹⁷ E Stewart, 'Anti-maskers explain themselves' in *Vox*, 7 August 2020.

time period, the curfew and a mandatory use of face mask were implemented in the Netherlands. I will primarily focus on these two restrictions, because Viruswaarheid sued the state for these restrictions.

In order to answer the main research question, I will look into the following sub-questions:

- What do the measures to contain Covid-19 in the Netherlands (in January-April 2021) state and how are these measures legally implemented?
- What legal objections do the Dutch protestors make against curfew and wearing face masks?
- What are the measures during the Influenza pandemic of 1919?
- What objections do the San Franciscans make about the face masks?
- Do the legal objections make sense from a legal perspective?

Methodology

To answer these questions, I will focus on the Netherlands for the contemporary court cases relating to the curfew and face masks. Furthermore, I will make a historical comparison to San Francisco for face masks by using historical sources for information on the Influenza pandemic. These will include newspaper articles and data on the numbers of cases during the pandemic. I will also make use of contemporary academic sources as secondary literature. In order to examine the protests against the measures to contain the Covid-19 pandemic in the Netherlands, this bachelor thesis will focus on Viruswaarheid. This is a Dutch organisation which actively voices their discontent with the measures taken in the current pandemic. I will use newspaper articles, the legal cases of Viruswaarheid and academic literature as well.

Finally, I will also examine the legal sources during the Covid-19 pandemic and the Influenza pandemic. In terms of the Influenza pandemic, this means that I will look into the mandates concerning the restrictions, especially the mandate concerning face masks. For the Covid-19 pandemic, this means that I will examine the jurisprudence concerning the Covid-19 measures and legislation revolving around this pandemic and public health in general during the time period January to late April 2021. Specifically, the *Wet publieke gezondheid* (2008), *Tijdelijke regeling maatregelen covid-19* (2021) and two court cases, initiated by Viruswaarheid about the face masks and the curfew will be discussed.

Chapter 1:

The legal objections against the Covid-19 measures

In order to make a proper analysis of the legal arguments against the measures, it is necessary to first investigate the measures themselves and their legal basis. From thereon we can consider the legal arguments and assess whether they hold legal ground. As pointed out in the introduction, this thesis uses a timeframe from January to late April 2021. It is important to establish a timeframe because the restrictions and measures have been gradually loosened since Spring 2021 and recently, since mid-November 2021, partially reinstated. From 23 January until 28 April, the Dutch government implemented the following measures on top of already existing measures. The government introduced a curfew from 21.00 to 4.30 (later, the start of the curfew was moved to 22.00), limited the number of visitors in a private sphere to one and the reduced the number of guests for funerals from 100 to 50 people.¹⁸ Late January-April 2021 can be considered the period, in which the measures were the most rigid during the Covid-19 pandemic in the Netherlands. Prior to the implementation of the stricter measures, there were already several measures and restrictions in place that were prolonged. From 1 December onward, the government had introduced an obligation to wear face masks inside all public places and public transport. The Dutch government had also enforced the closure of restaurants, bars and cafes in October 2020. While take-away was still permitted, nobody was allowed to sit inside the restaurants, bars and cafes, nor on their terraces. Public events, such as concerts and theatre productions, were prohibited.

The Legal Basis for Covid-19 Measures

The implementation of the restrictions and measures needs to have a legal basis. In the court case relating to the face masks, Viruswaarheid sues the security region of Amsterdam for the implementation of an emergency ordinance on which a mandatory face mask requirement in particular busy parts of Amsterdam, is based. Eventually, a face mask requirement became part of the national strategy to combat Covid-19 and it thus became part of national legislation. Like the other previously mentioned national restrictions, a face mask regulation was laid down in the

¹⁸ Rijksvoorlichtingendienst, ‘Letterlijke tekst persconferentie minister-president Rutte en minister De Jonge’, 20 January 2021. Retrieved from:

<https://www.rijksoverheid.nl/documenten/mediateksten/2021/01/20/letterlijke-tekst-persconferentie-minister-president-rutte-en-minister-de-jonge-20-januari-2021>

Temporary Regulation of Measures for Covid-19 (*Tijdelijke regeling maatregelen Covid-19*).¹⁹ This Regulation was implemented on 19 November 2020 and was adjusted every time new measures or restrictions were introduced. The Regulation refers to several articles of the Law on Public Health (2008) (*Wet Publieke Gezondheid*). The Regulation states that it “considers” these articles, meaning that they are the legal basis for the Regulation. The Law on Public Health (2008) was created in the aftermath of the Ebola crisis in order to prepare the Netherlands for future health crises due to infectious diseases. It replaces three laws, the Law on Collective Prevention Public Health (*Wet collectieve preventie volksgezondheid*), the Law on Infectious Diseases (*Infectieziektenwet*) and the Law on Quarantine (*Quarantainewet*).²⁰ The Law on Public Health organises the public health system, the combat against infectious diseases and the isolation of individuals and transports that could potentially cause international health hazards.²¹ The Regulation on Measures for Covid-19 and the Law on Public Health provide the legal framework for the measures. Whereas the Regulation remains more specific towards the measures and restrictions focusing on Covid-19, the Law on Public Health provides lawmakers with a broad framework for several infectious diseases.

Another important law to address is the Law on Extraordinary Competences of the Civil Authorities (*Wet Buitengewone Bevoegdheden Burgerlijk Gezag or Wbbbg*). The *Wbbbg* is an emergency law that allows the government to make decisions during extraordinary circumstances without having to go through the normal legislative route that is required to be taken under normal circumstances. This law applies to emergency measures and does not require the declaration of a state of emergency for it to be effective.²² Article 8 *Wbbbg* allows the Dutch minister of Safety and Justice and the King’s Commissioner to restrict people’s movement outdoors. Section 3 of this article states that in cases of emergency, the minister of Safety and Justice is allowed to implement rules that divert from, or even completely deactivate other

¹⁹ Tijdelijke regeling maatregelen Covid-19. (See Appendix)

²⁰ Wet Publieke Gezondheid (2008)

Wet collectieve preventie volksgezondheid (1990)

Infectieziektenwet (1998)

Quarantainewet (1960)

²¹ Rijksinstituut voor Volksgezondheid en Milieu, ‘Wet Publieke Gezondheid’, 2 November 2018. Retrieved from: <https://www.rivm.nl/meldingsplicht-infectieziekten/wet-publieke-gezondheid>

²² Avondklok-zaak, ECLI:NL:RBDHA:2021:1100

rules.²³ In the following paragraphs, I will delve further into the curfew and its legal complexities.

Curfew

The chapter of the Regulation that is specifically relevant to this chapter is chapter 6.9. Among other things, chapter 6.9 discusses the curfew. Article 6.15 states the exact time between which it is prohibited to be outside and the period in which this measure is active. Even though the measure was constantly extended, the Regulation on March 3rd, for example, stated that the curfew was in use from 3 March until 15 March. This shows that the Regulation was constantly updated on a biweekly basis as new restrictions were introduced or previously existing ones were changed.

The last time a curfew was implemented dates to the German occupation in the Second World War, which revived memories of a traumatic, historical event. In the first days after the curfew was installed, riots broke out in several cities. While stores were looted and cars destroyed, the Dutch Prime Minister responded to the riots by condemning this behaviour and qualifying it as criminal violence.²⁴ While reasons to protest may differ between protestors, the violence of the riots was enormous. During these weeks, the Dutch government was also sued by an organisation regarding the curfew.

This court case about the Dutch curfew was brought forth by Viruswaarheid (previously known as Viruswaanzin). Viruswaarheid is an organisation known for critiquing and suing the Dutch government. Their intention was to provide people with an opposing sound to the government in order to protect people's fundamental rights.²⁵ Willem Engel, the creator of Viruswaarheid, graduated in Bio Pharmacy in 2001, but later opened his own dance studio in 2008, which unfortunately had to close due to the Covid-19 restrictions.²⁶ As well as Engel's personal Twitter account, Viruswaarheid tweets and retweets critical posts about the government and pictures of results from experiments about the vaccination, which are supposedly proof that

²³ Wet buitengewone bevoegdheden burgerlijke gezag, art. 8(3)

²⁴ 'Covid: Dutch curfew riots rage for third night', in: *BBC*, 26 January 2021. Retrieved from: <https://www.bbc.com/news/world-europe-55799919>

²⁵ Viruswaarheid, 'Over ons'. Retrieved from: <https://viruswaarheid.nl/over-ons/>

²⁶ *Ibid.*

the vaccination is more harmful than they now say.²⁷ It creates a sense of doubt and maybe even fear amongst the readers with regards to the vaccination and the government's strategy in combatting the virus.

In February, the organisation sued the Dutch government for unlawfully implementing the curfew under article 8 (1) and (3) of the *Wbbbg*.²⁸ Viruswaarheid stated that in order for decisions to be made and implemented under article 8 of the *Wbbbg*, there have to be “extraordinary circumstances which require emergency measures.” For measures that restrict fundamental rights, such as a curfew does, there must be an element of necessity, which ultimately shows that other, less infringing measures, do not suffice to adequately address the emergency.²⁹

Viruswaarheid specified the fundamental rights that were being violated by the instalment of a curfew: the freedom of movement, as laid down in the article 2 of the Fourth Protocol on the European Convention on Human Rights, and the right to privacy and family life, as laid down in article 8 of the European Convention on Human Rights and article 10 of the Dutch Constitution.³⁰ The freedom to movement was infringed upon due to the prohibition to be outside between 21.00/22.00 and 4.30. The right to privacy and family life was considered to be violated as well, through a more broadly interpretation. It considers not just privacy and family life, but the entire sphere of private life. The sphere of private life also includes “the right of each individual to approach others in order to establish and develop relationships with them and with the outside world.”³¹

The Dutch State in fact agreed with Viruswaarheid on the infringements upon the fundamental rights.³² Yet, they also explained that they found the situation of the Covid-19 pandemic at that time was exceptionally severe which justified the implementation of a curfew under article 8 of the *Wbbbg*. This article specifically states that the Minister of Security and Justice and the commissioner of the King are allowed to limit the people's ability to go outside in

²⁷ Viruswaarheid, Twitter, 30 May 2021. (see Appendix)

²⁸ Avondklok-zaak, ECLI:NL:RBDHA:2021:1100

²⁹ Avondklok-zaak, ECLI:NL:RBDHA:2021:1100

³⁰ Fourth Protocol on the European Convention on Human Rights, art. 2
European Convention on Human Rights, art. 8
Dutch Constitution, art. 10

³¹ European Court of Human Rights, ‘Guide on Article 8 of the European Convention on Human Rights’, 31 December 2020.

³² Avondklok-zaak, *ibid.* 4.1

cases of emergency.³³ Viruswaarheid, on the other hand, argued that the situation was not sufficiently exceptional and urgent. They found that the curfew was disproportionate to the case and that the arguments of the government defending the curfew were inadequate.

The judge found that the State did not sufficiently motivate why the curfew was a necessary means to slow the spread of Covid-19, as “the pandemic already existed for almost a year” and “the pressure on the healthcare system was not as high as it had been in earlier stages of the pandemic.” The State had failed to explain why they had not previously installed a curfew during the period in which the pressure on the healthcare system was at its highest.³⁴ The State had based their restrictive measures on the assumption that the virus would lead to an uncontrollable situation, but the judge questioned whether this would suffice as a legitimate basis. The State had further failed to make clear why less-restricting measures would not adequately help to stop the rising numbers of infections, hospitalizations and mortality rates and that the curfew would even have “an actual substantial effect” on the numbers.³⁵ In first instance, the judge ruled in favour of Viruswaarheid and ordered the government to immediately cease the measure.³⁶

The Dutch State appealed against this decision. In this appeal, the Court found that the State had made a proper evaluation of the infringements upon fundamental rights and the “extraordinary circumstances” which made the implementation of the curfew necessary, i.e. the pressure of the rising Covid-19 cases on the healthcare system, and thus allowed the implementation of the curfew under article 8 (1) and (2). The Court dismissed the arguments made by Viruswaarheid, in which they claimed the *Wbbbg* only applied in cases that require immediate action.³⁷ The Court used an example an unexpected breach of a dike to illustrate their point. The Court pointed out that it would be less favourable to use the *Wbbbg* after the dike has already been breached, rather than when it was still a threat. The Court furthermore considered the arguments of Viruswaarheid regarding the infringements upon fundamental rights. The Court found that because the infringement of the curfew upon the fundamental rights was limited, this infringement falls under a clause of the fundamental rights which states that the rights can be infringed upon under certain circumstances.³⁸

³³ Wet Buitengewone Bevoegdheden Burgerlijk Gezag, art. 8

³⁴ Avondklok-zaak, ECLI:NL:RBDHA:2021:1100, 4.12

³⁵ Ibid.

³⁶ Ibid. 4.15

³⁷ Avondklok-zaak, ECLI:NL:GHDHA:2021:252

³⁸ Ibid. 6.15

Face Masks

Viruswaarheid instituted summary proceedings against the safety region Amsterdam-Amstelland before the Court of Amsterdam to contest the obligation to wear face masks in the region.³⁹ In August 2020, the security region of Amsterdam-Amstelland had issued an emergency ordinance, which made wearing face masks mandatory in certain areas of the city. The national government had allowed safety regions to take additional measures to contain the spread of the virus, tailored to the needs of the own region. The national face mask regulation would enter into force in December 2020.

Viruswaarheid claimed the abolition of the emergency ordinance on four grounds. First, they argued that the prohibition to be in certain areas without face mask curtails fundamental rights, i.e., the right to personal integrity as enshrined in article 10 of the Dutch Constitution. They further argued that the emergency ordinance was issued unauthorized, because it was not grounded in the *Wet Publieke Gezondheid*. Third, they argued that the ‘required necessity’ to impose wearing face masks is missing. It has not been proven that the measure is effective. Wearing face masks might even be detrimental to a person’s health. Finally, they argued that the implementation of the emergency ordinance was “unethical and morally unacceptable” as it now appeared to be an experiment to motivate people to adhere to another measure, i.e. keeping 1.5 metre distance.⁴⁰ In the following subchapters, I will address all of the arguments respectively.

In this specific case, Viruswaarheid argued that the emergency ordinance infringed upon the fundamental right to personal integrity, enshrined in the Constitution under article 10. Viruswaarheid interprets this right very broadly, claiming that people are no longer able to be in specific parts of Amsterdam without adhering to this measure. It therefore creates an ‘unacceptable breach’ of this fundamental right.⁴¹ The article and law upon which the emergency ordinance is based, art. 176 *Gemeentewet*, do not specifically allow an emergency ordinance to deter from the constitution.⁴² While the Court acknowledges that there were different opinions, also among legal experts, on whether emergency ordinances provide sufficient legal basis to curtail fundamental rights, the court decided that it could not conclude that the emergency

³⁹ Interim relief face masks, ECLI:NL:RBAMS:2020:4057

⁴⁰ Interim relief face masks, 4.11

⁴¹ Interim relief face masks, 4.13

⁴² Ibid.

ordinance, which was limited in time and place, was implemented unlawfully and therefore non-binding.⁴³

The last two arguments were both also dismissed by the Court. As the Court found that as previous measures had not been helpful, there was an element of necessity in implementing this measure. Additionally, the Court stated that the Dutch Minister of Health had provided the opportunity to security regions to implement measures involving face masks. The Court did not find the measure an experiment to push people to adhere to the other measures.

In both court cases, the Court refuted the legal argumentation, brought forward by Viruswaarheid, to cease the measures. However, in both cases, the Court's decision has not been perfectly straightforward. In the case regarding the curfew, the Court first appeared to agree with Viruswaarheid. Only after the State went into appeal, the State won. In the case regarding the face masks, the delicacy of the decision the Court makes becomes clear when reading the case. In the next chapter, we will examine to what extent the measures to contain the influenza pandemic in 1918-1919 evoked similar legal concerns.

⁴³ Ibid. 4.17

Chapter 2: Measures and objections during the Influenza pandemic

Roughly a century before the Covid-19 pandemic, another pandemic had claimed the lives of millions of people. While the end of the First World War was in sight, the United States struggled with the respiratory illness called Influenza, or more commonly known as the ‘Spanish Flu’. As previously stated, for this thesis, the intention is to focus specifically on San Francisco, a city with 550.000 inhabitants at the time. The focus on San Francisco was specifically chosen because it was the first city to implement a face mask ordinance, which was opposed by the Anti-Mask League. As the Influenza pandemic had already been raging over the East Coast and other big cities in the Spring of 1918,⁴⁴ San Francisco could have anticipated on the rise in infections and accompanying death toll that was coming their way but failed to do so.⁴⁵ Early measures could reduce overall mortality rates.⁴⁶ San Francisco eventually experienced two waves, one in October-November (1918) and another one in December-January (1919). In this chapter, the two sub questions relating to the Influenza pandemic of 1918 will be answered “What are the measures during the Influenza pandemic?” and “What objections do the San Franciscans make about the face masks?”

First measures

On the 24th of September 1918, the San Francisco Chronicle reported the first case of Influenza. Three days later, on 27 September, the California State Board of Health announced that they had qualified Influenza as a reportable disease. This means that if a patient was diagnosed with Influenza, it should be reported.⁴⁷ State health agencies, such as the California

⁴⁴ J K Taubenberger, D M Morens, ‘1918 Influenza: the mother of all pandemics’, in: the *Emerging infectious diseases* vol. 12,1, 2006. 15-22. doi:10.3201/eid1201.050979

⁴⁵ A W Crosby, ‘America's Forgotten Pandemic: The Influenza of 1918’, Cambridge, UK: Cambridge University Press, 2003. Retrieved from: <https://hdl-handle-net.tilburguniversity.idm.oclc.org/2027/heb.03212>.

⁴⁶ M C J Bootsma, N M Ferguson, ‘The effect of public health measures on the 1918 influenza pandemic in U.S. cities’, in: the *Proceedings of the National Academy of Sciences of the United States of America* vol. 104,18, 2007. doi:10.1073/pnas.0611071104

⁴⁷ A W Crosby, ‘America’s Forgotten Pandemic: The Influenza of 1918’, 2003.

State Board of Health, are mandated to respond to health hazards and crises.⁴⁸ The California State Board gave Health Officers the legal power to isolate cases of the disease.⁴⁹ This means that Health Officers were allowed to quarantine people diagnosed with Influenza. Health Officers are “the top public sector medical authority in the state” and are appointed either by the State Board of Health, an agency head, or the governor.⁵⁰ Even though while the first cases had already been reported, people were not afraid to attend big gatherings. In the first three weeks after these cases had been reported, several big events took place. About 25.000 people attended a patriotic “community sing” and about 150.000 people attended a movie called “relatives and sweethearts” in the Golden Gate Park on October 6th.⁵¹

A prominent figure in San Francisco’s battle against Influenza was Health Officer, Dr William C. Hassler. While there is little to find about him, he was the Chief of San Francisco’s Board of Health and oversaw the city’s efforts to combat the disease. A local board of health, such as this one, makes the actual rules and policies and is the adjudicatory body for public health in the county or counties which falls under its jurisdiction, in this case the city of San Francisco. Its powers and duties are laid down in state statutes.⁵² Hassler was an advocate for taking strong preventative measures against Influenza.⁵³ He suggested people should avoid public gatherings, but was, at that stage, a voice crying in the wilderness.

In the early autumn of 1918, the Influenza cases started to rise. On 14 October, 991 cases were reported and in the entire week of 19 October, about 4,000 cases were reported.⁵⁴ While it is likely that there were more cases, not everyone went to a doctor and had their cases reported. As the numbers rose very quickly, people started to get more afraid. On 18 October, the Board of Health declared the situation in San Francisco so severe that it issued a closing order.⁵⁵ All

⁴⁸ Institute of Medicine (US) Committee for the Study of the Future of Public Health, ‘The Future of Public Health. Appendix A, Summary of the Public Health System in the United States’, 1988. Retrieved from: <https://www.ncbi.nlm.nih.gov/books/NBK218212/>

⁴⁹ A W Crosby, ‘America’s Forgotten Pandemic: the Influenza of 1918’, 2003.

⁵⁰ Institute of Medicine (US) Committee for the Study of the Future of Public Health, ‘The Future of Public Health. Appendix A, Summary of the Public Health System in the United States’, 1988.

⁵¹ B Van Niekerken, ‘How SF sent World War I troops a message of love a century ago’ in: the *San Francisco Chronicle*, 2018. Retrieved from: https://www.sfgchronicle.com/chronicle_vault/article/How-SF-sent-World-War-I-troops-a-message-of-love-13325558.php (Van Niekerken, 2018)

⁵² J D Moore, M M Berner, A M Wall, ‘What does a local board of health do?’. Retrieved from: <https://www.sog.unc.edu/resources/faqs/what-does-local-board-health-do>

⁵³ ‘The Flu in San Francisco’ in: the *American Experience*. Retrieved from: <https://www.pbs.org/wgbh/americanexperience/features/influenza-san-francisco/>

⁵⁴ A W Crosby, ‘America’s Forgotten Pandemic: The Influenza of 1918’, 2003.

⁵⁵ Ibid.

amusement and public gathering places were forbidden. This included schools as well. Two days later, church services were also forbidden to attend. The Church Federation of San recommended their members to avoid everyone with respiratory illness and to promptly report all Influenza cases.⁵⁶

San Francisco suffered from severe organisational issues due to the many people that fell ill. The telephone service, which was necessary to distribute the medical help, was understaffed. There was no central cleaning service, which led to trash piling up in the streets. Many policemen, railroad workers and firemen fell either ill or died from the flu. The hospitals and doctor's offices overflowed. The organisational issues only got under control after the peak of the first wave. On 25 October, the highest number of cases was reported (2,319, about 450 cases per 100,000 inhabitants), after which a decline of numbers set in. On 30 October, 1,100 people had been hospitalised, leaving no room for any new patients, so that the decline in numbers was very welcome. In comparison, during the autumn wave of Covid-19 in October of 2021, the highest number of cases was 11,066 but 63 per 100,000 inhabitants.⁵⁷

First mask mandate

In the early days of the first wave, Hassler had recommended that nurses and doctors wore face masks, visiting patients. The face mask he was referring to consisted out of four layers of gauze which covers mouth and nose and is tied behind one's head. Later, on 18 October, Hassler recommended that store clerks and barbers should also wear a mask while on the job. Hassler and the Board of Health then made a proposal to the Board of Supervisors, an organ which oversees the local government boards, in which they recommended that everyone should wear a mask. With no votes against the proposal, it was voted into law and became legally into effect on November 1st.⁵⁸ Most people wore their masks, but those who refused doing so were called, *slackers*.

After the 25th of October, case numbers started to decline. On 21 November, the epidemic was thought to be over.⁵⁹ As the numbers of infections were declining, people began complaining

⁵⁶ Ibid.

⁵⁷ Rijksoverheid, 'Number of confirmed cases over time (per 100,000 inhabitants)' on the *Coronadashboard*. Retrieved from: <https://coronadashboard.rijksoverheid.nl/landelijk/positief-getestemensen>

⁵⁸ 'Everyone Is Compelled to Wear Masks by City Resolution; Great Variety in Styles of Face Adornment in Evidence' in: *San Francisco Chronicle*, 25 October 1918. (See Appendix)

⁵⁹ City and County of San Francisco, Department of Public Health, 'Resolution to Rescind the Mask resolution', 21 November 1918. (See Appendix)

about the inconveniences of the face masks and some even considered them “too absurd and depressing.”⁶⁰ The police started to fine more and more people who had slipped their masks under their chin or did not wear them at all. On November 21st, amusement places were the first to open again and schools followed quickly on November 25th.⁶¹ Additional to these liberations, face masks were now no longer mandatory. During December, Influenza cases started to rise again, announcing a second wave. In order to avoid reimplementing other measures, such as closing amusement places and schools, the Board of Health advised Mayor Rolph to have people starting to wear masks again.⁶² On 7 December, the mayor of San Francisco issued a proclamation in which he “respectfully” asked the citizens to do so, which was not legally binding.⁶³

Second mask mandate

A major difference between the first and second wave was that people’s attitude towards the pandemic had changed. While people had been scared during the first wave and did not know what to expect, people now knew from experience what was to come. 90% of the citizens of San Francisco ignored the mayor’s proclamation, mostly because people remembered how ‘inconvenient’ and ‘uncomfortable’ they were and thus refused to wear them again if it was not ordered.⁶⁴

The issue of the face masks had become quite a political debate. There were a lot of contradicting statements that fed overall confusion to the public. While the Board and the Mayor had been advised by Hassler to have people wear masks, other medical professionals claimed that there was no known cure or preventative for Influenza. Another Health Officer in San Mateo and declared face masks ineffective and even the California State Board of Health said that the situation regarding Influenza was insufficiently serious to require extreme measures such as masking.⁶⁵ Other than confusion from the medical field, there were also groups that warned the public about the dangers of reimplementing face masks. For example, the Christian Scientists warned that face masks are subversive of personal liberty and constitutional rights. The Christian Scientists are a religious group which argues that the mind rather than matter constitutes what is

⁶⁰ A W Crosby, ‘America’s Forgotten Pandemic: The Influenza of 1918’, 2003

⁶¹ Ibid.

⁶² A W Crosby, ‘America’s Forgotten Pandemic: The Influenza of 1918’, 2003

⁶³ ‘Proclamation Of Mayor Asks Masks for All’ in: the *San Francisco Chronicle*, 22 October 1918. (See Appendix)

⁶⁴ Ibid.

⁶⁵ Dr W H Kellogg, ‘Influenza, A Study of Measures Adopted for the Control of the Epidemic (California State Board of Health)’, January 1919. 12. Retrieved from:

<https://quod.lib.umich.edu/f/flu/8150flu.0013.518/1/--influenza-a-study-of-measures-adopted-for-the-control?page=root;size=150;view=text>

real. Based on this premise the religious group refuses all medical care, as they believe that, “[...] the power of prayer was thought to be an antidote to any ailment since the ailments themselves were really mental in origin.”⁶⁶ It is thus important to note, that the Christian Scientists did not agree with the implementation of face masks to begin with. Another group which spoke out publicly against the face masks are the Civil Libertarians. Civil Libertarians emphasise the importance of civil liberties and hold the opinion that individual rights and personal freedoms are superior to any kind of authority.⁶⁷ This group is very sensitive for issues concerning the infringement of civil liberties and would have been against the mask mandate from the beginning as it infringes upon their personal liberty. It seems that while both groups are from the opposing side, each are fighting for an entirely different ideology but are using similar arguments.

But while the effectiveness of face masks had caused a fierce debate, the numbers were still rising. On 19 December, the Board of Supervisors voted on the reimplementation of face masks but lost the vote (9-7).⁶⁸ On 4 January 1919, new measures regarding face masks were implemented, nevertheless. All teachers and students had to wear face masks in public schools. A mere six days later, the Board of Supervisors voted again on the reimplementation of face masks for everyone. This time, they won the vote with a large majority (15-1) and a new mask ordinance was implemented. This was put into effect on 17 January, almost two months after the second wave had reached its peak.⁶⁹

As becomes clear, the opposition to face masks was more stringent than it was in the first wave. Hassler received many letters containing threats.⁷⁰ Somebody even went as far to deliver a bomb to the Muirhead Building addressed to Hassler.⁷¹ These acts show that there is a striking resemblance to the violence against the measures implemented during the Covid-19 pandemic, where epidemiologists receive similar threats.⁷²

⁶⁶ L May, ‘Challenging Medical Authority The Refusal of Treatment by Christian Scientists’, in *The Hastings Center Report*, vol. 25, no. 1, 1995. 15–21, <https://doi.org/10.2307/3562485>.

⁶⁷ D Boaz, D Kirby, ‘The Libertarian Vote’. Cato Institute. 2006. Retrieved from: <https://www.cato.org/sites/cato.org/files/pubs/pdf/pa580.pdf>

⁶⁸ A W Crosby, ‘America’s Forgotten Pandemic: The Influenza of 1918’, 2003.

⁶⁹ Ibid.

⁷⁰ B Dolan, ‘Unmasking History: Who Was Behind the Anti-Mask League Protests During the 1918 Influenza Epidemic in San Francisco? Perspectives in Medical Humanities’, 2020. <https://doi.org/10.34947/M7QP4M>

⁷¹ A W Crosby, ‘America’s Forgotten Pandemic: The Influenza of 1918’, 2003.

⁷² ‘Covid: Dutch curfew riots rage for third night’, 26 January 2021.

On 18 January 1919, one day after the new mask mandate went into effect, the Anti-Mask League was formed. Chaired by Emma Harrington, an attorney,⁷³ the Anti-Mask League was a group of public-spirited citizens, sceptical physicians and fanatics.⁷⁴ The group held their first meeting at Dreamland Rink, where the intention was to distribute petitions and ask for the dismissal of Hassler. Two Supervisors of the Board of Supervisors, who had voted against the mask mandate, were invited to speak as keynote speakers at this meeting.⁷⁵ One of the supervisors had been a political opponent of Rolph in the elections for mayor.

The Anti-Mask League was particularly critical for the harsh actions against the “slackers.” The League argued that the effectiveness of face masks lacked scientific evidence and that face masks were unconstitutional.⁷⁶ The Anti-Mask League set out to protest at the offices of the Board of Supervisors on January 27th. Given that the second wave of the pandemic had already passed its peak, the second mask ordinance was repealed on February 1.⁷⁷ Eventually, the repeal of the mask ordinance also marked the end of the Anti-Mask League. Influenza cases further declined and until a small third wave appeared during the fall of 1919. But during this wave no face mask ordinances or similar measures were implemented.⁷⁸

⁷³ E Gutoskey, ‘At the Height of the 1918 Flu Pandemic, the Anti-Mask League of San Francisco Formed to Protest’ in: *Mental Floss*, 15 May 2020. Retrieved from: <https://www.mentalfloss.com/article/624477/san-franciscos-anti-mask-league-during-1918-flu> (Gutoskey, 2020)

⁷⁴ A W Crosby, ‘America’s Forgotten Pandemic: The Influenza of 1918’, 2003.

⁷⁵ B Dolan, ‘Unmasking History: Who Was Behind the Anti-Mask League Protests During the 1918 Influenza Epidemic in San Francisco? Perspectives in Medical Humanities’, 2020.

⁷⁶ Ibid.

⁷⁷ Ibid.

⁷⁸ Ibid

Chapter 3:

Two Pandemics: A Comparison

The current Covid-19 pandemic has required governments all around the world to implement measures to contain the pandemic, prevent national health systems from collapsing and reduce the death toll. These measures have uncovered tensions within society and caused a polarisation between citizens defending a strict policy, and others critiquing the policy installed by their respective governments. In the Netherlands, a very prominent voice critiquing the Dutch Covid-19 policy is Viruswaarheid, an organisation, which allegedly aims to protect people from the infringements upon their fundamental rights by the government. A little over a century ago, the Spanish flu created similar circumstances and forced the government to implement restrictions. For the Influenza pandemic, we zoom in on San Francisco. San Francisco was the first city in the US to implement a mask ordinance. The city saw the rise of an organisation specifically aiming to repeal this ordinance, called the Anti-Mask League. Both pandemics caused waves of infections, hospitalisations and mortality rates. In both pandemics, policymakers chose to strengthen the measures to decrease the number of cases.

This chapter draws several comparisons between the Influenza pandemic and the Covid-19 pandemic. First, we will recapture a short overview of the measures to slow the spread of the viruses during both pandemics. We will then move on to compare the resistance of the citizens against the measures, as expressed by Viruswaarheid and the Anti-Mask League respectively. We will finally examine whether some of the legal arguments, formulated by these organisations, make sense from a legal perspective.

As discussed in the previous chapter, the city of San Francisco took several measures to combat the Influenza virus. Alongside the implementation of a face mask mandate, which made wearing a face mask mandatory, there were several other measures taken to slow the spread of the virus. All amusement places and public schools were closed. Public gatherings and church services were prohibited. A little over a century later, the Dutch government took similar measures to combat the Covid-19 pandemic. From January until April 2021, face masks were mandatory in all public interior spaces. All adults had to keep a distance, and almost all stores and restaurants were closed. Exceptions were made regarding stores that were considered necessary such as supermarkets and drugstores. Similar to the Influenza pandemic, all public

gatherings were forbidden.⁷⁹ Finally, a curfew prohibited citizens to leave their houses between 21.00/22.00 and 4.30

What can be concluded from Crosby's monograph on *America's Forgotten Pandemic: The Influenza of 1918* is that the support base for the measures gradually declined. During the first wave of the Influenza pandemic, San Franciscans were more willing to abide by the governmental rules to prevent or slow the spread of the virus than in the second wave.⁸⁰ In the second wave, more people were caught not wearing their face masks and more fines were handed out for not obeying the measures. The Anti-Mask League asked for the withdrawal of the second face mask mandate in January 1919. It initially found support from two members of the Board of Supervisors, although only one voted against the reimplementing of the mask mandate. The Anti-Mask League was able to free ride on statements of scientists who challenged the scientific legitimization of the mask mandate. Eventually, the mask mandate was repealed soon after the rise of the Anti-Mask League. However, this was due to the decrease in numbers of infections rather than the actions of the Anti-Mask League.

During the second wave of the Influenza pandemic in San Francisco, people appeared to become more disobedient. It resembles the trend during the second wave of the Covid-19 pandemic in the Netherlands, in which people started to break the rules more as opposed to the situation before the second wave. On 17 and 18 October 2020, the first weekend of the second partial lockdown in the Netherlands, 435 fines were imposed, and 756 additional warnings were given to people who disobeyed the newly implemented measures.⁸¹ On 6 December 2020, 21.409 fines were handed out, mostly to people who were not keeping the 1,5 metres distance. Even though the large discrepancy in numbers might be due to the fact that police officers granted warnings in the early days after the start of the lockdown and became stricter afterwards, the numbers do illustrate an increased tendency to ignore the rules. From 1 June 2020 until 6 December 2020, 4.736 fines were imposed because people violated the face mask order in public transport.⁸² After the general face mask order and curfew were implemented, the fines for breaking the measures skyrocketed. On 16 June 2021, the OM came with an update on the previous numbers. They showed that on 16 May 2021, a total of 124.356 fines had been handed

⁷⁹ Tijdelijke regeling maatregelen Covid-19

⁸⁰ A W Crosby, 'America's Forgotten Pandemic: the Influenza of 1918', 2003.

⁸¹ L Bomers, B de Waal, '435 boetes voor overtreden coronaregels in eerste weekend van nieuwe gedeeltelijke lockdown' in: *EenVandaag*, 19 October 2020. Retrieved from: <https://eenvandaag.avrotros.nl/item/435-boetes-voor-overtreden-coronaregels-in-eerste-weekend-van-nieuwe-gedeeltelijke-lockdown/>

⁸² Openbaar Ministerie, 'Update cijfers coronagerelateerde misdrijven en overtredingen', 16 December 2020. Retrieved from: <https://www.om.nl/actueel/nieuws/2020/12/16/update-cijfers-coronagerelateerde-misdrijven-en-overtredingen>

out. 80.419 of those fines were for violating the curfew, which was implemented from 23 January until 28 April 2021. 8.391 fines had been handed out for breaking the face mask order.⁸³

Both the Anti-Mask League and Viruswaarheid gained popularity as the health crises continued. More people showed their support for Viruswaarheid on social media and Viruswaarheid almost became a regular item on the evening news. In comparing the arguments, brought forward by the Anti-Mask League and Viruswaarheid, we discern a pattern. Both organisations use scientific uncertainties to build an argumentation. The Anti-Mask League argued that it was not certain whether masks helped to slow the spread of the Influenza virus.⁸⁴ The Secretary of the Board of Health of San Francisco questioned the efficacy of masks, saying that“ [...] there is no proof of individual benefit accruing from its use.”⁸⁵ The nuance that is brought by science as it constantly corrects itself creates a sense of confusion and distrust amongst people. The Anti-Mask League appears to have played into that sense of confusion and distrust by using the scientific uncertainty of the effect of the measure as an argument. Likewise, Viruswaarheid argued in the above-mentioned court case that the use of a curfew and face masks to lower the rising numbers of Covid-19 cases was not yet backed by science. In the court case, initiated by Viruswaarheid to contest the curfew, the judge of first instance found that the government did not provide sufficient motivation and proof to demonstrate that a curfew would indeed slow down the numbers of infections.⁸⁶ The fact that there was not enough substantial scientific proof, nor adequate motivation for resorting to a curfew, contributed to the judge’s decision to cease the measure. Later, however, it was found that even though there was a lack of scientific proof and motivation, this lack should not have been a reason to cease the infringing measure. It shows that use of scientific uncertainty as a means to create a sense of distrust is a powerful rhetoric in both pandemics but apparently does not hold ground as a legal argument.

Furthermore, the Anti-Mask League filed a petition asking the Mayor of San Francisco to repeal the mask ordinance and dismiss Hassler. This petition received the support of two supervisors of the Board of Supervisors. One called the mask ordinance “an infringement of our personal liberty” and stated that it was not democratic to force citizens to wear face masks.⁸⁷ The Anti-Mask League refrained from further elaborating on the legal arguments against the mask ordinance. They could have, for example, elaborated on why the mask ordinance was

⁸³ Openbaar Ministerie, ‘Update cijfers coronagerelateerde misdrijfzaken en overtredingen’, 15 June 2021. Retrieved from: <https://www.om.nl/actueel/nieuws/2021/06/15/update-cijfers-coronagerelateerde-misdrijfzaken-en-overtredingen>

⁸⁴ C Hauser, ‘The Mask Slackers of 1918’ in the New York Times, 3 August 2020.

⁸⁵ Municipal Journal and Engineer. Incorporated, 1919. 111, Retrieved from: <https://books.google.com/books?id=ngo8AQAAAMAJ&q=anti-mask+league+of+1919&pg=PA111> (Municipal Journal and Engineer. Incorporated, 1919)

⁸⁶ Avondklok-zaak, ECLI:NL:RBDHA:2021:1100, 4.13

⁸⁷ Journal of proceedings, Board of Supervisors, City and County of San Francisco, v. 14, 1919. Retrieved from: <https://archive.org/details/journalofproceed1919sanfrich>

unconstitutional and undemocratic. The thinness of their legal arguments might be due to the fact that the second mask ordinance in San Francisco was implemented on 17 January, but already repealed on 1 February. This means that the time period, in which face masks were mandatory during the second wave of Influenza lasted little over two weeks. Furthermore, Crosby points out that there was a lot of disagreement surrounding the direction that the Anti-Mask League should have gone, as he claims that during the first meeting ended in a shouting match between the moderate members and the extreme members.⁸⁸ This could have also substantially contributed to the fact that the legal case of the Anti-Mask League against the measures had not fully come to its right yet.

Unlike the Anti-Mask League, Viruswaarheid provides a good legal basis to their arguments. They find that several of the measures infringe upon specific fundamental rights, such as the right to freedom of movement and the right to personal integrity. Additionally, unlike the Anti-Mask League, Viruswaarheid sued governmental institutions over these infringements. We specifically focused on the curfew case of February 26th, 2021, and face mask case of August 19th, 2020. Whereas the Anti-Mask League primarily focused on one specific objective: repealing the mask ordinance, the objective of Viruswaarheid appears to go far beyond one specific measure. The organisation's description has also moved beyond a description of an organisation that only attacks measures and restrictions during a pandemic. They claim to "fight for the preservation of a democratic *rechtsstaat*"⁸⁹ and seem to voice a much wider discontent within the Dutch society.

The Influenza and Covid-19 pandemics have displayed the challenge to balance fundamental liberties against a government's duty to adequately address health crises. National legislation, for example the *Tijdelijke regeling maatregelen Covid-19*, *Wet Publieke Gezondheid* or the *Wet Buitengewone Bevoegdheden Burgerlijk Gezag*, provide the Dutch State with the opportunity to legally implement measures in order to safeguard public health. In the Netherlands, the Court decided that the Dutch State operated lawfully by imposing face masks and curfew when sued by Viruswaarheid. However, safeguarding fundamental rights during crises should be under scrutiny. Due to the struggle that governments have in finding a balance between both safeguarding fundamental rights and protecting people from health crises, of the judiciary is responsible for warranting a proper balance between both.

⁸⁸ A W Crosby, 'America's Forgotten Pandemic: The Influenza of 1918', 2003

⁸⁹ Viruswaarheid, 'Over ons'

Conclusion

The current Covid-19 pandemic and the Influenza pandemic show similarity in terms of measures and resistance against these measures; the face masks mandates that were both installed during the pandemics and the organisations which critiqued them both. The aim of this thesis was to examine and assess the legal objections against the governmental measures to contain the Influenza pandemic (1918-1919) and the Covid-19 pandemic (2019 and ongoing). By discussing the Covid-19 pandemic and examining the legal cases of the curfew and the face masks, which were both lost by Viruswaarheid, the legal arguments of the organisation Viruswaarheid, who opposes the governmental measures to contain the Covid-19 pandemic, were shown. Unfortunately, no case law surrounding the Influenza pandemic can be found, but nevertheless the arguments against the governmental measures to contain the Influenza pandemic were presented and discussed.

The legal objections against the governmental measures to contain the Influenza pandemic (1918-1919) and the Covid-19 pandemic (2019 and ongoing) come down to similar objections. Two organisations that voiced their disagreement with the measures taken, argue that the measures infringe upon fundamental rights and that the scientific basis for these infringing measures is not strong enough if it even exists at all. The governmental duty to both protect people and their fundamental rights comes under pressure during health crises. There is a strong tension between efficiently addressing a health crisis while also safeguarding people's fundamental rights. While there is a duty of governments to implement measures that are balanced, there is also a responsibility of the courts to establish whether the balance was equal. Nevertheless, it remains the duty of people and politicians to address situations in which they consider the balance unequal.

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Appendix

Tijdelijke regeling maatregelen Covid-19

Geldend van 03-03-2021 t/m 12-03-2021

Hoofdstuk 2a. Mondkapjes publieke binnenruimten, stations, luchthavens, onderwijsinstellingen en contactberoepen

Artikel 2a.1. Mondkapjesplicht in publieke binnenruimten, stations en luchthavengebouwen

1. Personen van dertien jaar en ouder dragen een mondkapje in:
 - a. publieke binnenruimten;
 - b. een station, halteplaats, of een andere bij het openbaar vervoer of ander bedrijfsmatig personenvervoer behorende voorziening en de daarbij behorende perrons, trappen, tunnels en liften, met uitzondering van de daar gelegen besloten plaatsen;
 - c. gebouwen op luchthavens, met uitzondering van de daar gelegen besloten plaatsen.

2. Het eerste lid geldt niet voor:
 - a. personen die geplaatst zijn en de veiligeafstandsnorm in acht nemen;
 - b. personen als bedoeld in artikel 6.6, eerste lid;
 - c. personen in door het college van burgemeester en wethouders aangewezen stemlokalen als bedoeld in artikel J 4 van de Kieswet of andere locaties die worden gebruikt ten behoeve van de uitvoering van een verkiezing als bedoeld in de Kieswet dan wel de Tijdelijke wet verkiezingen covid-19.

Artikel 2a.2. Mondkapjesplicht in onderwijsinstellingen

1. Personen in een onderwijsinstelling of een andere ruimte die door een onderwijsinstelling voor onderwijsactiviteiten wordt gebruikt, dragen een mondkapje.

2. Het eerste lid geldt niet:
 - a. voor personen op een vaste zit- of staanplaats die deelnemen aan een onderwijsactiviteit of een onderwijsactiviteit verzorgen;
 - b. indien het dragen van een mondkapje een belemmering vormt voor deelname aan dan wel verzorging van een onderwijsactiviteit;
 - c. voor personeelsleden van een onderwijsinstelling, indien deze een vaste zit- of staanplaats innemen;
 - d. voor personen die etenswaren of dranken nuttigen, indien deze een vaste zit- of staanplaats innemen.

3. Van een belemmering als bedoeld in het tweede lid, onder b, is in ieder geval sprake bij activiteiten met betrekking tot lichamelijke opvoeding, zang, toneel en dans.

4. Het eerste lid geldt niet voor basisscholen en speciale scholen voor basisonderwijs als bedoeld in de Wet op het primair onderwijs en scholen voor speciaal onderwijs als bedoeld in de Wet op de expertisecentra.

Artikel 2a.3. Mondkapjesplicht contactberoepen

1. De beoefenaar van een contactberoep en de klant of patiënt aan wie diensten worden verleend, dragen beiden een mondkapje gedurende het contact.

2. Het eerste lid geldt niet voor:
 - a. personen tot en met twaalf jaar;
 - b. sekswerkers en hun klanten;
 - c. klanten en patiënten die een behandeling krijgen aan hun gezicht, voor zover het contactberoep niet op gepaste wijze uitgeoefend kan worden op het moment dat de klant een mondkapje draagt.

Artikel 2a.4. Uitzondering beperking of ziekte

1. De verplichtingen in dit hoofdstuk gelden niet voor personen die vanwege een beperking of een ziekte geen mondkapje kunnen dragen.

2. De verplichtingen in dit hoofdstuk gelden mede niet voor begeleiders van personen met een verstandelijke beperking, voor zover deze personen van het door begeleiders dragen van een mondkapje ernstig ontregeld raken, en voor personen die spreken met iemand die vanwege een auditieve beperking moet kunnen spraakafzien.

Artikel 2a.5. Uitzondering sport, cultuur en media

De verplichtingen in dit hoofdstuk gelden niet voor personen tijdens het:

- a. beoefenen van sport, waaronder het zwemmen in een zwembad, voor zover het dragen van een mondkapje de beoefening van de sport belemmert;
- b. beoefenen van podiumkunsten en acteren, voor zover het dragen van een mondkapje de beoefening van de podiumkunsten of het acteren belemmert;
- c. poseren voor beeldende kunst, voor zover het gaat om het op beeld vastleggen van personen;
- d. deelnemen aan de opname van audiovisueel media-aanbod dat verzorgd wordt door aanbieders van mediadiensten, als bedoeld in artikel 1.1, eerste lid, van de Mediawet 2008, voor zover het gaat om personen die in beeld of aan het woord komen.

Artikel 2a.6. Uitzondering identificatieplicht

De verplichtingen in dit hoofdstuk gelden niet voor personen aan wie gevraagd wordt krachtens een wettelijke bepaling hun mondkapje af te zetten om zich te identificeren met een document als bedoeld in artikel 1 van de Wet op de identificatieplicht op het moment van identificatie.

Artikel 2a.7. Uitzondering zorglocaties

De verplichtingen in dit hoofdstuk gelden niet voor personen in zorglocaties.

Artikel 2a.8. Uitzondering veilige uitoefening werkzaamheden

De verplichtingen in dit hoofdstuk gelden niet indien het dragen van een mondkapje de goede en veilige uitoefening van werkzaamheden in het kader van beroep of bedrijf onmogelijk maakt.

§ 6.9. Avondklok

Artikel 6.15. Avondklok

Het is van 3 maart 2021 tot en met 15 maart 2021 verboden tussen 21.00 uur en 04.30 uur te vertoeven in de openlucht.

Artikel 6.16. Uitzonderingen zonder formulieren

1. Artikel 6.15 geldt, voor zover dit noodzakelijk is voor de uitoefening van zijn kennelijke functie, niet voor:

a. een politieambtenaar, opsporingsambtenaar, brandweermidewerker of ambulancemedewerker;

b. degene die openbaar vervoer of taxivervoer als bedoeld in artikel 1 van de Wet personenvervoer 2000, vervoer per luchtvaartuig als bedoeld in artikel 16 van de Luchtvaartwet of personenvervoer per veerboot of passagiersschip verzorgt;

c. degene die internationaal vervoer van goederen over de weg, het spoor of het water verzorgt.

2. Artikel 6.15 geldt niet voor degene die in de openlucht vertoeft vanwege:
- a. een noodsituatie;
 - b. een reis vanuit het buitenland of het Caribisch deel van Nederland;
 - c. de omstandigheid dat hij dak- of thuisloos is en geen gebruikmaakt van de beschikbare maatschappelijke opvang;
 - d. het individueel uitlaten van een aangelijnde hond;
 - e. een verplaatsing onder begeleiding als rechtens van zijn vrijheid beroofde.

Artikel 6.17. Uitzonderingen met formulieren

Artikel 6.15 geldt niet:

- a. voor degene die in de openlucht vertoeft vanwege noodzakelijke beroepsmatige werkzaamheden anders dan als bedoeld in artikel 6.16, eerste lid, en die een naar waarheid ingevulde werkgeversverklaring overlegt waaruit het dienstverband blijkt en de daarmee samenhangende noodzaak voor het vertoeven in de openlucht, alsmede de verklaring, bedoeld onder b;
- b. voor degene die in de openlucht vertoeft en die een gedagtekende naar waarheid ingevulde eigen verklaring overlegt, waaruit de kennelijke noodzaak blijkt op die tijd op die plek te vertoeven vanwege:
 - 1°. werk;
 - 2°. medische hulp aan zichzelf of een dier;
 - 3°. hulpverlening aan een hulpbehoevende persoon;
 - 4°. een reis naar het buitenland of het Caribische deel van Nederland;
 - 5°. het aanwezig zijn bij een uitvaart;
 - 6°. het als direct betrokkene aanwezig zijn bij een bijeenkomst die plaatsvindt onder verantwoordelijkheid van een rechterlijk ambtenaar of waar hij wordt gehoord in verband met een bezwaarschrift of administratief beroep;
 - 7°. het aanwezig zijn bij een liveprogramma;

8°. het afleggen van een door een onderwijsinstelling gepland examen of tentamen in het middelbaar beroepsonderwijs, het hoger beroepsonderwijs of het wetenschappelijk onderwijs;

9°. het in het eindexamenjaar deelnemen aan een door een onderwijsinstelling verzorgde onderwijsactiviteit in het voortgezet algemeen volwassenenonderwijs;

10°. het deelnemen aan een door een onderwijsinstelling verzorgde praktijkgerichte onderwijsactiviteit in het voortgezet onderwijs, het voortgezet speciaal onderwijs, het middelbaar beroepsonderwijs, het hoger beroepsonderwijs of het wetenschappelijk onderwijs.

Artikel 6.18. Formulieren en bewijsstukken

1. De formulieren van de werkgeversverklaring, bedoeld in artikel 6.17, onder a, respectievelijk de eigen verklaring, bedoeld in artikel 6.17, onder b, zijn opgenomen als bijlage 2 respectievelijk bijlage 3 bij deze regeling. De formulieren worden door de overheid elektronisch en op papier beschikbaar gesteld.

2. Indien werkzaamheden als bedoeld in artikel 6.17, onder a, niet in loondienst maar door een zelfstandige of door een persoon die geen werkgever heeft worden verricht, wordt de werkgeversverklaring door de zelfstandige of door die persoon ingevuld en geldt die verklaring als de werkgeversverklaring, bedoeld in artikel 6.17, onder a.

3. Een reis als bedoeld in artikel 6.16, tweede lid, onder b, en een reis als bedoeld in artikel 6.17, onder b, onder 4°, gelden slechts als uitzonderingsgrond, indien reisbescheiden of andere bescheiden worden overgelegd waaruit die reis blijkt en voorts de noodzaak op die tijd op die plek te vertoeven.

4. De aanwezigheid bij een liveprogramma, bedoeld in artikel 6.17, onder b, onder 7°, geldt slechts als uitzonderingsgrond als een uitnodiging daartoe wordt overgelegd van de omroep die dit programma uitzendt.

5. Het afleggen van een examen of tentamen, bedoeld in artikel 6.17, onder b, onder 8°, geldt slechts als uitzonderingsgrond, indien een bescheid wordt overgelegd waaruit dat examen of tentamen blijkt en voorts de noodzaak op die tijd op die plek te vertoeven.

6. Het deelnemen aan een onderwijsactiviteit, bedoeld in artikel 6.17, onder b, onder 9°, geldt slechts als uitzonderingsgrond, indien een bescheid wordt overgelegd waaruit de onderwijsactiviteit blijkt en voorts de noodzaak om op die tijd op die plek te vertoeven.

7. Het deelnemen aan een praktijkgerichte onderwijsactiviteit, bedoeld in artikel 6.17, onder b, onder 10°, geldt slechts als uitzonderingsgrond, indien een bescheid wordt overgelegd waaruit de praktijkgerichte onderwijsactiviteit blijkt en voorts de noodzaak op die tijd op die plek te vertoeven.

Tweet Viruswaarheid

30 May 2020

←

@viruswaarheid
 9.810 Tweets

Volgen

↻ @viruswaarheid heeft geretweet

Melchior Meijer @PolderPaleo · 30 mei

In deze gelekte Pfizer studie - die niet voor de ogen van het plebs bedoeld was - concentreren de mRNA dragende nano vetbolletjes zich opvallend sterk in de eierstokken. Natuurlijk kunnen daaruit nog geen conclusies worden getrokken met betrekking tot vruchtbaarheid.

Dr Ah Kahn Syed @arkmedic · 30 mei

HOLY CRAP

This leaked #Pfizer study from the EMA shows that the #vaccine particles are hugely sequestered into the ovaries.

That's right. The ovaries.

@richardursomd @Fynnderella1 @NoWackyScience
h/t @dankdly11

[Deze collectie weergeven](#)

SARS-CoV-2 mRNA Vaccine (BNT162, PF-07302048)
2.6.5 薬物動態試験の結果表

2.6.5.5B. PHARMACOKINETICS: ORGAN DISTRIBUTION CONTINUED Test Article: [³H]-Labelled LNP-mRNA formulation containing ALC-0315 and ALC-0159
Report Number: 185350

Sample	Total Lipid concentration (µg lipid equivalent/g [or mL]) (males and females combined)							% of Administered Dose (males and females combined)						
	0.25 h	1 h	2 h	4 h	8 h	24 h	48 h	0.25 h	1 h	2 h	4 h	8 h	24 h	48 h
Lymph node (mandibular)	0.064	0.189	0.290	0.408	0.534	0.554	0.727	--	--	--	--	--	--	--
Lymph node (mesenteric)	0.050	0.146	0.330	0.489	0.689	0.985	1.37	--	--	--	--	--	--	--
Muscle	0.021	0.061	0.084	0.103	0.096	0.095	0.192	--	--	--	--	--	--	--
Ovaries (females)	0.104	1.34	1.64	2.34	3.09	3.24	12.3	0.001	0.009	0.008	0.016	0.025	0.037	0.095
Pancreas	0.081	0.207	0.414	0.380	0.294	0.358	0.599	0.003	0.007	0.014	0.015	0.015	0.011	0.019
Pituitary gland	0.339	0.643	0.868	0.854	0.405	0.478	0.694	0.000	0.001	0.001	0.001	0.000	0.000	0.001
Prostate (males)	0.061	0.091	0.128	0.157	0.150	0.183	0.170	0.001	0.001	0.002	0.003	0.003	0.004	0.003
Salivary glands	0.084	0.193	0.255	0.220	0.135	0.170	0.264	0.003	0.007	0.008	0.008	0.005	0.006	0.009
Skin	0.013	0.208	0.159	0.145	0.119	0.157	0.253	--	--	--	--	--	--	--
Small intestine	0.030	0.221	0.476	0.879	1.25	1.30	1.47	0.024	0.130	0.319	0.543	0.776	0.906	0.835
Spinal cord	0.043	0.097	0.169	0.250	0.106	0.085	0.112	0.001	0.002	0.002	0.003	0.001	0.001	0.001
Spleen	0.334	2.47	7.73	10.3	22.1	20.1	23.4	0.013	0.093	0.325	0.385	0.982	0.821	1.03
Stomach	0.017	0.065	0.115	0.144	0.268	0.152	0.215	0.006	0.019	0.034	0.030	0.040	0.037	0.039
Testes (males)	0.031	0.042	0.079	0.129	0.146	0.304	0.320	0.007	0.010	0.017	0.030	0.034	0.074	0.074
Thymus	0.088	0.343	0.340	0.335	0.196	0.707	0.531	0.004	0.007	0.010	0.017	0.008	0.007	0.008

🗨️ 6
↻ 95
❤️ 121
📤

Translation: “This leaked Pfizer study shows – which was not meant for the eyes of the *plebs* – that the mRNA carrying nano fat globules concentrate conspicuously high in the ovaries. Of course, no conclusions can be drawn from this with regards to fertility.”

37

Resolution to Rescind the Mask Ordinance

City and County of San Francisco, Department of Public Health, 21 November 1918

CITY AND COUNTY OF SAN FRANCISCO

DEPARTMENT OF PUBLIC HEALTH
CENTRAL OFFICE
1085 MISSION STREET

November 21st, 1918.

When replying quote subject:

Honorable James Rolph,
Mayor, City and County of
San Francisco, Cal.

This is a copy from the original manuscript held in the California Historical Society Library, San Francisco. It may be used for reference only, and no permission is here given for duplication in whole or in part.

*ack
your copy
of same.*

Sir:-

At a special meeting of the Board of Health held on November 21st, 1918, at 11:30 A. M., a resolution was adopted recommending to His Honor, the Mayor, the issuing of a proclamation rescinding the mask ordinance, as follows:

Whereas, upon the report of the Health Officer evidence shows that the epidemic of Influenza which has been in our City since October 10th, 1918 has ceased to exist, and,

Whereas, in the opinion of the Board of Health and the Health Officer the preventive measure adopted on October 24, 1918, to-wit: the wearing of a gauze mask over the nose and mouth was the principal protective measure which resulted in the rapid control of the disease, and,

Whereas, by the splendid spirit and co-operation upon the part of the people of the city and county of San Francisco, as well as the administrative bodies of the city, to-wit: His Honor the Mayor, the Board of Supervisors and the Police Department, it was possible to apply for the first time to an entire population of a large metropolitan city what appeared to be an unique measure but which has proven itself a sane and rational preventive measure against the spread of an epidemic disease of the respiratory type, therefore,

Be It Resolved, that the Board of Health acknowledge this spirit of co-operation, thank His Honor, the Mayor, the Board of Supervisors and the Police Department, the public press and the people of San Francisco for the hearty and intelligent support in a measure which undoubtedly has saved 20,000 cases of illness and prevented 1500 deaths, and further,

Be It Resolved, that we now inform His Honor, the Mayor and the public of San Francisco that we feel the need for the universal wearing of the mask to have ceased and request that the Mayor issue a proclamation to this effect.

'Everyone Is Compelled to Wear Masks by City Resolution; Great Variety in Styles of Face Adornment in Evidence'

San Francisco Chronicle, 25 October 1918

Oscar Hoops
Charles W. Fay
Tom Dillon

Everyone Is Compelled to Wear Masks by City Resolution

Great Variety in Styles of Face Adornment in Evidence

THE Board of Supervisors yesterday passed a resolution whereby every person who appears on the streets of San Francisco until a rescinding order is made, is compelled to wear a mask as a protection against influenza.

This order applies to everybody—to visitors as well as residents. Failure to wear a mask in public renders the delinquent liable to arrest.

Meanwhile, since the first order recommending the wearing of a mask was promulgated three days ago, the number of persons who accepted that advice increased so materially that yesterday about four out of every five persons in San Francisco were wearing masks.

GREAT VARIETY

All sorts and conditions of masks were in evidence—most of them simple affairs, mere pads of gauze four folds thick tied on the face with tapes that went around the head above the ears and around the neck below them.

Others affected masks of a more neutralized, the aesthetic flattened-conjurer type, like nosebars, which effected produced on the nose and contiguous features by the original

four-stringed square. Still others, more highly developed and complex in their scheme of construction and medical efficacy, were fearsome-looking machines like extended muzzles, similar substance, all suggestive of surgical instruments and lending a pig-like aspect to the wearer—an unnatural pig-like extension of the snout.

Dr. Easler of the Board of Health, who has the whole matter in charge, is wearing a combination mask that is a compound of the two principles.

OLD-TIME "MUZZLES"

The snout extends partially, like the helmets affected by the French Knights at the period of Agincourt, but is not so protrusive as the metal muzzles. Furthermore, it is sheathed outside in gauze, like the common or garden mask more usually adopted by the public.

The police affect the small, serviceable gauze-pad type of mask, resembling in size and contour about nine ordinary slabs of rawhide arranged in a square of three each way. Men with strong ears that set close to the head can loop these on to the same, with elastic loops that hold the mask comfortably in position. To per-

sons with weak or protrusive ears, however, the climacter, but more suitable, system of tying the mask with tapes around the neck and head is to be recommended.

The Yashmak or harem veil type of mask is used by many girl clerks and women in downtown offices. It hangs loose below the chin and has not such a disturbing and flattening effect upon certain types of female beauty as has the mask that is tied under the mouth close to the chin.

VELLS POPULAR, TOO

Hundreds of women have been compromising between the muzzles, aprons and their dread of unbecomingness by using thick veils or the regulation chiffon veils folded to two or more thicknesses. What will become of them if they persist in this form of mask, despite the new and more rigorous regulation, remains to be seen.

When the enforcement of the new order universalize the use of masks, fresh and wonderful attempts to blend the arts of beauty and prophylaxis, and mold them to the form of a mask or a muzzle, will promptly appear, and will afford a wide field for study to those who feel interested in such departures.

Drop in Deaths in New York Forecast

Health Expert Predicts Falling Off Next Week

NEW YORK, October 24.—Making deduction from Spanish influenza mortality statistics in other cities, Dr. Royal R. Copeland, New York Health Commissioner, predicted tonight that New York's death rate, which had climbed steadily from its peak 1906 to 40 per 1000, will begin to drop next week. Although he insisted the epidemic appeared to be on the decline, Dr. Copeland urged the public to keep vaccination as another method of influenza is predicted for next spring by many authorities.

An appeal was made in the Mayor today by Queensborough for city workers to be sent as grave diggers to bury the bodies of 2000 persons daily victims of the epidemic, which, though subsided in numbers, still through persistent winter of the epidemic in the greater city were in Queens and that to some extent had been spreading to those who had had been in the city.

Eastern Cities To Be Joined by Air Mail Route

WASHINGTON, October 24.—Aerial mail service between New York and Chicago will be started between December 1 and 15. Postmaster-General Burleson announced today, depending upon the time manufacturers deliver the necessary planes. The schedule for the unfavorable winter months contemplates the machines leaving Chicago and New York at 5 o'clock each morning and completing the trip, including all stops, within ten hours. Each plane will have a carrying capacity of 20,000 letters.

Staff Officers at Lewis Examined

Fitness for Overseas Duty Determined

CAMP LEWIS (Wash.), October 24.—All divisional staff officers today reported for physical examination to determine their physical fitness for overseas duty and practically all officers of the 13th Division will undergo similar examinations as fast as they can be made. When it became known about camp that overseas examinations were being given, it was thought by many the division soon would move from this camp. It was announced, however, these examinations are being given now to determine and weed from the divisional organizations all officers and men who are physically not qualified for active duty abroad instead of waiting until they are ordered abroad and thus causing changes in commands and organizations.

Typographical Union Meeting Postponed

The meeting of the Typographical Union, which was to have been held at the Hotel... has been postponed...

A. F. Wiedenmann Dies at Vallejo

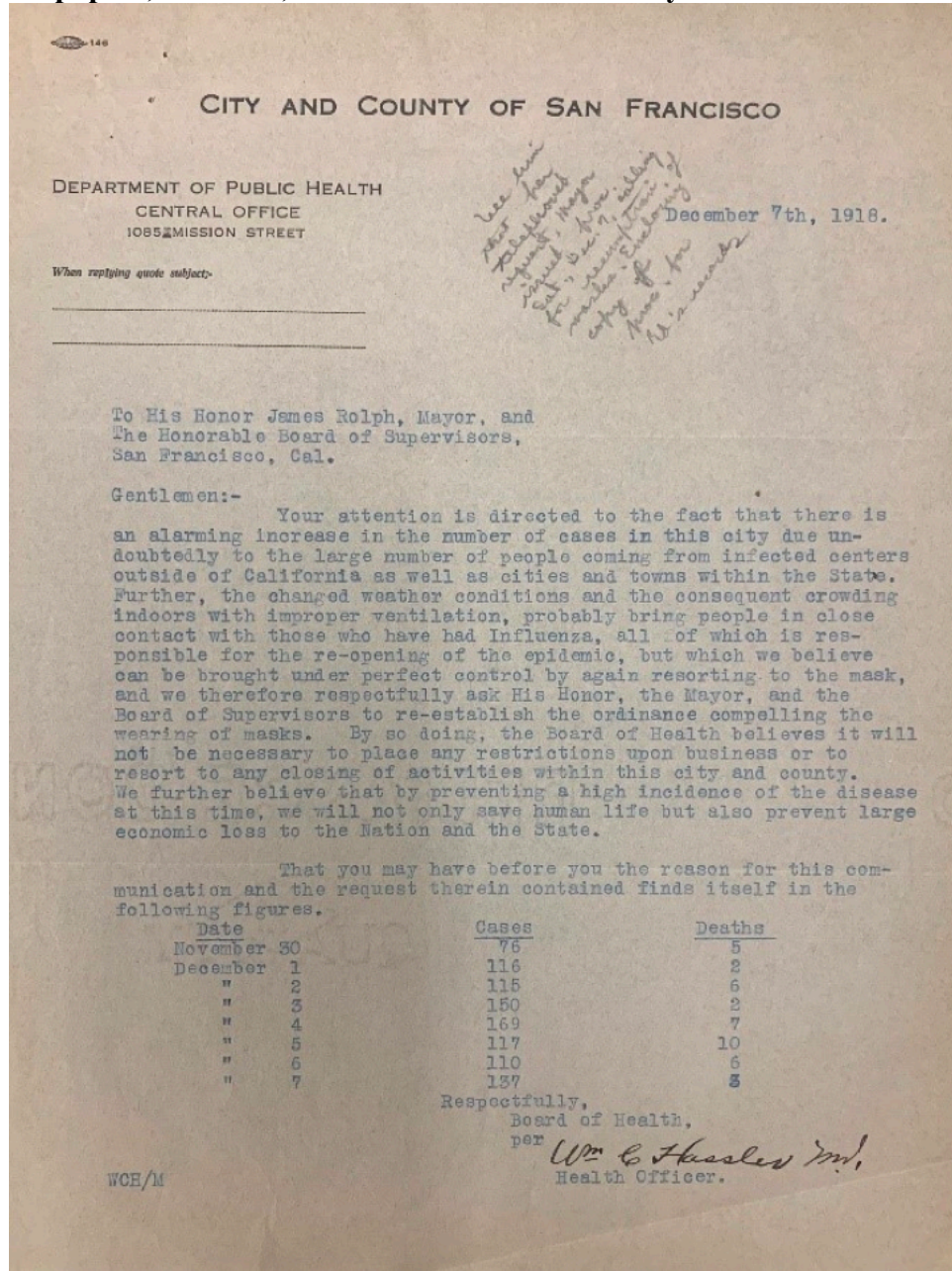
A. F. Wiedenmann, 44, died at Vallejo, California, after a long illness...

Chicago Trade Board Head Grippe Victim

The Chicago Trade Board president, A. H. ... died today of pneumonia...

Letter from Dr. William Hassler

Department of Public Health, to Mayor James Rolph Jr., December 7, 1918. James Rolph, Jr. papers, MS 1818, California Historical Society



Proclamation Of Mayor Asks Masks For All

San Francisco Chronicle, October 22, 1918, p. 8

WEAR MASKS FOR ALL

Health Board Decides General Use of Gauze Covering Is Necessary

LABOR COUNCIL TO ACT

Unions to Forbid Men to Go to Jobs Without Protection From Epidemic

Masks for every person in the city were determined upon by the Board of Health last night as the only effective measure to stop the spread of influenza.

Dr. Wood had not gone the length of making this an official order but prepared a proclamation which was issued last night by the Mayor urging every person to wear the mask out of regard both for his own safety and that of others.

In line with the Mayor and the Board of Health in the proclamation were the San Francisco Labor Council, the Building Trades Council, the State Council of Defense, the Retail Dry Goods Association, the Restaurant Men's Association, the Red Cross, the Chamber of Commerce and Postmaster Charles W. Day.

MANDATE BY UNIONS

Some of the associations have already made the matter the subject of a letter to members and Secretary of the Council of the Labor Council is the Board of Health that mandatory instructions would go out to all the unions affiliated with the Council that their men cannot work unless they wear masks.

After Health Officer William C. Hassler and Dr. Woods Hutchinson of Berkeley, where the epidemic has been most severe, had explained the urgent need and the efficiency of the mask, all the organizations represented at the meeting of the Board of Health pledged their unqualified support of the measure.

At 6 o'clock yesterday afternoon a few cases of influenza had been

DON MASKS! ROLPH URGES AS BEST MEANS OF AVOIDING RISK

TO THE PEOPLE OF SAN FRANCISCO: You are fast faced with a deadly epidemic. Already it has begun to make its record of death in our city. It must be stopped. It is the duty of every person to help stop it.

The Board of Public Health has left no stone unturned to find the best means of fighting the growing death lists. Its way to the public is, "Wear Masks." As Mayor I request every woman and child in San Francisco to take this advice of health authorities. Wear these masks and save your lives, those of your children and your neighbors.

The Italian Supreme Command has printed on every mask: "Who leaves this mask behind dies." You run a chance if you fail your city now and do not wear a mask. Masks may prevent half or more of the sickness and death which we are confronted. Every mask will cut down a possible total of 50,000 cases and 1500 deaths.

This proclamation has the concurrence of the Board of Public Health, the Red Cross, the State Council of Defense, organized labor, organized associations of merchants, charity organizations and other public bodies. Conscience, patriotism and self-protection demand immediate and rigid compliance.

Respectfully,
JAMES ROLPH, Mayor.

that we want general co-operation to keep it down to 5 or 6 per cent.

"It is well known that the course of the epidemic is about three months. For the next two weeks you may expect 1000 new cases a day. The efficiency of the working population depends entirely upon wearing masks regardless of what other cities have done. The vital necessity of the mask is the thing we want to drive home to the people of San Francisco."

That from the experience of Eastern cities San Francisco might expect 50,000 cases and 1500 deaths unless strenuous measures are taken to check the disease, was the word of Dr. Woods Hutchinson.

GIVES OFF GERMS

He explained that one of the greatest dangers arises from the fact that it is only two or three days after the germs are deposited in the nostrils that the affected person finds himself sick and that during the time he is constantly giving off the germs to infect others.

After a conference with Mayor Rolph, John A. Britton and Dr. Hutchinson brought back word that the unions would give the fullest support

hold any indoor services, and J. Gregory reported that Archbishop J. Hanna, Bishop W. F. Nichol, Jewish Relief Society and church organizations have co-operation in the fight.

The United Railroads and Municipal Railways yesterday all of their employees to wear masks. Thousands of masks were distributed yesterday by the Red Cross to employers. In addition to the distributed to the public. A block long stood all day before depot at 30 Montgomery street which the Red Cross mask given out. Seven factories were making masks yesterday.

Without special permission, all public meetings have been forbidden and it was stated that the Board of Health yesterday if permission will not be given except meetings necessary to government.

A permit has been given to the luncheon conference of the Board