

# **THE PLOT AGAINST RECENT HISTORY: MATT HANCOCK'S SPLUTTERING DISPLAY ON GB NEWS**

Posted on April 27, 2022



Matt Hancock's performance as Britain's Health Secretary exhibited all the wisdom of a man trying to prevent a burglary by welding the cat flap shut, but leaving the front door open.

**Category:** [COMMENTARY](#)

**Tags:** [COVID-19](#), [GB News](#), [lockdown](#), [Matt Hancock](#), [United Kingdom](#)

The former Health Secretary Matt Hancock was the main champion of Britain's lockdown policy. It later emerged that, while eager to make life unliveable for everyone else, he was somewhat less keen on the implications these abrasive measures would have on his own canoodling. Rules he proclaimed necessary in public were randily avoided by the Health Secretary in private. Once *The Sun* broke [CCTV footage](#) of Hancock having an adulterous smooch with a female aide, the game was up and he had to resign.

After a year now spent in the political wilderness, Hancock has clearly been told by some uncharitable, misguided soul that the British public is crying out for his return to frontline politics. He is marketing a book about the pandemic, promising to provide readers with valuable insights into what went wrong.

There is nothing objectionable in itself to learning lessons from past experience, but nor do we have any reason to believe that Hancock is the man to give them. In truth, the former Health Secretary is the last person from whom any independent observer should expect to learn anything—especially on such an issue as lockdown, where Hancock's very reputation as a public servant and even his status in the history books will be affected by whatever conclusions we reach.

His conflict of interest in these matters has now been made clear beyond reasonable doubt. Indeed, somewhat to Hancock's credit, he recently consented to be [questioned](#) by

Dan Wootton, a likeable talking head on GB News and a long-time critic of the government's ruinous, anti-human experiment with untested lockdowns. What followed was the most excruciating car crash on British television since Prince Andrew decided to overrule his handlers and [sit down with Emily Maitlis in 2019](#).

Wootton first asks Hancock about the [Influenza Pandemic Preparedness Strategy \(2011\)](#), a detailed plan stating that non-coercive public health guidance and isolation of the sick and vulnerable (as opposed to the healthy) should be the response in the event of a pandemic. Hancock denies that this plan, abandoned in 2020 by the government in favour of [copying Communist China](#), was applicable to COVID-19. The government was thus justified, says Hancock, in jettisoning a decade of its own research and taking unprecedented measures to destroy individual liberty, social life, free enterprise—everything, in fact, that makes good health such a blessing in the first place.

But this is untrue. As recently as 2017, the [National Risk Register](#) envisaged that a new pathogen might cause up to 750,000 deaths—considerably more deaths than the UK has suffered from COVID-19. Hancock's argument that coronavirus was an unforeseen threat which rendered our contingency plans obsolete is therefore false. The authors of the 2011 strategy even explained that their recommendations apply as much to coronaviruses as to influenza: "the plans could be adapted and deployed for scenarios such as an outbreak of another infectious disease, e.g., Severe Acute Respiratory Syndrome (SARS) in health care settings, with an altogether different pattern of infectivity." But Hancock maintains that the plans were drawn up purely with an eye to the flu. Either he has not read the strategy or he is wilfully misreading it.

Like many European governments, the Conservatives in the UK have come under fire for failing to protect care homes throughout the various waves of the pandemic. Especially disastrous was Hancock's policy, put into practice between March and April of 2020, of discharging hospital patients into care homes without first testing them for the virus. Asked about this blunder, Hancock says that the government did not have a solid enough testing regime to make sure that all of these patients were COVID-free.

Wootton points out that between March 17th and April 15th, 25,000 people were discharged from hospital to social care facilities. By this point, the government had already reached the capacity to perform 10,000 daily tests and over 530,000 had been carried out by April 20th. In other words, test capacity did exist. The department run by Hancock simply failed to prioritise its use for discharged patients, who were shovelled into places where they would inevitably mix with vulnerable residents. The Care Provider Alliance issued a direct warning to Hancock at the time in an [email](#): “All people discharged from hospital to social care settings must be tested before discharge.” Hancock then equivocates when asked if he ever received this urgent message.

Later, Hancock pushes the idea that in the absence of his lockdown policy, the NHS would have been overwhelmed. Wootton highlights that this is hotly disputed, to which Hancock responds: “It’s just a fact. It’s science!” He then shrugs off Wootton’s rejoinder that the COVID-19 infection rates were already [declining before the first lockdown](#)—proof that abrasive, top-down measures were not needed to bring down cases, hospitalizations, and deaths.

Hancock makes no effort to challenge these findings, pivoting instead to an assertion that allowing the virus to rip unchecked through the community—something no serious critic of lockdown has ever suggested—would have led to more deaths. This is true enough, but there are other, more targeted ways to fight a nasty disease than to force the whole population, regardless of their age or state of underlying health, under more or less total house arrest. At no point, for example, does Hancock address the constructive case made for ‘focused protection’ by the scientists who wrote the [Great Barrington Declaration](#). It has become convenient for those who enforced lockdowns to pretend that they faced a binary choice between reacting foolishly, as indeed they did, and doing nothing at all.

Finally, it is somewhat comical to crack down on the behaviour of the physically fit while forcing the elderly to fend for themselves. In response to COVID-19, the UK government invaded areas of private life in which they should have no business. At the same time, they failed to shield the very places where they had nothing but business: the hospitals and care homes which we entrust our leaders to manage, yet where the virus spread most

fatally. Matt Hancock's performance exhibited all the wisdom of a man trying to prevent a burglary by welding the cat flap shut, but leaving the front door open.

At no point in the interview does Hancock offer any sign of regret about his personal involvement in the most serious violation of basic freedoms in British history. He is inextricably tied to a policy which ruined so many lives and to no good purpose. His only escape, short of a career-ending apology, is to insist that these vicious measures were unavoidably necessary to avert a plague-like death toll. All evidence to the contrary must therefore be dismissed as harmful pseudo-science. His upcoming book, if it sticks to this predetermined script, will not be very enlightening.

Too many political reputations are at stake for anything but a convenient version of the truth to emerge from the official enquiry into COVID-19. Such cynicism may well be premature, but there is no doubt that ministers like Hancock will do everything they can to ensure that their prejudices, if not their fingerprints, are all over the official report when it comes to be published. Real lessons will only be learned through the research efforts of independent historians, epidemiologists, and reporters who, like Wootton, challenge the consensus.

The battle over how to respond to COVID-19 might have come to an end, but expect no ceasefire. We have already entered the foothills of what comes next: a longer, far more important war over its history.