Twitter Thread by Gregg Gonsalves

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OK. I may get slaughtered here, but there is a kind of pundit who doesn't know what he doesn't know. I'm not talking about ordinary people on @Twitter who shoot the shit on a variety of topics, but people with millions of followers, readers. 1/

These are usually men, who will assume expertise because they've always been told they were the smartest in the room, were given a platform because of who they are, and feel no sense of humility when they decide to ramble off and take down others. 2/

Here I am talking about @NateSilver538 @mattyglesias and @DouthatNYT who have decided they are the arbiters of truth in science and public health. 3/

It started with the #ACIP recommendations on the next phase of #COVID19 vaccination (which as far as I know is still pending). All three of them are suggesting that #ACIP doesn't know what it's doing because there are discussions happening about how to manage trade-offs. 3/

All three believe age-based allocation is the only way to triage vaccine delivery and they've been scornful of the deliberation of #ACIP for talking about things like equity, essential workers, etc. 4/

I'll wait and see how the recommendations play out, but let it suffice to say that there are complex trade-offs that have to be considered and the "certainty" of these three gentlemen, their easy derision of the process is sorta gross. 5/

Don't get me wrong. I am all for criticizing scientists. I did it for years as an AIDS activist but what I think differentiates us from them is that we dug deep into the science, had mentorship from some great researchers, took on problems, analyzed them sometimes for years. 6/

We weren't spouting off for this week's column or a series of tweets. And we got things wrong and were ruthless with each other about our failures. 7/

But now @NateSilver538 and @DouthatNYT are going after "public health," suggesting they know the contours of what is scientific and "para-scientific." Go ahead fellas. Tell us what you really feel. 8/

Nate Silver in discussing ACIP over the weekend, decides that all of public health has got it wrong. 9/

I dunno Nate, is that the basic scientists who helped sequence the #SARSCoV2 genome, developed new tests for detecting the disease? 10/

Or the biostatisticians who analyzed the vaccine trial results, the modelers who have been helping hospitals gauge ICU capacity? 11/

It's all public health. I see. Yes. Those who've made sure the water you drink is safe, that you don't get food poisoning from your local restaurant, who've kept us from having other epidemics or battled other ones for, I don't know decades? 12/

Oh but it's not you, it's them the front-line public health workers who are making sloppy decisions out there. You mean, those who've gotten death-threats, who are screamed at from left and right for doing their jobs? 13/

One day we should go all Lysistrata on you. See how well you fare if public health went on strike. We would never do that because even if we get paid terribly, work long hours, get shit thrown at us, we do our jobs, from bench to the field, in research and practice. 14/

Now for @DouthatNYT who decided that once public health leaves the laboratory, it's all political, suspect and worthy of derision as "para-scientific." 15/

Again, dear Ross has no idea what people in public health do, but go ahead just now spray paint fraud, charlatan, all over us. Because that's "para-scientific" is a fancy word for. 16/

Politics. No politics in public health please for @DouthatNYT. No conception that public health in its practice is hemmed in by politics on every side. 17/

From the politics that make us sick--we call them the social determinants of health (I just heard Ross faint) to the policies we have to fight for to keep people healthy, public health is intertwined with politics, as it is a public not private science. 18/

What sends Ross off the deep end is that racial equity is being raised in the vaccine allocation discussions. Once we talk race, then it's politics for Ross, and he gets to weigh in. Ross always gets to weigh in. 19/

So, let's talk epidemiology. There are racial disparities with #COVID19 that have not be articulated with para-science," but a tried and true method called counting the bodies. The risk of death for African-Americans is far greater than that of their white counterparts. 20/

And when young people die? They are often again from African-American, Latino communities. This is what the data shows. So discussing racial equity in health isn't a conversation about affirmative action @Harvard. It's about understanding who gets sick, who dies. 21/

Yes a strong case can be made for age-based triaging of vaccine allocation. It doesn't take a pundit to see that. 22/

But in addition to age, race/ethnicity are a strong factor in predicting death from #COVID19 in the US. It's just the facts. 23/

So if you wanted to frame vaccine allocation around preventing the most deaths, you'd go with age+race/ethnicity. 24/

But some people might say you want to prevent "premature deaths,", which might skew vaccine allocation younger. 25/

You might also make a case for instance, for keeping schools open as a social priority, and that would mean teachers would be categorized as "essential workers," and be moved ahead in line. 26/

If you believe these vaccines actually prevent transmission rather than blunting serious disease alone you might want to cluster-bust and head towards prisons, jails, meatpacking plants and Amazon warehouses. 27/

The main point here? It's complicated. But not complicated for @NateSilver538, @mattyglesias & @DouthatNYT who've got the answers and will take down an entire field, well, a diverse set of fields under the rubric of public health with their arrogance and snark. 28/

Who is #ACIP? "14 of the members have expertise in vaccinology, immunology, pediatrics, internal medicine, nursing, family medicine, virology, public health, infectious diseases, and/or preventive medicine; one member is a consumer representative." 29/

But sure, put @NateSilver538, @DouthatNYT and @mattyglesias in charge. How hard can public health be? 30/

It's hard, getting harder. 31/ https://t.co/fQwzUohiGC