

# **The 'No True Scotsman' Argument for COVID Compliance**



El pelele (The Straw Manikin), Francisco Goya, 1791-92

There is growing suspicion among accredited health professionals and ordinary people that the media and official sources have not been candid with the public. People who are heavily invested in the official viral narrative, whether for lucrative financial reasons, or from credulous belief, career and reputation, or a dubious political agenda, can be expected to downplay or bury the alarming after-effects of pandemic policy decisions. For the facts appear to be otherwise than as regularly represented.

Vaccinated people may pose as great or greater a risk to society via transmission as do the unvaccinated. A [Johns Hopkins University study](#) of July 31, 2021 states: *Vaccinated and unvaccinated individuals have similar viral loads in communities with a high prevalence of the SARS-CoV-2 delta variant.* [The Lancet](#) finds “no correlation between vaccine-induced neutralizing antibody levels and viral loads or the development of symptoms. [Data](#) released by the British government show that vaccinated adults are dying at twice the rate of unvaccinated people, a clear case of vaccine-caused mortality. (See also Table 4 of the Excel document.) Even Dr. Fauci [admits](#) that the vaccines do not work as advertised. (Solution? More of the same.)

The mandates and diktats just keep on coming: mask wearing, social distancing, mandatory jabs for ourselves and our children, followed by additional boosters—indeed, bellwether Israel is now wargaming an “[Omega variant](#).” The controversy has clearly coalesced around the vaccines, with those who resist compulsion threatened with social exclusion and loss of livelihood. Nevertheless, [resistance](#) appears to be mounting.

As a result, a new strategy to convince and compel the hesitant has begun to announce itself. Given that the tyrannical practices of our authoritarian overlords have met with spreading opposition, another species of vaccine enforcer

has arisen whose effect is subtly pernicious, relying on softer appeals to vaccine conformity.

Psychiatrist Norman Doidge is an exemplary case, addressed in a [previous article](#) for *PJ Media* by my wife Janice Fiamengo, but worth pursuing further because of how [widespread](#) the gamut is becoming. Doidge published a lengthy essay in *Tablet* magazine in which he purports to understand the “hesitant,” stressing the need for compassion and sensitivity in dealing with those who are anxious, insecure or skeptical. Doidge substitutes persuasion for fiat, empathy for mandate in a clever deployment of the No True Scotsman argument, technically defined as a “logical fallacy” but actually a rhetorical strategy. In its initial syllogistic form, it goes something like this:

*No True Scotsman dislikes Scotch whiskey.*

*My friend dislikes Scotch whiskey.*

*Therefore, he is not a True Scotsman.*

He may be a Scotsman with different tastes—may all be well with him—but he is No True Scotsman. And that is unfortunate.

As the device entails, the wielder of the argument affects great sympathy for his interlocutor, and appears willing to adjust his position in the course of the discussion, but the implication nonetheless is: *who of sound mind would not wish to be a True Scotsman?* Doidge proceeds in the following schematic manner:

- 1. Establish your bona fides. Yes, I jumped into the raging river, but that involved a better destination than standing pat on the shore. You can trust me. I took the jab.*
- 2. But we need to understand the “other,” the “hesitant,” who may have his reasons. That is only just and fair. We must be considerate.*
- 3. Still, the vaccines are the way to go. One may recognize*

*that the history of vaccinology is tempestuous and the current imbroglio is no different. Even so, the benefit of vaccination outweighs the risk. For those who continue to object, persuasion is a better operating principle than coercion.*

That's really what Doidge's 40-page thesis boils down to. He counsels that the hesitant should make their own decision in consultation with their doctors. But he must know, as a medical practitioner himself, that any doctor who goes afoul of the current "wisdom" runs the risk of losing his license or being fired. Such consultations are a sham. In almost every case, the patient will be advised to get the vaccine.

Additionally, his statistics are unfounded, that is, they are of the "official" variety, are not reliably researched and are accepted on faith. Doidge informs us, with reference to the vaccines, that only "one in 500,000 cases cause death, that we have a 99.999 percent chance of it not happening," but gives no dispositive source for his rosy estimates and places the blame for vaccine reluctance on something called the BIS, or behavioral immune system, a circuit in the brains of humans (and other animals) "triggered when we sense we may be near a potential carrier of disease."

Of course, "the BIS is turned on in people on both sides of the debate," but in the framework of his ultimately pro-vaccine argument, it is the fear that an injected substance may be poisonous that sets the BIS "off and running." This is a very convenient materialist explanation, which reduces conscious investigation to mere chemistry and pre-determined factors. Doidge has made his reputation as a [brain chemistry expert](#) and is obviously prone to random circuit hunting, which has nothing to do with sober, impartial, *mindful* research into the data that the [best immunologists, virologists and epidemiologists](#) have made available. The alphabet of increasing COVID variants among the vaccinated is now well known and inspires a degree of wakeful caution that has



nothing to do with this or that broad-spectrum brain circuit. The BIS strikes me as nothing more or less than BS.

Another troubling issue is the self-contradictory, almost schizophrenic drift of the essay, for in the voluminous third section Doidge targets the financial collusion between Pharma, government, academia and the diverse agencies, as well as the total lack of transparency in these corrupt arrangements, the bad testing, the equivocal status of the reports, and the many virulent downsides to the vaccines—yet still recommends the advantages of vaccination, a calculus that defies elucidation.

Doidge is a True Scotsman. He is also a Fake Democrat. While approving of Alexis de Tocqueville's and John Stuart Mill's political philosophy that the tyranny of the majority should not prevail over the minority, Doidge himself argues that we can "either choose, as we have, to coerce [the hesitant] with economic and social deprivation. Or we can work to better engage them." The upshot is that there is only one decision that can be reasonably made, whether one is forced or nudged. The dissident is to be coddled, understood, respected, even joined in his reluctance. Nevertheless, vaccination remains the endpoint.

The argument purveyed by such "miserable comforters" (*Job*, 16:2) is like saying: "On balance and despite the casualties, the war is absolutely necessary, but I'm against conscription. Instead, people should be persuaded to enlist." To persuade people out of kindness and understanding to take an untested and experimental therapeutic substance that may generate serious adverse effects or has proven to be inadequate to its stated purpose is nothing short of unprofessional and disingenuous.

And this is why people must be continuously informed and alert. Coercion is generally discernible and can be opposed via mass demonstrations, [strikes and walkouts](#). But it is not easy to discern the outlines of duress and compulsion when it

is couched in the language of deep concern and affable rapport. "No True Scotsman" suasion is genial and devious, and as a result is cannily insidious. It must be resisted, seen through and rumbled. There is too much at stake for unexamined trust. There are too many factors involved in the COVID drama that remain questionable, whether vaccines, mandates or the tactics of our kilted benefactors.