

Health Experts Admit Outdoor Mask Wearing Is Ridiculous

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According to an expert on viral transmission mechanics, brief outdoor encounters present a “very low risk” for transmission of COVID-19. Viral particles quickly disperse in outdoor air, so the risk of inhaling aerosolized virus from passersby is negligible

Using mathematical models, Italian researchers have calculated the amount of time it would take for you to contract the SARS-CoV-2 virus outdoors in Milan. If 10% of the population were infected, you would require 31.5 days of continuous outdoor exposure to inhale a dose of virus sufficient to transmit infection

Other research has shown your odds of transmitting COVID-19 are 18.7 times greater indoors than in an open-air environment

Several investigations looking at SARS-CoV-2 RNA concentrations in air have come up empty. No detectable RNA was found in air samplings from various locations in Wuhan, China, Venice in northern Italy, or Lecce in southern Italy, during the pandemic

Germany’s first registry for side effects of mask wearing on children has identified 24 physical, psychological and behavioral health issues, including irritability (60%), headache (53%), difficulty concentrating (50%), reduced happiness (49%), reluctance to go to school/kindergarten (44%), malaise (42%), impaired learning (38%) and drowsiness or fatigue (37%)

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After a year of questionable advice on masking, ranging from head-scratching and mildly amusing to outright laughable — such as [Spain mandating use of face masks while swimming](#) in the ocean — health experts who counter the prevailing narrative on universal masking are finally getting some airtime in the mainstream media.

In an April 22, 2021, article in The New York Times,¹ Tara Parker-Pope cites several doctors and virologists who advise against universal mask wearing outdoors.

Health Experts Weigh in on Outdoor Mask Wearing

Among them is Linsey Marr, a professor of civil and environmental engineering at Virginia Tech and an expert on viral transmission mechanics, who notes that brief outdoor encounters, such as walking past someone on a sidewalk or hiking trail, present a “very low risk” for transmission.

“Viral particles quickly disperse in outdoor air, and the risk of inhaling aerosolized virus from a jogger or passers-by is negligible,” Marr told Parker-Pope.² “Even if a person coughs or sneezes outside as you walk by, the odds of you getting a large enough dose of virus to become infected remain low.”

Similarly, Dr. Muge Cevic, a clinical lecturer of infectious disease and medical virology at the University of St. Andrews School of Medicine in Scotland, is quoted saying:³

“I think it’s a bit too much to ask people to put the mask on when they go out for a walk or jogging or cycling. We’re in a different stage of the pandemic. I think outdoor masks should not have been mandated at all. It’s not where the infection and transmission occurs.”

Parker-Pope also quotes Dr. Nahid Bhadelia, an infectious diseases physician and medical director of the special pathogens unit at Boston Medical Center:⁴

“Let me go for my run, maskless ... Given how conservative I have been on my opinions all year, this should tell you how low [the] risk is, in general, for outdoors transmission for contact over short periods ...”

Vaccinated or Not, Masks Don’t Work

Of course, most all of the doctors quoted in The New York Times article make the claim that vaccination lowers your risk of COVID-19, thus you can be more lenient when around other vaccinated individuals. I’ve written many articles explaining why [this narrative is nonsensical and just flat out wrong](#).

In a nutshell, it makes no sense because all COVID-19 “vaccines” are designed to do is reduce your symptoms if or when you get infected. They are not designed to prevent infection, they do not give you immunity against SARS-CoV-2, and they do not prevent transmission, so you can still spread the virus to others if you get infected.

All of this means you present the same “risk” to others whether you’re vaccinated or not. And, to be clear, if you have no symptoms of respiratory infection, the health risk you pose to others is virtually nonexistent.⁵ You simply cannot spread an infection you do not have.

The minuscule bits of viral RNA that the PCR test can pick up if run through too many amplification cycles — thereby rendering a false positive result — are not infectious. You need a whole, and live, virus for that.

CDC Grants Special Permission to Fully Vaccinated

Despite science being rather clear on these points, at the end of April 2021, the U.S. Centers for Disease Control and Prevention eased its outdoor mask guidelines for vaccinated-only.

If you’ve gotten all of the required doses of the COVID-19 “vaccine,” you no longer need to

wear a mask outdoors when in small groups or when exercising. Masks are still recommended when in crowded outdoor venues, though, such as sports stadiums. According to another New York Times article:⁶

“President Biden hailed it as a landmark moment in the pandemic, wearing a mask as he approached the lectern on a warm spring day on the White House grounds — and pointedly keeping it off as he walked back into the White House when he was done. ‘Go get the shot. It’s never been easier,’ Mr. Biden said. ‘And once you’re fully vaccinated, you can go without a mask when you’re outside and away from big crowds.’”

Researchers Set the Record Straight

Breaking with The New York Times’ typical propaganda, Parker-Pope actually goes on to cite research⁷ published in February 2021 in the Environmental Research journal:

“To understand just how low the risk of outdoor transmission is, researchers in Italy used mathematical models to calculate the amount of time it would take for a person to become infected outdoors in Milan.

They imagined a grim scenario in which 10% of the population was infected with the coronavirus. Their calculations showed that if a person avoided crowds, it would take, on average, 31.5 days of continuous outdoor exposure to inhale a dose of virus sufficient to transmit infection.

‘The results are that this risk is negligible in outdoor air if crowds and direct contact among people are avoided,’ said Daniele Contini, senior author of the study and an aerosol scientist at the Institute of Atmospheric Sciences and Climate in Lecce, Italy.

Even as more-infectious virus variants circulate, the physics of viral transmission outdoors haven’t changed, and the risk of getting infected outdoors is still low, say virus experts.”

Other research⁸ has shown your odds of transmitting COVID-19 are 18.7 times greater indoors than in an open-air environment. Several investigations looking at SARS-CoV-2 RNA concentrations in air have also come up empty, including air samplings done in various locations in Wuhan,^{9,10} China, Venice in northern Italy, and Lecce in southern Italy.¹¹

The Problems We Ignore When Mandating Masks

Aside from all the research demonstrating that mask wearing is an ineffective and largely pointless strategy against respiratory viruses — which I’ve detailed in several articles, including [“More Evidence Masks Don’t Work to Prevent COVID-19,”](#) [“Mindless Mask Mandates Likely Do More Harm Than Good”](#) and [“Landmark Study Finds Masks Are Ineffective”](#) — there’s the issue of potential adverse effects.

This part of the equation has been roundly ignored since the very beginning, even though there are both [environmental drawbacks to universal mask use](#) and individual health hazards, including the following:¹²

- Wearing a face mask increases breathing resistance, and since it makes both

inhaling and exhaling more difficult, individuals with pre-existing medical conditions may be at risk of a medical emergency if wearing a face mask.

This includes those with shortness of breath, lung disease, [panic attacks](#), breathing difficulties, chest pain on exertion, cardiovascular disease, fainting spells, claustrophobia, chronic bronchitis, heart problems, asthma, allergies, diabetes, seizures, [high blood pressure](#) and those with pacemakers. The impact of wearing a face mask during pregnancy is also wholly unknown.

- Face masks can reduce oxygen intake, leading to potentially hazardous oxygen deficiency (hypoxia).
- They also cause rapid accumulation of harmful carbon dioxide, which can have significant cognitive and physical impacts. Germany's first registry^{13,14} recording the effects mask wearing has on children, has identified 24 physical, psychological and behavioral health issues associated with wearing masks. Recorded symptoms include:

"... irritability (60%), headache (53%), difficulty concentrating (50%), less happiness (49%), reluctance to go to school/kindergarten (44%), malaise (42%), impaired learning (38%) and drowsiness or fatigue (37%)."

Of the 25,930 children included in the registry, 29.7% reported feeling short of breath, 26.4% being dizzy and 17.9% were unwilling to move or play. Hundreds more experienced "accelerated respiration, tightness in chest, weakness and short-term impairment of consciousness."

- Wearing a face mask increases your body temperature and physical stress, which could result in an elevated temperature reading that is not related to infection.
- All face masks can cause bacterial and fungal infections in the user as warm, moist air accumulates inside the mask. This is the perfect breeding ground for pathogens. This is why disposable medical masks were designed for short-duration, specific-task use only, after which they are supposed to be discarded.

Medical doctors have warned that bacterial pneumonia, facial rashes, fungal infections on the face,¹⁵ "[mask mouth](#)" (symptoms of which include bad breath, tooth decay and gum inflammation) and candida mouth infections¹⁶ are all on the rise.

A study^{17,18} published in the February 2021 issue of the journal Cancer Discovery also found that the presence of microbes in your lungs can worsen lung cancer pathogenesis and can contribute to advanced stage lung cancer. The same types of bacteria, primarily Veillonella, Prevotella, and Streptococcus bacteria, can also be cultivated through prolonged mask wearing.¹⁹

- With extended use, medical masks will begin to break down and release chemicals that are then inhaled. Tiny [microfibers are also released](#), which can cause health problems when inhaled. This hazard was highlighted in a performance study²⁰ being published in the June 2021 issue of Journal of

Mask mandates also represent another erosion of freedom, and normalizes the false notion that people are sick unless proven healthy, and that it's acceptable to be forced to cover your face just to go about your daily life, even when you're outdoors.

The public narrative is building prejudice against people who refuse to wear masks or [get an experimental vaccine](#), such that some are now fearful of people who aren't masked or those who choose not to get vaccinated. With societal norms rapidly changing, and an increasingly authoritative environment emerging, it raises the question of whether or not the public will [continue to blindly obey](#), no matter the consequences.

The Only Type of Mask That Is Safe and Effective

To provide any benefit whatsoever, users must be fitted with the right type and size of respirator, and must undergo fit testing by a trained professional. However, N95 respirators, even when fitted properly, will not protect against viral exposures but can adequately protect against larger particles.

Surgical masks, which do not seal to your face, do not filter out anything. They are designed to prevent bacteria from the mouth, nose and face from entering the patient during surgical procedures, and researchers have warned that contaminated surgical masks actually pose an infection risk.²¹ After just two hours, a significant increase in bacterial load on the mask was observed.

Nonmedical cloth masks are not only ineffective, but also particularly dangerous as they're not engineered for effective purging of exhaled carbon dioxide, making them wholly unsuitable for use.

The only type of mask that is actually safe and effective to wear is the gas mask kind of respirator you'd use to protect yourself against painting fumes, organic vapors, smoke and dust. These respirators are built to filter the air you breathe in, and to get rid of the carbon dioxide and humidity from the air you breathe out, thereby ensuring there's no dangerous buildup of carbon dioxide or reduction in oxygen inside the mask.

Where Are the Data Supporting Mask Mandates?

While there are a lot of data and science showing that masks are ineffective against viral transmission and that mandates do nothing to protect public health, government spokespeople simply continue spouting the propaganda narrative that mask wearing saves lives. "Listen to the experts; follow the science," they say. Yet they have yet to produce a single credible piece of scientific support for universal mask wearing.

Where are the data showing that masks work? Where are the data showing it lowers infection and hospitalization rates? Where is the evidence that mask mandates have had any positive influence at all on the COVID-19 pandemic during these past 14 months? We ought to have a mountain of data to support it by now.

The mask is a part of a larger apparatus of a movement of unelected, wealthy bureaucrats, who are robbing our freedoms and perpetuating lies. ~ North Dakota House Representative Jeff Hoverson

I suspect the reason we don't have massive studies filled with global data showing that mask mandates were a breakthrough success is because they either had no impact, or made matters worse. Case in point: "Texas, Mississippi See Lowest COVID Cases in Almost a Year 1 Month After Lifting Mask Mandate," Newsweek reported in an April 6, 2021, article.²²

Yes, ironically, despite fears that lifting mask mandates would result in hospitals overflowing with COVID-19 cases, the opposite actually happened. Both Texas and Mississippi are now, four weeks later, reporting their lowest case and COVID-related mortality numbers since May 2020.

North Dakota Aims to Secure Freedom From Mask Mandates

A special ray of hope shines in North Dakota, where the House of Representatives has approved a bill (H.B.1323) that would actually ban schools, businesses and local governments from making face masks a requirement for service. The bill, which passed 50 to 44 at the end of February 2021, is now being reviewed by the Senate.

The bill's sponsor, Rep. Jeff Hoverson, characterized the state's mask mandate, imposed in November 2020, as "diabolical silliness."²³ He told the Prairie Public Press he'd received "a lot of emails" from constituents opposed to mask mandates, adding:²⁴

"They do not want North Dakota to get sucked into what is becoming obvious. The mask is a part of a larger apparatus of a movement of unelected, wealthy bureaucrats, who are robbing our freedoms and perpetuating lies."

Yes. That about sums it up.

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Notes

^{1, 2, 3, 4} [New York Times April 22, 2021 \(Archived\)](#)

⁵ [Nature Communications November 20, 2020; 11 Article number 5917](#)

⁶ [The New York Times April 27, 2021](#)

⁷ [Environmental Research February 2021; 193: 110603](#)

⁸ [MedRxiv March 3, 2020 DOI: 10.1101/2020.02.28.20029272](#)

⁹ [Nature June 2020; 582\(7813\):557-560](#)

¹⁰ [Preprints May 29, 2020: 202005464](#)

- ¹¹ [Environ Int January 2021; 146: 106255](#)
- ¹² [Todayville June 2020](#)
- ¹³ [Research Square, 2021; doi.org/10.21203/rs.3.rs-124394/v2](#)
- ¹⁴ [Montana Daily Gazette, January 25, 2021](#)
- ¹⁵ [Global Research January 21, 2021](#)
- ¹⁶ [The Crimson White August 20, 2020](#)
- ¹⁷ [Cancer Discovery February 2021 DOI: 10.1158/2159-8290.CD-20-0263](#)
- ¹⁸ [AZO Life Sciences November 12, 2020](#)
- ¹⁹ [Global Research February 3, 2021](#)
- ²⁰ [Journal of Hazardous Materials June 5, 2021; 411: 124955](#)
- ²¹ [Journal of Orthopaedic Translation July 2018; 14: 57-62](#)
- ²² [Newsweek April 6, 2021](#)
- ²³ [Fox News February 23, 2021](#)
- ²⁴ [Prairie Public February 23, 2021](#)

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