



lain Davis

PSEUDO PANDEMIC

NEW NORMAL TECHNOCRACY

New Normal Technocracy

Iain Davis

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DEDICATIONFor my Dad

You were right

CONTENTS

р4 - Introduction p9 - Chapter 1 - Pseudopandemic p22 - Chapter 2 - Global Public Private Partnerships p37 - Chapter 3 - Who Cares About The Risk p45 - Chapter 4 - Keeping Us Safe p58 - Chapter 5 - A Testing Time p74 - Chapter 6 - Pseudopandemic Lockdowns p93 - Chapter 7 - Covid Catch 22 p104 - Chapter 8 - Unthinkable Happens p121 - Chapter 9 - The Pseudopandemic Opportunity Realised p136 - Chapter 10 - The Official Story p151 - Chapter 11 - Hybrid War p167 - Chapter 12 - Lockdown Mortality p184 - Chapter 13 - Core Beliefs p197 - Chapter 14 - Population Control Eugenics * p211 - Chapter 15 - Sustainable Eugenics p225 - Chapter 16 - Technocracy Rising p236 - Chapter 17 - Constructing The Technate p250 - Chapter 18 - Pseudopandemic Motive p266 - Chapter 19 - Faith In The Eco-Dictatorship p285 - Chapter 20 - Behaviour Change p300 - Chapter 21 - Pseudopandemic Vaccines p315 - Chapter 22 - Making An Extremist p327 - Chapter 23 - The Biosecurity State p340 - Chapter 24 - Proper Planning Prevents Poor Performance p358 - Chapter 25 - Money For Nothing p367 - Chapter 26 - Private Wealth Transfer

p378 - Chapter 27 - Pseudopandemic Trigger Event p388 - Chapter 28 - We Can Reset The World

INTRODUCTION

We are living through a global transformation. Our society, culture, economy and even our humanity is undergoing a process of change at the behest of our leaders. This book attempts to explain who those leaders are, what the transition is propelling us towards and why our leaders are taking us there.

The policy response to the COVID 19 crisis has been opposed by a large minority but supported by the overwhelming majority. Among those who question what we are told about COVID 19 are a contingent who wish to exercise their *inalienable rights* and freedoms. Often described as *anti-lockdown*, *anti-science*, *anti-vaxxers* or *conspiracy theorists*, on the whole, they are not opposed to anything other than dictatorship and slavery. Rather they are *pro-freedom*, *pro-science* (*pro-medical science*) and *pro-truth*.

The people who have been marginalised, censored, berated by many, and physically attacked by the authorities, are the people who most vociferously advocate the freedoms our democratic societies are supposedly based upon. The freedoms which generations before us struggled, fought and died to protect. While government frequently exult us to honour this sacrifice it seems it is currently inconvenient for them to do so.

Those who appear to unquestioningly support the policy response to the COVID 19 pandemic claim that these freedoms and rights don't matter when we are faced with a global emergency. It is difficult to understand this argument.

In what way are freedom of speech, expression and thought dangerous? Dangerous to whom? How do they inhibit our ability to respond to a genuine emergency?

Governments around the world are determined that we will embrace the idea of *human rights*. They claim that everything they do is based upon these *rights* and their determination to *keep us safe*.

Human rights are permissions written down on pieces of paper by other human beings. A system of global human rights is a system of government issued permits which defines what we are or are not allowed to do.

As human rights are just words written on pieces of paper they can be changed, reinterpreted and ignored. They are neither immutable nor inalienable. This is why governments are so eager for us to place our faith in *human rights*. It enables them to tell us what is permitted.

Governments are pathologically allergic to the concept of *inalienable rights*. They are mentioned just once in the preamble to the United Nations Universal Declaration of Human rights and are omitted entirely from the Declaration itself.

Article 2 states:

"Everyone is entitled to all the rights and freedoms set forth in this Declaration."

In other words, no one is entitled to any rights that are not stipulated in the Declaration. Unlike inalienable rights, which every human being is born with and no human being can legitimately deny, *human rights* are a political construct.

The Declaration then goes on to describe our rights to life, liberty, health, education and various freedoms. Who could disagree with these noble principles?

The Universal Declaration of Human Rights employs a form of propaganda called *Card Stacking*. By presenting a lengthy list of righteous humanitarian goals, to which no reasonable person could object, it hides the insidious and unacceptable reality. Unless we are observant we are easily fooled by *Card Stacking*. The devil is *always* in the detail.

Article 29 states:

"In the exercise of his rights and freedoms, everyone shall be subject only to such limitations as are determined by law solely for the purpose of securing due recognition and respect for the rights and freedoms of others and of meeting the just requirements of morality, public order and the general welfare in a democratic society. These rights and freedoms may in no case be exercised contrary to the purposes and principles of the United Nations."

Human rights are not rights at all. They can be denied by any law (legislation) enacted by any government (politician). As we have just experienced with the Coronavirus Act in the UK, human rights are expendable to protect "public order and the general welfare." Under the U.N. Declaration they can be and are ignored whenever the government sees fit. They are nothing but empty words written on pieces of paper.

A society based upon human rights has no rights. Those who think human rights are expendable in emergencies are correct. They are expendable "whenever."

What they fail to grasp is that inalienable rights can never be extinguished. Throughout this book the consistent, unspoken theme is the disregard for our inalienable rights. Not just among those who intentionally ignore them but also among a population who appear to have forgotten what they are and why, without them, we have nothing.

Inalienable right are not permits bestowed upon us by government. They are universal concepts of natural justice inherent to Natural or God's law. They exist in nature, not on pieces of paper. They are immutable and inalienable and can be perceived by every emotional being, including humans.

No one needs a written law to tell them that it is wrong to harm a defenceless child or commit other acts of violence. We don't need to be told that it is wrong to take something that is not ours without the permission of the owner. We feel that it is wrong, we experience our wrongdoing as guilt. Inalienable rights are emotionally resonant and, as soon as we are able to experience emotion, we can sense them.

We are born capable of emotion. We are born with the ability to understand the difference between right and wrong. We are born with inalienable rights. The few of us who are incapable of making the distinction are suffering from personality disorders.

Sociopaths and psychopaths are unable to distinguish between right and wrong because they lack natural human emotional responses. Their egos convince them that they are *special* and therefore they do not feel the need to observe other's rights. For them, only that which serves their purpose has value. Inalienable rights are incomprehensible for the psychopath and the sociopath.

When these people collude, their only goal is to serve their own collective interests and deny the rest of us our rights. Throughout our history generations of these rights abusers have caused untold chaos and human misery in pursuit of their ambitions. They are and always have been the most dangerous threat we have ever faced. Their actions are consistently wrong and, as sovereign human beings with inalienable rights, it is our duty to disarm any undue influence they may hold over anyone.

The rest of us innately possess empathy, remorse and compassion. We try to avoid antisocial behaviour, where we might cause harm or loss to others, because we instinctively know that we do not have the right to hurt other people. If we act in good conscience and in observance of our own and other's rights, whatever we do is right and it is our right to do it.

Inalienable rights are solely defined by what is right and what is wrong. Anything we do which does not cause harm or loss to another human being (including denial of their rights) is right and it is our right. We are free to exercise our rights at all times and "freedom" is defined as the unhindered freedom to exercise our rights.

We do not define what is right or what is wrong. We don't decide to feel guilt or shame, nor can we feel assured by our own honourable action if that assurance isn't genuinely felt.

Rights are not our property. We don't own them just as we don't own the physical space we inhabit. We occupy our place in space and time and we occupy our individual rights. While we live, we are the rightful custodian of our rights but no one *permits* us to occupy them and they cannot be taken from us. They are our inalienable rights.

While we exist it is impossible for us to give away our rights, just as it is for us to give away our place in space and time. Our rights encapsulate us but we don't

possess them. When we die we no longer occupy a physical place in space and time but both continue in our absence, as do inalienable rights.

To fail to defend our rights against those who would seek to stop us exercising them contravenes Natural Law and is therefore wrong. We all know this, we naturally react defensively when we feel someone is attempting to deny our freedom to exercise our inalienable rights.

Psychopaths and sociopaths have learned this truth from experience. They have come to place great value upon deception as the best way to coerce us into accepting that they have the right to ignore our inalienable rights. By neither exercising nor defending our inalienable rights we permit them to *do as they wilt*.

This abrogation of our rights *always* causes harm because psychopaths and sociopaths *always* harm or cause loss to others. To idly stand by and do nothing, in the certain knowledge that harm or loss is being inflicted upon others, is negligent. To passively allow harm or loss to be inflicted upon ourselves is equally negligent. Negligence is wrong and we have no right to be negligent.

It is *always* wrong to initiate the use of force but we might have to use minimum force to defend our rights against those who commit the wrong of trying to deny us our rights. We may harm them in that defence, but we did not initiate the use of minimum force and it is our duty as human beings to defend our rights.

Anything which, either by intent or neglect, initiates the causation of harm or loss to another human being is wrong. It is not a right that any human being can ever exercise. Inalienable rights are universal and are undeniably occupied *in equal measure* by every human being. All those who cause harm are wrong and we must defend our individual rights because they are everyone's rights *in equal measure*.

The only justice is natural justice. It is the restoration of right when a wrong is committed. Natural justice is an expression of Natural Law (God's Law) which is the universal balance between chaos and order. Natural Law is unforgiving, it does not care what we think or imagine to be true. It is balance, it is the truth and it is absolute.

Those who do not respect inalienable rights must be brought to natural justice. We all share the responsibility to defend everyone's freedom *in equal measure*. All peaceable means must be exhausted in the pursuit of justice. The minimal use of force is solely a right of self-defence but an attack on one human being's inalienable rights is an attack on all human beings inalienable rights *in equal measure*.

So far, despite all the community groups we frequently identify with, such as English, Democrat, Black, LGBTQ+, Green or Conservative, the community we have universally failed to identify with is *human being*. Instead, we have been convinced to divide ourselves into ever smaller social subdivisions in search of the individuality which increasingly eludes us and can seemingly only be expressed in terms of the group we believe we belong to.

It is as if identifying as a human being, the most intelligent, creative and resourceful creature ever to walk the Earth, is somehow not good enough.

Or perhaps it is because doing so would force us to confront our existence. Rather than express our individual truth, as many seem to want to do, we would need to accept that there is only one abiding truth and it is not relative to us. We are a part of it.

We would be one among 7.8 billion other souls who are not "other" but rather family. Regardless of our nationality, gender, ethnicity, age, sexual orientation, disability or what team we support, we would be part of the whole and if one of us suffers we all suffer.

Instead of defining our individuality through our affiliation to a belief system or a social construct, we would have to do it through our own independent thoughts and actions. We would be entirely responsible for ourselves and, as human beings, we would share an *equal measure* of responsibility for each other and the conduct of all humanity. We would have no one to blame for our travesties but ourselves and all achievements would be ours.

We have been deceived into imagining we have *human rights* and in doing so we have neglected our duty to defend humanity's inalienable rights. Our irresponsible behaviour, apathy and credulity has brought us, most assuredly, to the brink of a global dictatorship.

Whether that malevolent plan succeeds or fails is up to us. If you seek a leader to take responsibility and to stand up against this tyranny then look in the mirror.

Many will strongly disagree with the conclusions in this book. This is as it should be. There's nothing wrong with debate, it is the silencing of debate that should concern us. Evidence is cited throughout *Pseudopandemic*. It has been necessary to provide links to archived citations because many of the scientific articles and papers, news reports and qualified opinion pieces have already been censored.

I do not assert that "Pseudopandemic" is the truth, only that I have tried to present the truth to the best of my knowledge and understanding. You have the evidence before you, please explore it, look for more and form your own conclusions. Freedom is your inalienable right. Make of it what you will.

"Our culture is predicated upon the idea that truth in speech is of divine significance. It is the fundamental presupposition of our culture. If you believe that then you act it out and you take the consequences. You are going to take the consequences one way or the other. So do you want the truth on your side or do you want to hide behind falsehoods?"

[Jordan Peterson]

Chapter 1 - Pseudopandemic

COVID 19 was a *pseudopandemic*. The threat level suggested by those running the *psychological operation* was a lie. It was a fraud designed to fool you into abandoning your inalienable rights and freedoms. The *core conspirators* objective was to enable the reset of the global economy, the world's monetary system and its political and social structure, simply to further their own interests.

We are going to examine the evidence which exposes the *pseudopandemic* fraud and the likely perpetrators. The evidence is cited throughout. Please check it yourself, look for more and make up your own mind. We will necessarily cover some extremely contentious issues and you probably won't agree with some of the conclusions drawn. This is as it should be.

Disagreement and open, evidence-based dialogue is a vital component of any healthy, free society. One of the travesties of the *pseudopandemic* has been the erosion of critical debate. However, it was designed to lay the foundation of a global tyranny and no totalitarian system can tolerate dissent.

The COVID 19 *pseudopandemic* wasn't the first *pseudopandemic* but it was the first to be fully implemented and exploited. It seems previous attempts may have been trial runs.

This time, those responsible, having learned from their previous efforts, thoroughly prepared [1] for their pseudopandemic operation. They perfected the strategies and techniques required to convince the population that the scale of the public health threat was overwhelming. In reality, as pseudopandemic proponents admit, it was the least significant pandemic humanity has faced in the last 2000 years. They even had to change the definition of "pandemic" to describe it as such.

The COVID 19 *pseudopandemic* crime moved the *core conspirators* much closer to their <u>longstanding objectives</u> [2]. On this occasion the *pseudopandemic* delivered on its earlier promise.

While this *pseudopandemic* was fundamentally a deception, this doesn't suggest that pandemics aren't a genuine threat. Ebola Hemorrhagic Fever (EHF) is a truly terrifying disease. It has the potential to become a deadly global pandemic. Throughout history, pandemics have threatened populations and we have every reason to be wary of the next. COVID 19 just wasn't one of them.

Seen by many as one of the world's leading public health experts, Bill Gates referred to COVID 19 as Pandemic One [3]. He wrote:

"I grew up learning that World War II was the defining moment of our parents' generation. In a similar way, the COVID-19 pandemic—the first modern pandemic—will define this era. No one who lives through Pandemic One will ever forget it."

COVID 19 was a *pseudopandemic* because a powerful group capitalised upon a respiratory disease, with a relatively low mortality rate, to create the illusion of a dangerous global pathogen. COVID 19 itself wasn't a "hoax." While the cause of the disease and its origin are debatable, people certainly became ill, some seriously and sadly many died.

COVID 19 was a disease with specific symptoms which required very careful medical diagnosis. Otherwise the wider set of symptoms could <u>appear largely indistinguishable</u> [4] from other respiratory illnesses and the risk of misdiagnosis was high. This risk was compounded by the global reliance upon tests which were not diagnostic tools and were incapable of identifying a COVID 19 *"case."*

Unusually, the hypoxia (low blood oxygen levels) and hypercapnia (high blood Co2 levels) seen in genuine COVID 19 cases <u>did not appear to correspond</u> [5] to the expected loss of respiratory system compliance, common to other causes of Acute Respiratory Disease Syndrome (ARDS.) These specific COVID 19 symptoms could only be revealed through detailed medical examination. No test in isolation was capable of identifying COVID 19.

Far from protecting the public from the disease, the policy response to COVID 19 caused immense additional suffering. Many people died before their time as a direct result of political decisions. If we acknowledge that this was a contrived event, we must also conclude that the perpetrators were willing to use policy as a weapon to cause additional deaths in pursuit of their objectives.

History is littered with tyrannical despots who killed people for their own ambitions. We have done nothing to guard against this happening again. In many respects the perpetual push towards the centralisation of global authority, coupled with ever more sophisticated and devastating weapons of mass destruction, has increased the risk of genocide.

In a June 2020 interview, convened by the US Chamber of Commerce, Bill Gates warned the world about the next pandemic. He has an intimate knowledge of the deliberations of the World Health Organisation; he has access to the latest public health research, related science and predictions. We would be wise to take note of his words:

"We will have to prepare for the next one. That, you know...I'd say....er.....will get attention next time."

While the COVID 19 *pseudopandemic* was essentially a confidence trick, this doesn't mean the next pandemic won't pose a real global health threat. It would be foolish to imagine that people who are capable of orchestrating the *pseudopandemic* wouldn't be willing to exploit a far more deadly contagion.

Nor does it suggest there is no need to observe proper public health standards or maintain effective health monitoring systems. In fact, awareness of the *pseudopandemic* demands that we do. If our current systems weren't so corrupt

perhaps we could have both spotted the deception and implemented a more effective public health response to COVID 19.

The *pseudopandemic* is first and foremost a crime. There are real people who are guilty of it. This book is written in the firm hope that the plan ultimately fails and that we never allow our society to be manipulated by criminals again.

A crime consists of specific elements. It must be a voluntary act or wilful omission (actus reus) driven by dishonourable or mendacious intent (mens rea - guilty mind). It must also contravene a law. In this case the COVID 19 pseudopandemic appears to be both a conspiracy to commit fraud (under Common Law) or a Joint Criminal Enterprise [6] (under International Law.)

In order to convict the perpetrators of the *pseudopandemic* fraud, a jury would need to see evidence of the *categorical trinity*. They must be satisfied, beyond any reasonable doubt, that the accused had the means, motive and opportunity to commit the crime.

Obviously a global *pseudopandemic* is no ordinary fraud. The scale is immense and the complicit number in millions. However, the vast majority involved in perpetuating the scam were innocent. They demonstrated neither *actus reus* nor *mens rea*. Just like the billions of victims around the world, they too were duped.

Contrary to popular belief, in order for a global conspiracy to work, there is no need for a large number of conspirators. In fact, if the conspiracy stands any chance of success, it is vital that only a few have any knowledge of it. The more people who know, the more likely it is to fail.

A small number of people exerting world-wide control over vast, complex systems is nothing unusual. There are many multinational corporations and government agencies who manage global operations using this top down, compartmentalised, authoritarian structure.

Nor is it cheap. Only those with the deepest pockets can possibly be the architects of the *pseudopandemic*. The guilty are among their number.

At this stage all we can have are suspicions. In order to formally identify the guilty we would first need to launch a truly independent global investigation. Only the evidence can reveal the suspects and only lawfully convened juries, invested with all judicial *authority*, can consider that evidence and convict the guilty on its merits.

For this reason all individuals and organisations named in this book are rightfully considered innocent until proven guilty. No crime is alleged against anyone or any group.

Centralised global authority and <u>compartmentalisation</u> [7] enabled the COVID 19 *pseudopandemic* to pass largely undetected. While the voices challenging the "official narrative" were many, they remained a minority. Their objections and the evidence they presented was widely censored and the broader population accepted

the *pseudopandemic* story. The vast majority were deceived into believing they faced a genuine global pandemic and a severe public health threat.

The evidence is now incontrovertible. The *pseudopandemic* was a psychological operation used to control billions through fear. By looking at this evidence we can identify the suspects who had the means, opportunity and motive to commit the greatest fraud ever perpetrated on humanity.

Centralised authority combined with thorough planning and preparation made the *pseudopandemic* possible. This enabled a tiny group of *core conspirators* to control the behaviour of billions.

They abused our trust and sold us nothing but disinformation. Billions of us believe that the global system of authority has our best interests at heart. Consequently we were willing to comply with our orders, wrongly assuming they were intended to *keep us safe*.

This belief in benign authority isn't rational. History should teach us to be sceptical. Unfortunately, our collective faith in authority allowed the *pseudopandemic* to proceed largely unchecked.

When a *global health authority* told us the threat level was severe we were already programmed to accept it. The global authority had no need to prove anything. A simple declaration sufficed, as their authoritarian status imbued them with the power to define reality. No lesser authority could challenge them.

The *core conspirators* control the system of global, compartmentalised authority. For the *pseudopandemic* to succeed they only needed to command a small cadre of well placed individuals. They <u>formed the inner ring</u> [8], protecting the *core conspirators*. We will refer to these individuals as the *informed influencers*.

Informed influencers were tasked to facilitate the pseudopandemic by exercising their invested authority. They worked at the intergovernmental, governmental and corporate level to further pseudopandemic objectives. For the plan to work, the core conspirators required only that the informed influencers were committed to the cause. No one else needed to have any idea about the nature of the deception. In fact, it was essential that they didn't.

The *informed influencer*'s role was twofold. Firstly they had to convince their colleagues, and their wider networks, that the claimed threat level was real. *Informed influencers* were placed within academic and scientific bodies to achieve this. Once convinced, the remaining *deceived influencers* unwittingly contributed towards the success of the *pseudopandemic*.

The *core conspirators* initial goal was to create a global policy response to the *pseudopandemic* that would lay the foundations for their longer term objectives. The *deceived influencers* genuinely believed these policies were necessary to combat the perceived scale of the threat. Once careers were invested in the

deception, even those who perhaps realised they were complicit, were unable, or unwilling, to stop the policy juggernaut.

This left the *informed influencers* free to shape policies which, had the scale of the threat been genuine, would have made no sense. These policies were specifically designed to instil fear in the public, reinforce the *pseudopandemic* narrative and introduce the population to new forms of dictatorial governance.

The seismic shift towards new technocratic social control systems would not have been possible unless the population were terrorised. Once the people were suitably cowed, the *informed influencers* were able to use the cover of the *pseudopandemic* to create the form of governance (technocracy) the *core conspirators* ultimately desired.

Fearing COVID 19 and trusting *the authorities*, the global population was deceived. The only remaining task for the *core conspirators* was to command the narrative. As they own and control most of the world's <u>mainstream media</u> [9] (MSM) this wasn't too difficult.

Any who were suspicious, or those who asked questions likely to expose the *pseudopandemic*, regardless of their qualifications or experience, were <u>isolated and attacked</u> [10] by the MSM. With marginally less control over social media, the *core conspirators* had to <u>accuse all who questioned them</u> [11] of the deceit which they were themselves guilty of.

This was achieved by funding so called *fact checkers* [12] to infiltrate and <u>control</u> the social media [13] platforms. They policed online free speech. *Informed influencers* also deployed the military [14] to attack the psyche of the public using applied psychological techniques. The people were subjected to a *pseudopandemic* terror campaign.

In preparation for this *hybrid war*, a propaganda tsunami was unleashed to create the myth of the <u>so called infodemic</u> [15]. This was done both to protect the *pseudopandemic*, in the short term, and to manufacture the claimed rationale for the eventual removal of free speech.

The *pseudopandemic* presented the public with a stark choice. They could either make the effort to research and verify information for themselves or rely upon whatever they were told by *influencers*, either *deceived* or *informed*, <u>in the mainstream media</u>. [16] and *government*.

For whatever reason, most were unable or unaware of the need to think critically. Consequently widespread disinformation was believed. Utterly bamboozled, many victims came to view their own freedom of speech, inalienable right and liberties as dangerous. They conceded that their own freedoms were an unacceptable risk to their *safety*.

The second aspect of the *informed influencers* role was to provide <u>plausible</u> <u>deniability</u> [17] for the *core conspirators* and, to a great extent, themselves. They

obfuscated their responsibility by claiming decisions were made by a wider group. They were either *led by science* or serving the wishes of the public. Although many scientists disagreed with the policies and the public weren't asked to approve any of them.

By slotting themselves into the right committees, think tanks, representative bodies and governance institutions, the *informed influencers* steered the policies while obscuring their individual culpability. At the same time, a bulwark was created between the *core conspirators* and the controlled authorities who implemented the policies.

Whenever objections crept into the decision or policy making process, the *informed influencers* called upon the *core conspirators*. They marshalled their practically limitless resources to cherry pick the expert opinion they needed to convince wavering *deceived influencers*. Ultimately any firm resistance from *objecting influencers* was simply overruled, outvoted, ignored or removed.

The *core conspirators* must therefore have enormous financial power. While they only needed to control a relatively small number of *informed influencers*, they also had to maintain a watchful eye and command over many other important influencing groups and authorities.

This was done, without raising too much alarm, through careful investment planning and grant making. This so-called *philanthropy* was then combined with a few *informed influencers*, appointed to key positions, to achieve international and national systemic control.

We will largely focus upon the UK to illustrate how some had the means, opportunity and motivation required to orchestrate the *pseudopandemic*. However, events in the UK were not unique. The same *modus operandi* was evident in countries across the world.

The most influential authority, central to the pseudopandemic, was the United Nation's special agency the World Health Organisation (WHO). They have pseudopandemic form: there is a precedent. For the moment, we will also focus upon the Bill and Melinda Gates Foundation (BMGF) as exemplars of the financial control mechanism.

The BMGF are just one part of a global network of authority. The *core conspirators* lead that network, but many of their ambitions are shared by the network as a whole. Primarily because they serve the interests of network participants (stakeholders).

The WHO receives <u>funding from two sources</u> [18]. Assessed contributions are a percentage of GDP which nation member states have agreed to pay. These represent a little less than 20% of the WHO's total budget. Voluntary contributions comprise the remaining 80%.

Voluntary contributions are those which member states choose to donate. They also include contributions from private grant making foundation, industry bodies, intergovernmental organisations, pharmaceutical corporations and other private sector interests.

With the Trump administration's temporary withholding of the <u>US voluntary</u> <u>contribution</u> [19] (and a small portion of its assessed contribution), Germany were claimed to be the largest single donor. The BMGF <u>were said to be the second</u> [20]. These claims, both by the Trump administration and by the WHO, were deceptive.

The BMGF are also the leading donors to other significant WHO contributors. Most notably the GAVI Vaccine alliance, the COVID Solidarity Fund and Rotary International. This made the private BMGF the largest single contributor to the WHO's overall budget, by some margin.

While former US President Trump made the headlines with his apparent decision to withhold the US voluntary contribution of around \$1 billion, at the same time his administration increased the US tax payer's contribution to the BMGF controlled GAVI by \$1.16 billion [21]. Effectively reducing the US tax payer's theoretical influence over the WHO, while significantly increasing their contribution to it via GAVI and the BMGF.

Many claim that the BMGF investment in the WHO does not buy influence. This is possible but implausible.

Whether you consider the BMGF to be simply a philanthropic organisation or not, the WHO consistently promote the BMGF's publicly stated agenda. It is far more plausible that the BMGF funding does influence WHO policy recommendations.

In an article titled "Meet The World's Most Powerful Doctor: Bill Gates," Politico observed [22]:

"Some billionaires are satisfied with buying themselves an island. Bill Gates got a United Nations health agency in Geneva."

Bill Gates dropped out of Harvard to focus on his fledgling Microsoft business. It isn't clear whether he did so in the knowledge that his mother <u>would secure him</u> [23] the IBM contract that would ultimately make him a billionaire. Though perhaps we should note it was nepotism, not business genius, which assured his future.

Gates has a few honorary degrees but he is neither scientifically nor medically qualified. Yet Politico's headline was not entirely inaccurate. Somehow, he is <u>seen by millions</u> [24] as some sort of leading global health expert. While academic qualifications are no guarantee of expertise and experience is often a better measure, would anyone listen to Bill Gates' opinion on global health were it not for his so-called philanthropy? How does money make you an expert?

We are about the cover the reasons why we might suspect that Gates may have been among the *core conspirators*. In so doing, we can see how the *core*

conspirator's authority was devolved to the *informed influencer* who were then able to shape policy in the interest of their handlers.

The WHO's current Secretary General, Tedros Adhanom Ghebreyesus, is a potential example of an *informed influencer*. Ghebreyesus' career has benefited considerably from his relationship with the BMGF. He was the Director of the Global Fund [25], founded by the BMGF in *partnership* with G8 [26] governments. He was also a board member of the GAVI vaccine alliance [27], again founded in partnership with the BMGF. The BMGF also backed his bid, along with China, to become WHO director general in 2017.

The BMGF don't just fund the WHO. They are entwined with public health, biotech and <u>agricultural initiatives</u> [28] the world over. Often in *stakeholder* partnership with the WHO and various governments.

For example, they have <u>heavily backed</u> [29] a bio-metric payment system called <u>Trust Stamp</u> [30] in West Africa. This combines Mastercard's AI payment technology with the GAVI - Mastercard Wellness Pass.

This creates a technology linking biometric ID and immunity status (based upon vaccination, not health) with access to money. With a rather unpalatable whiff of neocolonialism, so called fact checkers have been <u>eager to point out</u> [31] that the Trust Stamp initiative currently *only* impacts people in developing nations. They conclude:

"There is nothing to suggest vaccination refusal would result in prevention or loss of any financial freedom."

Then why design a system specifically capable of doing so? Undoubtedly many will say this is just another coincidence. Though, as we shall explore later, bio-metric ID linked to vaccine derived immunity, controlling access to finance in a *cashless* society, is very much part of the *core conspirators* motive for the *pseudopandemic*.

If we suspect that Tedros Adhanom Ghebreyesus was a likely *informed influencer* for the BMGF within the WHO, it should come as no surprise that the WHO <u>warned the world</u> [32] about the COVID dangers of using cash. Despite there being no plausible evidence that handling cash presents any <u>COVID 19 infection risk</u> [33].

For the WHO, making wildly inaccurate statements is a habit. Though incorrect, these *errors* consistently benefit the interests of the BMGF and their *partners*.

The Pfizer and BioNTech's BNT162b2 was the first vaccine approved for global distribution to *combat* COVID 19. As we shall see, none of the COVID 19 vaccines stop the spread of SARS-CoV-2 infections. Instead, they are said to reduce the health impacts of the resultant COVID 19 disease.

Mass vaccination of the populace has proceeded based upon *emergency* approval. In the UK, for all COVID 19 vaccines, the <u>Medicine and Healthcare Products</u>
<u>Regulatory Agency</u> [34] (MHRA) states:

"This medicinal product has been given authorisation for temporary supply by the UK Department of Health and Social Care and the Medicines & Healthcare products Regulatory Agency. It does not have a marketing authorisation, but this temporary authorisation grants permission for the medicine to be used for active immunization to prevent COVID-19 disease."

None of the vaccines are "licensed," because none of them completed clinical trials [35] prior to their temporary approval. Pfizer's phase III trial won't be completed until January 2023 [36] and AstraZeneca's will conclude in February 2023 [37]. Moderna's mRNA vaccine phase III trial isn't due for completion until October 2022 [38] and Johnson & Johnson's Janssen trials won't end until May 2023 [39].

Pfizer are <u>GAVI partners</u> [40] and key participants, alongside the BMGF, in the Advanced Market Commitment (AMC) programme. The purpose of AMC is to <u>develop new vaccine markets</u> [41] in developing nations. The <u>AMC initiative</u> [42] sees GAVI *partner* with the governments <u>who buy the vaccines</u> [43]. Thereby developing the new markets for pharmaceutical corporations.

This guarantees tax payer funded profits for the corporations and their major shareholders. Thus seamlessly transferring wealth from the population to the *core conspirators* under the guise of "saving lives." There is no reason to imagine anyone who wittingly participated in the *pseudopandemic* had any intention of saving anyone. Quite the opposite.

Pfizer are BMGF <u>grant recipients</u> [44]. This is a *philanthropic* act which provides profits for the BMGF Trust. Tedros Adhanom Ghebreyesus <u>warmly welcomed</u> [45] Pfizer's apparent vaccine breakthrough.

Bill Gates personal wealth grew from an <u>estimated \$109 billion</u> [46] in January 2020 to <u>approximately £119 billion</u> [47] by December. Like many of his fellow multi billionaires, the year of the COVID 19 *pseudopandemic* was <u>hugely profitable</u> [48] for Bill. Yet still people fantasize that he gives money away.

This \$10 billion windfall was thanks, in no small part, to the <u>BMGF Trust</u> [49]: the entirely separate BMGF entity managing the Gates' assets.

The BMGF Trust invests in "for profit" companies, such as Walmart, with their primary asset being a sizeable holding of Berkshire Hathaway (BH) inc stock [50]. In turn, not only are BH direct Johnson & Johnson shareholders [51] they are also major holders of Bank of America Corp and Bank of New York Mellon Corp stock. These are two of the top 10 Pfizer shareholders [52]. Simply from a financial perspective, the last thing the BMGF Trust wanted was a cheap, proven alternative to COVID 19 vaccines.

A treatment protocol using the inexpensive <u>Hydroxychloroquine (HCQ) in</u> <u>combination with antibiotics and zinc</u> [53] had an excellent 70 year plus safety profile and was able to deliver exactly the same outcome as COVID 19 vaccines.

Like the vaccines, it didn't stop the spread of infection but rather reduced the likelihood of anyone becoming seriously ill from COVID 19.

Many people <u>tried to highlight</u> [54] the efficacy and safety of this and other treatment protocols for COVID 19 throughout the *pseudopandemic*. The controlled authorities simply <u>refused to countenance them</u>, [55] often despite their <u>apparent life saving</u> [56] potential.

<u>Numerous studies</u> [57] show that the anti-parasitic drug Ivermectin is also effective in reducing the symptoms of COVID 19. The possibility that it could have reduced COVID 19 mortality by 83% was something the WHO acknowledged <u>in their own studies</u> [58].

As early as April 2020 Australian scientists published a paper which showed that Ivermectin completely killed off <u>replication of the SARS-CoV-2 virus</u> [59] in the laboratory. Further "apex research" on Ivermectin then <u>came under the control</u> [60] of the BMGF, the pharmaceutical giant GlaxoSmithKline (via their Wellcome Trust Foundation) and Mastercard, in the guise of their joint COVID 19 "therapeutics accelerator."

This effectively ended any hope of HCQ, Ivermectin, or other promising treatment protocols, such as high dose <u>use of vitamin D</u> [61] ever being approved for treatment of COVID 19. Mark Suzman (CEO of the BMGF) clearly stated <u>what the purpose</u> [62] of the *therapeutics accelerator* was:

"We believe we can help by partnering with private and philanthropic enterprises to lower the financial risk.. for biotech and pharmaceutical companies developing antivirals for COVID-19.. The only way to treat a viral infection, such as COVID-19, is with antiviral drugs......The best way to prevent an infectious disease is with a vaccine."

The problem for pharmaceutical corporations with treatments like the HCQ protocol, Ivermectin or high dose VitD, is that they are *generic*. This means no one owns a patent and small to medium size manufacturers can compete in the market. This lowers the price, thus removing the profit incentive for multinational corporations.

If a generic drug proves just as effective as new patented antivirals, developed by pharmaceutical corporations, their development costs will have been wasted. Effective generic treatments increase pharmaceutical corporation's *financial risk*, contrary to the stated purpose of the BMGF *therapeutic accelerator*.

Despite there being <u>overwhelming scientific evidence</u> [63] that these generic treatments warranted further research, "apex research" (pharmaceutical corporations funded studies) were actively resisted by *Big Pharma*. For example, the pharmaceutical giant Merck released a press statement on Ivermectin which falsely claimed there was "no scientific basis" for further trials. It is difficult to see how this can be described as anything other than <u>entirely false</u> [64].

However, making money (or not making it) wasn't the primary reason why these treatment protocols were shunned by the global corporate funded, scientific establishment. The threat they posed to vaccine uptake was a major concern. Vaccines that do little more than reduce symptoms aren't necessary if you can pop into your local chemist and buy an inexpensive, over the counter medication that does the same thing.

This is not to claim that a vaccine that worked wouldn't be welcome, but patient choice was certainly unwelcome among those who intended to use vaccines for much more than simply protecting people against a disease. The vaccines were a key element of the *biosecurity State* the *core conspirators* wished to construct.

Ivermectin, VitD, and Hydroxychloroquine treatment protocols presented a direct threat to this ambition. By looking at how they treated just one of these treatments (Hydroxycholoroquine) we can see how the centralised global system of authority dealt with any scientific or medical threat to *pseudopandemic* objectives.

In order to discredit HCQ the WHO cited a <u>blatantly fraudulent</u> [65] scientific paper published in the Lancet. The Lancet is also funded by the <u>WHO and the BMGF</u> [66] among others. The paper was written by a bio research company called <u>Surgisphere</u> [67].

The WHO used this fake science to suspend global Hydroxychloroquine trials for COVID 19, within days of their commencement. The MSM then <u>spread this</u> <u>fraudulent science</u> [68] worldwide.

The UK's MHRA responded to the WHO announcement with great haste. They shut down the trials they could [69] and pressured researchers to curtail other trials. In 2017 the MHRA were operational partners [70] with the BMGF and are BMGF grant recipients [71].

Throughout the *pseudopandemic*, a concerted media campaign was waged against HCQ and the eminent scientists and physicians who advocated it. Many of the media organisations involved in the propaganda operation were also <u>funded by the BMGF</u> [72].

The propaganda was <u>designed to deceive the public</u> [73]. It focused upon the dangers of extremely high doses of HCQ to treat people with advanced COVID 19 and at no stage informed the public that its proposed use was a part of a broader treatment protocol using lower doses in the early onset of the disease. Saving life was not on the *pseudopandemic* agenda.

The Surgisphere paper the WHO used to besmirch HCQ was so poor that many scientists and medical researchers <u>immediately complained</u> [74] to the Lancet. The Lancet were forced to withdraw the paper, but not before putting up <u>considerable resistance</u> [75]

The WHO are supposed to be the world's leading health authority. Yet they were incapable of spotting obvious scientific fraud which many other qualified *experts*

identified with ease. The Lancet retracted the paper and the WHO reinstated some of the trials. None of the HCQ trials <u>approved by the WHO</u> [76] were designed to investigate either the recommended dosage or the HCQ treatment protocol.

Making dubious statements and counterproductive decisions, consistently advancing the objectives of their financiers, is common practice for the WHO. We will cover more examples but, before we do, let's consider what this implies.

One possibility is that the WHO are inept and make statements based upon limited evidence without considering the implications. Their decision making is based upon a weak grasp of medical science and public health policy and these persistent errors just happen to coalesce with the interests of the people who fund them.

Or, the evidence suggests that the WHO are corrupt. They act as a policy vehicle for a small handful of powerful interest groups who exploit public health policy to advance their own agenda.

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Chapter 2 - Global Public Private Partnerships

As we progress through this investigation we will take a detailed look at the evidence which exposes the *pseudopandemic*. However, we first need to understand the broad principles that made it possible.

We have already discussed how the *core conspirators* could have potentially deployed their *informed influencers*. Their goal was to coerce and manipulate *deceived influencers* into forming policies designed to achieve the *core conspirators'* objectives.

The *deceived influencers* were wrong but were acting out of misplaced concern and fear. They were innocent.

However, shortly after the *pseudopandemic* began, many *deceived influencers* must have become aware of the deception. The evidence revealing it mounted rapidly. At what point those who maintained the lie, perhaps to protect their careers, became criminally negligent, only a lawfully convened jury can decide.

We are initially going to focus upon the relationship between the UK Government and the Bill and Melinda Gates Foundation (BMGF) to understand how the *pseudopandemic* was possible. However, this was just one among many such *partnerships*.

The COVID 19 pseudopandemic was the first concerted attempt to establish a single, centralised form of global governance which had any realistic prospect of success. For the first time in human history, advances in technology made total global control entirely feasible.

This unprecedented *pseudopandemic* effort forced some of the likely *core conspirators* and *informed influencers*, who usually avoid scrutiny, into public view. Thus we can see how the authority levers were pulled to engineer the desired policies.

There is no evidence that the BMGF were leading this effort. They were the public face and sales representatives for the *pseudopandemic*: a front for a wider campaign.

The *core conspirators* reside within the network behind that campaign, and their collective dream is global governance under their control. The *pseudopandemic* was a marketing offensive to convince us to buy into it.

They are undoubtedly nearing fulfilment of that ambition. If the global population is going to lawfully defend itself, time is short.

No crime is alleged against any named individual or organisation. However, the *core conspirators* and *informed influencers* must be within, or networked to, the named organisations. Any future investigation into the *pseudopandemic* fraud should focus upon them.

In order for authoritarian power and influence to deliver real world results it was converted into policy. Once enacted by governments and local authorities, the policy made a material difference to our lives. Whether we appreciated it or not.

Through a cascading system of authority, with each level under the command of the one above, the *core conspirators* merely needed to control the *global authorities* for the *pseudopandemic* to work. Compartmentalisation added the necessary information security and plausible deniability.

As the *core conspirators* must have controlling interests in the global financial authorities, such as the Bank for International Settlements (BIS), The World Bank, International Monetary Fund and national central banks, they <u>control the monetary system</u> [1] and thereby intergovernmental organisations and national governments. With the addition of a tiny handful of *informed influencers* in each respective government, that control is comprehensive.

The UK government's partnership with the BMGF goes back many years. The consistent theme throughout that partnership has been the development of biosecurity. This is presented to us as protection against bio-hazards. The *core conspirators* have exploited this misapprehension to further population control.

We will discuss motive later in the series, but it is important at this juncture to consider what *biosecurity* really means. For this <u>we can reference</u> [2] the philosopher <u>Giorgio Agamben</u> [3].

Drawing on the work of Patrick Zylberman, Agamben summarised how biosecurity actually creates a new form of *biosecurity State*. We can further summarise this as follows:

- Data is presented to maximise the perceived threat level. This enables government to claim a constant *extreme situation* and demand populationwide behaviour change in response.
- 2. It is the public's belief in this claim of an extreme threat which enables the biosecurity State to control citizen's behaviour. Without this perception, such draconian diktats would not be tolerated. Therefore the threat must be constantly reinforced by the biosecurity State to maintain fear and thus compliance.
- 3. By imposing behavioural conditions, to which the citizen must adhere, the citizen's relationship with the State is fundamentally altered. The people no longer receive public health protection. Rather, public health becomes a behavioural obligation demanded by the biosecurity State.

The vast majority of us accepted the *pseudopandemic* threat. Most lived in fear both of succumbing to the disease and of infecting others, especially loved ones. Consequently, we were mostly willing to comply with our orders.

We are all bio-hazards in the new biosecurity State. We are the threat, each of us a danger to each other. As the biosecurity State claims the authority to *keep us safe*, all bio-hazards must be controlled. Therefore we must be controlled.

Our individual behaviour is now an existential threat to all. This means we are no longer *allowed* to be free human beings with autonomy. Walking the dog, shopping, visiting family, enjoying live music or the company of friends have become potential acts of bio-terror.

Therefore, no aspect of our lives is beyond the reach of State authority. We have to comply with the orders of the biosecurity State to *stay safe*.

Any who didn't, possibly because they realised the *pseudopandemic* was a fraud, were <u>equated with terrorists</u> [4] in the psychologically manipulated minds of the terrorised. Dissenters were described and perceived as "science deniers," "antivaxxers" and "conspiracy theorists." They became the morally repugnant wrongdoer, thus making them the focus of anger for the fearful. This empowered the *core conspirators* to silence their opponents with censorship and propaganda, while simultaneously claiming they were protecting the people they abused via their *pseudopandemic*.

As the saviours of the terrified they were free to issue their orders without any notable resistance. Those orders came to us in the form of legislation, regulation and policy. For the *core conspirators* to seize dictatorial power over humanity, they merely had to control the *informed influencers* in governments through their relationships with private *stakeholder* partners.

In 2000 the United Nations formed their Millennium Development Goals (MDG's). In their 2005 document <u>Connecting For Health</u> [5], the World Health Organisation (WHO) noted what the United Nations goals meant for global health:

"These changes occurred in a world of revised expectations about the role of government: that the public sector has neither the financial nor the institutional resources to meet their challenges, and that a mix of public and private resources is required......Building a global culture of security and cooperation is vital....The beginnings of a global health infrastructure are already in place. Information and communication technologies have opened opportunities for change in health, with or without policy-makers leading the way......Governments can create an enabling environment, and invest in equity, access and innovation."

The WHO acknowledged that a range of *stakeholders*, such as private corporations, philanthropic organisations and Non-Governmental Organisations (NGO's), would "partner" with government in a *culture of security and cooperation*. Government's role had been *revised*. Plans for global health governance could proceed "with or without" government policy makers. This placed the relationship between government and private interests (stakeholders), which has always

existed, on an official footing. Affording the *core conspirators* more direct policy control.

With the establishment of U.N. MDGs governments would no longer lead global health policy. Rather their role was to enable the *environment* of global *health* security through investment. In 2016 MDGs gave way to U.N. <u>Sustainable</u> <u>Development Goals</u> [6] (SDGs) under the auspices of the United Nations Development Program (UNDP).

The UNDP has oversight of SDG's but also brings together numerous United Nations *specialist* agencies in order to pursue them. The United Nations is nominally an intergovernmental organisation but it is actually a <u>public private partnership</u> [7]. The UNDP describes this partnership:

"The private sector has a huge role to play in the 2030 Agenda for Sustainable Development. In addition to offering a wealth of expertise and disruptive innovation, businesses can help mobilize much needed capital in support of the SDGs......Achieving the SDGs could open up US\$12 trillion of market opportunities.....Incorporating the SDGs into the private sector's business model will actually bring profits in the long-term.....UNDP aims to make markets work for the SDGs."

Sustainable development is sold to the public using key words like "inclusive," "equality," "sustainability," "resilience" and "safety." The repetition of these words is a <u>public relations</u> [8] marketing tactic. Like the <u>pseudopandemic</u> itself, they are intended to deceive the people. In truth, as clearly stated by the UNDP, SDG's are designed to create new markets. These <u>innovative</u> markets are engineered via <u>disruption</u>.

This is why global investors, such as the Rockefellers, are such <u>avid supporters of the United Nations</u> [9]. The UNDP supposedly lead the <u>SDG philanthropy platform</u> [10]. However, it is a Global Public Private Partnership (GPPP) between the U.N. and the Rockefeller, Hilton, Brach and Ford families.

This *partnership* exemplifies how global authority (power) is concentrated into the hands of a tiny number of people. This in no way suggests that everyone associated is complicit in the *pseudopandemic*, but the *core conspirators* and *informed influencers* are able to manipulate such partnerships.

In order to understand how this power centralisation process works, we need to consider what government authority is and our relationship to it. "Governance" is a set of rules by which we agree to live in order to achieve our shared goals. "Government" claims the authority to control governance at national level. Intergovernmental organisations claim the same authority at an international and global level.

Government claims that it determines governance (the rules) through legislation. Legislation should not be confused with law. Law stems from Natural Law and

protects our inalienable rights from, among others, the government. Government legislation claims authority over those rights. *Authority* it does not have.

The government is a group of people who say they have the authoritarian power to make legislation. The government has no resources of its own. Aside from natural resources, the people possess and create all of them.

The government have access to financial resources solely through taxation. Borrowing does not put the government in debt but rather the tax payer.

There is no such thing as government investment. All investment is tax investment and all tax is taken from the labour of the people. Even the assets the government claims as its own belong to the people. We create the government and we give it our resources.

The government is not administered by politicians but by bureaucrats. We call them the Civil Service in the UK. Politicians set policy and form new legislation. Thereby changing the rules we all supposedly agree to live by.

However, there are limits. The <u>City Remembrancer</u> [11] is positioned in the UK parliament to protect the interests of the <u>corporation of the City of London</u> [12]. The *City of London* corporation is effectively the council for the Square Mile, which is one of the world's financial centres, often referred to as *the City*. The Remembrancer makes sure the government doesn't accidentally reduce corporate profits with its *legislation*.

The full extent of our *democratic control* over this system is that we get to "elect" a new batch of politicians every few years. We do not elect the bureaucrats nor the *partners* of the government. They are permanent and no amount of voting can change that.

Once every 5 years (1825 days), in the UK, we have a say in the legislative process through elections. In the meantime we can form pressure groups, protest and write petitions, but the government is under no obligation to listen to us. The government's "partners" are able to influence legislation (the rules) on every one of those 1825 days.

Some *partners* have enough money to fund political parties, politicians and their campaigns. This network of government *partners* owns the mainstream media, controls the corporations and a powerful lobby industry. They can make or break ambitious politicians as they wish. In every decade we are allowed two days where we can choose some of the politicians they have selected for us.

Government *partner* status is afforded by immense wealth. *Partners* are joint investors, with government (using tax revenue) in various governmental and intergovernmental programs and projects. With additional resources to fund political campaigns and bestow patronage, it is the private partners, without any democratic mandate, who dominate.

We call this system *representative democracy*. It is nothing like <u>true democracy</u> [13] but we are encouraged to believe in it, because it maintains the status quo.

Intergovernmental organisations, like the U.N., are conference venues for the people the *core conspirators*, among others, have allowed us to select. Government representatives are already the chosen *influencers* of the *core conspirators*. The only question is whether they are *deceived* or *informed influencers*.

In meetings with government *partners*, the *elected* representatives facilitate access to all of our resources. Through their <u>financial support</u> [14] of intergovernmental organisations, the *core conspirators* can then exploit their *partnerships* and decide how they want to divide up our resources amongst themselves.

Just as the WHO has come under the control of its *partners*, such as the BMGF, Gavi and the World Bank, so the U.N. is also controlled by private investors. The *core conspirators* are part of that financial and corporate network.

From its inception in 2000, the BMGF has been a key *partner* to governments, intergovernmental organisations and global authorities. In 2002 the WHO commissioned a research paper titled <u>Global Health Governance</u> [15] (GHG). The researchers stated:

[An] example of state-nonstate governance is so-called global public-private partnerships (GPPPs).....The idea of building partnerships with business is at the centre of UN-wide views on the governance of globalization (Global Compact)....[the] WHO and the World Bank are shown as central.....At the same time, they are accompanied by a cluster of institutions.....the International Monetary Fund (IMF), World Trade Organization (WTO) [etc.]...........GHG also includes the wide variety of actors within the private sector and civil society.....Some of these actors (e.g. Bill and Melinda Gates Foundation) have become highly prominent in recent years. Others...can be influential on a more policy specific basis."

This idea of global health policy controlled by the GPPP led to the 2005 revision of the International Health Regulations [16] (IHR). The IHR's are an internationally binding treaty which created the WHO as a global public health surveillance system. The IHR define how governments (nations) respond to acute public health risks, such as pandemics.

The WHO's IHR <u>Emergency Committee</u> [17] advises whenever a Public Health Emergency of International Concern (PHEIC) emerges. Those advisors are chosen by the <u>Director General</u> [18] (DG) of the WHO.

Given the possibility that DG is an *informed influencer* it is reasonable to suspect that this was part of the mechanism which rendered the global *pseudopandemic* possible. This was combined with the appointment of *informed* and *deceived influencers* in national governments to convert the *pseudopandemic* into policy.

Bill Gates has maintained a constant dialogue with the UK Government for decades. This often took the form of secret chats with influential politicians. In our open and transparent democracy there are no minutes of these meetings.

In July 2010, in the midst of the fallout from the 2008 financial crisis, Bill was among the first to have an <u>informal discussion</u> [19] with then newly appointed UK Deputy Prime Minister Nick Clegg. Without minutes, we were reliant upon whatever Mr Clegg and Bill chose to disclose about that meeting. Clegg said:

"Today is the beginning of a close and productive relationship between their [BMGF] Foundation and our [Coalition] government......The global economy has undergone a major trauma....The New York talks are a huge opportunity to get the Millennium Development Goals back on track."

In 2009 former Clinton campaign manager and Whitehouse Chief of Staff Rahm Emanuel observed [20]:

"You never want a serious crisis to go to waste. And what I mean by that is an opportunity to do things you think you could not do before."

It seems clear that Clegg and Bill Gates were well aware that a crisis presents opportunities. In this case, the turmoil of a financial crisis was viewed as an opportunity to further the MDG's. Which meant, among other things, a new form of GPPP to manage global health *security* and foster new markets.

<u>Following their chat</u> [21], Clegg clarified this when he was dispatched to address the <u>United Nations General Assembly</u> [22] He stated:

"Together we can reach the Millennium Development Goals....These are the technocratic terms in which governments must necessarily trade......Growth in the developing world means new partners with which to trade and new sources of global growth......When the world is less secure, the UK is less secure....When pandemics occur, we are not immune."

Only a few weeks later Bill Gates dropped in to see the UK <u>Department for International Development</u> [23] (DfID - subsumed by the Foreign, Commonwealth & Development Office in September 2020). Bill spoke about the BMGF partnership with DfID to deliver the MDG's. He said:

"Closer collaboration, as we see what works and what doesn't work, will be important to us."

DfID, a government department funded entirely by the UK population, needed to understand what was important to the BMGF. They decide what works and what doesn't. In exchange for this *partnership* key political *influencers* benefit from the revolving door between government, NGO's and the private sector.

For example, the <u>BMGF created</u> [24] the NGO pressure group <u>called ONE</u> [25] to bring together the worlds most influential and powerful philanthropists, foundations

and corporations. Former UK Prime Minister David Cameron (Clegg's boss) was appointed to the <u>board of directors</u> [26] alongside other industrialists, corporate board members, bankers and celebrities who all share a commitment to save humanity.

ONE's <u>enthusiastic supporters</u> [27] include George Soros' Open Society Foundation, Bloomberg Philanthropies and the Rockefeller Foundation. Their collective aim is to lobby "political leaders in world capitals" and "pressure governments to do more." Where doing more means taking more money from the tax payer to fund the development of their new markets.

Under Cameron's steerage, ONE's sister organisation *'RED'* subscribes to the same ideals. It brings other <u>humanitarian organisations</u> [28] such as Merck, Roche, Twitter, Google and Facebook into the family. Nick Clegg was appointed Facebook's <u>Head of Global Affairs</u> [29] in October 2018.

Joining David Cameron on ONE's board is Joe Cerrel, the BMGF's Managing Director for Global Policy and Advocacy. Joe too has revolved between the government and corporate world and his <u>board profile</u> [30] illustrates how the political means required to manage the global *pseudopandemic* were acquired:

"Joe oversees the Foundation's relationships with donor governments in North America, Europe, Asia-Pacific, and the Middle East. His team seeks to expand the Foundation's partnerships with these governments, but also corporations, foundations and other non-governmental organisations, to support increased global engagement and progress on global health."

In September 2019 UK Prime Minister Boris Johnson gave a speech to the <u>General Assembly of the United Nations</u> [31]. The UK was in the middle of negotiating its withdrawal from the European Union (Brexit), yet this warranted scarcely a mention. Johnson's apparently rambling, off topic speech was met with almost universal bewilderment.

Instead of Brexit and global trade he chose to expound upon a coming scientific and technological revolution. He described a future <u>form of technocracy</u> [32], sweeping aside Luddites who question the essential tools of progress, such as nanotechnology vaccines: a world of gleaming smart cities, to be controlled by a centralised system of global partnerships.

In hindsight this speech was truly remarkable for its prescience. It was almost as if the UK Prime Minister knew that, in just a couple of months, a deadly pandemic would emerge. He accurately foresaw that the solution to it would be a technological revolution, orchestrated at the global level, not by governments but by academics, corporations and others acting in *partnership* with government.

Shortly before being ousted from power, then UK Prime Minister Theresa May used the last few weeks of her premiership to <u>lobby other world leaders</u> [33] to commit more tax payer's resources to the BMGF cause. In doing so, she continued the

unwavering policy commitment of previous UK governments. No matter who formed the UK government, their <u>partnership with the BMGF</u> [34] was unshakeable.

It is no surprise therefore that UK Prime Minister Boris Johnson, just like his predecessors, has been wedded to the BMGF since his election victory in July 2019, especially during the *pseudopandemic*. In May 2020 he met with Bill and Melinda and when the public submitted a <u>freedom of information request</u> [35] to find out what they had discussed the Prime Minister's Office refused to respond.

They met <u>again in November</u> [36], this time in the company of the pharmaceutical corporations to discuss the vaccine roll out. No minutes were offered.

However in his testimony to the Commons Hearing on Covid 19 in May 2021, former chief advisor to the Prime Minister, Dominic Cummings, confirmed what many suspected. He said:

"In March I started getting calls from various people saying these new mRNA vaccines could well smash the conventional wisdom.. People like Bill Gates and that kind of network were saying.. Essentially what happened is.. there is a network of people, Bill Gates type people, who were saying completely rethink the paradigm of how you do this.. What Bill Gates and people like that were saying to me and others in number 10 was you need to think of this much more like the classic programs of the past.. the Manhattan Project in WWII, the Apollo program.. But what Bill Gates and people were saying.. was, the actual expected return on this is so high that even if does turn out to be all wasted billions it's still a good gamble.. and that is what we did."

It seems secret discussions, which make a material difference to our lives, are the norm in the *new normal* representative democracies. What is not in doubt is that the UK's long standing commitment to a COVID 19 vaccine was the crux of the *pseudopandemic* campaign from the start. Bill Gates' instructions were clear. Vaccines were *important* to the BMGF and so they were equally important to the UK government.

With its COVAX project, funded by the tax payer, the <u>Coalition for Epidemic Preparedness Innovations</u> [37] (CEPI) launched its call for research into a COVID 19 vaccine on February 3rd 2020. CEPI was <u>founded as a partnership</u> [38] between the World Economic Forum (WEF), The Norwegian and Indian governments, the BMGF and GlaxoSmithKline's foundation the <u>Wellcome Trust</u> [39]. CEPI's *partners* include the European Commission and numerous pharmaceutical corporations.

As the world learned of the rapid spread of COVID 19, on the 3rd March 2020, the <u>UK Government released</u> [40] its *Action Plan*. It was abundantly clear from that document that the only medical treatment strategy the UK government were willing to consider was a vaccine or pharmaceutical corporations' patented anti-virals. No other <u>treatment options</u> [41] were advocated or even considered.

Given that they had already invested a lot of tax revenue in vaccine development, through CEPI and GAVI for example, this was perhaps expected. In *partnership* with the BMGF and the World Economic Forum the UK government stated:

"The UK government has already pledged £20 million to the Coalition for Epidemic Preparedness Innovations (CEPI) to develop new vaccines to combat the world's deadliest diseases, including vaccines for COVID-19."

On the 12th March, the day after the WHO declared the *pseudopandemic*, following a meeting in the Cabinet Office Briefing Room (COBR - Cobra meeting), Boris Johnson <u>addressed the nation</u> [42]. He gave the people of the UK some hard truths:

"We've all got to be clear, that this is the worst public health crisis for a generation. Some people compare it to seasonal flu. Alas, that is not right. Owing to the lack of immunity, this disease is more dangerous.....I must level with you, level with the British public, many more families are going to lose loved ones before their time......At all stages, we have been guided by the science."

However, COVID 19 was absolutely comparable with the influenza. With regards to influenza, in 2018, The WHO stated:

"Hospitalization and death occur mainly among high-risk groups. Worldwide, these annual epidemics are estimated to result in about 3 to 5 million cases of severe illness, and about 290 000 to 650 000 respiratory deaths."

The COVID 19 mortality risk was known to be low and, despite claiming to be *led by science*, many scientists around the world questioned if a <u>dangerous global pandemic even existed</u> [43]. Johnson's claim about being *guided by science* meant government were listening to *selected* scientific advisors while <u>ignoring the rest</u> [44] of the scientific *community*.

The UK government did listen to a handful of *scientists* from Imperial College London (ICL). Their wildly inaccurate computer modelled *projections* were used to justify subsequent polices. In addition, Spi-B, the behavioural science sub group of the Scientific Advisory Group for Emergencies (SAGE), were also given selected credibility by the government. They attended the Cobra meetings where they attended the Cobra meetings where they advised Johnson [45]:

"A substantial number of people still do not feel sufficiently personally threatened.. The perceived level of personal threat needs to be increased among those who are complacent, using hard-hitting emotional messaging.. Some people will be more persuaded by appeals to play by the rules, some by duty to the community, and some to personal risk. All these different approaches are needed.. Communication strategies should provide social approval for desired behaviours and promote social

approval within the community.. Use media to increase sense of personal threat.. Consider use of social disapproval for failure to comply."

This was essential for the *pseudopandemic* to proceed because the actual threat from COVID 19 was nowhere near severe enough to justify the kind of draconian polices the UK government, and their *partners*, were planning. Acting on Spi-B advice, Johnson's dire warnings and frightening rhetoric were gauged to deliver terror.

The level of fear was hammered into the public imagination with a relentless mainstream media propaganda campaign [46]. Never once checking to see if the projections were accurate, never seeking opposing scientific or medical opinions and actively censoring or attacking them when they emerged, the MSM investigated nothing and simply parroted whatever the State (the government and its *partners*) told them.

With the population understandably afraid, the State was free to enact the legislation (rules) that were vital to the *core conspirators'* objectives. They needed an <u>Enabling Act</u> [47] to give themselves the authority to set about creating the biosecurity State they desired. In the UK, this came in the shape of the <u>Coronavirus Act</u> [48]

No parliamentarians voted [49] to pass the Enabling Act. There was no debate, no questions asked, no parliamentary democracy. Simply the stamp of authority on the people.

The Coronavirus Act was rammed into force in the <u>full and certain knowledge</u> [50] that COVID 19 was not the threat the State claimed. On the 19th March, both Public Health England (PHE) and the Advisory Committee on Dangerous Pathogens (ACDP) judged that COVID was not a high consequence infectious disease (HCID). Their assessment stated:

"Now that more is known about COVID-19, the public health bodies in the UK have reviewed the most up to date information about COVID-19 against the UK criteria. They have determined that several features have now changed; in particular, more information is available about mortality rates (low overall)"

However, the State considered them to be the wrong scientists and public health experts. Their opinions were not useful and were therefore ignored.

Two days earlier, on the 17th March, the WHO reported that COVID 19 was less transmissible that influenza. <u>They stated</u> [51]:

"The serial interval for COVID-19 virus is estimated to be 5-6 days, while for influenza virus, the serial interval is 3 days. This means that influenza can spread faster than COVID-19."

This *fact*, that COVID 19 was a relatively low impact disease with a low mortality rate and less virulent than influenza, was not in dispute. The scientific evidence was clear. On the 30th April the UK Chief Medical Officer and physician Prof. Chris Whitty, delivering a lecture <u>at Gresham College</u> [52], said:

"At an individual level the chances of anyone, watching this, dying of Coronavirus are actually low. Over the course of the epidemic, even if we have no vaccine, a high proportion of the people will not get this. Of those who do get it, a significant proportion.. have no symptoms at all. They get it without even realising it. Of those who do get the symptoms the great majority, probably around 80%.. have a mild or moderate disease. Which is sufficient that they need to go to bed or feel unwell, in some cases they can just carry on doing their ordinary activity - although we ask them not to - But they don't actually need to go to the doctor or medical services and they make a full recovery. A minority have to go to hospital.. the great majority of those will go on just to survive. And then a minority have very severe disease, and they need ventilation, and then, of those, some sadly die with current treatment. But, important to stress, even in the most high risk group, the majority of people who get this infection do not die."

When the ACDP <u>met on the 13th March</u> [53] to discuss the secure transport of clinical samples, Professor Neil Ferguson from ICL did not attend. When the UK Department of Health and Social Security (DHSC) contacted ACDP to clarify their position on the classification of COVID 19, they noted the committee's response:

"The Committee unanimously agreed that this infection should not be classified as a HCID."

The UK government decided not to listen to this unanimous expert opinion. It chose instead to listen to Neil Ferguson, and based its response upon his and his team's simulated computer models.

Control of the media meant these findings from PHE, ACDP and the WHO were not reported. This enabled the politicians, their partners and hand-picked scientific advisors to brush aside the available scientific evidence and plough on regardless.

On the 23rd March Johnson again <u>addressed the nation</u> [54] to let the people know about the restriction the State had decided to inflict upon them for no apparent reason. What he provided was an outrageous omission of the truth.

Talking about invisible killers, threatening many more deaths, destroyed lives and oppressive police enforcement, Johnson outlined a number of *measures* to deal with the claimed national emergency that didn't exist. Assuming full authority, he told other human beings what he and his *partners* would allow them to do.

They were *allowed* to go out to buy essential supplies; they were *permitted*, like prisoners, to exercise for one hour a day; people were *licensed* to go to work, if strictly necessary, and could care for vulnerable loved ones if they had to.

Though terrified, most people were fairly sensible. Exercising the precautionary principle seemed logical. Though somewhat onerous, most were willing to accept these restrictions because no one had told them that COVID 19 was not the plague they had been given to believe. Those that tried were called *science deniers* and *conspiracy theorists*.

If the majority had any notion of what the coronavirus *Enabling Act* really contained, it is extremely unlikely so many would have complied. Their suspicions would naturally have been aroused. Therefore the State, personified by Boris Johnson, took the most expedient course available. He didn't tell them.

He neglected to mention that the legal protections against falsifying death certificates had been removed; he missed out the part about rescinding mental health safeguards, making it much easier for the State to lock people up on mental health grounds; it slipped his mind to inform people that the NHS duty of care had been significantly downgraded, meaning they did not have to assess ongoing healthcare needs prior to discharging patients; he forgot that the State had given itself the power to halt legal gatherings, including protests, whenever it chose; he didn't think it necessary to tell people that approved State officials could lock them up if they merely *suspected* they were ill, then force them to undergo treatment; he failed to tell the nation that the State could now retain their biometric data for an additional period and he completely overlooked the need to tell the people that all elections were suspended and their representative democracy had been temporarily cancelled.

However, he did remember to remind people of their obligations. Because the "new normal" is not about what your country can do to protect your health, it is about what you can do for your biosecurity State. In Johnson's words:

"..In this fight we can be in no doubt that each and every one of us is directly enlisted. Each and every one of us is now obliged to join together, to halt the spread of this disease."

On 23rd March 1933 Hitler was bestowed with supreme executive power (plenary power) by the German Enabling Act. Just as the Nazi's exploited the Reichstag Fire to seize dictatorial control, so the UK State used the *pseudopandemic* to do the same. In both cases, trampling all over their national constitutions.

Tellingly the UK State did not use the available legal provisions created for national emergencies, such as pandemics. The <u>Civil Contingencies Act 2004</u> [56] (CCA) was formulated following lengthy consultation and debate and gave the State (executive) the plenary powers considered necessary to deal with a real national emergency.

The CCA also severely restricted those powers, in order to protect both the constitution and democracy. It set a strict time limit of 30 days for *emergency powers* and compelled the government to continually return to parliament to extend their *authority* if necessary.

The *pseudopandemic* was planned to deliver permanent economic, social and political change. In order to achieve this, emergency powers had to be sustained and the State needed to ignore the constitution and sideline democracy. While the CCA was more than adequate to deal with a genuine pandemic, the *pseudopandemic* wasn't real and the parliamentary oversight mechanisms within the CCA would have quickly exposed it.

By not invoking the CCA the UK State were among many around the world who did not formally declare a *State of Emergency* in response to COVID 19. In legal terms, the *pseudopandemic* was <u>not a national emergency</u> [56].

By using the system of global authority, in concert with extensive planning, and by maximising the advantages of compartmentalisation, the *core conspirators* guided global public private partnerships and strategically positioned *informed influencers* to consolidate their political control. They had successfully converted their financial means into the political means required to operate the *pseudopandemic*.

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Chapter 3 - Who Cares About The Risk

For any jury to be satisfied, beyond a reasonable doubt, that a criminal is guilty the evidence must convince them that the accused had the means, motive and opportunity to commit the crime. As we continue to explore the principle mechanisms which facilitated the *pseudopandemic* we need to consider if the *core conspirators* had the opportunity.

Hitherto we have used the term "State" to refer to a public private partnership. It is a partnership between government, non governmental organisations (NGO's), philanthropists and their foundations, private corporations (including the mainstream media - MSM), think-tanks and intergovernmental organisations.

Private interests dominate this *State*. The State makes use of academic and scientific institutions, government agencies and departments, civic institutions and nominally public services, to serve those private interests.

Seen in this way, the State is essentially a method for transferring wealth from the people, via taxation and debt, to the group within which the *core conspirators* reside. This relationship provides them with the means of population and behaviour control. The *core conspirators* could exercise authoritarian control over the State using compartmentalisation and strategically situated *influencers*.

The *pseudopandemic* can be described as the manufactured response to an engineered world-wide health crisis to justify a global <u>paradigm shift</u> [1]. The *pseudopandemic* was a public relations stunt. It was the gross exaggeration of the threat posed by COVID 19.

We'll look at motive later, but the *core conspirators* needed to create social, economic and political upheaval: the *disruptive innovation* described by the UNDP. The chaos the *pseudopandemic* response caused is just beginning to unfold, but its ultimate purpose was to establish the conditions for a global, technocratic *coup d'état*.

The *pseudopandemic* was the deceptive manipulation of the truth about SARS-CoV-2 and COVID 19. This was achieved through the obfuscation of science, the weaponisation of policy, falsification of statistics, propaganda, disinformation and censorship.

This does not imply that there was no threat from COVID 19. Many people have died as a result of the *pseudopandemic*. This included some who died from COVID 19. The fraud was predicated upon very real human suffering. However, we must not allow our grief to stop us asking questions.

The allegation that doing so shows a callous disregard for the dead is a tired and abominable tactic to censor inquiry. It is tantamount to claiming that investigating murder is disrespectful to the victim. We would be wise to consider that it is the murderer who stands to gain most from such emotional blackmail.

There is doubt about the claimed origin of SARS-CoV-2. For example, <u>Waste Water based Epidemiology</u> [2] (WBE) suggests that it was present long before the announced outbreak in Wuhan. Others are convinced it was a man-made virus, deliberately released: the so called "Wuhan Flu."

Regardless of its origin, COVID 19 did not, in any rational sense, constitute a pandemic. For the WHO to claim it did, they had to apply an extremely tenuous definition. Their previously changed parameters enabled them to subsequently declare the COVID 19 pandemic.

COVID 19 presented the *core conspirators* with their opportunity but they would not have been able to capitalise upon it unless they controlled the State. The State was essential to steer the COVID 19 narrative to create the illusion of a pandemic. The deception manufactured the *core conspirators'* global *coup d'état* opportunity.

This concept will be impossible for many to accept. <u>Cognitive dissonance</u> [3] means that even the most well-read among us are unable to contemplate that the State is anything other than our attentive carer.

The <u>Royal College of Surgeons of England</u> [4] (RCSE) revealed how lockdown policies (non-pharmaceutical interventions - NPIs) led to soaring waiting times for National Health Service (NHS) treatment. With nearly 4.5 million people waiting for appointments, the health impact of NPIs (lockdowns) is <u>already acknowledged</u> [5] to be worse than any resulting from COVID 19.

Yet Professor Neil Mortensen, President of the RCSE said:

"...These waiting time figures drive home the devastating impact COVID has had on wider NHS services."

COVID 19 did not have a devastating impact on the UK's NHS (or health services in any other developed nation). It was the policy decision to reorientate health services to treat nothing but COVID 19 which subsequently led them to fail.

In the UK, mirroring the situation in the US and elsewhere, health services have not been *overwhelmed* or even close to it. During the initial outbreak in the spring of 2020, UK claimed mortality peaked on the 8th of April. In an article published on the 13th April the Health Service Journal reported record low bed occupancy rates [6].

During the so called *second wave* in the autumn and winter of 2020, politicians continue to make <u>unsubstantiated claims</u> [7] about NHS COVID 19 pressures. NHS winter pressures are real enough, but there is no evidence COVID 19 exacerbated them. Policy and regulatory responses to the *pseudopandemic* certainly did.

Alleged UK COVID 19 hospital admissions reached their second wave high point of 1,956 on the 11th November 2020. We can describe them as "alleged" because diagnosis of the disease was flawed. Nonetheless, they were declining until the vaccine roll out when, unusually for a respiratory disease, they suddenly started climbing rapidly again to reach a 2021 winter peak of 4,478 on the 12th January

2021. England alone had nearly 95,000 general and acute beds. The <u>NHS reported</u> [8]:

"Hospital capacity has had to be organised in new ways as a result of the pandemic......In general hospitals will experience capacity pressures at lower overall occupancy rates than would previously have been the case."

This was the first pandemic in history characterised by fewer people going to hospital and a reduction in healthcare capacity. Nonetheless, at its worse, there was never any reason to suspect the NHS was likely to be *overwhelmed*. Yet, based upon little more than hearsay and speculation, the MSM continuously deceived the public and gave that impression [9].

Some of the COVID 19 propaganda the MSM engaged in was obscene. They considered this necessary because the vast majority of people had no first-hand evidence of any pandemic.

Their beliefs about the *pseudopandemic* were not formed by experience but rather by the MSM. Absent the 24 hour news cycle and State lockdowns, most of us would have had no idea, or reason to suspect, that a *global pandemic* was supposedly underway.

For example, in April 2020 the MSM reported, without evidence, that an <u>additional 7,500 people</u> [10] *may have* died from COVID 19 in care homes. In reality, health research <u>analysis showed</u> [11] that up to 80% of these people did not die from COVID 19.

This indicated that large numbers of vulnerable people were dying in care homes of something other than COVID 19. Not a single MSM outlet reported this.

The MSM was <u>awash with stories</u> [12] about NHS staff dying from COVID 19. The message was clear: the NHS was the *front line* in the *war* on an *invisible enemy*.

It is uncomfortable to grasp how sick this *disinformation* was. The <u>Health Service</u> <u>Journal</u> [13] reported that, with millions of employees, NHS staff were statistically less likely to die from COVID 19 than the general public.

The MSM used the deaths of these NHS workers as propaganda to prop up the *core conspirators' pseudopandemic*. At the same time, while generating unrelenting COVID 19 *disinformation* and *fake news*, the MSM, whose biggest advertising client was the government, worked in partnership [14] with the State to attack anyone [15] who questioned their *pseudopandemic* PR campaign.

False epidemics and even pandemics are nothing new. In 2007 a whooping cough epidemic was declared at Dartmouth-Hitchcock Medical Center in New Hampshire (US). Nearly 1000 staff were "tested." This resulted in 142 confirmed "cases" and hundreds of staff being furloughed, putting considerable staffing pressures on the Hospital. It later transpired that the whole thing was a false alarm [16]. Panicked staff and patients were probably suffering from nothing more than normal colds.

The false alarm occurred because of the reliance upon highly sensitive molecular testing technology. Dr. Cathy A. Petti, infectious disease specialist at the University of Utah, spoke at the time about the lessons learned:

"The big message is that every lab is vulnerable to having false positives.....No single test result is absolute and that is even more important with a test result based on P.C.R."

In 2007 Imperial College London (ICL) launched the MRC Centre for Outbreak Analysis and Modelling [17] (MRC). Their purpose was to be an international resource for the modelling of infectious disease outbreaks. With Professor Neil Ferguson, already a government scientific advisor [18], directing them, they held contracts to provide real-time disease outbreak analysis and modelling to the UK Department of Health, the World Health Organisation and the US Center for Disease Control.

According to Professor Ferguson, in 2008 they received £10M from the BMGF to set up their <u>Vaccine Impact Modelling Consortium</u> [19] (VIMC), which he also led. The BMGF have given approximately \$300M to Imperial College [20] over the last decade or so. It is entirely reasonable to state that the BMGF funded the models used as the basis for declaring the global *pseudopandemic*.

Imperial College's infectious disease modelling bears about as much semblance to reality as Mario-Kart. In 2002 they predicted 50,000 people in the UK would die of "mad cow's disease," less than 200 did; shortly after forming the MRC in 2007, they predicted up to 200 million deaths from H5N1 bird flu, this has resulted in an estimated 455 deaths globally and a year later they "modelled" 65,000 UK swine flu deaths. Less than 460 died.

In 2009, advised by the <u>BMGF funded MRC</u> [21], the WHO declared H1N1 influenza a *global pandemic*. As usual, Imperial College predicted millions would perish, though the eventual total was <u>18,500 laboratory-confirmed deaths</u> [22] globally.

The WHO's 2009 pandemic claims weren't dissimilar to their declaration of the global *pseudopandemic* on <u>March 11th 2020</u> [23]. Shortly before the 2009 announcement, the WHO changed the definition of "pandemic." <u>The previous WHO definition</u> [24] of an influenza pandemic read as follows:

"An influenza pandemic occurs when a new influenza virus appears...resulting in several, simultaneous epidemics worldwide with enormous numbers of deaths and illness."

This changed to [25]:

"An influenza pandemic occurs when a new influenza virus emerges and spreads around the world, and most people do not have immunity."

This was more in keeping with the Dictionary of Epidemiology [26] definition:

"An epidemic occurring worldwide, or over a very wide area, crossing international boundaries, and usually affecting a large number of people."

It was notable that the WHO removed their reference to illness and mortality and added the concept of immunity. Every person who contracts a disease lacks immunity. If they were immune they wouldn't fall ill in the first place. When you get the flu you aren't immune to it. Claims that COVID 19 was unique because people weren't immune was claptrap.

This equivocation from the WHO regarding immunity was notable. Why replace the meaningful measures of sickness and death with the far less tangible estimate of immunity? Initially this appeared to make no sense. Yet there was method in the WHO's apparent madness. If you define the problem as immunity then the solution to declared pandemics becomes vaccines.

The WHO went to considerable lengths, including what appeared to be the deliberate sabotage of scientific investigations into potential COVID 19 treatments, to make sure vaccines were the only offered solution. The importance of vaccines to the *pseudopandemic* will become clear when we discuss the *core conspirator's* motives.

Under the WHO's new definition, every annual flu strain can be called a *pandemic* regardless of the presence (or absence) of any associated illness or mortality. A definition from the world's leading health experts that most people would regard as bizarre. Though it is very useful if you want to declare a *pseudopandemic*.

The WHO say that they go through a number of processes (phases) before declaring a pandemic. This makes no material difference. Both the CDC in the US and the UK State have adopted the WHO's new, far more vague definition. The full extent of the UK State version [27] doesn't require anyone to be ill either:

"[Pandemics] are the result of a new pathogen emerging and spreading around the world."

When the WHO were investigated for *falsely declaring the H1N1 pandemic* by the <u>Parliamentary Assembly of the Council of Europe</u> [28] (PACE) they presented a strange defence. They claimed their definition of a pandemic <u>was't really a definition</u> [29] and had no bearing upon their six declaration *phases*. Yet they had plainly offered two distinct definitions.

There is little doubt that the WHO falsely declared a pandemic in 2009. Their decisions were riven with significant conflicts of interest and the evidence that a genuine pandemic occurred doesn't exist. Had they maintained their previous definition, they could not have declared the H1N1 *global pandemic*. H1N1 would have been recorded for what it was. A fairly unremarkable flu season.

When the <u>British Medical Journal and the Bureau of Investigative Journalism</u> [30] investigated they noted the collaboration between the WHO and the European Scientific Working Group on Influenza (ESWI). The ESWI were almost entirely

funded by the pharmaceutical corporations. Many of the WHO and ESWI scientific advisors were also employed, or funded by, the same pharmaceutical corporations. The WHO did not disclose these relationships when it declared its "pandemic."

PACE launched their investigation because the H1N1 pandemic was indistinguishable from normal seasonal influenza [31]. Unconvinced by the WHO's denials, PACE issued a damning report [32], not only of the WHO, but also of so called competent health authorities at both the national and European level.

Despite the WHO and their *partners'* refusal to disclose information to the PACE investigators, their report was comprehensive. They found a lack of transparency in decision making, habitual distortion of public health priorities, enormous waste and clear evidence of the undue influence of pharmaceutical corporations. PACE determined that this led to:

"Unjustified scares and fears about health risks faced by the European public at large."

Imperial College's MRC hasn't just been wrong. Its unrestrained inaccuracy has been remarkably reliable. It's BMGF funded models have never erred by underestimation and have consistently exaggerated the threat enormously. To reiterate, they are funded by a *philanthropic* foundation which profits, via its trust, from the sale of vaccines.

Irrespective of what you make of this conflict of interest, experience and common sense should be enough to dissuade anyone from taking Imperial College' predictions seriously. Especially among government scientific advisors like the Scientific Advisory Group in Emergencies (SAGE) [33].

They had ample opportunity to discuss these repeated errors with Neil Ferguson as he was a SAGE committee member at the time. Though he had to resign after contravening the lockdown rules [34] his own predictive models allegedly justified. He was in good company.

<u>Dr Catherine Calderwood</u> [35] (Scotland's Chief Medical Officer), resigned after driving to her children to the family holiday home during lockdown. Damian Cummings (then chief advisor to the UK Prime Minister), Robert Jenrick MP (Housing and Communities Minister), Stephen Kinnock (Shadow Minister for Asia and the Pacific and husband of former Danish Prime Minister Helle Thorning-Schmidt) and <u>Tobias Ellwood</u> [36] MP (Chair of the Defence Select Committee and a serving Officer in 77th Brigade - more on them later) were among the many influential people who were accused of breaking the lockdown rules they strongly advocated for everyone else.

While this doesn't matter much, it does illustrate a point. The people who most emphatically stressed that COVID 19 was a dire health risk, especially Ferguson and Calderwood, those who supposedly had access to the best scientific evidence about the scale of the threat, didn't believe it was a risk to them or their families.

Given their pandemic track records, you might think someone *in authority* would have questioned Imperial College's model or the WHO's opinion about what does or does not constitute a global pandemic. No one did.

The scientists, medical professionals and independent journalists who questioned the *pseudopandemic* were ignored or attacked by the MSM and censored by the social media companies. Any who questioned the *"official truth"* were castigated as *"conspiracy theorists"* or *COVID-idiots*.

For the *core conspirators*, their control of global health authorities meant the *pseudopandemic* progressed smoothly. The UK State, along with the rest, doffed their caps, believed everything Imperial College and the WHO told them, asked no questions, and set about destroying their own nation and the people who lived in it.

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Chapter 4 - Keeping Us Safe

The majority of people who worked for the organisations which were complicit in the *pseudopandemic* fraud were *unwitting influencers* or other committed professionals who genuinely believed their work was beneficial. Only the *core conspirators* and their immediate *informed influencers* wanted to cause harm and create economic, political and social chaos. This was necessary to lead the world towards their planned solution.

As COVID 19 was a disease with a low mortality rate, comparable to seasonal influenza, its destructive potential alone was insufficient. Further measures to increase the public health risk were required to capitalise on the COVID 19 opportunity. Both informed and deceived *influencers* were vital to create the desired *pseudopandemic* disruption.

Neil Ferguson, from Imperial College London (ICL), was apparently indispensable to the UK State. They seemingly could not let him go, and were committed to protecting him. We might ask why he was such a key figure. He has no particularly relevant qualifications.

Ferguson studied at Oxford University achieving a BA in Physics in 1990 and in 1994 he earned his Ph.D in Theoretical Physics. He has no formal qualifications in the either the biological or computer sciences, nor any training as an epidemiologist.

In May 2020, unconcerned about the risk of COVID 19, Ferguson received a visit from another household [1] to continue his affair with a woman that was not in his familial "bubble." The UK Health Secretary Matt Hancock said the social distancing rules applied to everyone and that Ferguson was right to resign as a government advisor. Hancock added that it was "just not possible" for Prof. Ferguson to continue in his government advisory role.

The Health Secretary misled the public. Ferguson continued as a government scientific advisor through his role within the New and Emerging Respiratory Virus Threats Advisory Group (NERVTAG) who contribute to SAGE.

Reportedly, <u>a government spokesperson</u> [2] said that Prof. Ferguson was considered *"one of the world's leading epidemiologists."* It is worth noting the explanation given by Prof. Ferguson regarding why he had felt it was OK for him to ignore his own advice:

"I acted in the belief that I was immune, having tested positive for coronavirus and completely isolated myself for almost two weeks after developing symptoms."

As one of the world's leading epidemiologists, though unqualified, he was referring to the concept of natural immunity. There were no available COVID 19 vaccines when Ferguson spoke about his natural, post infection resistance to the disease.

The idea that this natural immunity reaches a critical point within a population, where the disease is no longer able to infect new hosts, is called the herd effect (often referred to as *community* or *herd immunity*). Empirical data, appearing to demonstrate the *herd effect*, has been the <u>subject of scientific of debate</u> [3] for many years.

What can be said is that diseases do not infect entire populations and some people are already immune. The debate relates to whether or not the *herd effect* partly explains this. The basic notion is that once a sufficient number of possible hosts have been infected they develop natural immunity and exhaust the pathogen's ability to spread. Protecting others, who may never be infected as a result.

The theory is born from observations in veterinary medicine and has nothing to do with vaccination. At the point where a disease runs out of viable hosts it's impact upon public health and mortality is consistently observed to wane. Many scientists suspect this may be due to the Herd Immunity Threshold (HIT.) On balance, the evidence strongly favours herd immunity as a working hypothesis.

During the 2003 SARS outbreak [4] in Hong Kong for example, the disease distribution followed the familiar "bell curve" suggested by Farr's Law [5]. Some social distancing, limited quarantine of the most vulnerable and increased vigilance of basic hygiene, saw the disease pass through the usual phases without any possible vaccine intervention.

The herd immunity hypothesis seeks to explain why this disease pattern is invariably observed. If human populations were unable to naturally resist disease we would have gone extinct thousands of years ago. *Community immunity*, in some form, is an obvious epidemiological fact. How that immunity occurs is the question.

Researchers from Oxford University's Department of Zoology [6] published a paper explaining the theoretical HIT for SARS-CoV-2. They identified three distinct viral phases:

"(I) an initial phase of slow accumulation of new infections (often undetectable), (II) a second phase of rapid growth in cases of infection, disease and death, and (III) an eventual slow down of transmission due to the depletion of susceptible individuals, typically leading to the termination of the first epidemic wave. The point of transition between phases I and II is known as the herd immunity threshold (HIT)."

By mid to late December 2020 numerous studies had <u>detected existing immunity</u> [7] to SARS-Cov-2 in the general population. This may well have been the result of our previous, widespread exposure to similar coronavirus such as SARS and the coronavirus strains which cause the common cold. Growing evidence suggested <u>T-cell immunity</u> [8] may have been key to this apparent *"community immunity."* It appeared that the HIT for SARS-CoV-2 was likely to be somewhere in the region of 20 - 40%.

None of this science had anything to do with vaccines. These studies were of unvaccinated populations. The epidemiological variations were attributable to other risk factors such as age and comorbidity, not vaccine uptake. The "herd effect" and the HIT were concepts that squarely related to the human beings' natural immunity to disease, which must exist or we wouldn't.

The gradual transition towards attributing *herd immunity* solely to vaccines can be seen in a 2011 paper <u>by researchers from McMaster University</u> [9] in Canada. The McMaster researchers said:

"The herd effect or herd immunity is an attractive way to extend vaccine benefits beyond the directly targeted population. It refers to the indirect protection of unvaccinated persons, whereby an increase in the prevalence of immunity by the vaccine prevents circulation of infectious agents in susceptible populations......A high uptake of vaccines is generally needed for success."

McMaster were suggesting that vaccination was the key to improved *herd immunity*. They have a long history of considerable industry funding. Through their MILO program [10] they have generated more than \$500M in "income" in the last 5 years. Among their numerous industry and philanthropic partners are the BMGF who have contributed more than \$20M [11] to McMaster's since 2015.

Insisting that herd immunity is *only* possible through vaccination was a <u>persistent theme</u> [12] in the MSM even prior to the *pseudopandemic*. The <u>BBC defined</u> [13] herd immunity as:

"The protection given to a population against an outbreak of a specific disease when a very high percentage of the population have been vaccinated against it."

There is no scientific justification for this claimed definition. The BBC went on to allege disease can only be combated with vaccine programmes.

As was common with promoters of the *pseudopandemic*, they simply ignored all the science which demonstrated their assertions weren't true. The 2003 SARS outbreak in Hong Kong could not be acknowledged because it illustrated how far removed from science their *science reporting* had become.

This claim was found in the BBC's Bitesize series for GCSE students (16 yr olds). Ensuring that young people "learn" the right medical science, despite it being incorrect. The BBC were not alone in "memory holing" inconvenient facts and scientific evidence.

The US. Center for Disease Control (CDC) <u>once reported</u> [14] that between 10 - 30 million US citizens were vaccinated with a Polio vaccine containing the carcinogenic SV40 virus. That fact has now been consigned to the dustbin of inaccessible history. The page has been removed from the CDC website and all reference to it expunged from their documentation.

During the *pseudopandemic* the WHO were engaged in exactly the same kind of *memory holing*. Until recently the WHO <u>definition of herd immunity</u> [16] was:

"Herd immunity is the indirect protection from an infectious disease that happens when a population is immune either through vaccination or immunity developed through previous infection."

This explains why Neil Ferguson thought his natural immunity would allow him to safely ignore his own lockdown advice. He apparently got this *fact* wrong because the world's leading global health authority had *memory holed* any link between natural immunity and resistance to disease in the interim. The WHO's new definition now reads:

"Herd immunity, also known as 'population immunity', is a concept used for vaccination, in which a population can be protected from a certain virus if a threshold of vaccination is reached....Herd immunity exists when a high percentage of the population is vaccinated....For example, herd immunity against measles requires about 95% of a population to be vaccinated."

All the science looking at T-Cell immunity and the SARS-CoV-2 HIT is now invalid and meaningless. The hundreds of scientists and medical researchers, meticulously analysing the data and the epidemiological evidence, were wasting their time, because *herd immunity* can only officially be derived from vaccines now. There is no such thing as natural herd immunity in the post *pseudopandemic* world.

Scientific knowledge was apparently changed thanks to the science free opinion of one man. The new version of *herd immunity* was announced by Tedros Adhanom Ghebreyesus in his <u>media briefing on 13th October 2020</u> [17]. His announcement to the gathered MSM formulated the new, globally accepted definition. No science required.

There is no new scientific evidence that provides any basis for this claimed definition of herd immunity. With a few keystrokes, the WHO simply changed *the science*. This version is now being taught to children, some of whom will go on to be the scientists of tomorrow. Whether they question this or not, it will be necessary for them to regurgitate it in examinations if they wish to pass.

The official *pseudopandemic* truth was enforced by the MSM and the tech giants who dominate social media and online search results. Alphabet's shell company Google own Youtube, the worlds second largest search engine, Google itself being the first. Their policy on so called <u>medical misinformation stated</u> [18]:

"YouTube doesn't allow content that spreads medical misinformation that contradicts the World Health Organization (WHO)."

The modern adage of "Google it" is only any use if you want to know what the State approved truth is. If you want to know what the actual truth is you need to be creative with your search operators, use different search engines and sources, and

cross reference the information. Something most people, leading busy lives, are unlikely to do. Thus "*Googling*" their information during the *pseudopandemic* told them practically nothing beyond reaffirming the belief system required of them.

Facebook <u>updated their community guidelines</u> [19] to ensure users on their Facebook and Instagram platforms were directed to the *official truth*. For example, anyone who shared or liked a post which linked to a peer reviewed study investigating natural herd immunity had their thinking corrected for them by Facebook. They proudly announced:

"We've now directed over 2 billion people to resources from the WHO and other health authorities through our COVID-19 Information Center.....We're going to start showing messages in News Feed to people who have liked, reacted or commented on harmful misinformation about COVID-19....These messages will connect people to COVID-19 myths debunked by the WHO."

Harmful misinformation was thus defined as anything which questioned the unscientific pronouncements of the WHO. Twitter, who declared their intention to reframe users minds if they ever questioned vaccines [20], provided perhaps the most succinct description of how the core conspirators were able to control online information. Wedged firmly inside the Global Public Private Partnership (GPPP), Twitter stated [21]:

"Experts, NGOs, and governments play a pivotal public service role, using Twitter to reach people with the right information when they need it. We're committed to playing our part to amplify authoritative, official content across the globe."

As far as the social media giants were concerned, the WHO, with their conveniently changed definitions, poorly evidenced assertions and a history of scientific and public health fraud, were the leading arbiters of the truth. Evidence only existed if the WHO *approved* it.

No matter how much evidence supported a qualified opinion, unless the WHO sanctioned it, it was *memory holed*. Along with everything else that didn't fit with the *pseudopandemic* agenda.

This is the power of compartmentalised authority. It was not necessary for many thousands of co-conspirators to collaborate for the *pseudopandemic* to proceed. Our unquestioning acceptance of authority sufficed. The *core conspirators* reach extended into our minds. The billions who got the bulk of their information from social media could be corralled into online *communities*, sharing sources with the like-minded, reinforcing each others opinions within walls defined for them by the GPPP.

Those engaged in the brainwashing weren't necessarily aware of the deception or in agreement with it. It wasn't essential for the algorithm programmers and the fact

checking researchers, the online monitors and the decision making panels to be actively intent upon promoting *disinformation*. All that was required was their belief in authority.

While the people accepted that others had the right to define truth for them, and while populations considered some experts to *outrank* others, then dividing us into information silos, pitting us against each other, creating identity groups and guiding our minds toward acceptance of the official *pseudopandemic truth*, couldn't have been easier for the *core conspirators*.

One of the WHO's official truths [22] was that "studies show hydroxychloroquine does not have clinical benefits in treating COVID-19." Technically this was correct. Some studies did show no clinical benefit. The WHO's claimed fact was also disinformation by omission.

Chloroquine, and its analogue Hydroxychloroquine (HCQ), were known to <u>inhibit</u> the spread of viral SARS [23] in cell cultures. When COVID 19 supposedly broke out in Wuhan it was an obvious drug treatment for Chinese researchers to trial.

By the 4th February 2020 chloroquine was showing <u>promising initial results</u> [24]. Researchers at the Wuhan Institute of Virology stated:

"Our findings reveal that....chloroquine [is] highly effective in the control of 2019-nCoV infection in vitro. Since these compounds have been used in human patients with a safety track record.....we suggest that they should be assessed in human patients suffering from the novel coronavirus disease."

By February 19th 2020 Chinese researchers from Qingdao University had published <u>clinical trial results</u> [25]. They provided the references to the controlled clinical trial data sets, making them available to the global scientific community. Singling out chloroquine, they reported:

"Results from more than 100 patients have demonstrated that chloroquine phosphate is superior to the control treatment in inhibiting the exacerbation of [COVID 19 induced] pneumonia, improving lung imaging findings, promoting a virus negative conversion, and shortening the disease course."

Ideally science and medicine should be free from the influence of multinational corporations and the GPPP. However, the British Medical Journal reported that <u>it is not</u> [26]:

"Politicians and governments are suppressing science.. Science is being suppressed for political and financial gain. Covid-19 has unleashed state corruption on a grand scale, and it is harmful to public health. The pandemic has revealed how the medical-political complex can be manipulated."

Just because something is labelled *medical science* we shouldn't assume it is based upon the objective examination of scientific or medical evidence. We must consider who funds the research, what their goals are and what lengths they may be willing to go to in order to achieve them.

As we have already discussed, despite the obvious need to trial Hydroxychloroquine, Ivermectin, high dose VitD and other potential treatments, the WHO were perfectly prepared to cite fraudulent science to discredit treatment protocols. In their efforts to stop adoption of hydroxychloroquine it is now clear that they, and their *partners*, were willing to put lives at risk.

Among the COVID 19 myths *debunked* by the WHO was the considerable body of scientific and medical evidence demonstrating the potential efficacy and safety of a Hydroxychloroquine based treatment protocol. The WHO managed to *debunk* this by simply refusing to trial it. Instead they worked with their *partners* to create HCQ trials that were so dangerous it is a wonder anyone survived.

The WHO *mythbusted* the study by researchers at the New York <u>Grossman School of Medicine</u> [27] who reduced COVID 19 mortality rates by 44% using the protocol; they tore Brazilian clinician's evidence that the protocol <u>reduced hospital admissions by 300%</u> [28] to shreds; they eviscerated Chinese doctor's reports of reduced fever severity and duration, improving clinical outcomes <u>using chloroquine</u> [29]; Spanish doctors, who used Hydroxychloroquine to <u>increase patient survival rates</u> [30], were fantasists; US researchers who discovered the addition of zinc improved the <u>effective treatment protocol</u> [31] were full of it and both the systemic review by <u>Indian researchers</u> [32] and the analysis of available studies <u>by US scientists</u> [33], who both found consistent evidence of treatment efficacy and safety, was baseless *anti-science*. According to the WHO.

The social media giants were tasked with clamping down on anyone who highlighted the scientific and medical evidence which questioned the WHO's edicts. It was common knowledge among content creators that they could not mention the "H" word, as that would result in the automatic removal of their videos, podcasts and articles. Criticism of the *pseudopandemic* has now effectively been outlawed in our free and open democracies which value free speech, freedom of expression and evidence based inquiry.

A team of qualified doctors formed a group called "American Frontline Doctors." They held a press conference questioning the medical evidence supposedly underpinning the *pseudopandemic*. Their video garnered 17 million views in 8 hours before being banned [34] from Facebook and YouTube.

Some of their statements seemed politically motivated but these were qualified doctors expressing their views and giving their account of treating COVID 19 patients. Their motivation should not be our primary concern. It is the fact that their medical opinions were censored that should worry us. None of us have any hope of

exercising critical thinking or exploring the evidence if our access to it is effectively barred.

The treatment protocol called the *Marseilles Treatment* (hydroxychloroquine with the antibiotic azithromycin - HCQ+AZ - plus zinc to aid absorption) was recommended for use in the early stages of COVID-19, or even prior to developing the disease, as a prophylaxis. This cheap, over the counter treatment protocol, if found effective, could have been widely used to save lives.

Clinicians around the world had to fight the authorities to be allowed to use it. In the US the Association of American Physicians and Surgeons (AAPS) launched an appeal against an FDA injunction [35] stopping them prescribing HCQ for their COVID 19 patients. In France, as the pseudopandemic was emerging in China, HCQ was reclassified in all its forms [36] as a poisonous substance. Thus ending more than 50 years of the public's free access to the drug from high street pharmacies across the country.

The case fatality rate (CFR) for the oldest COVID-19 patients was reported by the MSM to rise to more than 14% [37]. Professor Didier Raoult's largest field study of the Marseilles Treatment, evaluating more than one thousand patients, showed that the CFR for the oldest patients dropped to 0.5% [38].

Experienced practitioners and senior physicians could not understand the fierce resistance to trialling the Marseilles Treatment. Prof. Harvey Risch, MD, from Yale University, wrote that that it should be used immediately [39] as an early therapy for COVID-19 patients:

"Hydroxychloroquine+azithromycin has been widely misrepresented in both clinical reports and public media.....Five studies, including two controlled clinical trials, have demonstrated significant major outpatient treatment efficacy......These medications need to be widely available and promoted immediately for physicians to prescribe."

Relenting to public pressure the WHO finally authorised global trials. However the trials were carefully designed not to test the possible prophylactic properties and early onset efficacy. Instead they were constructed to make sure HCQ would never threaten the planned COVID 19 vaccines.

The WHO announced their "Solidarity trials" [40] on March 18th. "Solidarity" is an interesting word we will discuss later, but the trials were designed to look at a range of treatments including HCQ and vaccines.

The French medical research agency Inserm (Institut national de la santé et de la recherche médicale) initially refused to trial HCQ at all. Preferring to run their own parallel <u>Discovery Trials</u> [41], speaking 4 days before the WHO announcement, the head of the REACTing (REsearch and ACTion targeting emerging infectious diseases) Prof. Yazdan Yazdanpanah said HCQ would not be included [42]

The WHO did include HCQ in their Solidarity trials and Inserm caved in, reluctantly including it in theirs. However, like the WHO, they refused to trial the Marseille Treatment and would only test HCQ, in isolation, with the most severely ill COVID 19 patents. Totally contrary to its recommended use and avoiding any investigation of the protocol used across the world by practising clinicians to actually save people's lives.

The British also elected to run their own trials. They ran three separate experiments. The RECOVERY, PRINCIPLE and COPCOV trials.

The <u>Recovery Trials</u> [43] were funded by *partners* including the BMGF and Oxford University who were *partnered* with Astrazeneca in COVID 19 vaccine development. They didn't trial the Marseille Treatment either and insisted upon ignoring the clinical evidence. They too only gave HCQ to the very sickest COVID 19 patients. Of all the Hydroxychloroquine trials, theirs was the most lethal.

The maximum recommended dose of HCQ in the UK is no more than 200 - 400 mg [44] per day. While all of the known risks associated with the drug are encountered either with long term, sustained use or overdose, severe toxicity is possible if used incorrectly. Even before banning it, the French considered 1800 mg per day to be *lethal* poisoning [45].

Many of the patients unfortunate enough to be subjected to the Recovery Trials were already fighting for their lives against severe respiratory illness. Across 175 UK hospitals, 1542 patient participants were given 2400 mg (six times the recommended maximum dose) on the first day, followed up by ten days at 800 mg.

Unsurprisingly, the mortality rate among HCQ subjects in the deceptively named Recovery Trials was 25.7%. They actually <u>killed more COVID 19 patients</u> [46] than they would have done had they used the standard model of care. As a trial to investigate the effectiveness of a treatment protocol it was absolutely useless. As a showcase to prove Hydroxychloroquine could kill, it was perfect.

By contrast, the <u>Marseilles Treatment</u> [47], recommended by physicians the world over, administered 200mg of Hydroxychloroquine three times daily (600mg total) in combination with antibiotics (limiting toxicity risks) and zinc (aiding rapid absorption and further limiting toxicity risks.) To this day, neither the WHO, nor the majority of their *partner* national health authorities, have ever bothered trialling this treatment in any of their "apex trials" for COVID 19.

Not <u>every nation on Earth [48]</u> was convinced by the WHO's antipathy towards HCQ. South Korea, China and India all <u>incorporated Hydroxychloroquine [49]</u> treatments into their COVID 19 response measures. Currently, COVID 19 deaths per million of the population (DPM) in the UK is said to be 1,873. In the US the claimed figure is 1,836. In India (who also widely used Ivermectin) the DPM is 245, it stands at 38 in South Korea and in China it is just 3.

There are other factors, such as population density and age distribution, which could impact COVID 19 mortality rates. Nonetheless, while correlation does not prove causation, the use of both Hydroxychloroquine and Ivermectin correlates directly with reduced COVID 19 mortality.

Following the WHO's announcement of their Solidarity Trials, most Hydroxychloroquine arms started recruiting in late May. Within days of them starting to recruit, the WHO cited the fraudulent Surgisphere paper, published in the Lancet, to suspend them.

Once the paper they used had been exposed by real scientists, the WHO announced it would re-instigate trials on the 3rd of June. These took a few weeks to restart before the WHO declared that Hydroxychloroquine would no longer be included in trials on the 4th of July [50] 2020.

The only UK trial investigating the use of HCQ as a potential prophylaxis for public use, was the PRINCIPLE trial. Citing the WHO suspension and the "evidence" produced by the RECOVERY trial, they <u>ceased trialling HCQ</u> [51] on the 22nd June 2020.

The PRINCIPLE research team stated that the UK Medicines and Healthcare products Regulatory Authority (MHRA) ordered them to stop HCQ trials based upon the retracted Surgisphere paper. They never recommenced.

The <u>COPCOV trial</u> [52] didn't investigate the Marseilles Treatment either. However, it is ongoing and struggling to make headway, having only secured 236 participants in the UK. Perhaps this is unsurprising given the MSM's unremitting and <u>frequently ridiculous attacks</u> [53] on HCQ. The BBC called it the "Trump drug."

The WHO's approach to *proving* vaccine efficacy and safety could not have differed more. They created a compliance framework that placed absolutely no demands upon vaccine manufacturers at all. The pharmaceutical corporations could have produced a nothing and it would still have been approved as a COVID 19 vaccine by the WHO.

For a COVID 19 vaccine to be considered *effective*, the WHO stated it must meet their <u>Target Product Profile</u> [54] (TPP). In order for a vaccine manufacturer to demonstrate efficacy for their vaccine candidate The WHO wanted to see:

"At least 70% efficacy (on population basis, with consistent results in the elderly). Endpoint may be assessed vs. disease, severe disease, and/or shedding/transmission."

Where long term (LT) efficacy is determined by:

"Active immunization of at-risk persons to prevent COVID-19"

As long as the vaccine reduced incidents of COVID 19 to 30% of the target population or below, it had proved its efficacy to the WHO's satisfaction. At the time

of writing, with a claimed 173 million COVID 19 cases worldwide, in 18 months, only 2.02% of the global population have ever allegedly contracted COVID 19 which means 98% of the population haven't.

As long as the vaccine doesn't *increase* COVID 19 by more than 28% of the population, it works as far as the WHO's TPP's are concerned. A syringe full of saline solution would easily meet the WHO's exacting vaccine efficacy standards. From a clinical perspective, it doesn't need to do anything at all.

This makes achieving WHO vaccine safety requirements easier than falling off a log. The WHO define their long term vaccine safety requirements as:

"Safety and reactogenicity sufficient to provide a highly favourable benefit/ risk profile in the context of observed vaccine efficacy."

As practically anything that doesn't kill more than 30% of the global population will be deemed effective by the WHO, a favourable benefit/risk profile is assured as long as the vaccine doesn't cause serious harm to more than 2 billion people. Obviously, if that were the case, the harm from the vaccine would dwarf the potentially harm caused by COVID 19. However, a vaccine that is considerably more dangerous than COVID 19 would still satisfy the safety standards required by the WHO.

According to the official *pseudopandemic* story, COVID 19 was a significant threat to life, there were no known treatments and no one was immune. Resistance to trialling promising treatment protocols made no sense if the WHO's intention was to save *life*.

Nor was it reasonable to design dangerous vaccine efficacy and safety standards, allowing manufacturers wide scope to produce a drug potentially more harmful than the disease it supposedly combats, if the objective was to "keep people safe." What these measures show is that saving life was never a concern for the core conspirators who control the GPPP State.

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Chapter 5 - A Testing Time

The *pseudopandemic* transformed the perception of a nasty but statistically unremarkable disease into wide acceptance of an epochal event. COVID 19 was the potential opportunity, but in order to capitalise upon it, the *pseudopandemic* narrative needed to blow the perceived risk out of all proportion.

The term "State" can be seen as a collective noun for the constituent organisations that form the Global Public Private Partnership (GPPP): the GPPP is the global State. National governments operate as partner organisations within the GPPP. Governments are effectively State franchises.

The *core conspirators* are part of the inner circle who hold ultimate authority within the GPPP. In order for their *pseudopandemic* plan to work it was essential that we believed it. To this end they used their *informed influencers* to corrupt and manipulate scientific, medical and statistical data. They then presented this fabrication to us as the evidence substantiating the *pseudopandemic* claims.

Imperial College's Centre for Outbreak Analysis and Modelling (MRC) produced Report 9 [1] assessing the value of using non pharmaceutical interventions (NPI's) to reduce the public health impact of COVID 19. It was one of two key documents which lent the *pseudopandemic* fraudulent scientific legitimacy. Claiming they were "led by science," the UK State used Report 9 [2] as justification for severe lockdown restrictions.

Report 9 was based upon the computer generated models of the MRC. The code used to produce the micro-simulation models <u>was extremely poor</u>. [3]

Founded upon little more than <u>mathematical guesswork</u> [4] the code was littered with calculation and basic coding errors. It was incoherently constructed and absent the necessary annotation. Imperial's code was described by one <u>investigating software engineer</u> [5] as "Sim City without the graphics."

It seems some at Imperial College London (ICL) knew the Report 9 models were junk. The version eventually released to investigators on the Microsoft code depository [6] GitHub was not the original version used to create Report 9. When engineers requested sight of the initial code, ICL representatives said that the Report 9 code had "essentially the same functionality," and that they did "not think it would be particularly helpful to release a second codebase which [was] functionally the same".

Yet when investigating software engineers <u>reverse engineered the code</u> [7] that ICL released, they found numerous amendments such as algorithm updates, the removal of corrupted data and attempted bug fixes. Hardly "functionally the same."

Despite ICL efforts, the code they offered, though presumably better than the one they used for Report 9, was so poor its obvious failings remained apparent to any professional coder who reviewed it. This included Steve Baker MP who said:

"As a software engineer I am appalled."

Once the politicians had been fed Report 9, it was released to the public on March 16th. It was based upon little more than <u>a series of assumptions</u> [8] and was practically meaningless from a scientific perspective, but it served well as propaganda. It cast an almost apocalyptic shadow over the nation's psyche.

It was Report 9 which gave us all first sight of the orders we had to obey to "stay safe." Effectively introducing the concept of a <u>biosecurity state</u> [9] to an unsuspecting public. Once in the hands of the *informed influencers* within the State franchise, it was the gift that just kept giving.

It alleged that if the UK politicians did nothing, 81% of population would become infected and more than half a million would be dead by August. For the US the alarming projection was that 2.2 million would perish. The Bill and Melinda Gates Foundation (BMGF) funded "science" of Imperial College was the fulcrum upon which the political world, and our society, pivoted.

The MSM eagerly reported its predictions with comments like "warnings don't come much starker than that." Indeed not, it was propagandised as a truly terrifying warning. However, the MSM narrative spun from Report 9 had virtually no empirical scientific basis and was the product of a badly written, fantasy computer model.

The MRC produced their modelling error of an 81% population infection rate by assuming a reproduction number (R0) of 2.4. Meaning every person infects 2.4 others on average. This had already been proven not to be the case for SARS-CoV-2 by numerous of scientists.

Epidemiologists (and many other scientifically qualified experts) knew that the notion of a prolonged duration of near exponential growth in COVID 19 infections, as suggested by ICL's models, was wrong. Not only did Report 9 ignore seasonal variations in respiratory illness, scientists already had hard data from China [10] and elsewhere to prove that COVID 19 epidemics rapidly became sub-exponential before peaking and then steadily declining.

One of the worst possible environments for a viral respiratory disease outbreak is a cruise liner. They are notorious for infections. COVID 19 had broken out on the Diamond Princess forcing 3711 passengers and crew to quarantine together on the ship for nearly a month. This presented a perfect opportunity to study COVID 19 in an isolated human population.

The <u>resultant study</u> [11] showed that, following prolonged exposure in an enclosed environment, 19% of the 3711 people onboard were infected with SARS-CoV-2. Rather than 81% being infected, as ICL assumed, the precise opposite was true. The percentage of people free from infection was 81%. The Diamond Princess study was published on the 9th March, before Report 9 and nearly three weeks before the announced lockdown policies.

<u>Farr's Law</u> [12] is observed with all respiratory viral diseases. It describes the initial rate of increasing infection before it levels off and then declines in any given population. When epidemiologists observe the point at which the initial infection rate starts to slow down, they can calculate the scale of the outbreak from there with some confidence. This is not new to epidemiology.

That rate reduction <u>occurred in the UK</u> [13] on March 4th. From that point onward the trajectory of the infection was set, no matter what interventions the politicians dreamed up. The State franchise imposed lockdowns began three weeks later.

Though not an epidemiologist, Nobel laureate and Stanford biophysicist Prof. Michael Levitt had been analysing the COVID 19 data since January. His statistical approach evidenced how Farr's law consistently applied to COVID 19 outbreaks.

He observed that the infection data looked like a <u>Gompertz curve</u> [14] and also noted numerous anomalies in the data that required explanation. He had been reporting his findings since February and had made them <u>publicly available</u> [15].

He recorded that deaths and infection rates peaked and then started to decrease in Wuhan in early February. He demonstrated, from this distribution, that he could calculate what the infection and death toll would eventually be. His prediction of around 3,250 deaths and 80,000 infections by mid-March were <u>unerringly accurate</u> [16].

However, his view, and that of many other scientists, contradicted the BMGF funded alarmism of ICL's MRC. Prof. Levitt was just one among the many ignored scientists and statisticians. His science did not support the *pseudopandemic* storyline. Consequently his work was <u>effectively censored by the MSM</u> [17] and heavily policed by the State franchise's <u>online search partners</u> [18].

Lockdown policy was effectively defined in Report 9. The solution it strongly advocated was *Suppression*. This was expressed in terms of Non Pharmaceutical Interventions (NPI's):

"Suppression will minimally require a combination of social distancing of the entire population, home isolation of cases and household quarantine of their family members. This may need to be supplemented by school and university closures.....The major challenge of suppression is that this type of intensive intervention package – or something equivalently effective at reducing transmission – will need to be maintained until a vaccine becomes available.....we predict that transmission will quickly rebound if interventions are relaxed....measures will need to be reintroduced if or when case numbers rebound."

The *suppression* model suggested by ICL did not recommend the lockdown of the entire population, only of those infected and their families. However the State franchise took this as a green light to place everyone under house arrest. No one in

Ferguson's ICL team objected. They have remained enthusiastic supporters of mass lockdowns.

With the whole population under orders to obey, the biosecurity state was created. There was no such thing as a healthy individual any more, all had to quarantine themselves. This behavioural control system could be throttled on and off by the State franchise based upon "case numbers." The only possible solution offered was a vaccine.

The core conspirators and their informed influencers knew that COVID 19 had a low mortality rate [19]. They also knew the MRC's projections were absurd. There were epidemiologists [20], virologists [21] biochemists [22] and all manner of statisticians and scientists [23] around the world, screaming to be heard over the political din created by the MRC's pseudo-scientific gibberish. The MSM reported virtually none of them.

For example, <u>Prof. Knut M. Wittkowski</u> [24], one of world's leading epidemiologists and the man who coined the term *"reproduction number,"* speaking about the MRC's notion of *suppression*, said:

"With all respiratory diseases, the only thing that stops the disease is herd immunity. About 80% of the people need to have had contact with the virus....We are experiencing all sorts of counterproductive consequences of not well-thought-through policy....we will see more cases among the elderly....we will see more death because of this social distancing....I have been an epidemiologist for 35 years, and I have been modeling epidemics for 35 years.....but it's a struggle to get heard."

Prof. Wittkowski was understating the problem. It was virtually impossible for scientists who questioned the *pseudopandemic* to inform the public and the policy makers refused to listen to them. The only people who would report their expert opinions and the science they presented were the incorrectly named "alternative media."

When thousands of frustrated scientists, tens of thousands of concerned medical professionals and hundreds of thousands of desperate citizens, came together to petition governments to <u>stop their destructive lockdown polices</u> [25] the media and online tech giants set about defending the *pseudopandemic*. At the time of writing the Great Barrington Declaration (GBD) has been signed by approximately 14,000 scientists, 43,000 medical practitioners and 792,000 members of the public.

In a quite remarkable display of aggravated sabotage, presumably fuelled by a pressing need to maintain the *pseudopandemic* story, people calling themselves journalists deliberately signed the declaration with fake names and then <u>wrote MSM stories</u> [26] highlighting the fact that it had been signed by idiots. Although they forgot to mention that they were engaged in a coordinated effort to undermine it. Consequently, the GBD petition organisers were forced to issue a response:

"In a strange twist, one journalist bragged on Twitter about adding fake names, after which other journalists criticized the Declaration for having fake signatures. Anyhow, the fake signatures are less than 1% of the total, and most have been removed from the count tracker."

However, the MSM barrage on the GBD didn't end there. A series of hostile attack pieces were published. In one example the eminently qualified experts who questioned the *pseudopandemic* were characterised as "half baked" and "self-important scientists with little idea about how to engage with the real world."

The MSM propaganda [27] in question was written by an alleged journalist who was a former UK Government Home Office researcher and a leading political adviser to the leader of the opposition. She was also a former program leader for the progressive think tank [28] DEMOS and a research fellow for the Institute for Public Policy Research (IPPR). The IPPR are "partners" with Merck, Gilead Sciences, Google [29] and the international investment bank JP Morgan Chase, among many other members of the Global Public Private Partnership (GPPP).

Of course the GBD is not above criticism. It maintained many of the key fallacies that lay at the heart of the *pseudopandemic*. While it questioned the policy response and the unwarranted fear propaganda it didn't tackle, or even mention, the fundamental problems of pseudo-science, misleading statistics and manufactured "case" numbers. However, the attacks upon it demonstrated dissent of any kind would not be tolerated.

Google simply <u>removed it from their search results</u> [30]. People using Alphabet's search engine (and other major search engines) to look for the information about the GBD could not find a listed link to it. Presumably many, who would otherwise have signed it, didn't. Instead they were presented with all the opinions and MSM hit pieces telling them it was "dangerous," while the GBD website itself languished on page - "no one goes to."

It doesn't matter whether you agree with the thousands of scientists and medical professionals who signed the GBD, the point is their opinions were censored. It is absurd to cling to the delusion that we live in an open and free democracy while this situation persists.

There is a place for censorship. However, we have laws to stop the sharing and open publication of material like child pornography and snuff movies, though arguably they have little impact upon the criminals intent upon making and accessing this vile scoria. But if we censor free speech and legitimate scientific opinion, as we have throughout the *pseudopandemic*, all we have left is *approved* information. Dictatorship in other words.

Unlike the people labeled <u>conspiracy theorists</u> [31], most people have better things to do with their time than obsess over the networks that shape geopolitics and drive the realpolitik. Consequently, it is often unthinkable for reasonable people like Prof. Wittkowski to conceive that "the government" would deliberately endanger the lives

of its own citizens. Hence, he believes the disastrous lockdown policy was "not well-thought-through."

Sadly, it was meticulously planned and executed. The widely held faith in the illusion of a benevolent State allowed the *core conspirators* and *informed influencers* to get away with it. At the SAGE meeting [32] held on the 16th March, the day that Report 9 was made available to the public, SAGE noted:

"The risk of one person within a household passing the infection to others within the household is estimated to increase during household isolation, from 50% to 70%."

The *core conspirators* and their *informed influencers* knew that locking people up in their own homes would increase the risk of infection. Despite State franchise claims about policy being *"led by science,"* not only did they ignore all the science which contradicted their preferred yarn, they even ignored the warnings from their own carefully selected scientific advisors.

They then implemented policies designed to increase mortality and used statistical manipulation both to maximise so called *case* numbers and falsely attribute death to COVID 19. This was done for no other reason than to advance the *pseudopandemic*. At best it was a deliberate Machiavellian act of wilful neglect and potentially manslaughter.

All that mattered was that the *pseudopandemic* created the desired condition for the reset of humanity (motive). The casual termination of human life along the way was merely *collateral damage*.

Coordinated with the release of Report 9, the WHO Director General Tedros Adhanom Ghebreyesus told governments [33] around the world to "test, test, test." The RT-PCR test kit was the weapon of choice.

It wasn't a diagnostic tool, was extremely vulnerable to human and systemic error and was incapable of identifying a "case" of COVID 19. Consequently, it was perfect for the *pseudopandemic*. Through centralised control of the global COVID 19 testing regime, the *core conspirators* and their *informed influencers* were able to create the illusion of a pandemic.

COVID 19 was a potentially lethal respiratory infection that was a possible threat to the elderly infirm and others with existing comorbidities. It presented virtually no risk to people of working age and none to the young. Most healthy people, even older healthy people, had nothing *unprecedented* to fear. Without the distorted *pseudopandemic* narrative, from a global perspective, such a virus would normally have passed largely unnoticed.

By using a test unsuited to *diagnosing* any disease, the *pseudopandemic* myth advanced based upon little more than deceptive propaganda spun from meaningless RT-PCR generated "case" numbers. Hence the WHO's incitations to test, test, test.

So called "positive" RT-PCR results were misreported as COVID 19 "cases," allowing pseudopandemic case numbers to climb whenever testing was increased. The intention was to convince the public that a barely perceptible public health risk was an existential threat to humanity.

During the *pseudopandemic*, many terrified people with colds, coughs, headaches, muscle pain or no symptoms at all, attended their local hospital, or State franchise test centre, where samples were taken. These were then sent to laboratories who used RT-PCR to determine a supposedly "*positive*" or "*negative*" result. These laboratories were said to be looking for evidence of the presence of the SARS-CoV-2 virus first sequenced in Wuhan.

The Wuhan Center for Disease Control and Prevention and the Shanghai Public Health Clinical Centre published the <u>first full SARS-CoV-2 genome</u> [34] (MN908947.1). This has subsequently been updated many times. However, MN908947.1 was the first genomic sequence describing the alleged cause of COVID 19, the *etiologic agent* SARS-CoV-2.

All subsequent *pseudopandemic* claims, tests, *approved* treatments, statistics, vaccine development and resultant NPI (lockdown) policies were, and are, based upon this sequence.

The <u>WUHAN researchers stated</u> [35] that they had pieced the SARS-CoV-2 genetic sequence together using a process called <u>de novo assembly</u> [36]. They had no *a priori* knowledge of the correct sequence or order of the RNA fragments they *discovered*.

Looking for matches to published genomes, following 40 rounds of RT-qPCR amplification, they found 29,891-base-pairs which shared a 79.6% sequence match to the SARS-CoV genome. They called it 2019-nCoV and the WHO subsequently renamed it SARS-CoV-2.

The Minimum Information for Publication of Quantitative Real-Time PCR Experiments (MIQE standards [37]) state that 40 quantification cycles (Cq) of RT-qPCR is the absolute limit of detection (LOD) for any molecule. However, this only applies to establishing the existence of a molecule in *quantitative* experiments.

The Wuhan researchers were trying to see if a virus could be detected. They were not trying to ascertain if that virus was present in sufficient quantity (viral load) to make someone ill.

A study by scientists at <u>Porton Down Defence Science and Technology Laboratory</u> [38] demonstrated the importance of SARS-CoV-2 viral load. Subjects infected with high doses had more illness that those infected with medium doses and those with mild doses had very little illness. Accurately detecting the viral load was key to understanding if a person was at risk of becoming ill with COVID 19.

RT-PCR was repeatedly referred to as the "gold standard" SARS-CoV-2 test throughout the pseudopandemic. It was only capable of detecting the presence of

nucleotide sequences. RT-PCR is not a test for an active virus, only for sequences indicative of a virus. That judgment was entirely dependent upon a range of other factors.

SARS-CoV-2 is said to be a single strand of RNA inside a protein shell called a capsid. This structure, containing the viral RNA, is called a virion. PCR cannot amplify RNA, only DNA. An enzyme called reverse transcriptase is added to first convert viral RNA in the sample to *complimentary* cDNA. In essence, cDNA is a manufactured DNA double helix created from the single strand RNA.

During PCR amplification, when a chemical enzyme called a *probe* meets another called a *primer*, the probe decays releasing a fluorescent dye. Laboratories can measure the fluorescence in *"real time*," as these chemical reactions occur. Hence Real Time (RT) - PCR.

By heating the cDNA to a specific temperature, the primers bind, or "anneal," to the ends of the cDNA strands, called the *sense* and *antisense* strands. The probe is then added to highlight the cDNA between the primers. For this to clearly indicate the corresponding presence of SARS-CoV-2 RNA, the primers must demonstrate *specificity*. They must bind to nucleotide sequences that are unique to SARS-CoV-2.

Wherever in the world they were used, SARS-CoV-2 RT-PCR kits were calibrated to the primers and probes specified in the WHO's <u>SARS-CoV-2 RT-PCR protocols</u>. [39] These protocols were based upon a single, supposedly *scientific* study which claimed to offer a validated RT-PCR workflow for laboratories around the world to test for MN908947.1 (or its latest, updated version).

The paper by *Corman - Drosten et al* "<u>Detection of 2019 novel coronavirus (2019-nCoV) by real-time RT-PCR</u>" [40], was the second key supporting document for the *pseudopandemic*. The WHO used this paper to <u>justify their protocols</u> [41] defining the SARS-CoV-2 RT-PCR test <u>primers and probes</u> [42].

Like the Wuhan team, when *Cormen - Drosten et al* researched the genome they did not have any isolated samples of the SARS-CoV-2 virus from which to work. They formulated the WHO RT-PCR protocols using a nucleotide sequence from the Wuhan genome. They did not have a viral sample from a COVID 19 patient. They noted:

"In the present case of 2019-nCoV, virus isolates or samples from infected patients have so far not become available to the international public health community. We report here on the establishment and validation of a diagnostic workflow for 2019-nCoV screening and specific confirmation, designed in absence of available virus isolates or original patient specimens."

Many of the world's leading scientific experts in virology, RT-PCR, epidemiology and other relevant disciplines had serious doubts about the scientific credibility of

the *Corman - Drosten et al* paper. Some were concerned enough to instigate an independent peer review. They made a <u>formal request that the paper be withdrawn</u> [43] pending genuine scientific validation.

The scientists found 7 serious scientific flaws in the study. The primers were inaccurate, non-specific and inadequate; the binding (annealing) temperature used in the study was too high, again giving non specific results; the study used 45 PCR amplification cycles, meaning the RT-PCR identified nothing but genetic background noise. There was no bio-molecular verification of the results. There were no controls applied to viral detection. No standardised operating procedures were described to enable others to repeat the experiment and the study design was imprecise, greatly increasing the chances of false results.

Research undertaken by the <u>Spanish medical journal D-Salud</u> [44] showed that the *Cormen - Droston* primers and probes, stipulated in the WHO protocols, were not unique to the SARS-CoV-2 published genome. They could possibly indicate the presence of the virus, but could also tally to a range of nucleotide sequences, found in anything from microbes to the human genome itself. A *"positive"* RT-PCR test, using the WHO protocols, did not appear to reliably identify the presence of SARS-CoV-2.

First published in January 2020 *Corman - Drosten et al* provided some initial scientific kudos for the *core conspirators* and *informed influencers*. Ultimately it enabled them to make the unfounded claims that the misnamed *positive* RT-PCR test was *proof* of infection and evidence of a COVID 19 "case."

The scientists who requested the paper's withdrawal were not convinced that the paper had ever been peer reviewed, as claimed. The paper was submitted for review on 21st January 2020, accepted on the 22nd and published on the 23rd. Proper peer review did not seem possible. The paper was first published in Eurosurveillance and two of the study's lead authors, Christian Drosten and Chantal Reusken, were members of the Eurosurveillance editorial board [45].

The WHO repeated the "errors" first uncovered by PACE's investigation of their declared 2009 H1N1 pandemic. Again, the WHO were either unaware or unwilling to disclose serious undeclared conflicts of interest. Four of the scientists responsible for the paper forgot to mention crucial commercial interests. As is the apparent norm, the WHO either didn't check or didn't care.

Olfert Landt is the CEO of TIB-Molbiol and Marco Kaiser works for them as a scientific advisor. TIB-Molbiol were credited as the first company to produce SARS-CoV-2 RT-PCR test kits [46]. These were commercially available on the 11th January [47]. Nearly two weeks before the Cormen - Drosten et al paper was published.

Neither Landt nor Kaiser made their disclosure until July 2020. Six months after the paper was published. By then the WHO protocols had been used to "assess" the scale of the first alleged wave of the *pseudopandemic* using the completely

unsuitable RT-PCR kits, which weren't tests for a disease at all. They continue to be used to this day.

However, despite their colleague's admissions, Victor Corman and Prof. Drosten did not feel they needed to declare their <u>affiliations with Labor Berlin</u> [48]: a commercial laboratory that specialises in virus diagnostics using real time PCR testing.

In 1993 Kary Mullis <u>won the Nobel Prize</u> [49] for Chemistry for his work developing the polymerase chain reaction (PCR) amplification technique. It is a <u>reiterative</u> <u>exponential growth process</u> [50]. It can replicate a single DNA (or cDNA) molecule millions, even billions of times. In a <u>2013 email</u> [51] to the widow of boxer Tommy Morrison, Kary Mullis wrote:

"PCR detects a very small segment of the nucleic acid which is part of a virus itself. The specific fragment detected is determined by the somewhat arbitrary choice of DNA primers used which become the ends of the amplified fragment."

The so-called *RT-PCR test*, driving public perceptions of the *pseudopandemic*, was the *somewhat arbitrary choice of* primers and probes to pick out target nucleotide sequences from that amplified genetic mix.

When using an RT-PCR test, the number of amplification cycles, beyond which no meaningful sequences can be identified, is referred to as the Ct threshold. The Infectious Diseases Society of America (IDSA) considered the absolute maximum cycle threshold [52] (Ct) to be 34. Anything above 34 cycles would mean there was no "meaningful or transmissible disease" detected.

Yet the WHO's standard for RT-PCR, to identify alleged COVID-19 "cases," recommended 50 cycles of amplification [53]. At 50 cycles, the RT-PCR process cannot identify anything but an indistinct genetic soup. Or rather it will detect any nucleotide you want to detect, because the chances of that sequence not being somewhere in the sample is practically zero.

Professor <u>Stephen Bustin</u> [54] is one of the world's leading, living experts in RT-qPCR. A Professor of Molecular Medicine, he wrote the definitive reference to qPCR called the "A-Z of Quantitative PCR." He is also a founding author of the <u>MIQE standards</u> [55] for quantitative PCR.

In a podcast discussion with researcher David Crowe, <u>Prof. Bustin pointed out</u> [56] that reliable results for RT-PCR (tests) are found between 20 and 30 cycles. This assumes the target nucleotide sequences and primer and probe design are specific, which does not seem the case with SARS-CoV-2, and that all the other many variables, such as the annealing temperature, are properly calculated and fastidiously observed. Like the IDSA, he stated that any result gleaned from more than 35 cycles was practically meaningless.

French scientists <u>analysed the results</u> [57] from thousands of French "positive" RT-PCR tests. They compared viral cultures, produced from the nasopharyngeal

samples collected for the subsequent RT-PCR *tests*, with the respective Ct values of those tests. From this they were able to calculate the Ct dependent accuracy. Up to 25 cycles accuracy was 70%, at 30 cycles this had dropped to 20% and with a Ct of 35, accuracy was less than 3%.

Throughout the *pseudopandemic* State franchise authorities around the world have either been spectacularly vague or curiously tight-lipped about their RT-PCR laboratory Ct values. They could have been using up to 50 cycles, which would have been absurd.

The New York Times reported [58] that they had seen data from researchers which found that most US laboratories were using 40 rounds of amplification and a few at 37. Using these Ct values their RT-PCR tests were woefully inaccurate. The *false positive rate* would have been extraordinarily high.

The UK government guide to RT-PCR [59] Ct values stated the following:

"Live and potentially infectious virus has been isolated in laboratory cell culture from samples exhibiting high Ct (>36) - to what extent this indicates a potential transmission risk from person-to-person is not fully understood."

This was complete nonsense. The UK State franchise's claim that they found "live and potentially infectious virus" using more than 36 cycles of PCR amplification was highly questionable. Their consideration of potential transmission risk was practically irrelevant because the likelihood they had accurately identified the presence of active SARS-CoV-2 was virtually nil.

For the RT-PCR test to have been the *gold standard* test, to identify cases in a global pandemic, consistency and rigorous adherence to effective, standardised procedure would have been necessary. This did not happen. A <u>study from the Department of Microbiology</u> [60] at Queen Mary Hospital, University of Hong Kong found wild variations in RT-PCR accuracy.

RT-PCR was between 22% – 80% reliable depending on how it was applied. This general unreliability <u>has been confirmed</u> [61] by other studies. Further studies <u>show clear discrepancies</u> [62] between RT-PCR test results and clinical indication from other diagnostic tools, such as CT scans.

Regardless of the numerous problems with the global RT-PCR testing regime there was a far more fundamental deception at the heart of the *pseudopandemic*. RT-PCR tests may or may not detect the presence of a virus but they are absolutely incapable of diagnosing a disease. RT-PCR could not, in any sense, identify a COVID 19 "case."

The WHO stated:

"Coronavirus disease (COVID-19) is an infectious disease caused by a newly discovered coronavirus.....The best way to prevent and slow down

transmission is to be well informed about the COVID-19 virus, the disease it causes and how it spreads."

The UK State <u>published a study</u> [63] of residents in care homes which purported to show the total number of *confirmed cases*. Among this number they claimed:

"80.9% of residents who tested positive were asymptomatic."

Yet the UK Coronavirus Act makes a clear distinction between the virus and the disease. <u>It states</u> [64]:

"Coronavirus" means severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2); "coronavirus disease" means COVID-19 (the official designation of the disease which can be caused by coronavirus)."

The <u>definition of disease</u> [65] is:

"A disorder of structure or function in a human....one that produces specific symptoms."

Therefore, to have the disease called COVID 19 you must have the symptoms of COVID 19. You may be *pre-symptomatic*, and possibly go on to develop COVID 19, but that cannot be determined by the RT-PCR test. In the UK government's study (cited above) 80.9% of the care home residents may have allegedly tested "positive" for SARS-CoV-2 but they did not have COVID 19 disease.

In no way could they justifiably be described as COVID 19 *confirmed cases*. Doing so was contrary to the UK *authorities* own Coronavirus Act. However the UK State franchise apparently made this *"mistake"* endlessly, without ever correcting themselves in any of their public addresses, statements or national press briefings.

Throughout the *pseudopandemic* the MSM used the terms coronavirus, SARS-CoV-2 and COVID 19 interchangeably. Understandably this created further confusion, which was the point. Muddying the waters wasn't just a favoured tactic of the MSM and the national State franchises. The <u>World Economic Forum</u> [66] (WEF) stated:

"People are 'asymptomatic' when they test positive for COVID-19 without having shown any symptoms."

You cannot be both *asymptomatic* and test *positive* for COVID 19. You can only potentially test *positive* for the virus SARS-CoV-2. They are not the same thing.

The WEF were among many within the GPPP who persistently asserted that RT-PCR tests were capable of identifying COVID 19. This was the epitome of *disinformation*. An RT-PCR test could not diagnose a "case" of COVID 19.

This false claim was <u>repeated ad nauseum</u> [67] throughout the *pseudopandemic*. It seeped into the collective consciousness and drove the *pseudopandemic* hysteria. In one of numerous examples, on September the 21st 2020, the UK Government's

Chief Scientific Advisor Sir Patrick Valance made precisely that "error." During his delivery of the SAGE update to the UK people, the GSK shareholder [68] said:

"I want to start talking about the number of cases.....We've seen increases in cases across Europe.....we've seen an increase in the number of cases."

Valance was referring to an increase in the number of RT-PCR tests, not *cases*. We can only speculate why a State franchise appointed scientist would give such a misleading impression. What can be said is that his *"mistake"* ably advanced the *pseudopandemic* narrative.

To put this into context, speaking at a <u>symposium Q&A</u> [69] during the AIDS crisis, Kary Mullis stated:

"If they could find this virus in you at all, PCR, if you do it well, you can find almost anything in anybody....If you can amplify one single molecule, up to something you can really measure, which PCR can do, and there's very few molecules that you don't have at least one of them, then that could be thought of as a misuse of it, to claim that it is meaningful.. It allows you to take a very minuscule amount of anything and make it measurable and then talk about it in meetings and stuff, like it is important.....It doesn't tell you that you are sick and it doesn't tell you that the thing you ended up with really was going to hurt you or anything like that."

Kary Mullis scepticism and his observation that PCR could find "anything in anybody" seemed to be corroborated by the former president of Tanzania. In May 2020 President John Magufuli, who held a doctorate in chemistry, was sufficiently dubious of imported RT-PCR test kits that he sent swabs taken from a goat, a quail, a sample of engine oil and a paw paw to the Tanzanian National Health Laboratory. When the tests came-back-positive [70] for SARS-CoV-2 he sacked the technical director.

Magufuli wasn't the only senior African politician who openly questioned the *pseudopandemic*. The president of Burundi <u>Pierre Nkurunziza</u> [71] called the WHO's declared global pandemic *nonsense*. Aged just 55 he suddenly died of a suspected heart attack, although no one was really sure. His successor Evariste Ndayishimiye immediately declared COVID 19 to be the nations "biggest enemy."

In a truly amazing coincidence, a few months later exactly the same thing happened to President John Magufuli. Shortly after announcing to the world that the WHO's RT-PCR protocols meant that engine oil tested positive for SARS-CoV-2, the President of Tanzania just vanished. His whereabouts were unknown until it was officially announced he had <u>suddenly died at the age of 61</u> [72].

No clear explanation to his death was given, though it was said to be a suspected heart attack, just like President Nkurunziza's. In another remarkable coincidence, his replacement President Samia Suluhu Hassan, who started wearing a face mask

in public, was warmly welcomed by the WHO's Director who said he looked forward to working with her [73].

Kary Mullis also frequently questioned the scientific orthodoxy and was highly <u>critical of the corruption of science</u> [74] by corporate interests. He died suddenly of pneumonia aged 74, just weeks before the process he invented would be violated to create the *pseudopandemic* deception. Had he lived a few more months perhaps he could have brought some much needed reason to a terrified public.

The propaganda, asserting that an RT-PCR test was proof of a COVID 19 "case," was accompanied by the equally false claim that so called *asymptomatic cases* posed a threat of *infection*. COVID 19, a disease with relatively small impact upon the population and a low mortality rate, was thereby heightened to plague status in the public's imagination.

For the *core conspirators' pseudopandemic* to work it was vital to them that the majority accepted the high reported number of "cases." The intention to convince enough people that they had, or were at high risk of catching, COVID 19. For reasons we will discuss shortly, the RT-PCR case deception created an environment where practically any illness, combined with a "positive RT-PCR result," was incorrectly reported and frequently misdiagnosed as COVID 19.

The WHO protocols were based upon an extremely poor scientific paper, drowning in conflicts of interest. Their protocols didn't appear to target anything specific to the SARS-CoV-2 viral genome and the research almost certainly wasn't peer reviewed.

The RT-PCR test was not designed and was never intended to be used as a diagnostic tool. The Portuguese courts were among the many who ruled that it was not reliable [75] for diagnosing a disease. The global testing regime for COVID 19 cases, and the alleged identification of asymptomatic cases, was based upon corrupted "junk science" and the WHO's demand to "test, test, test."

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Chapter 6 - Pseudopandemic Lockdowns

The altered definition of "pandemic" enabled the 2009 and 2020 pseudopandemics to be declared. In 2020, Report 9 provided the alarmist justification for suppression (lockdown) and the Cormen - Drosten et al inspired WHO protocols guaranteed the necessary inflated RT-PCR "case" numbers. The core conspirators had created the conditions for their informed influencers to set about building the biosecurity State.

Always falsely claiming they were "led by science," by utilising mainstream media (MSM) propagandists, informed influencers were able to convince the population to forfeit their inalienable rights and freedoms in exchange for biosecurity "safety." Rights would be exchanged for State franchise privileges, granted to those who obeyed and behaved accordingly.

The initial public acceptance of the *pseudopandemic* wasn't irrational. With an unknown threat of disease it made sense to err on the side of caution. However, there were also early indications that something wasn't right.

In January 2020, as the *pseudopandemic* developed in China, the world was shown terrifying images and news reports. We were informed about people dropping dead in the streets, overflowing mortuaries, health services inundated with desperately ill patients who apparently lay dying in crowded hospital corridors; screaming, desperate people sealed into their own homes behind steel shutters and makeshift barricades and brutal police arrests of those who refused to comply with their "lockdown" orders.

Unusually, despite China being the alleged enemy of the West and a country normally held up as an example of totalitarian state control and censorship, suddenly the western mainstream media (MSM) believed every report coming out of China. They accepted every image and video clip without question, relaying whatever the Chinese Communist Party (CCP) released to western audiences as verified, unchallenged, reported *fact*.

None of the horrendous Chinese scenes, showered upon us by the western MSM and the social media companies, subsequently transpired anywhere else other than inside Wuhan. It seems COVID 19 only caused the complete breakdown of society in one city in China, and only for two or three very well-reported weeks.

While the CCP has almost total state control of information in China and engages in ruthless suppression of Chinese activists, "citizen journalists" were able to share their video reports from inside Wuhan during the Chinese authority's lockdown [1] of the city. However, now that Wuhan lockdown restrictions have been lifted they can't.

Once the concept of the *pseudopandemic* was widely accepted in the West, China rapidly moved on to containing and then quickly eradicating any threat from COVID 19. With just 63 cases and 3 deaths per million of the population, China has one of the lowest COVID 19 infection and mortality rates in the world.

In truth, all of these reported statistics are dubious. There isn't really any reason to believe any of them. Neither for China nor any other country. However our entire way of life has changed as a result, so we can justifiably reference them. State franchises certainly do.

While China has long since moved on from COVID 19, western aligned democracies face 3rd, 4th or who knows how many more waves of the deadly virus. Primarily due to *variants* which don't appear to have any effect in China.

In January 2021 the UK Chief Medical advisor warned the nation that Lockdowns may be required <u>practically indefinitely</u> [2] regardless of any vaccine. Almost as he spoke massive crowds <u>were partying hard</u> [3] for New Year in Wuhan.

So it is no wonder that western democracies copied the *suppression* policies if the Chinese dictatorship. These policies were so successful that they managed to contain a respiratory virus, which initially appeared to spread like wildfire, mainly to a <u>few districts in one city</u> [4].

However, western attempts to emulate Chinese lockdowns appeared to fail miserably. China's claimed lockdown success was firmly in the minds of SAGE, and notably Prof. Neil Ferguson, whose qualifications in physics and inept computer programming skills apparently made him the UK's leading epidemiologist.

Speaking to the Times, <u>Ferguson recounted</u> [5] the SAGE discussions which led them to advise the UK State to impose lockdowns. He said:

"We knew it was possible that social distancing could control a respiratory virus....but there is an enormous cost associated with it..... I think people's sense of what is possible, in terms of control, changed quite dramatically between January and March....[China] claimed to have flattened the curve.....as the data accrued it became clear it was an effective policy.....It's a communist one party state, we said, we couldn't get away with it in Europe we thought.. and then Italy did it, and we realised we could."

Unfortunately, once again, Ferguson was hopelessly deluded. Totalitarian lockdown policies don't work at all. He seems to have fallen for the tightly controlled propaganda of the CCP. Lockdowns certainly weren't working in Italy, which was the COVID 19 hotspot of Europe at the time, so why SAGE thought they were brilliant is mystifying.

While SAGE and Imperial College London (ICL) unquestionably accepted Chinese stories about lockdowns, they were less convinced by peer reviewed Chinese scientific data. This clearly indicated the scale of the COVID 19 threat and the mortality risks were evident. Hence Public Health England's downgrading of COVID 19 from a High Consequence Infectious Disease. There was no statistical, scientific or medical reason for SAGE to suggest lockdown (NPI) policies.

Professor Mark Woolhouse, a member of SAGE's Spi-B behavioural science team, later admitted that <u>lockdown was a "monumental mistake"</u> [6]. However, practically the only body of scientific opinion which ever believed ICL's models and thought lockdowns were a good idea were SAGE and other selected "experts" who enjoyed State Franchise patronage.

Lockdowns evidently made no difference to the *pseudopandemic* outside of China. COVID 19 has apparently continued unabated in the West. As we shall see, numerous studies have demonstrated how ineffectual lockdowns are. Yet it seems the UK State franchise, among many others, remains ideologically wedded to lockdowns. It didn't seem to matter what the scientific, medical or statistical evidence was.

Lockdown was a deliberate policy with predetermined goals unrelated to public health, not a rational response to a viral respiratory disease. Lockdowns (suppression) were designed to make the population suffer and to increase mortality. They heightened fears and contributed to the desired economic, social and political destruction (a motive we will discuss later). They also accustomed the people to their behavioural commitment to the new biosecurity State.

What Lockdown policies definitely did not achieve was reduce either the spread of disease or resultant mortality. Just as Imperial College was wrong about projected infections and mortality so it was wrong about suppression (NPI's or lockdowns.)

By early June 2020 the WHO had already acknowledged that SARS-CoV-2 was an aerosol dispersed virus. Tiny virions, the viral RNA inside the capsid, spreading as aerosols would obviously be airborne, able to spread liberally in the atmosphere. Explaining how COVID 19 is spread between people the WHO stated [7]:

"The virus can spread from an infected person's mouth or nose in small liquid particles when they cough, sneeze, speak, sing or breathe heavily. These liquid particles are different sizes, ranging from larger 'respiratory droplets' to smaller 'aerosols'.... More studies are underway to better understand the conditions in which aerosol transmission is occurring."

The US Center for Disease Control (CDC) stated that the evidence was growing that <u>SARS-CoV-2</u> was spread by aerosol [8] and more than 200 scientists stated this was a <u>route of transmission</u> [9]. Yet the WHO remained *airborne hesitant* and didn't concede the obvious <u>until May 2021</u> [10]. Until then they had only claimed aerosols <u>may be airborne</u> [11].

Throughout the *pseudopandemic* the WHO consistently ramped up fear of the virus. Yet they avoided defining SARS-CoV-2 as an airborne virus. This was because airborne transmission ruled out any chance that lockdown policies could possibly work.

Even without aerosol transmission there was never any reason to think *suppression* would be effective. Many epidemiologists, such as Professor Wittkowski, were

trying to point this out before the politicians decided to base every decision on ICL's defective computer game and the misbegotten WHO RT-PCR test regime.

In March 2020 globally renowned microbiologist <u>Dr. Sucharit Bhakdi</u> [12], warned that the scientific evidence justifying lockdowns simply didn't exist. Speaking in March 2020, Dr. Bhakdi said:

"Implementation of the current draconian measures.....can only be justified if there is reason to fear that a truly, exceptionally dangerous virus is threatening us. Does any scientifically sound data exist to support this contention for COVID-19? I assert that the answer is simply, no."

The social and economic cost of incarcerating the healthy, thereby reducing their *community immunity* at the time it was most needed, had long been eschewed by scientists and policy makers. The lockdown cure would inevitably cause more human misery, illness, death and destruction than the disease. This wasn't a contentious point and was well understood by public health policy makers and experts alike.

In the 2011 Influenza Pandemic Preparedness Strategy [13] the UK Department of health did not recommend any of the business closures or mass quarantines we saw in the response to COVID 19. No lockdowns, no masks (except in exceptional circumstances), no school closures and no travel restrictions. Business continuity was essential and it recommended that vaccine development should only be prioritised in the following circumstances:

"If it is not possible to limit the spread by achieving herd immunity, where so many people are immune that the disease cannot continue to infect people to maintain itself in the population."

The suggestion that social distancing and isolation might protect against a respiratory virus (whether aerosol dispersed or not) was first imagined in 2006 by a 14 year old Albuquerque school girl [14] whose virus transmission computer model won her third prize in her school science project awards. Laura Glass' father was Robert J. Glass, a complex-systems analyst with Sandia National Laboratories in the US.

Robert was a data analyst with no medical or public health experience who, inspired by his daughters homework, <u>published a paper</u> [15] presenting the notion of social distancing and other NPI's. He even credited his daughter as a co-author. It was her idea after all.

Epidemiologists, immunologists and virologists became alarmed as this baseless theory began to take hold in the US administration. In response, eminently qualified scientists, including Prof. Donald A Henderson, the man largely credited with winning the fight against smallpox, published their refutation with <u>Disease Mitigation Measures in the Control of Pandemic Influenza</u> [16]. The report noted:

"There are no historical observations or scientific studies that support the confinement by quarantine of groups of possibly infected people for extended periods...Such a policy would also be particularly hard on and dangerous to people living in close quarters, where the risk of infection would be heightened...Travel restrictions, such as closing airports and screening travelers at borders, have historically been ineffective.....the societal costs involved in interrupting all air or train travel would be extreme...It might mean closing theaters, restaurants, malls, large stores, and bars....Implementing such measures would have seriously disruptive consequences...a manageable epidemic could move toward catastrophe."

The <u>public health rationale</u> [17] for Lockdown policies was notable only for its absence. Respiratory viruses wither in <u>the warming sunlight</u> [18], so the UK State franchise order for people to stay in their own homes during the spring of 2020 effectively incubated the virus in as many hosts as possible. They knew this would increase the risk of infection [19].

While SAGE advised the UK State franchise of this risk, given their otherwise staunch advocacy of lockdowns, it seems possible they did so just to cover their own backs. They too were more than willing to accept this increased risk. *Informed influencers* ignored the warnings, along with all the other prevailing science counselling against lockdowns. Just as the epidemiologists cautioned, they turned a manageable epidemic into a catastrophe.

The *core conspirators* wanted more infection, not less. They knew this would disproportionately impact poorer households and the most vulnerable, so this was of little concern and provided a much needed mortality boost.

The WHO also understood that lockdowns would increase the infection and mortality risk. In their 2019 guide to <u>Non Pharmaceutical Interventions</u> [20] for managing global influenza they considered quarantining healthy, exposed individuals. They concluded that this was:

"Not recommended because there is no obvious rationale for this measure."

They too were clear that isolation for the sick should only be done for limited periods and did not recommended it for "individuals who need to seek medical attention." They stated that workplace closures should only be considered in "extraordinarily severe pandemics." They found "no obvious rationale" for contact tracing and the widespread use of face masks was not recommended because "there [was] no evidence that this is effective in reducing transmission."

Having reviewed the scientific literature, the WHO listed the measures they considered to be effective in the management of an influenza pandemic. These were maintaining hand hygiene, respiratory etiquette, face masks for symptomatic individuals, sanitising surfaces and objects, increased ventilation, isolation of sick individuals and travel advice.

If the pandemic was more severe, they suggested further potential preventative strategies, such as extended use of face masks for people working with symptomatic patients and school closures. Some workplace measures (minimal restrictions) should only be considered in extraordinarily dangerous pandemics, which COVID 19 most certainly was not.

With regard to the WHO's recommendation for possible school closures it should be noted that they were assessing a likely flu pandemic. While the risk of hospitalisation for people under 18 with a SARS-COV-2 infection was practically zero, in a severe influenza pandemic hospitalisation rates among the young can reach 20% [21].

The WHO judged that the economic and health costs of some measures outweighed the disease risk, regardless of pandemic severity. Others were simply considered ineffective. These included contact tracing, quarantine of exposed individuals (lockdowns), entry and exit screening of premises and border closures.

In 2019 the WHO found the public health risks of lockdowns to be unacceptable in all but the most severe pandemics. Yet in response to the *pseudopandemic* they ignored their own research and urged governments to quarantine the healthy and re-orientate the whole of government to focus upon one low mortality disease, almost to the total exclusion of everything else.

They effectively <u>maximised the risk</u> [22] to the most vulnerable, something which <u>never made any sense</u> [23]. At least not if *saving lives* was the priority.

By March 25th 2020 The WHO had forgotten their own scientific and medical evidence. The science hadn't changed, only their opinion. <u>Tedros Ghebreyesus</u> [24] said:

"We call on all countries who have introduced so-called lock-down measures to use this time to attack the virus......Implement a system to find every suspected case at community level.....ramp up production capacity and availability of testing.....And finally...refocus the whole of government on suppressing and controlling COVID-19."

The UK State franchise, like many others, enthusiastically embraced this "whole of government" approach which, by pure coincidence, fitted perfectly with their Fusion Doctrine. This was envisaged in the 2015 UK National Security Capability Review [25]. Fusion centralised strategic UK State power under the auspices of the National Security Committee (NSC). The aim was to "identify the most effective and efficient combination of ways to achieve the government's objectives."

Similar in many respects to the Chinese totalitarian model of centralised authoritarian control, this new UK concept of *national security* meant far more input from private corporations, philanthropic organisations, NGO's and other key *partners*:

"Many capabilities that can contribute to national security lie outside traditional national security departments and so we need stronger partnerships across government and with the private and third sectors....Many technological challenges are best addressed through partnership between the public and private sector.....One or more major hazards can be expected to materialise in the UK in every five year period. The most serious are pandemic influenza."

This seamlessly moved public health into the *national security context*. The *pseudopandemic* was an opportunity to flex the new Fusion Doctrine muscles.

A study <u>published in the Lancet</u> [26] in July 2020 analysed statistics from the 50 countries with the highest number of cases. The scientists stated:

"Rapid border closures, full lockdowns, and wide-spread testing were not associated with COVID-19 mortality per million people."

A similar <u>study by french researchers</u> [27] analysed data from 160 countries and they too found no evidence of reduced mortality attributable to lockdown measures. They reported:

"Stringency of the measures settled to fight pandemia, including lockdown, did not appear to be linked with death rate."

Another from <u>scientists at Stanford University</u> [28] looked at the impact of lockdowns on case numbers. The Stanford researchers contrasted the use of NPI's, applied to different degrees, between countries and then within national boundaries between provinces, states and county authorities. They found no evidence or correlation between lockdown restrictions and case number reduction. They concluded:

"While small benefits cannot be excluded, we do not find significant benefits on case growth of more restrictive NPIs."

A study published in the <u>European Journal of Clinical Investigations</u> [29] found:

"There is no evidence that more restrictive non pharmaceutical interventions [lockdowns] contributed substantially to bending the curve of new cases in England, France, Germany, Iran, Italy, the Netherlands, Spain, or the United States in early 2020"

This United Nations have acknowledged that there is <u>nothing to suggest lockdowns</u> achieve any disease mitigation [30]:

"Our analysis shows that governmental policies related to mobility restrictions and physical distancing has dramatically reduced people's movements but their impact on COVID transmission vary across countries. Although some countries still have highly stringent measures, they seems

to not have served the purpose as the number of cases are still increasing."

The MSM have not reported any of this to the public. In 2021, in the UK, we continue to suffer the disastrous consequences of lockdowns. All the signs are that we are now moving to a new model of variant dependent, tiered lockdowns. This will not have any public health benefit.

A project of the Blavatnik School of Government at Oxford University called the <u>Coronavirus Government Response Tracker</u> [31] formulated the *Stringency Index*. This compared various NPI's with infection and mortality rates. It shows, in terms of managing a respiratory virus, there is no measurable benefit to lockdowns.

Lockdowns were not public health initiatives. The lockdown consequences of contact tracing, entry and exit screening, shutting schools, destroying businesses and quarantining the healthy were widely acknowledged as harmful in the scientific and medical literature. Subsequent scientific and statistical research has confirmed what was already known prior to the *pseudopandemic*.

Lockdowns were a political, economic and social control mechanism. In Britain they were part of strategic national security project run by the UK State franchise of the Global Public Private Partnership (GPPP). They served exactly the same purpose in other nations, as the *core conspirators* and their *informed influencers* began the process of building the global biosecurity State.

Yet the ubiquitous, incessant MSM incantation remains that <u>COVID 19 caused</u> [32] all the problems we are now familiar with. COVID 19 shut businesses, it halted education, emptied sports stadiums, shut the pubs, the restaurants and the community centres. COVID 19 created mass unemployment, ended international trade, increased economic inequality and slashed national GDP's.

This was and is mendacious *pseudopandemic* tripe. Political policies were the cause. It had nothing to do with a relatively low impact viral infection. Those policies were steam rolled onto the population in an act of wilful economic sabotage. This was purposefully designed for the "Great Reset" of the global order.

Initial <u>pro lockdown arguments</u> [33] were focused upon "flattening the curve" (FTC). The various claimed lockdown objectives have shifted continuously as the *pseudopandemic* progressed through its biosecurity phases. As the reported number of deaths hit the headlines "flatten the curve" <u>was discarded</u> [34].

The FTC theory proposed that by prolonging the outbreak health services wouldn't be overwhelmed with a rapid, unmanageable surge in symptomatic cases. Many scientists pointed out that this approach had serious shortcomings. Not only did it inhibit the building of community (herd) immunity and fail to reduce the total number of projected deaths, by lengthening the duration of the pandemic, the most vulnerable were exposed to the virus for the maximum period.

This was largely confirmed by <u>researchers at the University of Edinburgh</u> [35]. They corrected the assumptions made in Report 9 and applied the data that was available at the time (March 2020). Using similar but properly coded models, they demonstrated that policies to *"flatten the curve"* were more, not less, dangerous:

"Adding school and university closures to case isolation, household quarantine, and social distancing of over 70s would lead to more deaths compared with the equivalent scenario without the closures of schools and universities. Similarly, general social distancing was also projected to reduce the number of cases but increase the total number of deaths compared with social distancing of over 70s only."

Papers claiming to demonstrate the effectiveness of lockdowns were heavily criticised by other academics. For example, a well funded article <u>financed by the BMGF and the UK and US government</u> [36] by *Flaxman et al.* claimed that lockdowns had led to an 82% drop in the virus reproduction rate. The paper was based upon the ICL models and was published to some fanfare in the respected scientific journal Nature.

When *independent* German academics reviewed the article, frequently cited as evidence of lockdown success by *pseudopandemic* advocates, they discovered it was <u>founded upon assumption</u> [37] and circular thinking. They stated:

"Purported effects are pure artefacts, which contradict the data. Moreover, we demonstrate that the United Kingdom's lockdown was both superfluous and ineffective."

There was a palpable sense of anger in the scientific community. It is rare for scientific researchers and academics to use such strong language when challenging other scientist's theories. Researchers from Stanford University [38] were equally scathing of the Flaxmen et al article. They said:

"Flaxman et al. made the statement - We find that, across 11 countries, since the beginning of the epidemic, 3,100,000 deaths have been averted due to intervention. - Both the provided estimate and the accompanying limited uncertainty are highly misleading.....The results included in the Nature paper seem to suffer from serious selective reporting, providing the most favorable estimates for lockdown benefits."

The Stanford team also analysed the ICL lockdown (suppression) models, in light of the available data, and observed:

"Lockdown appeared the most effective measure to save lives in the original analysis of 11 European countries performed by the Imperial College team.....these impacts were highly exaggerated, with little or no benefit from lockdown in most of the same countries......Claimed effects of lockdown are grossly overstated.......Data and results may be filtered by

modelers according to whether they fit their prior beliefs. This bias can have devastating implication if it leads to adoption of harmful measures."

The claimed justification of "flattening the curve" was spurious in the extreme. In Britain, the reproduction rate (rate of infection) had <u>already started to decline</u> [39] before the UK State franchise initiated its ICL (Report 9) inspired lockdowns. Lockdowns had absolutely no impact on the trajectory of the disease.

The State franchise did the same with the <u>second national Lockdown</u> [40] in October 2020, and repeated the tactic again with their 2021 New Year lockdown. Similar exploitations were deployed elsewhere. For example, a study by scientists in Munich found that the German State franchise had <u>used the same ruse</u> [41]. They also noted that there was "no direct connection" between lockdowns and disease distribution.

According to Public Health England's *Weekly National Influenza and COVID 19 Surveillance Report* [42] there were 266,245 alleged additional cases for week 51 (ending December 24th 2020) but 241,969 (nearly a 10% decline) for week 52 (ending December 31st 2020).

In <u>accordance with Farr's Law</u> [43], and epidemiological opinion the world over, this slowing of the increase in the rate of infection (the R number) is the point at which the trajectory of the infection can be reasonably projected.

The reported case rate was always false. It was based upon little more than the number of tests conducted. As we shall see, the COVID 19 hospitalisation and mortality figures were similarly manipulated.

However, there was only so far the statistical manipulation could go. Within the fake figures real COVID 19 hospitalisation and mortality was occurring. For the *pseudopandemic* to remain at least vaguely plausible the case figures couldn't be completely disassociated from the hospitalisation and mortality statistics. They had to correlate to some degree.

By opportunely timing the lockdowns, the State franchise could claim the inevitable FTC and subsequent decline was due to their policy. In reality it had nothing to do with it.

The Republic of Belarus, with a population of nearly 10 million and a GDP of more than \$200Bn, has an average per-capita income of just over \$21,000. It was a thriving, medium income, developing nation during the *pseudopandemic*. In September 2020 the Belarusian President Aleksandr Lukashenko claimed that the IMF and the World Bank [44] tried to "bribe" Belarus with a \$940M aid package in exchange for imposing lockdown restrictions.

Lukashenko said the money was offered on condition that he impose lockdowns, enforce the wearing of face masks, introduce curfews, establish an effective police state and shut down the economy. He is a tyrant and faced mounting political pressure in Belarus. The extent to which his allegations were intended for domestic

consumption wasn't clear. However, for their part, the IMF more or less <u>confirmed</u> <u>his story</u> [45], though they portrayed it in less scandalous light.

The IMF director of Communications Gerry Rice said:

"Belarus approached the Fund with a request to discuss possible emergency assistance.....We did not demand quarantine, isolation, lockdown, but we sought assurances for steps to contain the pandemic in line with WHO recommendations, which is our standard operating procedure in all countries. So, just the same."

The relief money was dependent upon the imposition of lockdown measures by the Belarus government, as Lukashenko described. If the IMF and the World Bank were genuinely concerned for the welfare of ordinary Belarusians, faced with a *global pandemic*, there was no reason to deny Belarus access to relief funds.

Lockdown in Belarus was what the GPPP wanted, not what the people needed. The public health threat faced by the population of Belarus was irrelevant to the IMF and World Bank. It seems perfectly reasonable to describe this conditional offer of aid as a "bribe."

The net effect in Belarus was that, unlike its European neighbours, it did not impose any lockdown restrictions. Instead Belarusians could go to testing centres if they felt the need. Testing stations were set up in high density population areas like Minsk and Belarusians were tested in significant numbers. The people were advised to carefully observe hygiene and to self-isolate if they felt ill or *tested positive*.

At the time of writing (June 2021) there have been 2,892 alleged COVID 19 deaths in Belarus. This means that the claimed COVID 19 deaths per million of the population (DPM) are 306.

In the US COVID 19 deaths per million are said to be 1,838 and they stand at 1,874 in the UK (624 times the DPM in China and 5 times that of Belarus). Total claimed cases per million (CPM) are 102,709 in the US (1,630 times the CPM in China) and 66,056 per million in the UK (who have a worse death rate than the US.)

In Belarus alleged CPM are 42,138, which is a little below two thirds of the UK figure. However, the UK has a mortality rate five times greater than Belarus. This suggests COVID 19 is a far more dangerous disease in the UK than it is in Belarus.

Perhaps a better Belarus comparison would be with its immediate, neighbouring nation states, all of whom deployed lockdowns to some extent. The DPM in Poland is 1,960, in the Ukraine it's 1,174, it's 843 in Russia and in Lithuania it has reached 1,599. All considerably higher than the 306 DPM in non-lockdown Belarus.

Throughout the *pseudopandemic* so called *lockdown sceptics*, who were simply people who questioned the information they were given, consistently highlighted Sweden as a comparison to harsher lockdown states. While Sweden didn't adopt

the full blown economic shutdown favoured by other European states, it did employ some similar measures: a kind of Lockdown-Lite.

In one regard however, Sweden differed little from its more lockdown zealous European neighbours. Sweden placed its most vulnerable citizens, in poorly staffed, ill equipped, overcrowded care homes. The <u>staffing crisis</u> [46] in the Swedish care system was compounded when carers were <u>told to self isolate</u> [47], even without a *positive* test result, for a range of mild symptoms that could have been attributable to anything.

The *pseudopandemic* MSM used this, along with any other reason they could find, to allege Sweden's less draconian lockdown was the <u>cause of the disaster</u> [48] in their care homes. This was *disinformation*. It was a continuation of the long-standing problem of high <u>seasonal flu mortality in Swedish care homes</u> [49].

While they never missed an opportunity to attack Swedish public health policy, seemingly for no other reason than Swedish resistance to full lockdown measures, they did not report that Swedish care home deaths were in line with the European lockdown average. Across Europe 50% of all recorded COVID-19 deaths [50] were in care settings. Notably, Belarus has relatively few care homes.

Sweden did adopt some minor Non-Pharmaceutical Interventions (NPI's) but was far less oppressive than places like the UK, France and the US. Rather like Belarusians, the Swedes were trusted to take sensible precautions. Much of the Swedish COVID 19 mortality was a result of their calamitous care home policies. This was little different to the policies in harsher lockdown states.

In the end there was only a marginal difference between the outcomes in Sweden and other nations. However, despite its care home disaster, Sweden fared better than France, Spain, Italy, Portugal, Belgium, The US and the UK. This was in keeping with prevailing epidemiological science: lockdowns do not limit the spread of viral respiratory diseases.

However, as we shall explore shortly, harsher lockdowns do cause additional excess mortality. One of the countries with the harshest lockdowns in the world was Belgium. The health Minister Frank Vandenbroucke stated that they had used lockdown measures as a <u>psychological shock tactic</u> [51] and claimed there was no other reason behind their decision to close small businesses.

The DPM in Belgium is currently 2,148. This is more than 7 times higher than lockdown free Belarus, nearly twice that of Sweden and more than 700 times worse than China.

Approximately 700 Belgian doctors, nearly 2,400 healthcare professionals and 18,000 concerned Belgian citizens signed an open letter to the Belgian authorities [52] demanding that they base their policies on "science, expertise, quality, impartiality, independence and transparency." Like the Great Barrington

Declaration, this was either vehemently attacked or completely ignored by the Belgian MSM.

Pseudopandemic *lockdown theory* was centred upon the cardinal principle that so called *asymptomatic carriers* pose an infection risk. This is also the claimed justification driving the creation of the *global biosecurity State*. The theory ignores the fact that an asymptomatic person does not have COVID 19 (or any other disease). They could be *presymptomatic* (asymptomatic with a high viral load) but this is extremely unlikely.

Acceptance of this *theory* designates all of us as bio-hazards. As you can't know for certain that someone isn't *"positive,"* everyone is a threat to everyone else. Therefore we must all be subject to constant State surveillance for our own *community* safety.

For the public to buy into the *biosecurity state* they must concede a key principle: no one can possibly be healthy.

People must believe, for the first time in human history, that although they have no symptoms, feel fine and would otherwise consider themselves well, they are ill. They are a health threat to their family, friends and anyone else unfortunate enough to encounter them in their imperceptibly diseased state.

In order to convince people of this lunacy, lockdown populations were <u>bombarded</u> <u>with MSM stories</u> [53] promoting the notion that healthy people are actually asymptomatic carriers. The BBC even used an image of someone coughing as an example of someone with no symptoms. Others such as CNN <u>dubbed perfectly</u> healthy people [54] "silent spreaders."

Once again, there was no scientific basis for this notion of asymptomatic spread. The WHO were aware of this. In April 2020 in <u>situation report 73</u> [55] they wrote:

"Asymptomatic transmission refers to transmission of the virus from a person, who does not develop symptoms.. To date, there has been no documented asymptomatic transmission."

A study conducted by Chinese researchers from the <u>Wuhan University of Science</u> and <u>Technology</u> [56] carried out screening on nearly 10 million Chinese citizens in Wuhan. This was an enormous study of people living in the epicentre of the COVID 19 outbreak.

Of the of the 9,865,404 participants without any previous history of COVID-19, a mere 300 were identified as being positive and *asymptomatic*. That means they had some of the viral RNA but no disease. They did not have COVID 19.

1,174 Close contacts of the *asymptomatic* positive cases were tracked and traced. Every one of those 1,174 people were tested for the presence of SARS-CoV-2.

None, not one, tested positive. Of the 300 identified "asymptomatic carriers," from a cohort of nearly 10 million people, there was not one single case of asymptomatic transmission. Science rarely encounters absolutes, yet on this occasion the scientists concluded:

"There was no evidence of transmission from asymptomatic positive persons to traced close contacts. There were no asymptomatic positive cases in 96.4% of the residential communities."

There were 34,424 study participants who had previously been diagnosed with COVID-19. Of these 107 (0.310%) subsequently tested positive again, but all of them were *asymptomatic*. All of the asymptomatic cases, with an age range between 10 and 89, had low viral loads. There was no reason or evidence to suggest they would infect anyone or redevelop symptoms of COVID 19.

Children and younger adults are not <u>at risk from COVID 19</u> [57]. The Wuhan research team found no evidence that *asymptomatic* children posed any infection risk to either other children or adults. Similarly a French study found that asymptomatic SARS-CoV-2 positive children <u>presented no transmission risk</u> [58].

The researchers from the Pasteur Institute looked at a cohort of SARS-CoV-2 infections surrounding six primary schools in the north Paris suburb of Crépis-en-Valois. 510 pupils and 42 teachers participated in the study.

Their infection rates were measured using serological (antibody) tests. The children with infections tended to come from households with higher SARS-CoV-2 rates. However there was no evidence that the children infected either other pupils or their teachers, suggesting they brought the infection into the schools from their homes.

Viral loads were found to be similar in both children and adults but the children were far less likely to develop symptoms, with more than 40% of them being asymptomatic and the rest having only negligible to mild symptoms. The French researchers concluded:

"In young children, SARS-CoV-2 infection was largely a- or paucisymptomatic and there was no evidence of onward transmission from children in the school setting."

Again, the total lack of any evidence of asymptomatic transmission among children was notable. Not a single example of was identified.

During the first wave of the *pseudopandemic* in England and Wales, statistics from the <u>Office of National Statistics</u> [59] showed that the brief spike in all-cause mortality occurred almost exclusively in April. This was an unusual time of year for a respiratory illness to cause significant mortality. Age specific mortality, for those under 65, was 5 in 100,000. The risk to those of working age was barely discernible. For young people under 18 it was statistically zero.

A study conducted in the Republic of Ireland, published in May 2020, found <u>no</u> <u>evidence of secondary transmission of COVID 19 from children attending school in Ireland</u> [60]. In the early stages of the COVID 19 outbreak precautionary school closures were perhaps understandable. If COVID 19 acted like influenza there would have been a risk to the young.

Once the data was clear, the justification for school closures rapidly evaporated. Children faced no mortality risk, no notable risk of illness and there was no evidence they presented any transmission risk. There were no appreciable reasons for any school to remain closed.

A meta-analysis of studies looking at SARS-CoV-2 transmission in and between households, conducted by the <u>Department of Biostatistics at Florida State</u> <u>University</u> [61], also found extremely limited evidence of *asymptomatic* transmission among all age ranges. They considered 54 transmission studies collectively analysing 77,758 "cases."

From these they calculated the secondary attack rate (SAR). This is the likelihood of infection occurring within a specific group under a defined set of circumstances. In this case households living in overcrowded conditions. The Florida researchers found the following:

"Estimated mean household secondary attack rate from symptomatic index cases (18.0%...) was significantly higher than from asymptomatic or presymptomatic index cases (0.7%...).... These findings are consistent with other household studies reporting asymptomatic index cases as having limited role in household transmission...The lack of substantial transmission from observed asymptomatic index cases is notable."

A 0.7% chance of asymptomatic transmission was negligible. This figure was for both asymptomatic (low viral load) and presymptomatic (higher viral load) infections combined. The scientists concluded:

"The findings of this study suggest that given that individuals with suspected or confirmed infections are being referred to isolate at home, households will continue to be a significant venue for transmission of SARS-CoV-2."

Incarcerating people in their own homes for prolonged periods was a counterproductive, dangerous policy. This was clearly understood prior to any lockdown responses to the *pseudopandemic*.

An analysis of 73 studies, collectively evaluating 5340 test subjects, ascertained that viable viral shedding (transmission of the virus in high enough load to infect someone else) was short lived among people with symptoms. The <u>researchers stated</u> [62]:

"Although SARS-CoV-2 RNA shedding in respiratory and stool samples can be prolonged, duration of viable virus is relatively short-lived. SARS-CoV-2 titres in the upper respiratory tract peak in the first week of illness."

There was no evidence during the *pseudopandemic* that testing asymptomatic people for COVID 19 served any practical public health purpose. There was never any reason to think people without symptoms were an infection risk to others. SAGE understood this and advised the State franchise accordingly [63]:

"Prioritising rapid testing of symptomatic people is likely to have a greater impact on identifying positive cases and reducing transmission than frequent testing of asymptomatic people in an outbreak area."

However the false narrative, alleging widespread asymptomatic transmission, was crucial for public acceptance of the new biosecurity state. The promoters of the pseudopandemic were extremely sensitive to anyone who cast any doubt upon it. During a June 2020 press briefing, Maria Van Kerkhove, the WHO's technical lead for the COVID-19 pandemic, made it abundantly clear that asymptomatic transmission was very rare [64]:

"We have a number of reports from countries who are doing very detailed contact tracing. They're following asymptomatic cases, they're following contacts, and they're not finding secondary transmission ... it's very rare, and much of that is not published in the literature,"

Just one day later, Dr. Mike Ryan, executive director of the WHO's emergencies program, back-pedalled swiftly claiming that Van Kerkhove's statement was "misinterpreted." Perhaps this illustrated the difference between the informed and the deceived influencer.

For her part, Dr. Van Kerkhove was clear about what she meant. She <u>responded to the comments</u> [65] of Dr Ryan by conceding that the *"models"* show asymptomatic spread but that real world data did not.

The *pseudopandemic* was based upon computer models, not empirical science. Real science observes, measures, analyses and interprets reality, computer models are best guesses. Their error margin is very high and they cannot be considered scientific proof of anything.

Predictions can only be proven in hindsight. For Neil Ferguson and his ICL team's epidemiological models, this has yet to happen.

To put the *asymptomatic* transmission fable into perspective we need look no further than the UK State's own Chief Medical Advisor. Chris Whitty "advised" the British people to *pretend* they had COVID 19.

In January 2021 UK State franchise desperation to convince people that asymptomatic transmission was real reached absurd heights. They launched a campaign instructing people to behave "as if" they had COVID 19. It was almost

beyond comprehension that millions in the UK still could not see what was in front of their eyes. The Murdoch's <u>Sky News network reported</u> [66]:

"A major new public awareness campaign has been launched, urging people to behave like they are infected with coronavirus.....The campaign - made up of TV and radio adverts as well as a social media blitz - tells people to stay at home and 'act like you've got it'......Around one in three people infected with the virus do not have any symptoms and could therefore be passing it on without realising."

There was no evidence that anyone who was asymptomatic was *passing it on without realising*. This was nothing but propaganda.

In launching their COVID 19 amateur dramatics campaign, the UK State laid bare the reality: the *pseudopandemic* was a confidence trick. It was neither *led by science* nor any concern for the welfare of the people. It was a rather transparent public relations gambit to convince the population to accept a *new normal* form of governance.

It exploited concerns about a nasty respiratory infection to create a completely unwarranted atmosphere of terror. In reality there was no clear empirical evidence that asymptomatic transmission of SARS-CoV-2 was even measurable, let alone significant. This fact obliterated the pseudopandemic delusion but the propaganda and disinformation convinced the people to believe in it. The ambitions of the core conspirators to consolidate global power, via the emerging biosecurity state, continued as planned.

Lockdowns did not provide any public health benefit and were based upon a determined effort to ignore and obfuscate real science. Unfortunately, that is the best we can say about these destructive policies. ICL's recommended *suppression models*, and the accompanying legislation, also provided the UK State franchise, like many others, with the opportunity not only to exercise ever more tyrannical population control and behaviour modification, but also to destroy society, the economy and maximise death and human suffering.

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Chapter 7 - Covid Catch 22

One of the most pervasive *pseudopandemic* deceptions was the inappropriate and misleading conflation of *tests* with *cases*. All *pseudopandemic* State franchises insisted that a *test for SARS-CoV-2* equated to diagnosis of COVID 19. They were ably assisted in this deceit by the mainstream media who continually claimed *tests* were *cases*. This was a *disinformation* and propaganda operation on a global scale.

This duplicity had a considerable impact upon the claimed number of COVID 19 deaths. The WHO <u>classification for a COVID 19 death</u> [1], published in April 2020, stated:

"A death due to COVID-19 is defined for surveillance purposes as a death resulting from a clinically compatible illness, in a probable or confirmed COVID-19 case."

This meant that a COVID 19 death could be ascribed based upon probability. This isn't unusual for determination of cause of death. Often doctors have to make a judgment based upon probability, but in the case of COVID 19 this opened the door for State franchises to create a registration system that cast a very wide net over deaths from a broad range of causes and classify them as COVID 19 mortality.

Most State franchises categorised COVID 19 mortality as death within 28 days of a positive RT-PCR test. Some, such as the UK, also added mortality 60 days post positive test. This met with considerable resistance which we will discuss later. Consequently, in the overwhelming majority of cases, the test was a key determinant in the attribution of mortality.

The likelihood of positive RT-PCR test accurately identifying a SARS-CoV-2 *infection* fluctuated along a spectrum. If identified in a sample using a low Ct threshold it would suggest a high viral load which in turn would indicate a probable *"active"* infection. Above a Ct of 30 it rapidly became increasingly unlikely that there was any *"active"* infection.

A freedom of information request made by <u>independent statistical researchers</u> [2] to Kings College Hospital London revealed the extent of this problem. The hospital confirmed they had recorded 575 COVID 19 deaths between March and December 2020. Of those 486 had died within 28 days of a *positive* RT-PCR using a Ct threshold of 45. This rendered the identification of SARS-CoV-2 meaningless in these cases. As Kary Mullis stated, this threshold would "detect anything in anybody."

Furthermore, the false positive rate of RT-PCR meant deaths attributed predominantly on the basis of a tests were highly dubious. The UK Scientific Advisory Group for Emergencies (SAGE) estimated the RT-PCR false positive rate to be between 0.8% - 4.0%. The median <u>false positive rate was 2.3%</u> [3]. While this initially sounds low, it is important to fully understand the implications.

The 2.3% was the median false positive rate for all conducted tests, not just positive results. With an overall 2.3% false positive rate, if you conduct 1000 tests and 4% are found to be positive then of those 40 people 23 will be false positives. The number of false positives is 2.3% of 1000, not 2.3% of 40.

Currently the UK State franchise claim they have conducted 182 million tests [23]. They define cases as "people tested positive" and allege the cumulative total of "positive" cases is 4.5 million: a positive test rate of 2.5%.

However, if 2.3% are false positives this suggests that of the 4.5 million alleged cases 4.2 million weren't cases at all. It is possible that up to 93% of claimed UK COVID 19 "cases" are false.

In reality the false positive rate isn't this high. The State franchise claim total tests "may include multiple tests for an individual person." Unfortunately they don't say how many are duplicates and we can only use the available figures. Nonetheless, the false positive rate calculated by SAGE applied to all tests, including those conducted upon people who allegedly died of COVID 19.

Even if the test accurately identified the presence of SARS-CoV-2, absent a clinical diagnosis, it still didn't mean the person had COVID 19. They could well have been asymptomatic, in which case the presence of the virus alone would not indicate that COVID 19 contributed towards their death.

Diagnosis takes various forms. Clinical, differential, medical, physical etc. However, in the public health context, the common element for a clinical diagnosis is the observed presence of symptoms. Clinical diagnosis can be defined as [4]:

"Diagnosis based on signs, symptoms, and laboratory findings during life."

A study of <u>asymptomatic SARS-CoV-2 patients</u> [5] in China found that the presence of the virus alone had little to no impact on their presenting conditions. Nearly 80% of the studied patients did not develop COVID 19, although CT scans possibly indicated signs of the disease.

The <u>British Medical Journal</u> [6] reported that Australian researchers tested all the passengers on a quarantined cruise ship. Approximately 59% of the 217 passengers tested positive for SARS-CoV-2. Again, 81% of those infected were asymptomatic. <u>Asymptomatic rates</u> [7] on two quarantined aircraft carriers, the U.S.S. Theodore Roosevelt and the French Charles de Gaulle, were 58% and 48% respectively.

A similar figure of 78% asymptomatic infection was found in <u>a study by Chinese researchers</u> [8] who tested overseas arrivals. They showed no symptoms and therefore there was no evidence they were suffering the ill effects of COVID 19.

Another study of an isolated community of approximately 3000 people in the northern Italian village of Vo' Euganeo found similar results. Sergio Romagnani,

professor of clinical immunology at the University of Florence, stated that <u>between</u> 50%-75% of positive test cases were asymptomatic [9].

Careful symptomatic diagnosis was crucial, regardless of the test results. Symptoms suggest a possible diagnosis which a test may confirm. But if someone asymptomatic tested positive, a doctor could easily misdiagnose associated symptoms caused by some ailment not tested, like flu, as confirmatory of the asymptomatic RT-PCR test result.

With its speculative testing regime in place, the UK State franchise then decided that it needed to completely overhaul the death registration process for COVID 19. This ensured a huge inflation of COVID 19 mortality statistics. While we focus upon the UK State franchise, it is important to note that the *pseudopandemic* was a global operation and similar statistical distortions were applied worldwide.

For example, On the 24th March 2020 the US Centre for Disease Control (CDC) issued COVID-19 Alert No. 2. [10] to all physicians and healthcare professionals. In it they *advised* those signing death certificates that the CDC *expected* them to use the WHO authorised clinical code U07.1. for *possible* COVID 19 decedents. This meant that COVID 19 would be recorded as the underlying cause of death whether or not that was the case. The CDC stated:

"The rules for coding and selection of the underlying cause of death are expected to result in COVID-19 being the underlying cause more often than not."

In the UK numerous, significant changes were made to the death registration process and in each and every case they increased, and never decreased, COVID 19 mortality statistics. This clearly indicates the intention to portray COVID 19, a low mortality disease, as something it was not.

Harold Shipman was a British General Practitioner (GP) and mass murderer who was convicted of killing 15 vulnerable patients in 2000. The evidence showed that he almost certainly murdered at least another 200 other vulnerable people by overdosing them with diamorphine. Following his trial, the *Shipman Inquiry* considered the case and found that Shipman had managed to cover up his crimes by falsifying the death certification process.

The <u>Shipman Inquiry Report</u> [11] recommended a number of improvements to the death registration process. It was published in 2003 but the State franchise did nothing and, partly as a result, between 2005 and 2008, an estimated 400 - 1200 patients died unnecessarily due to the atrocious neglect of Mid Staffordshire NHS Foundation Trust (Mid Staff's).

Like the Shipman case, dangerous malpractice at Mid Staff's had remained undetected due to shortcoming in the death registration process. The subsequent *Francis Report* recommended changes again which, 13 years after the Shipman Inquiry, the UK State franchise <u>finally implement in 2016</u> [12].

In 2020, as the UK faced an alleged global pandemic, the State removed all of these safeguards. Thus recommending the system that had been identified as a danger to patients.

The Coronavirus Act <u>indemnified all NHS doctors</u> [13] against any claims of malpractice or negligence. It also effectively removed the possibility of a jury led inquest into any COVID 19 death. The Act restarted a legislative and regulatory framework which was known to have contributed towards undetected medical error, was prone to abuse and had led to thousands of otherwise avoidable deaths.

In concert with WHO guidelines, and in response to the Coronavirus Act, the NHS issued guidance to doctors [14] for the completion of the Medical Certificate of Cause of Death (MCCD). The regulations and policy guidance from health and statistical authorities applied exclusively to COVID 19. The COVID 19 death certification and registration process they produced beggars belief. The guidance stated:

"Any medical practitioner with GMC registration can sign the MCCD, even if they did not attend the deceased during their last illness."

There was no requirement for a positive test result, the NHS guidance also stated:

"If before death the patient had symptoms typical of COVID 19 infection, but the test result has not been received, it would be satisfactory to give 'COVID-19' as the cause of death....In the circumstances of there being no swab, it is satisfactory to apply clinical judgement."

However, COVID 19 symptoms were largely indistinguishable from a range of other respiratory illnesses. A study from the University of Toronto [15] found:

"The symptoms can vary, with some patients remaining asymptomatic, while others present with fever, cough, fatigue, and a host of other symptoms. The symptoms may be similar to patients with influenza or the common cold."

The MCCDs, which inform Office of National Statistics (ONS) mortality figures in England and Wales (after subsequent registration), were completed inline with the WHO's recommendations [16]. The MCCD is split into sections. Part 1. a) "Disease or condition directly leading to death"; b) "Other disease or condition, if any, leading to (a)"; and c) "Other disease or condition, if any, leading to (b),"

Part 2 records "Other significant conditions contributing to the death, but not related to the disease or condition causing it." For example, a person may have died from heart failure caused by pneumonia but obesity, though not directly related to the immediate cause of death, could have contributed and would therefore be recorded in Part 2.

In the case of respiratory disease, the direct cause of death could be Acute Respiratory Distress Syndrome (ARDS). This may be brought on by, for example,

pneumonia which was caused by influenza. In this instance the direct cause of death would be recorded in Part 1. a) as ARDS, prompted by pneumonia in Part 1. b) and the underlying cause would be set as influenza in Part 1. c).

Following the genomic sequencing of SARS-CoV-2, the WHO Family of International Classifications (WHOFIC) Network Classification and Statistics Advisory Committee (CSAC) created new International Classification of Diseases codes (ICD-10 codes) for COVID 19.

A "confirmed case" was dependent solely upon a positive test result [17] and was given the code U07.1. Observable symptoms were not necessary for U07.1 code to be recorded on a death certificate. This was the code US physicians were ostensibly compelled to use.

A *suspected* COVID 19 case was coded as U07.2. A decedent known to have had contact with a SARS-CoV-2 positive person, while neither testing positive nor having any symptoms themselves, could be considered a *suspected/probable* COVID 19 case and given the code U07.2.

Neither the U07.1 nor the U07.2 codes required any evidence that the decedent had COVID 19 disease. The only requirement was that they, or someone with whom they had contact, tested *positive* for the SARS-CoV-2 virus.

The U07.1 code indicated a "confirmed case" and so, unless the decedent passed away from something that could not possibly be related, such as head trauma, a SARS-CoV-2 positive RT-PCR test would almost automatically confirm COVID 19 as the underlying cause.

The WHO clearly described this process in their <u>International MCCD coding</u> <u>guidelines</u> [18]. They defined what a death "due" to COVID 19 was. Doctors were advised that a death from a "clinically compatible illness, in a probable or confirmed COVID-19 case" indicated a "death due to COVID-19."

A clinically compatible illness could be any respiratory illness, flu or pneumonia for example, or any respiratory distress. Whether coded as confirmed (U07.1) or suspected (U07.2), perhaps based on nothing more than a positive RT-PCR test, COVID 19 would be recorded as the *underlying* (due to) cause of death.

Potentially, even if the individual died from cancer, as long as they tested positive for SARS-CoV-2, or the Doctor suspected *respiratory distress*, the death would be registered as "due to" COVID 19. That is, COVID 19 would again be the reported as the *underlying* cause.

Additional WHO guidance stated:

"COVID-19 should be recorded on the medical certificate of cause of death for ALL decedents where the disease caused, or is assumed to have caused, or contributed to death. Although both categories, U07.1...and U07.2are suitable for cause of death coding.....it is

recommended, for mortality purposes only, to code COVID-19 provisionally to U07.1 unless it is stated as probable or suspected."

Where doctors merely *suspected* a *probable* COVID 19 case, they were advised to record it on the MCCD as a *confirmed* case (U07.1 and not U07.2). Again, effectively ensuring it would be reported as the "underlying cause."

The Office of National Statistics recorded COVID 19 mortality as [19]:

"Deaths involving the coronavirus (COVID-19) include those with an underlying cause, or any mention, of U07.1 (COVID-19, virus identified) or U07.2 (COVID-19, virus not identified)."

If the Doctor held firm and coded COVID 19 as U07.2 on Part 2 of the MCCD, the ONS would still report it as a COVID 19 death in the UK mortality statistics.

The vague Ct thresholds, high *asymptomatic* and false positive rates meant that attribution of COVID 19 death, based solely upon a positive test, that may have been reported weeks prior to the time of death, was close to meaningless. A positive test combined with a detailed examination of observed symptoms would be required for COVID 19 death registration to be plausible.

In the UK, the MCCD process for COVID 19 abolished the need for any examination at all. The scrutiny of a second medical opinion (Medical Examiner) was also removed. Any qualified doctor could sign the MCCD alone.

Accordingly, NHS guidance to MCCD signing health authorities advised:

"During periods of excess deaths due to COVID-19, healthcare providers are encouraged to redeploy medical practitioners whose role does not usually include direct patient care, such as some medical examiners, to provide indirect support by working as dedicated certifiers, completing MCCDs."

These dedicated *certifiers*, though medically qualified, were tasked with signing off COVID 19 MCCDs. GP's and hospital physicians, would gather reports, perhaps from a review of the deceased medical notes or a video conference with a care home provider, and pass that information to the dedicated COVID 19 *certifier* for MCCD completion.

There was no requirement for them to have actually met the decedent. Providing they had information from any other medical practitioner who had seen the decedent within 28 days of their date of death.

The reporting physician didn't need to have physically examined the deceased either. A brief video conference at any time in 4 weeks preceding their passing was deemed sufficient. However if this was impractical, for example for vulnerable older people in quarantined care homes, even this video chat was unnecessary for the MCCD to be signed off as a COVID 19 death.

As long as the signing physician *believed* it was *likely* that the decedent died from COVID 19, they could still sign the MCCD to indicate a COVID 19 death. This could be done based upon nothing more than a review of the patient's case notes or information received from a care home.

Doctors are generally intelligent people but they are no less susceptible to propaganda than the rest of us. Convinced they were facing an unprecedented health crisis, any respiratory symptoms were highly likely to be considered indicative of COVID 19. Especially if, as in the case of the majority of GP's, the doctor was often reliant upon reports from others.

This unbelievably obscure COVID 19 MCCD process steered the recording of COVID 19 deaths in both hospital and community care settings. Additional changes, for primary (community) health and social care, made the situation worse.

From late April 2020 the notification that the deceased *probably* had COVID 19 were gathered from care home managers, who were predominantly medically unqualified, by the Care Quality Commission (CQC). It was based upon the care home's discussion, via video call, with a GP. Again, no actual medical examination of the decedent by any doctor was necessary.

Prior to this, but only for COVID 19, the NHS <u>Key Principles of General Practice</u> [20], issued to General Practitioners had already stated:

"Remote consultations should be used when possible. Consider the use of video consultations when appropriate."

This culmination of these policies, the direct consequence of the Coronavirus Act and WHO guidance, led the Office of National Statistics (ONS) to add this statement to their mortality reports:

"There is no validation built into the quality of data on collection. Fields may be left blank or may contain information that is contradictory, and this may not be resolved at the point of publication."

The ONS reported the requirements for a CQC <u>notification of a COVID 19 death</u> [21] from care settings:

"The inclusion of a death in the published figures as being the result of COVID-19 is based on the statement of the care home provider, which may or may not correspond to a medical diagnosis or test result, or be reflected in the death certification."

Although difficult to comprehend, the preceding statement is unedited. In UK care settings, a COVID 19 death could be recorded, often based upon the non-medical opinion of a care manager, without any medical evidence that the patient had either COVID 19 or a SARS-CoV-2 infection. This could be entered into the running reports of COVID mortality statistics, even without it being notified on the death certificate.

With a declared global pandemic supposedly underway, the NHS were placed on a war footing by the *pseudopandemic informed influencers*. Comments, like those from UK <u>Prime Minister Boris Johnson</u> [22] that the nation was "engaged in war," were commonplace. Always endeavouring to ramp up fear and never urging calm reflection.

There was no proof required for the attribution of a COVID 19 death. The NHS guidance stated:

"Without diagnostic proof, if appropriate and to avoid delay, medical practitioners can circle '2' in the MCCD (information from post-mortem may be available later)"

This suggestion that a post mortem *may be available* was impractical. Additional guidance issued by the <u>Royal College of Pathologists</u> stated [23]:

"If a death is believed to be due to confirmed COVID-19 infection, there is unlikely to be any need for a post-mortem examination to be conducted and the Medical Certificate of Cause of Death should be issued."

Seeing as the WHO had instructed *suspected* U07.2 deaths to be coded as *confirmed* U07.1 deaths, the chance of anything other than *confirmed COVID 19 infection* reaching a pathologist was extremely remote. Any MCCD signed "without diagnostic proof" would be agreed by the pathologist without further scrutiny. The mere act of putting COVID 19 anywhere on the MCCD was enough to negate the need for a post mortem.

This new death certification system, specifically designed for COVID 19, clearly caused confusion. The British Medical Association's (BMA) <u>verification of death guidance</u> [24] advised that if no signing doctor had seen the decedent, prior to completing the MCCD, it should be referred to the coroner. However, this was only a policy recommendation not a legal requirement. It was also a pointless exercise.

Contradicting the BMA's advice, the Chief Coroner's Office advised:

"COVID-19 is a naturally occurring disease and therefore is capable of being a natural cause of death......The aim of the system should be that every death from COVID-19 which does not in law require referral to the coroner should be dealt with via the MCCD process."

This meant, even if a coroner received a referral from a doctor, they would be highly likely to automatically approve the MCCD without further examination. Given that a post mortem had already effectively been ruled out, there would be little point in the coroner investigating further anyway.

Coroners who may have been uncomfortable with this unreal situation, were advised to think of their careers. On the 26th March, contained in the released guidance from the Chief Coroner [25], was some not so friendly advice to coroners who may receive a COVID 19 referral. Normal coronal procedures were abandoned

(but only for COVID 19) and coroners were "reminded" of their obligation to maintain judicial conduct:

"Coroners are reminded of their obligations under the Guide to Judicial Conduct. The Chief Coroner cannot envisage a situation in the current pandemic where a coroner should be engaging in interviews with the media or making any public statements to the press. All coroners should be focussing on their vitally important judicial role."

That *role* was evidently to sign off on any COVID 19 MCCDs and never ask questions. Though we might wonder why it was necessary to make this thinly veiled threat.

Similarly it seemed doctors, nurses and others working in the NHS, who questioned this system, were under no illusions either. The use of <u>draconian Hospital Trust</u> gagging orders [26] (non disclosure agreements) were widely reported by the MSM.

However, these news reports related solely to *whistleblower* stories about NHS *insiders* reporting equipment shortages or inadequate staffing levels. Only narratives that reinforced the concept of the *pseudopandemic* crisis were fed to the public.

The Coronavirus Act had effectively created a medical certification process for COVID 19 where no proof was required. There was no need for a corroborating second medical opinion, no post mortem and effectively no oversight from coroners. It also ended the potential safeguard of a qualified informant. But only for COVID 19.

Prior to the Coronavirus Act, once the cause of death was entered on the MCCD, before being sent to the registrar, the signing medical practitioner was required to seek, where possible, the agreement of a *qualified informant*. Typically this would have been a family member or acquaintance of the decedent who could consent to the recorded cause of death.

The Coronavirus Act stressed that the qualified informant need not be anyone acquainted with the deceased. A hospital official, someone who was *'in charge of a body'* or a funeral director could suddenly perform this vital function. The Chief Coroner recommended:

"For registration: where next of kin/informant are following self-isolation procedures, the arrangement for relatives (etc) should be for an alternative informant who has not been in contact with the patient to collect the MCCD and deliver to the registrar for registration purposes. The provisions in the Coronavirus Act will enable this to be done electronically as directed by the Registrar General."

If family members had just lost a loved one to suspected COVID 19, the chances of them being in lockdown *self-isolation* themselves were high. If not, their option was to visit the location where seemingly infected patients or residents, included a

member of their own family or a friend, were allegedly dying from COVID 19. It isn't known how many *qualified informants*, who knew the deceased, were either able or willing to do this.

To finalise this unbelievable COVID 19 death system, the UK State franchise also withdrew the standard second opinion required prior to cremation. The need to complete <u>Cremation form 5</u> [27] was suspended for all COVID 19 deaths.

This meant possible COVID 19 decedents could be cremated without any clear evidence that they ever had the disease, regardless of their family's wishes. Swiftly ending any chance of an investigation by dubious family members. Of which there were many.

The profusion of suspicious practices within this system can't be blamed upon the medical profession. Doctors have always had the responsibility of completing MCCDs "to the best of their knowledge and belief" even when test results may not be available. They can only make this determination based upon the evidence at their disposal within the policy guidelines and regulations they have to obey.

The difference with the COVID 19 system was that all the normal requirements for qualified confirmatory opinions, and every opportunity to question the cause of death, were removed. Given the extent to which evidence was either vague (in the case of both test results or diagnosis from symptoms alone) or absent completely (not required) the prodigious scope for mortality to be falsely attributed to COVID 19 was on an industrial scale.

It is not credible to imagine that a death registration system as bad as this could have emerged purely by chance. It took planning. It is notable that every element consistently promoted increased recording of COVID 19 mortality. Not one of the changes could have led to any under-reporting. This was a carefully crafted, pseudopandemic mortality deception.

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Chapter 8 - Unthinkable Happens

We must now discuss the part of the *pseudopandemic* most people will find very difficult to accept. In an effort to convince us that a low mortality respiratory virus was a deadly pandemic the State franchise not only manipulated the death registration process they surreptitiously increased mortality wherever possible.

Most people will instinctively baulk at this suggestion. It is inimical to everything we value about our representative democratic society. Sadly, a brief look at history proves that State franchises have frequently killed their own for political purposes. We don't have to go back very far for clear, documented proof.

Operation Gladio [1] was formally revealed in 1990, by then Italian Prime Minister Giulio Andreotti, in an official statement to the Italian parliament. He reported NATO's hand in a series of terrorist atrocities that had taken place in Italy and other European nations throughout the 1950s to the 1980s. Judicial investigations had uncovered a European wide network of NATO trained and equipped terrorist groups staging *false flag* terrorist attacks and political assassinations across the continent for decades.

Gladio atrocities included the Piazza Fontana bombing in 1969, which killed 17 and injured 88, the 1972 Peteano Bombing that killed three Italian police officers, the Belgian Brabant massacres, killing 28 and injuring 40 people between 1982 and 1985, and the 1980 bombing of Bologna railway station which killed 88 and injured 200.

Far right terrorist organisations, acting under the direction of NATO and the intelligence services, committed terrorist attacks which were then blamed on far left groups. This was done most notably, but not exclusively, at the behest of the US, UK and Italian secret services. The broad objective was political and social manipulation and often the aim was to demonise the Soviet Union.

The European MSM and political establishment, sometimes unwittingly, falsely alleged the Soviets were ultimately behind many of the attacks. Over the years, European citizens were murdered by their own respective State franchises for purposes including propaganda, election rigging and geopolitical advantage.

The European Parliament published its <u>Resolution on the Gladio Affair</u> [2] in November 1990. This document stated a number of known facts relating to the four decades of covert Gladio operation. The European Parliament recorded:

"In certain Member States military secret services (or uncontrolled branches thereof) were involved in serious cases of terrorism and crime as evidenced by, various judicial inquiries."

The resolution then recommended that European governments should:

"Protests vigorously at the assumption by certain US military personnel at SHAPE (Supreme Headquarters Allied Powers Europe) and in NATO (North Atlantic Treaty Organisation) of the right to encourage the establishment in Europe of a clandestine intelligence and operation network."

MSM reporting of the Operation Gladio revelations was extremely muted, though some broadsheets mentioned it and the BBC's Timewatch documentary series covered it in detail [3]. Today its existence is rarely discussed, but nonetheless the evidence is indisputable. Western, so called, democratic governments killed their own for political objectives.

Other examples of the UK State franchise's disregard for our lives have included the deliberate release of deadly toxins. Between 1940 and 1979 the Ministry of Defence (MoD) Science Technology Laboratory (DSTL) at Porton Down in Wiltshire ran a series of experiments <u>releasing dangerous chemicals and biological agents</u> [4] upon the UK population.

While they claimed these were "safe" simulations of biological warfare, the experiments included the aerial spraying of the carcinogenic Zinc Cadmium Sulphide on people living in the South and East of England between 1955 and 1963. In 1963 and again in 1964, they released B globigii bacteria [5] on the London Underground. This causes a range of illnesses including the blood poisoning condition septicaemia which, if untreated, can develop into the lethal sepsis.

These are just a couple, among many historical examples, which demonstrate that the State franchise is willing to kill us to achieve its objectives. While distressing, what we are about to discuss is by no means *unthinkable*.

When the UK Prime Minister addressed the nation on March the 23rd 2020, to inform them of their lockdown house arrest, he said that the everyone had to work together to *stay safe* during their enforced incarceration and beyond. There is no direct evidence that he was personally aware, but enforcing people to remain in their own homes during the outbreak of a respiratory virus certainly increased the mortality risk.

When we consider the changes that were made to the death registration process every one increased the likelihood of COVID 19 misdiagnosis. Similarly, when we look at the lockdown and other policy responses to SARS-CoV-2, they all consistently heightened the mortality risk. We will examine these through the prism of the UK State franchise response but all *pseudopandemic* nations implemented similar policies.

Health services were reconfigured to treat virtually nothing but COVID 19. This had disastrous public health implications, as all other potentially life threatening conditions were largely overlooked. The lockdown *suppression* model was never considered effective precisely because the public health costs were known to

outweigh the benefits. The only circumstance in which epidemiologists and other public health experts recommended using this approach was for an outbreak of an extremely virulent, very high mortality disease.

The running UK mortality total, <u>reported by the MSM</u> [6] throughout the *pseudopandemic*, came from a mixture of sources. These included the NHS, the CQC, Public Health England (PHE), Public Health Scotland (PHS) and various other statistical agencies, from both the statutory and private sector.

This reporting grabbed the headlines, but was chaotic and meaningless from a statistical perspective. The MSM did not report the deplorably inaccurate death registration process, and consistently promoted alarm instead of objective rationalism. To understand what happened (and is happening) we will rely upon registered deaths.

In the UK weekly mortality is most reliably recorded by the Office Of National Statistics (ONS) for England and Wales, the National Records of Scotland (NRS) system and the Northern Ireland Statistics and Research Agency (NISRA). These statistics are collated and represented graphically by European Centre for Disease Prevention and Control (ECDC) on their <u>Euromomo website</u> [7].

ONS, NRS and NISRA *all cause* (total deaths) mortality figures represent hard data when considered retrospectively. The Death registration process can take a week or two on average, and these figures correspond to the date the death was registered, not the date it occurred.

It is a legal requirement for all deaths to be registered. While the *core conspirators* and *informed influencers* could manipulate the reported cause of death they couldn't easily increase all cause mortality. However, they made every effort to do so.

Another unique aspect of the *pseudopandemic* has been the cumulative reporting of mortality. Usually mortality statistics for diseases, such as influenza, are reported on a weekly, monthly quarterly and annual basis. Death tolls from a disease are expressed as seasonal or annual. This is not how the State franchise have reported COVID 19 mortality. As we move through 2021 they are adding 2021 mortality to the 2020 total.

If this is the new way of reporting mortality then the current 128,000 reported UK deaths from COVID 19 could be contrasted to the 300,000 or so from influenza and pneumonia this century. In reality there is no reason to believe anywhere near 128,000 people died "of" COVID 19 in the UK.

If we consider registered deaths in 2020, we can see the *pseudopandemic* mortality in the UK can be characterised by two distinct periods. There was no substantial increase in mortality in Northern Ireland and some very brief and short lived increases in Wales. However, in both England and Scotland there were significant

spikes in mortality. This occurred in England between weeks 12 and 21 of 2020 and a smaller but still notable increase in Scotland between weeks 13 and 20.

This is highly unusual for respiratory illness, which tends to occur in the winter months rather than in the spring. The alleged second wave of COVID 19, between October 2020 and March 2021, corresponded to normal respiratory illness though the notable second increase, following the vaccine roll out, was marked. It remains to be seen if overall (all cause) mortality will be high in 2021. The current indication is that it won't, as we are currently experiencing extremely low all cause mortality [8].

Therefore we have seen what appears to be two distinctly different periods of mortality. One, the "second wave," was largely in keeping with seasonal variation and the other, the initial outbreak in the spring of 2020, was an anomaly.

The Health Protection (Coronavirus, Restrictions) (England) Regulations 2020 (lockdown legislation) came into force on the 26th March 2020 (week 13). UK restrictions were relaxed on the 10th May 2020 (week 20). However, prior to the lockdown restrictions, deeply concerning policies were already in operation.

This correlation between unseasonable excess mortality and lockdowns was a pattern repeated across the world. Correlation does not prove causation and lockdowns would broadly coincide with increased mortality if they were designed to tackle it. They began as mortality started to rise and were loosened as mortality fell back to more normal levels. Nonetheless, it cannot be denied that lockdowns also saw policies implemented which increased mortality.

The stated reason for the first spring lockdowns was to "flatten the curve," protect the NHS, by reducing the spread of infection, and save lives by protecting the most vulnerable. A sensible approach to providing this protection, clearly defined in the scientific literature and spelled by the WHO's 2019 recommendations, would have been to quarantine the most vulnerable and allow the healthy to face the infection to build community (herd) immunity as quickly as possible. COVID 19 presented a barely measurable threat to the healthy population.

The UK State franchise's response not only prolonged the exposure of those most at risk from the virus, numerous measures ensured they would receive neither treatment nor a basic standard of care. In no way could it be suggested that lockdown policies *protected* the most vulnerable. Quite the opposite.

The Coronavirus Act removed the NHS duty to abide by the <u>National Framework</u> [9]. This meant they could discharge vulnerable <u>SARS-CoV-2 positive patients into care homes</u> [10] thereby introducing it to otherwise uninfected and isolated care settings. The extent of this practice was considerable.

A UK <u>State franchise report</u> [11] into problems with the distribution of personal protective equipment (PPE), reinforcing the *pseudopandemic* story, also noted the following:

"Some 25,000 patients were discharged to care homes from hospitals, some without being tested for COVID-19, even after it became clear that people could transmit the virus without having symptoms. This contributed significantly to the deaths in care homes during the first wave."

While *pseudopandemic* discussion of *asymptomatic spread* were asinine, nonetheless this indicates the scale of the operation to move vulnerable, possibly infected individuals, into care settings. Even if infection rates were much lower than reported, an effort of this size maximised exposure, among the small percentage of the population that were at an appreciable risk, to the virus.

Mortality peaked on the 11th of April and the UK State franchise published its <u>COVID 19 Action Plan</u> [12] on the 15th April. This seemingly insane policy of discharging potentially SARS-CoV-2 positive patients from hospital into care homes was deemed *"necessary"* by the UK state to create *"capacity"* in the NHS. They stated:

"The UK Government with the NHS set out its plans on the 17th March 2020 to free up NHS capacity via rapid discharge into the community and reducing planned care.....We can now confirm we will move to institute a policy of testing all residents prior to admission to care homes."

From the 17th March 2020 (week 12), during a supposed global pandemic, The NHS were discharging vulnerable patients into care homes without testing them for SARS-CoV-2. On 2nd April 2020 (Week 14) the NHS combined this with instructions that care home residents should not be conveyed [13] to hospital. The traffic of infected vulnerable patients was one way.

The *pseudopandemic* was global and this policy of introducing the disease into isolated vulnerable populations wasn't limited to the UK. Similar scandals <u>emerged in France</u> [14], Germany, Sweden and elsewhere. In Italy even the WHO <u>referred to their policy</u> [15] as a "a massacre." This wasn't just happening in Europe either. The same policy was being conducted in the US.

On the 25th March 2020 the New York State Health Department issued a directive compelling care homes to open their doors to patients who had tested positive [16] for SARS-CoV-2. Just like UK, Italy and nearly every other pseudopandemic State franchise, the US policy was accompanied by a withdrawal of healthcare, chaotic PPE distribution and staff asymptomatic self isolation directives that created chronic shortages at the worst possible time.

In the UK, the process of filling care homes with SARS-CoV-2 infections continued for at least a month. While the *Action Plan* was published on 15th April, this only offered a future commitment to move towards testing. Meanwhile the healthy were under house arrest, thus both reducing the effectiveness of their immune systems and limiting their capacity to tackle the virus through natural immunity. This <u>did not go unnoticed</u> [17] by the scientific and medical community.

Prof. Carl Henneghan from the Oxford Centre for Evidence Based Medicine and the epidemiologist Tom Jefferson from the Cochrane Collaboration reported:

"In order to free up space in hospitals, older patients were discharged into care homes without even being tested for the virus. In the two weeks after lockdown, when the risk of infection should have been waning, a further 1,800 homes in England reported outbreaks."

As previously mentioned, this disgusting practice was combined with almost the complete withdrawal of primary healthcare from the care sector. GP's <u>refused to attend</u> [18] the care homes due to "the restrictions" and were conducting video consultations, often with the carers rather than the patients. Far from being "protected" by the State franchise, the most vulnerable were put at maximum risk and abandoned to their fate.

Other measures were introduced and all of them made the situation worse. In pursuit of the *pseudopandemic*, the State franchise, under the leadership of the *core conspirators* and their *informed influencers*, made a concerted effort to ensure as many deaths as they could.

The UK State told care staff that they <u>must self isolate</u> [19] if they had symptoms, even if they had tested negative, which was unlikely because most couldn't access functioning tests. They also told care staff that they must use PPE when caring for patients.

While most care homes are privately run businesses, access to PPE was then <u>limited by the State franchise</u> [20]. At the same time non-care staff, such as cooks, maintenance staff, postal workers and others, were not required either to access tests or use PPE. Thus withdrawing carers while maintaining the influx of potential infection into the care homes.

The restrictions placed upon care staff increased the already <u>chronic staff shortages</u> [21] in the care sector. This meant care homes were both understaffed and more reliant upon agency staff who then moved between care homes, spreading the SARS-CoV-2 infection widely among the most vulnerable.

Trapped in care homes with overburdened, unprotected staff, unable to cope with both their own fear and the mounting mortality, the State felt it was an opportune moment to <u>suspend all safety inspections</u> [22], in both hospital and care settings. This was supposedly to "limit infections" although every other initiative appeared to increase them. Yet again ending inspections raised the mortality risk for the most vulnerable.

While this appalling situation was being orchestrated there were widespread reports [23] of residents having "do not attempt resuscitation" (DNAR) notices attached to their care plans, without their knowledge or consent. This practice extended beyond the elderly to other vulnerable adults, such as those with learning difficulties. [24]

During the spring "outbreak" testing was not readily available in care homes [25]. This left care workers uncertain if either they or the people they cared for were "negative." The Randox tests that were issued by the State franchise not only failed to reach care settings on time, they were then withdrawn because they admittedly didn't work [26]. Instead care staff were reliant upon the limited number of drive through test centres. Usually many miles from where they lived and worked.

By September 2020, long after thousands had died in care homes, they State still hadn't *resolved* this problem. Again, a combination of State led *initiatives* combined to create the worst possible conditions in care settings. All this must be seen in the context of the completely unnecessary levels of fear created by the State and it's MSM propaganda machine [27]. Just like everyone else, care staff were terrorised.

The British Medical Journal published early analysis of what they called the staggering number of non COVID deaths [28] in the care sector. ONS statistics indicated that of the 30,000 deaths that occurred in care homes during the "spring outbreak" only 10,000 or less could possibly be attributed to COVID 19. Yet every death in care homes was reported to the public by the MSM as evidence of the deadly virus.

A study by the <u>Queen's Nursing Institute</u> [29] found the following practices, commonly operating in Care Homes, at the height of the *pseudopandemic*:

"Having to accept patients from hospitals with unknown Covid-19 status, being told about plans not to resuscitate residents without consulting families, residents or care home staff.....21% of respondents said that their home accepted people discharged from hospital who had tested positive for Covid-19.....a substantial number found it difficult to access District Nursing and GP services....25% in total reporting it somewhat difficult or very difficult during March-May 2020."

These life threatening practices were a direct result of official guidance, issued by registration bodies and health services, in response to the UK State franchise's lockdown legislation. The likelihood of all these various measures coalescing to create a *perfect storm* in care settings is extremely remote. It is unpalatable though not *unthinkable* to describe this as a cull.

Had such policies converged so disastrously during just one "wave" then, while extremely unlikely, perhaps error could be argued. Regrettably these dangerous policy decisions, consistently increasing the mortality risk, were a permanent feature of the *pseudopandemic* response measures. Harmful policies continued throughout both subsequent lockdown and non lockdown periods.

The first hard lockdown ended on the 10th May 2020. NHS orders not to convey vulnerable people to hospital had been rescinded and hospitals had begun routinely screening for SARS-CoV-2, prior to discharge, by the end of April. By mid June 2020, excess mortality in England & Wales had been below the seasonal average for more than 13 weeks [30]. Deaths in care settings were at or below normal levels

[31] and COVID 19 accounted for less illness and death than combined influenza and pneumonia.

With much lower hospital admissions and mortality, soundbites like "flatten the curve" and "stay home, protect the NHS, save lives" were no longer tenable. People were starting to think the pseudopandemic might be over.

Therefore, the MSM propaganda shifted away from mortality towards cases and the use of face masks. Case numbers were solely dependent upon testing so they were easy to fix. However, without pressure on the NHS and related mortality the core conspirators needed to divert attention away from the fact that rising case numbers inversely correlated to falling mortality figures. A new narrative was required until the normal winter season of respiratory illness could be exploited upon its return.

Consequently the MSM told the public [32] that wearing masks would protect them from the SARS-CoV-2 respiratory virus. This too was policy that presented a significant risk to public health.

After years of gold standard science [33] demonstrating no benefit to wearing face masks as protection against viral respiratory infections, suddenly they became mandatory [34]. Despite having said for months that masks didn't work [35], the UK State franchise changed its mind [36] on June 4th 2020. The very next day the WHO also reappraised its opinion, issuing new guidance tentatively supporting the wearing of masks. This decision had nothing to do with medical science and showed a complete disregard for the welfare of the public.

BBC Newsnight correspondent Deborah Cohen revealed that it was political lobbying [37] and not "new science" that influenced the WHO's decision. Originally the WHO did not recommend [38] the widespread use of face masks because there was no reason to wear one, unless caring for a sick patient. Dr. Mike Ryan (WHO director), speaking in late March [39] 2020 said:

"There is no specific evidence to suggest that the wearing of masks by the mass population has any potential benefit. In fact, there's some evidence to suggest the opposite in the misuse of wearing a mask properly or fitting it properly."

Ryan had good reason to make this statement. The *gold standard* of science is the Randomised Control Trial (RCT). To this day, there are no reliable RCT's demonstrating the effectiveness of masks. However, there are many <u>demonstrating</u> their ineffectiveness [40].

An alleged 2008 <u>Australian RCT study</u> [41] did make a claim that masks were effective. However, bizarrely, they did so by ignoring their own results. After conducting the RCT they concluded:

"We found no significant difference in the relative risk of respiratory illness in the mask groups compared to control group."

They then decided that their results were wrong and adjusted their methodology to produce new ones. This time they found:

"In an adjusted analysis of compliant subjects, masks as a group had protective efficacy in excess of 80%"

Needless to say this didn't make much of an impact upon the scientific evidence base for mask use. Changing your methodology because you don't like the outcome isn't usually a scientific principle.

<u>Long, Y. et al. (2020)</u> [42] looked at available RCTs to see if any provided evidence that masks either protect the wearer or others from viral respiratory infections. There were none, and the scientists concluded:

"A total of six RCTs involving 9171 participants were included. There were no statistically significant differences in preventing laboratory-confirmed influenza, laboratory-confirmed respiratory viral infections, laboratory-confirmed respiratory infection and influenza-like illness (ILI) using N95 respirators and surgical masks."

Under political pressure to shift the narrative, The WHO hastily commissioned a meta-analysis (a study of available studies) on the efficacy of <u>face masks and social distancing</u> [43]. The Lancet published it and the WHO then cited their own study as the primary evidence for suddenly changing their stance on face masks. The researchers stated that they looked at:

"172 observational studies across 16 countries and six continents, with no randomised controlled trials and 44 relevant comparative studies.....Our search did not identify any randomised trials of COVID-19, SARS, or MERS....The primary limitation of our study is that all studies were non-randomised"

This was a meta-analysis, on the efficacy of face masks for viral ILI's, which excluded all the available RCTs. Yet the researchers said the main limitation of their study was the lack of randomised trials. The reason for this very strange omission by the researchers became clear in the footnotes:

"The funder contributed to defining the scope of the review."

By insisting that the researchers stuck rigidly to SARS-CoV-2 studies, of which there were very few, and ignored all other ILI research, the WHO ruled out the relevant RCTs from the Lancet paper. Otherwise, the study they commissioned would have concluded that there was no evidence that face masks worked. This was not what the *core conspirators* and their *informed influencers* wanted.

An independent study by Spanish scientists, also <u>published in the Lancet</u> [44], which looked at clusters of SARS-CoV-2 infections in Spain, established very different findings. The scientists didn't see any evidence of any transmission reduction with the use of face masks:

"We observed no association of risk of transmission with reported mask usage."

Noting the lack of RCTs proving that mask were of any use for SARS-CoV-2, a team of Danish scientists took it upon themselves to conduct one [45]. The evidence was already reasonably clear, but the scientists wanted to see if SARS-CoV-2 behaved differently to other viral respiratory infections. It didn't:

"No statistically significant difference in SARS-CoV-2 incidence was observed....infection rates were similar between groups."

Medical practitioners wear sterile masks once and discard them after use. Sometimes they have to wear them for prolonged periods and this correlates with an increased likelihood of them <u>experiencing headaches</u> [46]. This suggests that oxygen levels are depleted when you obstruct your airway.

Some studies indicate that this is the case [47]. When researchers investigated the respiratory consequences [48] of wearing N95 masks among health workers their conclusion was concerning:

"N95 mask materials...impede gaseous exchange and impose an additional workload on the metabolic system"

Medical N95 masks are much better quality than the soggy, cloth muzzles people commonly wore throughout the *pseudopandemic*. Health professionals are trained to keep their masks as sterile as possible, monitor their condition and dispose of them properly. People wandering around the supermarket or delivering Pizza are not.

If the State franchise was to be believed then discarded masks must have presented potential bio-hazards. Yet no effort was made to provide hazardous material disposal bins in any public spaces.

Wearing masks for a long time, especially low-quality cloth or paper masks, increases the risk of bacterial infection. A 2018 study by <u>scientist in Shanghai</u> [49] found that bacteria accumulated quickly on the surface of surgical masks (SMs). They concluded:

"This study provides strong evidence for the identification of SMs as source of bacterial contamination......which should be a cause for alarm"

Research from the <u>American Association for Cancer Research</u> [50] indicated that oral microbes can enter the lungs via unconscious aspiration. These were associated with advanced stage lung cancer. Of particular concern were the Veillonella, Prevotella, and Streptococcus bacteria. So allowing them to coagulate around your mouth and nose probably wasn't a very good idea.

Not only was the increased <u>risk of bacterial infection</u> [51] well known, so too was the increased risk of respiratory influenza like illness (ILI). Bacterial infection is a

primary cause of pneumonia. Pneumonia is usually a significant contributor to ARDS mortality.

In an RCT comparing cloth masks to medical masks, <u>Australian researchers</u> [52] found that cloth masks not only presented a higher ILI risk than medical masks they were worse than wearing no mask at all:

"Cloth masks also had significantly higher rates of ILI compared with the control arm....The results caution against the use of cloth masks. This is an important finding to inform occupational health and safety. Moisture retention, reuse of cloth masks and poor filtration may result in increased risk of infection...cloth masks should not be recommended."

If the intention was to reduce the spread of infection and protect vulnerable people then just about the worst thing you could possibly do was recommend that everyone wear bargain bucket face masks. State franchise *pseudopandemic* face mask policy also increased the likelihood of infection and ill health.

There was never any relevant scientific justification for social distancing. The arbitrary selection of the *"two meter rule,"* demanding that everyone stay apart, was not based upon any relevant scientific research [53].

Scientists from across the country analysed the WHO's Lancet paper and found only 5 of the 172 studies they cited had anything at all to say about social distancing. Of those just one looked specifically at proximity and that paper found no evidence that it made any difference to the spread of viral respiratory infections.

Viral transmission is not controlled, or limited in any way, by bits of cloth on your face or plastic barriers erected in supermarkets and restaurants. These measures are useless and *believing* that they could ever possibly stop the transmission of an airborne virus was a total delusion. The *disinformation* suggesting these barriers work was forced upon the public and businesses by the politicians, their selected scientists and the MSM.

The seasonal pattern of respiratory infections is clearly affected, first and foremost, by atmospheric conditions. This is why we have a winter flu season. A study by Shaman et al (2010) showed the clear correlation between excess respiratory mortality and <u>relative atmospheric humidity</u> [54]. This confirmed earlier animal studies by Lowen et al (2007) [55] and others.

Imperial College London's (ICL's) estimated R0 value took no account of seasonal humidity and wrongly assumed infection was independent of these environmental controls. Respiratory illnesses, such as COVID 19, are seasonal and will rise and fall accordingly. It has nothing whatsoever to do with face masks, lockdowns or standing further apart.

SARS-CoV-2 virions are unimaginably small, around 0.25 microns or less. This is comparable to 1/100th of the cross-sectional diameter of a human hair. Even N95

respirators, with 0.3 - 0.5 micron impenetrability, <u>struggle to cope</u> [56] with virions this small.

At this scale <u>virions are airborne</u> [57]. They are *aerosol particles* and the slightest disturbance in air flow will send them flying. They are much smaller than the weave of a cloth face mask and have no problem at all traversing over, under and around plastic "safety screens."

They are virtually impervious to gravitational sedimentation and can practically fly across entire continents, if the wind is with them. They are everywhere and on everything.

This is why lab technicians who work with viruses wear pressurised, hermetically sealed, full NBC suits not plastic fibre masks. The slightest gap or tear results in them having to undergo full decontamination and antiviral therapy.

The idea, fed to the public, that you could stick a bit of cloth on your face for *protection* (either from infection or transmission), walk around or otherwise avoid an aerosol distributed virus by standing two meters apart was abject nonsense. Moreover, precisely because they are airborne, virus concentration is higher indoors-than-outside [58].

Prior to the *pseudopandemic* the alleged "second wave" was called <u>seasonal variation</u> [59]. As we moved into a genuine winter flu season in the autumn of 2020/2021, increased mortality, especially among the most vulnerable was expected.

There was less need for the State franchise to deploy their policy weapons to maintain the *pseudopandemic* narrative. With their deceptive testing regime and COVID 19 death registration system in place, normal winter mortality could be blamed on COVID 19. However, just to be on the safe side, they deployed them anyway.

Just as they did during the spring outbreak, in order to free up space in the NHS, the UK State tried to discharge <u>SARS-CoV-2 positive patients</u> [60] into care homes, which they rebranded as "designated settings." The claimed need to do this was in response to the alleged overcrowding crisis in hospitals. As we shall see, the reality was not as the State franchise described. However, during the second wave, private care home providers resisted.

As the staffing crisis in the care sector escalated, with up to 50% of staff absent [61], largely due to them having to self-isolate following a *positive* test, with many suffering from additional stress, the Care Quality Commission (CQC) were working with the care sector to *designate* some care homes as sinks for COVID 19 patients. The CQC stated [62]:

"These settings are admitting people who are discharged from hospital with a COVID-positive test who will be moving or going back into a care home setting. This is to help prevent the spread of COVID-19

(coronavirus) in care homes...... The Government's aim is for each local authority to have access to at least one designated setting as soon as possible."

These weren't purpose built facilities. These were existing care homes, with vulnerable residents already living in them. The State Franchise's *safety* plan was as follows:

"NHS provider organisations must ensure all people being discharged into care homes have received a COVID-19 test within the preceding 48 hours of the discharge date.....All individuals who test positive for COVID-19 within 48 hours of being discharged into a care home should be discharged into a designated setting."

Following the disaster that occurred in the Spring "outbreak," many local authorities were unwilling to participate in the State's designated COVID 19 community scheme. But perhaps more importantly, private care home providers were even less enthusiastic. Insurers, confronted with mounting private litigation for deaths ostensibly caused by State franchise policy but blamed upon care home providers, began to refuse cover for care homes who knowingly accepted [63] SARS-CoV-2 residents into their establishments.

As a result, by late October to mid December 2020 mortality followed the typical winter pattern. Statistically <u>significant access mortality</u> [64] first emerged in England in Week 45, ending 11th of November. This was declining, as you might expect for a winter respiratory season.

By week <u>52 and 53</u> [65] Public Health England reported no statistically significant excess mortality for the period. They cautioned that this may be due to delays in reporting over the Christmas period. Though this seems unlikely, as mortality had been declining for weeks.

The UK State franchise COVID 19 vaccine trials rolled out in care settings nationally, beginning on the 8th December 2020. The distribution was completed by late January 2021. This trial of unlicensed vaccines, which did not have marketing authority from the UK Medicines and Healthcare Products Regulatory Agency (MHRA), corresponded to a massive spike in mortality [66] in care homes. The CQC reported a 46% increase in care home deaths [67] in just one week during the vaccine roll out.

According to the UK State, on the 21st November, the average number of COVID 19 deaths per day was 464.7. This had dropped to 427.3 by the start of the vaccine roll out, on the 10th of December. This represented a gradual 8% decline over a couple of weeks. By the 19th of January, with the vaccine roll out of the over 80's nearing completion, it stood at 1,272. An increase in daily mortality of just over 270% in 7 weeks.

Without an investigation of the startling increase in mortality that directly corresponded to the vaccine roll out, we may never know if there was a link. However, any refusal to investigate this would be untenable. Such a clear correlation warrants examination. Given that every other *pseudopandemic* mitigation policy added to mortality, this correlation must be investigated.

Other harmful State franchise policies also made an unwelcome return during the normal winter respiratory illness season. Once again the widespread use of enforced <u>do not resuscitate orders</u> [68] (DNAR) were reported, not just for the care home residents but also for people with disabilities, again <u>including those with learning disabilities</u> [69].

It was policies such as these which contributed to the statistical fact that 6 out of 10 so called COVID 19 deaths were of people with some degree of disability. The NHS found:

"Between 24 January and 20 November 2020 in England, the risk of death involving COVID-19 was 3.1 times greater for more-disabled men and 1.9 times greater for less-disabled men, compared to non-disabled men. Among women, the risk of death was 3.5 times greater for more-disabled women and 2.0 times greater for less-disabled women"

In every way imaginable the policy decisions and advice given to the public throughout the *pseudopandemic* increased the infection and subsequent mortality risk. When all of them achieve the same elevation of risk *coincidence* ceases to be credible.

Regrettably, our deeply held beliefs about the nature of our society, coupled with our ignorance of history and faith in "the science," render us incapable of recognising the truth. We are conditioned to believe the State is a protective influence, almost from birth. If we ever consider the possibility that the State may actively seek to harm us, especially the most vulnerable, we experience an uncomfortable schism in our thought processes (cognitive dissonance.)

Our inability to even countenance this possibility has repeatedly allowed the worst atrocities in human history to proceed unchallenged. We never realise until it is too late.

Despite accurately describing this cull, the leading UK care charities the Alzheimer's Society, Marie Curie, Age UK, Care England and Independent Age all attributed this stomach churning mortality conveyor belt to *coronavirus*. While organisational cognitive dissonance may be evident, their <u>call for a comprehensive government plan to support social care</u> [70] illustrated that many knew what was happening but were helpless in the face of State authority.

They wrote an open letter to the State franchise, published on April 14th 2020:

"We are appalled by the devastation which coronavirus is causing in the care system and we have all been inundated with desperate calls from the

people we support, so we are demanding a comprehensive care package to support social care through the pandemic......we urgently need testing and protective equipment made available to care homes – as we're seeing people in them being abandoned to the worst that coronavirus can do. Instead of being allowed hospital care, to see their loved ones and to have the reassurance that testing allows; and for the staff who care for them to have even the most basic of PPE, they are told they cannot go to hospital, routinely asked to sign Do Not Resuscitate orders, and cut off from their families when they need them most....Older people's lives are not worth less. Care home staff are not second class carers. The Government must step in and make it clear that no-one will be abandoned to this virus simply because of their age, condition or where they live."

The UK State did not step in to save anyone. It continued to pursue exactly the same policies throughout the alleged "second wave." Even a few isolated voices in the MSM pointed out what they referred to as culpable neglect [71].

The State franchise continued to heap yet more disastrous regulations and policies upon the health and care sectors, consistently boosting mortality figures, all to be blamed upon COVID 19. The lives of the most vulnerable meant nothing, as the core conspirators and informed influencers pushed ahead with their pseudopandemic.

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Chapter 9 - The Pseudopandemic Opportunity Realised

The UK State, like most other states, is a franchise of the Global Public Private Partnership (GPPP). The *core conspirators* are among the controlling members of the GPPP. They used their *informed influencers*, working in key positions within State franchises, to run their *pseudopandemic*.

COVID 19 presented a low population mortality risk, primarily to older people and those with other health problems (comorbidities). In order to create the *pseudopandemic* illusion, the UK state franchise, like many others, made a number of legislative and regulatory changes to maximise the number of deaths. They then attributed the considerable mortality they caused to the relatively innocuous COVID 19.

The State Franchise *partners* with the mainstream media (MSM). The major media corporations are also members of the GPPP. They disseminated most of the *pseudopandemic* propaganda used to terrorise the public. Disinformation was then combined with exaggerated case numbers, based upon non diagnostic tests, and the rigged mortality statistics to complete the deception.

Genuine scientific enquiry was sidelined, ignored and if necessary censored. Pseudopandemic scientific legitimacy was misappropriated by referencing only the compliant scientific partners of the GPPP, who were well funded to produce erroneous scientific papers and alarming computer models. Many of these so called scientists had considerable financial conflicts of interest and personally profited from their junk science.

Grossly inflated case numbers and heavily manipulated mortality statistics made objective statistical analysis challenging. Thankfully, *all cause* mortality (total deaths), released in early 2021, enabled some meaningful, if limited, examination. It exposed the *pseudopandemic* for all to see. If they cared to look.

Statistical agencies like the Office of National Statistics (ONS) were confronted with the prospect of reporting mortality statistics they could no longer rely upon. Not only was the COVID 19 death registration process untrustworthy, but other changes to the reporting process created a further lack of reliability.

Just before the significant spring spike in mortality, on the 30th March 2020, the MSM reported [1] that the UK State had instructed the ONS to change the way they record COVID 19 deaths. Prior to the change, the ONS reported a COVID 19 death only if it was clearly identified as the direct or underlying cause. Explaining the change to recording "mentions" of COVID 19, an unnamed spokesperson for the ONS said:

"It will be based on mentions of Covid-19 on death certificates. It will include suspected cases of Covid-19 where someone has not been tested positive for Covid-19."

In response to this move by the State, in their guidance the ONS endeavoured to make a distinction:

"From 31 March 2020 these figures also show the number of deaths involving Coronavirus (COVID-19), based on any mention of COVID-19 on the death certificate.....We use the term 'due to COVID-19' when referring only to deaths with an underlying cause of death as COVID-19 and we use the term 'involving COVID-19' when referring to deaths that had COVID-19 mentioned anywhere on the death certificate, whether as an underlying cause or not."

ONS statistics consistently demonstrated, throughout the *pseudopandemic*, that more than half of their reported mortality figures related to deaths *"involving COVID-19."* This distinction was not disputed. Speaking in April 2020 the UK's Deputy Chief Medical Officer Jenny Harries explained the mortality figures:

"For the UK these are COVID 'associated' deaths, they are all sad events, they will not all be deaths as a result of COVID."

Until mid August 2020, a UK COVID 19 death was reported if the decedent had *tested positive* at any point during the preceding months. An individual may have been found to have traces of SARS-CoV-2 in March, and then subsequently died of heart failure in August, only for their family to learn that they were recorded as a COVID 19 statistic.

In response to considerable public <u>and scientific pressure</u> [2] this approach changed to only recording a COVID 19 death within 28 days of a *positive test*. The fact that the test wasn't a diagnostic tool remained unchallenged. However the UK State franchise was among many reluctant to let go of its *pseudopandemic* numbers. Adding further statistical confusion:

"In England, a new weekly set of figures will also be published, showing the number of deaths that occur within 60 days of a positive test. Deaths that occur after 60 days will also be added to this figure if COVID-19 appears on the death certificate."

The August methodological change <u>reduced claimed COVID 19 deaths</u> [3] by 5,377 in England alone. This didn't make any difference to the number of people who died from COVID 19, it just changed the number of people who *reportedly* died from COVID 19.

It seems likely that a similarly forced change for case numbers occurred after the chair of the UK Statistics Authority, Sir David Norgrove, wrote to the Health Secretary [4] on 3rd June 2020. He was among many who questioned the purpose of the State's testing regime, noting it merely served to pump up so called *case* numbers.

He informed them it provided neither statistical nor epidemiological value. This seemingly led to the subsequent overnight removal of more than 30,000 claimed cases [5].

When COVID 19 was falsely attributed to the death of the father of journalist and broadcaster Bel Mooney she was able to <u>report her father's story</u> [6] in the mainstream media (MSM). Mooney noted a conversation she had with the registrar:

"The strangest thing is that every winter we record countless deaths from flu, and this winter there have been none. Not one!"

The MSM did not report the hundreds of other families who had long been posting their anger and distress [7] on social media as their loved ones deaths were turned into fake COVID 19 statistics. Bereaved family members, who knew their relatives had not died of COVID 19, were left unable to express their anger through official channels. It was only when families launched a campaign to call for a public inquiry [8] that the MSM and the State franchise even acknowledged them.

The attempts to manipulate the mortality statistics led to some bizarre official statements. For example, speaking on April 16th 2020, during one of the daily national MSM briefings, the UK's Chief Scientific Officer, Patrick Vallance, said:

"It is worth remembering again that the [Office of National Statistics] ONS rates are people who've got COVID on their death certificates. It doesn't mean they were necessarily infected because many of them haven't been tested. So we just need to understand the difference."

The difference was that a significant number of decedents were added to COVID 19 mortality statistics without any evidence that they actually had it. Deaths were also being recorded based upon wildly inaccurate tests which didn't indicate that the deceased had developed the corresponding disease. Others were diagnosed based upon the untrained medical opinion of care managers or a case review of symptoms, which could have been from a range of illnesses.

With one of the oldest populations in Europe, Italy was seemingly hit very hard by COVID 19 during the spring *outbreak*. Citing research by the Italian National Institute of Health, which found no clear COVID 19 cause of death in 88% of deaths attributed to COVID 19 [9], the scientific adviser to Italy's minister of health, Professor Walter Ricciardi, said:

"The way in which we code deaths in our country is very generous in the sense that all the people who die in hospitals with the coronavirus are deemed to be dying of the coronavirus.....On re-evaluation by the National Institute of Health, only 12 per cent of death certificates have shown a direct causality from coronavirus."

The US Center for Disease Control [10] (CDC) reported:

"For 6% of the deaths, COVID-19 was the only cause mentioned. For deaths with conditions or causes in addition to COVID-19, on average, there were 2.9 additional conditions or causes per death."

This was the minimum figure for plausible COVID 19 deaths, the true percentage was almost certainly higher. Nonetheless it was preposterous to claim that a decedent who had cancer, pneumonia and had just had surgery, but tested positive for SARS-CoV-2 four weeks earlier, could reasonably be categorised as a COVID 19 death. Yet, that is precisely what happened, and continues to happen, as a result of the *pseudopandemic*.

Often the propaganda was simply false. The MSM reported the sad death of a 17 year old football fan [11] in Northern Ireland as the "youngest person to die in Northern Ireland linked to Covid-19." Again it took citizen journalists to highlight that the young man died of heart failure [12] and had tested negative for SARS-CoV-2. Yet his death was entered onto the official COVID 19 mortality statistics. His father said:

"I don't want him to be remembered as a statistic, as the youngest person to have died of Covid. As far as we are concerned he died of heart failure. We just have to get our point across...We're also having to cope with what I can only describe as a media circus."

This issue of ignoring all comorbidities and automatically attributing COVID 19 as cause of death, frequently with disregard to other more serious health conditions, led to some nonsensical contradictions from the ONS [13]:

"Influenza and pneumonia was mentioned on more death certificates than COVID-19, however COVID-19 was the underlying cause of death in over three times as many deaths between January and August 2020."

Influenza or pneumonia are not usually "notifiable" diseases, the mere "mention" of them did not constitute a reason to automatically record a death as a flu or pneumonia statistic. However, any "mention" of COVID 19 always did.

It is obvious what the intention was. In regions across the UK there was little sign of a *global pandemic*. Had one been underway every town and city, village and borough would have been deeply affected. Most people would have personally known someone who died from COVID 19. There would have been no need to artificially induce the sense of fear. It would have been a natural emotional response to real world events. Instead the *global pandemic* was experienced almost entirely through the lens of the MSM.

To suggest that COVID 19 accounted for three times as many deaths as influenza and pneumonia, while flu and pneumonia were on more death certificates, was untenable. Especially in light of the distinct lack of evidence required to enter COVID 19 on a UK Medical Certificate of Cause of Death (MCCD).

COVID 19 had a magical curative effect on all other respiratory illness, including influenza. According to the CDC Influenza Like Illness Surveillance Network [14] (ILINet) COVID 19 almost completely eradicated all other ILI's. The cumulative rate of Influenza between September and December 2019 [15] was 8.7% (of specimens tested). For the same period in 2020 [16] that figure was 0.2%. An amazing reduction.

However, SARS-CoV-2's ability to cure influenza wasn't restricted to the US. It had the same effect the world over. The WHO operate the Global Influenza and Surveillance Report System (GISRS) which records influenza positive tests in both the northern and southern hemisphere. In 2020 GISRS registered no influenza [17] at all from week 16 onward. Coincidentally, just as COVID 19 "case" numbers started picking up in western developed nations.

COVID 19 also cured influenza in the UK. If, for example, we look at Public Health England's (PHE) Weekly Influenza Report for week 2, in any previous year [18], we consistently see that early January is always a period of influenza outbreaks, hospital admissions and related mortality. In 2020, according to the combined PHE Weekly Influenza and COVID Report [19], there were virtually no flu-related incidents.

It appeared that COVID 19 simply replaced influenza. Therefore, if official statistics were reliable, it was impossible that influenza and pneumonia were on more death certificates than COVID 19 because influenza and pneumonia didn't apparently exist in 2020.

As there was no influenza it is also a mystery why the UK State franchise ran its largest ever flu vaccination program [20] in the the autumn of 2020. What were they vaccinating against?

Picking COVID 19 mortality out of the statistical quagmire was tricky. Not just because the data sources were corrupted, but due to the nature of the disease itself.

COVID 19 risks increased considerably with age, as practically all mortality risk does. Statistics for those of working age show a population mortality risk of between 0.0166% and 0.0046%, depending upon who you believed [21]. The COVID 19 risk to the working age population and younger was statistically insignificant.

The mortality risk <u>disproportionately impacted</u> [22] men. In 2018 in England and Wales the <u>average age of death</u> [23] for men was approximately 80 and 83 for women. The average age of <u>COVID 19 death</u> [24] in 2020 was just over 82. COVID 19 mortality was practically indistinguishable from standard mortality distribution. To this day there is no evidence of a global pandemic in this data.

The last <u>Published ONS analysis</u> [25] that directly reported the number of preexiting conditions for deaths *"with"* COVID 19 *mentioned* on the death certificate was released for the period ending the 30th June 2020. From this we discovered

that 91.1% of alleged COVID deaths had at least one serious comorbidity. The ONS stated:

"Of the 50,335 deaths that occurred in March to June 2020 involving COVID-19 in England and Wales, 45,859 (91.1%) had at least one pre-existing condition, while 4,476 (8.9%) had none. The mean number of pre-existing conditions for deaths involving COVID-19 between March and June 2020 was 2.1 for those aged 0 to 69 years and 2.3 for those aged 70 years and over."

The <u>direct reporting of COVID 19 comorbidity rates</u> [26] were "paused" in July and never resumed. It took a <u>freedom of information request</u> [27] to reveal the data. Of the approximate 71,000 people who allegedly died of COVID 19 in England and Wales between July 2020 and February 2021 just 9,400 had no other pre-existing conditions. Of the remaining 87% we can only assume that the average number of *pre-existing conditions* per decedent was 2.1 or more.

This suggests that the minimum number of people who died as a direct result of COVID 19 was around 10 - 15% of total reported deaths for the period. Given the false positive testing rate, this percentage was likely to be even smaller. For an additional unknown number, COVID 19 probably contributed toward their deaths. Data from other sources suggested this figure was unlikely to have increased the total much beyond 20% of claimed COVID 19 mortality.

In England and Wales it is a legal requirement for all registered medical practitioners to notify their local health authority of any diagnosed cases of notifiable diseases. The list of Notifiable Infectious Diseases (NOIDS) includes COVID 19. Normally they will report this case as soon as possible. They are not required to wait for test results.

This is not optional. All diagnosing doctors must complete a NOIDS report upon making a diagnosis.

<u>NOID's reports</u> [28] are dependent upon observed symptoms. They indicate that a qualified medical practitioner has diagnosed a patient who presented with symptoms of a notifiable disease.

For a 4 week period of Week 46, ending 15th November 2020, until Week 49, ending 6th December 2020, there were 502 (five hundred and two) notified, diagnosed cases of symptomatic COVID 19 in England and Wales. During the same period the UK State franchise reported 469,356 (four hundred and sixty nine thousand, three hundred and fifty six) new *cases*.

Another NOIDS obligation is given to testing laboratories in England who have a statutory duty to inform Public Health England (PHE) of positive tests for notifiable causative agents, including SARS-CoV-2. Between Week 46 and Week 49 [29] they notified PHE of 423,772 positive tests and the UK State reported 439,418 for England.

This clearly demonstrated the huge inflation of claimed "cases" as a result of using positive SARS-CoV-2 tests as *proof* of COVID 19. It also revealed the significant disparity between symptomatic diagnosis of COVID 19 and reported case numbers.

According to the official fact checker *Full Fact* there were 18,152 COVID-19 notifications [30] made by doctors in the whole of 2020. Yet the State franchise claimed there were 70,853 COVID-19 deaths in England and Wales in the same year. Full Fact offered an explanation for this enormous discrepancy:

"People with Covid symptoms are advised to get a test, but not to visit their doctor, which may be part of the reason why doctors reported so few cases of the disease through NOIDS. Since Covid became widespread in the UK, and began to be monitored in other ways, it is also possible that doctors felt there was little need to continue notifying PHE about each case."

This was not credible. While it is true that people were told not to go to a doctor if they suspected they had COVID-19, a diagnosis by a doctor was still necessary at some point for subsequent mortality to be attributed to the disease. The suggestion by Full Fact that doctors unilaterally decided not to bother with their statutory obligations was ridiculous.

What this massive difference between claimed cases, subsequent COVID-19 mortality and NOIDS indicated, was that Doctors were reliant upon laboratory testing to fulfil the duty to notify the authorities. It seem highly likely that a positive test was the leading determinant in the overwhelming majority of COVID-19 diagnosis.

SAGE acknowledged that a positive test result did not constitute proof that death was caused by COVID 19. Following the vaccine roll out, their modelling specialists Spi-M-O were concerned that the false attribution of COVID 19 deaths would undermine the vaccine narrative. They advised the State franchise to change the way they made up the mortality statistics [31]:

"SPI-M-O is concerned that, as.. a large proportion of the adult population is vaccinated, the current definition of death (i.e. death within 28 days of a positive COVID-19 test) will become increasingly inaccurate... It will also potentially distort estimates of vaccine efficacy."

Explaining how the 28 day system, if consistently applied, would suddenly *become increasingly inaccurate*, a senior SAGE member <u>reportedly said</u> [32]:

"If the definition remains the same, these people would be counted as 'vaccine failures', whereas the vaccine prevented death from Covid, but they really died from something else. I suspect that the current definition will have to be revised"

In other words, the State franchise' own scientific advisors accepted that diagnosing a COVID 19 case based upon a test result was completely unreliable. Really they

died from something else. They weren't concerned that the whole population had been deceived, only that the fraudulent reporting system would undermine the claims they wanted to make about vaccines.

In response the MSM were immediately tasked with changing the narrative. Admitting that *up to a third* of registered COVID deaths were <u>not attributable to the disease</u> [33] they suggested this was only a recent phenomenon. They neglected to mention that the system *had not changed* and was used throughout the *pseudopandemic* to terrorise the public. Medical science or statistical rigour had nothing to do with it.

There is no reason to believe that deaths caused by COVID 19 were anywhere near the numbers claimed. In light of all the factors we've discussed, a reasonable estimate for COVID 19 deaths is that they amounted to no more than 15% of those reported [34]. While the State franchise allege (at the time of writing) that 130,000 people have died *of* COVID 19 in the UK, it is likely that the true figure is much closer to 19,000.

For example, freedom of information requests to councils across the UK showed no increase in <u>burials or cremations</u> [35]. It is an unpleasant calculation to make but, bluntly, there aren't enough dead people to evidence a genuine pandemic.

Sadly, it seems unlikely that we will ever know how many people really died "of" COVID 19 during the *pseudopandemic*. All we can know is that total *all cause* mortality wasn't unusually high. Families across the country, who know their loved ones deaths were falsely attributed to COVID 19, may never get the closure they deserve.

What is beyond dispute is that a global pandemic should bring with it significant additional mortality. As we cannot rely upon excess mortality reports and attribution of cause of death, all we can look to for evidence is the total number of deaths. *All cause mortality* must demonstrate an unprecedented mortality rate in 2020. If it doesn't, then there is no evidence of a global pandemic.

As a result of the way the weekly divisions fell, statistically speaking 2020 was a 53 week year. The ONS released data [36] for their estimated deaths from all causes in England and Wales for 2020.

Total estimated deaths in England and Wales were 607,173. This was considerably higher than the 529,553 in 2019 and the difference of 77,620 initially appeared to account quite precisely for the reported COVID 19 deaths, plus a notable increase in mortality from dementia and Alzheimer's. However, there were a series of anomalies.

Deaths from Ischaemic heart diseases were 1,450 below the 5 year average. Cerebrovascular disease was down by 2,276, malignant respiratory neoplasm by 1,537, chronic lower respiratory disease by 2,764, and influenza and pneumonia

deaths were 7,313 below the 5 year average. An apparent reduction of 15,340 deaths from other causes.

To truly understand if 2020 was a year of *unprecedented* mortality then it must be viewed in comparison to previous years. Mortality is a function of population size and age distribution. A smaller, older population may well have higher numbers of deaths than a larger, younger one. Equally, population growth usually means more deaths.

The population in the UK, as in many developed nations, is <u>aging significantly</u> [37]. In 1991 the 9 million over 65's represented 15.8% of the population. In 2016 there were 11.8 million accounting for 18% of the population. This may, in part, explain the marginal trend of increasing mortality [38] since 2011.

In 2000 the <u>UK population was 59 million</u> [39] growing to 59.3 million by 2002. It now stands at 68 million. This represents a UK population growth of 15% in just 20 years.

In order to calculate the relative death rate, given population growth and age distribution, the ONS apply a calculation to produce their <u>Age Standardised Mortality Rates</u> [40] (ASMRs). Given the extraordinary State response to the *severe* global pandemic, you would expect the ASMR for 2020 to be horrendous. The ONS certainly showed that 2020 was the worst year [41] for mortality in the last 10.

ASMRs fluctuate from year to year. Until 2010 the trend had been constantly downwards in the post war period. Other notable spikes in annual mortality were seen in the ONS data record of annual ASMRs in England since 1938 [42]. Significant rises were seen in 1947, 1949, 1951, 1958, 1963, 1970, 1972, 1976, 1985, 1993, 2014 and 2020. None of these previous years warranted any lockdown (suppression) measures. The exception was 2020.

Most of these annual ASMR rises were in the region of 35 to 45 points. For example, in 2014 the ASMR rose by 40.2, in 1993 by 38.4 and in 1984 by 46.3 points. By contrast the rise in 2020 was 118.5. There is no doubt that mortality increased significantly in comparison to the 5 year average in 2020.

This notable rise occurred in a year where mortality was impacted by a combination of factors. We will discuss some of the many lockdown costs shortly, but the circulation of a low mortality viral respiratory disease, affecting vulnerable people with comorbidities, was just one among a long list of disparate drivers of mortality in 2020.

Despite these non - COVID 19 antecedents for additional mortality, the increase seen in 2020 was by no means unique in the post war era. In England it rose by 90.5 in 1947, by 83.5 in 1963, it rose by 104.9 in 1970 and in 1951 by 216.3.

The death toll in 1951 was allegedly attributable to the the influenza epidemic which struck some parts of the UK (most notably Liverpool in England) but left others

relatively unscathed. To this day science has <u>struggled to account for this</u> [43] unusual, localised pattern of ILI infection.

In 1951 Jackie Milburn scored twice for Newcastle United as they beat Arsenal 2 - 0 in the FA Cup final in front of more than 100,000 spectators in a packed Wembley Stadium; the Royal Festival Hall hosted the Festival of Britain, attracting visitors from across the world. In 1970 the Commonwealth Games were attended by huge crowds in Edinburgh and the Isle Of Wight Rock festival attracted more than half a million people.

Not only was 2020 far from having the highest mortality rate in the post war period it didn't even have the highest death rate [44] in the 21st century. From 2000 to 2008 every year had a higher ASMR than 2020. In the two decades of the 21st century, 2020 ranked 9th, out of 20 consecutive years, for all cause mortality in England and Wales.

The falling trend in mortality throughout the post war period stopped in 2008-2009 following the global financial crash. This was because economic deprivation has a <u>direct relationship to health inequality</u> [45] and increased mortality.

Those who pointed out that the economic destruction caused by lockdowns would kill more people than COVID 19 were attacked by the MSM throughout the *pseudopandemic* for not caring about deaths caused by COVID 19. The MSM enthusiastically capitalised upon the <u>deaths of people they called conspiracy theorists</u> [46] who they reported as dying of COVID 19, despite there being no formal announcement on their cause of death.

While a persons beliefs wouldn't stop them dying from COVID 19, the chances of this happening to someone of working age or younger were extremely remote. All too often, in their eagerness to promote the pseudopandemic, the MSM boldly reported deaths due to COVID 19 only for it to later emerge that wasn't the case.

In one of many examples, the BBC announced that a young woman with no underlying health conditions <u>died from COVID 19</u> [47]. She actually suffered a heart attack and the hospital she attended <u>did not consider her death to be related to COVID 19</u> [48]. Nor had she been tested for SARS-CoV-2 in the hospital where she died. However, as she had already been reported as the UK's youngest COVID 19 death, the coroner recorded her death from COVID 19 [49] anyway.

There was, of course, no post mortem or inquest. The coroner appeared to simply record cause of death as instructed. It seems not doing so could have been very damaging to their career.

Though a notable increase in mortality over the 5 year average was observed in 2020, it was far from unique in terms of numbers of deaths. The only aspect of 2020 that was *unprecedented* was the State franchise's policies and public hysteria created by the MSM

In an incredible example of MSM propaganda, Sky News concocted a dizzying mix of mismatched mortality measures in their <u>hapless disinformation article</u> [50] discussing the 2020 figures. Written by their *Economics and Data Editor*, the lengths the global media corporation went to, in order to mislead their readership, were astonishing.

Writing their fake news prior to the release of ONS mortality figures for the whole year, Sky actually underestimated the number of deaths in England and Wales, claiming that 604,045 deaths were "nearly without precedent." While the final figure turned out to be 607,173, this wasn't unprecedented either, or nearly without precedent as Sky chose to describe it. The leading propagandist claimed:

"The only other year in which more than 600,000 people died in England and Wales was 1918....this is more than in any year of the Second World War or any other pandemic - ever."

Realising that their readers weren't complete idiots, in an attempt to regain some credibility, they then qualified this derisory misrepresentation of statistics by adding:

"You've probably already realised the main problemthe UK population is far bigger today than it was in 1918.....We need to divide the number of deaths by the total population in England and Wales.....it's...only the highest crude mortality rate since 2003....Crude mortality rates...have been falling for most of the 20th and 21st century as medical science has advanced and people have lived longer. So casting this number as telling us 'it's only as bad as 2003" isn't quite right."

At least the propagandists recognised they had a major problem. Far from being *nearly without precedent*, in terms of mortality 2020 was not a unique year. There was an increase in mortality but, as Sky acknowledged, this was only the highest *crude* mortality rate seen since 2003. When adjusted for age and population, it barely made it over the mid way point of the 21st century: it was only the highest total since 2009.

ASMRs completely undermined the story that the propagandists desperately wanted to tell. So they started talking about the increase in mortality instead, claiming this was a "far better yardstick." However this improved yardstick only served to highlight the absurdity of their claim:

"In 2020 the number of excess deaths, as a proportion of the population, rose by 12.1% compared with the average of the previous five years. To put that in perspective, that's the biggest leap in any year since 1940. Bigger than during the 1951 flu epidemic. Bigger than during the Asian flu in the 1950s or the Hong Kong flu in the 1960s."

They switched between calculated ASMRs and absolute (crude) numbers then mixed the two different measures together in one statement. Rather than report the 8% ASMR increase they reported the 12.1% increase in crude numbers of deaths.

Having already acknowledged ASMRs reveal the population death rate, they then ignored this completely and compared crude numbers, misleading the public into believing this was calculated as a proportion of the population.

Sky weren't alone, the BBC, perhaps the UK's most rapacious propagandists, persisted with the deception that excess COVID 19 mortality was the worst in the post war period [51]. As did the UK's Guardian with their amazing "fake news" headline "2020 Was Deadliest Year In A Century In England and Wales, Says ONS" [52]. Despite backtracking somewhat from their disinformation, by vaguely acknowledging ASMRs, they still maintained and publicised their completely false claim.

In an October press conference [53] the WHO stated that their best estimate was that 10% of the world population had been infected with COVID 19. This meant that around 780 million people supposedly had SARS-CoV-2. Even if we accept the WHO's official statements, with just over 1 million deaths that indicated a COVID 19 Infection Fatality Rate (IFR) of 0.14%. Which is only marginally higher than the WHO's own estimated influenza IFR [54] of 0.1%.

This slip of the tongue by the WHO exposed undoubtedly one of the key *pseudopandemic* deceptions. One that was maintained at the very highest levels. This was the seemingly deliberate blurring of definitions that continually failed to distinguish between the two very different mortality measures of CFR and IFR.

In a coordinated statement with the WHO's pandemic declaration, on the 12th March 2020 Anthony Fauci, the Director of the US National Institute of Allergy and Infectious Diseases (NIAID), made a pivotal statement to the US Congressional Committee for Coronavirus Preparedness and Response. He told the committee:

"The flu has a mortality rate of 0.1 percent. This [Covid-19] has a mortality rate of 10 times that. That's the reason I want to emphasize we have to stay ahead of the game in preventing this."

Infection Fatality Rate (IFR) records the percentage of people who die following infection with a virus (SARS-CoV-2). The Case Fatality Rate (CFR) records the mortality rate among those who develop the resultant disease (COVID 19). Fauci compared the CFR of COVID 19 to the IFR of influenza. As later accidentally revealed [55] by the WHO, the IFR's for both Influenza and COVID 19 were similar.

Claims that COVID 19 was much more deadly than influenza were dependent upon acceptance of the incredibly vague, manipulated mortality statistics. However, even if we disregard the additional deaths caused by lockdown measures and accept the State's illegitimate COVID 19 mortality claims, the historical records demonstrate that COVID 19 in 2020 was still no worse than influenza. The ASMR record for England in 2020 was considerably lower, not higher, than during the 1951 flu epidemic.

Neither Sky, the BBC, The Guardian nor any of the other MSM outlets, who spun the mortality statistics to report something which did not exist in the data, have retracted their claims. Leaving the wider public believing something which is not true.

There was a notable increase in the ASMR in 2020 but it was comparable to 1947, 1963 and 1970. There was also more mortality during 8 of the 20 years in the 21st century. None of these years of higher mortality apparently necessitated any restrictions or changes to public *behaviour*.

That was it! That was the entire mortality impact of the global pandemic in England and Wales in 2020. A perceptible percentage increase on the 5 year average.

The State franchise and its MSM partners ignored the fact that mortality in 2020 ranked 9th in the last two decades; they forget that we saw frequent, similar rises in mortality during the post war period; they omitted any mention that 2020 didn't evidence any *unprecedented* mortality, avoiding any mention of higher death rates in every year between 2000 and 2008; they put aside that 2020 was the 11th least dangerous year in the last 50 and instead focussed upon a calculated percentage increase above one of the lowest 5 year mortality averages in British history.

However, in every lie there is an element of truth. The only part of Sky's appalling propaganda, that had any relevance was their observation on lockdowns, was:

"In at least one sense, this pandemic has been like no other in history: while other diseases have sparked sporadic restrictions and changes in behaviour, we have never experienced the kinds of lockdowns implemented over the past year. Never. This is completely without precedent."

This wilfully avoidant tripe from the MSM, frantic to hide the truth, illustrated the essence of the *pseudopandemic*: it was essentially disinformation. It was a lie on a global scale and it was a "hoax."

2020 was the year of the global pandemic: a supposedly unprecedented health crisis. Businesses were destroyed, trade came to a grinding halt, people were placed under house arrest and told they weren't allowed to see their family and friends.

Vulnerable people were left to die alone in isolated, understaffed and neglected care homes; people were arrested for going for a walk, disabled people were thrown out of shops for not wearing masks; peaceful protest was outlawed and censorship rife, mass unemployment was created, household incomes fell across the country, GDP evaporated, health services were crippled and unimaginable national debt was loaded upon the taxpayer at a rate never seen before.

The *pseudopandemic* would not have been possible without the MSM. With only a couple of exceptions, from established journalists with their own loyal readership, the MSM never questioned any of the State franchise policies.

They were unwavering in their support for lockdowns and other equally dangerous and entirely unnecessary "measures." They consistently attacked anyone who asked questions or those who expressed doubt about the State's response.

The MSM drip fed a continual supply of hallucinatory misinformation, disinformation, propaganda and evidence free assertions into the public imagination. They steadfastly ignored the weight of scientific evidence, expert opinion and inconvenient statistical fact.

As the rise of the Internet has seen their stranglehold on information dwindle, they have worked with the tech giants and the State regulators to increase censorship of free speech and freedom of expression and they strongly support further legislation to remove our freedoms and dismiss our inalienable rights.

We are in a global, hybrid information war and we, the people, are the enemy of the State. We are under psychological attack.

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Chapter 10 - The Official Story

Informed political influencers were only able to run the pseudopandemic, while claiming all their decisions were "led by science," with the complicity of the mainstream media (MSM) and the social media companies. Their role was to run a cohesive propaganda and disinformation campaign to restrict scrutiny of the official scientific claims and to convince the public to believe in the pseudopandemic.

They limited their science reporting solely to promoting the *pseudopandemic narrative* and poured scorn upon anything that brought it into question. The weight of contradictory scientific evidence and medical opinion was largely omitted or ridiculed in order to protect the fraud.

Few people in the West appreciate how the MSM functions. It operates under the centralised control of the Global Public Private Partnership (GPPP,) of which it is a constituent *stakeholder partner*. A 2016 investigation by Swiss Propaganda Research identified what they called The Propaganda Multiplier [1]. Dissecting MSM reports of the conflict in Syria, they uncovered evidence which showed that three news agencies, Associated Press (AP), Agence France-Presse (AFP) and Reuters (Thomson Reuters,) effectively controlled the western MSM narrative during the conflict.

These agencies provided reports which were then gathered by various national news agencies. For example, PA Media in the UK or DPA in Germany. These news aggregators then forwarded the GPPP agency stories to newsrooms and editors around their respective countries. The former managing director of the Austrian national news agency (APA) Wolfgang Vyslozil said:

"News agencies are rarely in the public eye. Yet they are one of the most influential and at the same time one of the least known media types....They are the invisible nerve center that connects all parts of this system."

Text, images, video reports, analysis and even claimed "opinion pieces" often come from this small collective of GPPP news agencies. The effect is that major news stories are reported from a single perspective the world over. On the major issues, beyond their party political loyalties, diversity of western MSM opinion is strikingly rare.

Some dissenting voices remain in the MSM, though their number has dwindled markedly over the last two decades. They find themselves relegated to the minor pages with limited reach, generally to their own established audience, and they are almost completely invisible to the broadcast MSM.

This centralised propaganda forms the "official truth" and it is particularly notable in times of national crisis or following major global events. We only have to look at the western media coverage in the lead up to the 2003 Iraq war to understand this.

The MSM unanimously asserted that Saddam Hussein possessed weapons of mass destruction that could strike us in 45 minutes. He didn't and despite very public MSM contrition for the lies they told [2], which they framed as "mistakes," nothing changed. In fact, the situation has deteriorated.

The power of the news agencies isn't necessarily what they report but often what they omit. As they form the views of many, if they decide not to report a story, for those reliant upon the MSM for their opinions, it as if it never happened.

When hundreds of thousands of protesters joined the *Unite for Freedom* marches through London, in two of the biggest UK public demonstrations <u>since the Iraq war protests</u> [3], the UK MSM broadcast media ignored them completely. The print media barely covered them and when they did, they lied.

For the first march they falsely alleged the police were attacked by the protesters. In reality a small unit of <u>police officers were sacrificed</u> [4] for the cameras when they were ordered to physically assault a relatively small group of protesters who gathered in Hyde Park after the event. The main demonstration having dispersed without incident hours earlier.

The Hyde Park crowd defended themselves and some of the poorly equipped and isolated officers sustained minor injuries in their forced retreat. The MSM then used the images and reported this [5] insinuating the incident occurred during the main protest that took place earlier. Saying a few thousand attended the demonstration, instead of hundreds of thousands, they then suggested this would be a *superspreader* event.

As far as the majority knew these huge peaceful demonstrations, drawing hundreds of thousands of people from every corner of the country, never happened. Leaving those with doubts about State franchise policy unaware that they were not alone. Clearly there was a sizeable minority who questioned the *pseudopandemic*. The GPPP State franchise and their MSM *partners* were eager to keep this as quiet as possible.

In April 2020 Reuters put out a story about <u>mass graves at Potters Field</u> [6] on Hart Island in New York. This story was picked up by the entire MSM network and reported globally. It gave the *pseudopandemic* impression of overwhelmed mortuaries and a city struggling to cope with *unprecedented* numbers of deaths. Reuters reported:

"New York City officials have hired contract laborers to bury the dead in its potter's field on Hart Island as the city's daily death rate from the coronavirus epidemic has reached grim new records."

What Reuters neglected to report was that Potters Field has been used for burying unclaimed bodies for <u>more than 150 years</u> [7], mass graves were regularly dug at the site throughout its history. Reuters also forgot to relay that the New York

authorities had reduced their maximum required period for storing unclaimed bodies from 30 to 14 days [8], thus forcing far more frequent interment in Potters field.

Without knowledge of this information the public were convinced by MSM stories, based upon Reuters *news wire*, that mass graves in New York were *proof* of the global pandemic. The purpose of the narrative was to cause alarm and raise the level of fear. Thereby perpetuating the *pseudopandemic*.

A quick look at Reuters <u>board of directors</u> [9] reveals an extensive web of connections to the GPPP. Global credit agencies, hedge funds, investment banks, think tanks, policy advisory groups and global technology firms are well represented. Thomson Reuters themselves are corporate members of influential policy think tanks such as the <u>Council on Foreign Relations</u> [10].

There is little chance of the MSM ever reporting anything too damaging to the interests of the GPPP or its State franchises. In the UK, the State franchise has the power to issue Defence and Security Media Advisory Notices (more commonly referred to as D-notices).

D-notices are supposedly unenforceable but they are used to good effect nonetheless. For example, the UK State <u>quashed a 2003 Observer story</u> [11] about a joint UK - US influence operation on members of the U.N. Security Council in the lead up to the vote to go to war with Iraq.

In 2019 the highly influential global policy think tank the Royal Institute of International Affairs, also known as Chatham House, hosted a seminar with the catchy title "Joining Forces In Influenza Pandemic Preparedness" [12]. This was held in partnership with the European Scientific Working Group on Influenza (ESWGI). The same pharmaceutical corporation lobby group whose partnership with the WHO led to the declaration of the non-existent 2009 influenza pandemic.

The Belgian Flu Commissioner Dr Marc van Ranst spoke to the gathered *stakeholders* about how to use the MSM to get your pandemic narrative out. The conference listened attentively to his presentation, which he delivered with great humour drawing plenty of laughs. Dr van Ranst said:

"In day one you start your communication with the press, with the people... You have to go for one voice, one message. In Belgium they chose.. a non politician to do that [Dr van Ranst].. this makes things a little bit easier because you're not attacked politically....and that was a huge advantage, the second advantage....you can play...the complete naive guy.

You have to be omnipresent.. so that you attract the media attention.. You make an agreement with them that you will tell them all.. if they call, you will pick up the phone.. if you do that you can profit from these early days and get complete carpet coverage.. and they're not going to search for alternative voices.. the news is brought the way that you bring it.

Then you say that we are going to have [H1N1] deaths, of course that is completely unavoidable.. I used that in the media.. 7 deaths per day at the peak of the epidemic would be realistic.. That is true in every year.. [crowd laughs].. However, talking about fatalities is very important because, when you say it, people say Wow! You mean people die from influenza?.. and then of course, a couple of days later, you had the first H1N1 deaths.. and the scene was set and it was already talked about.

I went to the first couple of funerals. You have to be very quiet, sit in the back, um, but, but, it, it, it shows that you care.. and I think that was, at that time, quite important.. then everything is set about the pandemic.

The crux of the campaign was the vaccination campaign.. Then you had to pick who is going to be vaccinated first.. I misused the fact that the.. top.. football.. clubs in Belgium.. made their soccer players priority people. So I said, I can use that.. because, if the population really believes this vaccine is so desirable that even the soccer players would be dishonest to get their vaccine.. OK.. I can play with that. So I made a big fuss about this.. it worked.

The 2009 pandemic arrived.. this was a good exercise for a big pandemic."

Until the *pseudopandemic*, the MSM had never before reported a daily, running tally of mortality from any other terminal disease. If every death from causes, such as heart disease, flu or cancer were incessantly reported in the national media, it is likely the public would perceive them as "pandemics."

The only people who had any hope of being properly informed were those who followed the so-called *alternative media*. This is currently the only place to find *real news media*. This is how the term "news media" is used for the remainder of our exploration of the *pseudopandemic*. The MSM are the "alternative."

All of us must exercise <u>critical thinking skills</u> [13] whenever we consume information. While the *news media* outlets were the only ones fulfilling the vital social function of <u>questioning power</u> [14], as a whole they are plagued with just as many trashy, click-bait merchants as the MSM. Notwithstanding, the best among the *news media* maintained the highest standards of journalism, something the MSM largely abandoned decades ago.

The *news media* are distinct from the MSM in a couple of important regards. It is almost entirely funded by its readership and audience. The MSM is funded by advertising or directly through taxation. In the UK this is deceptively called a *"license fee."* For the commercial UK MSM the State franchise is now their biggest client by far. The MSM is State funded and <u>has been for some time</u> [15].

The MSM are far more likely to use phrases like "according to experts," "a study suggests" or a "a source said." By contrast, the news media consistently directs its

audience and readers to the cited expert opinion, scientific evidence, statistical data and sources, wherever possible.

It is extremely common for the *news media* to report news events months in advance of the MSM. For example, in April and May 2020, the *news media* outlet the UK Column <u>reported the evidence</u> [16] showing how State franchise behavioural scientists had used the MSM to increase the public's fear of the *pseudopandemic*. They provided their readers and viewers with links to the evidence revealed in their report.

It wasn't until January 2021 that the MSM <u>made any mention of the same facts</u> [17]. This certainly wasn't widely reported and they did not provide any public access to the relevant documents. The MSM insist that you *trust* whatever they report, the best among the news media actively encourage critical thinking.

A favoured tactic of the MSM throughout the pseudopandemic was to pejoratively "label" dissenting voices. They would call them "conspiracy theorists," "quacks" or "anti-vaxxers." These labels are psychological linguistic devices implying a whole raft of assumptions. They are used to dissuade the reader, viewers and listeners from considering the evidence provided by the "labelled" source.

For the *core conspirators* of the *pseudopandemic* the *news media* presented a small, though irksome irritant. However, they identified the potential of the growing threat from the *news media* some time ago. They have been hastily constructing a global censorship grid ever since.

The belief, held by so many, that we have a free press in our western representative democracies is naive. We have a centrally controlled GPPP information system, designed to define our world-view for us. Reuters, AP and AFP, CNN and the BBC perform exactly the same role as Russia's Tass or the Xinhua News Agency in China.

Our perceptions are formed and our opinions shaped by the creation of MSM *news reports* and the deliberate omission of vital information. During the *pseudopandemic* this MSM propaganda machine was omnipresent.

A few years ago, the State recognised that a small segment of the population were starting to look to the *news media* on the Internet and were becoming increasingly sceptical of the MSM. The State franchise <u>decided to act</u> [18].

In his 2014 speech to the U.N. General Assembly then UK Prime Minister <u>David</u> <u>Cameron said</u> [19]:

"We must be clear: to defeat the ideology of extremism we need to deal with all forms of extremism – not just violent extremism. We must work together to take down illegal online material.........we must stop the so called non-violent extremists from inciting hatred and intolerance....Some will argue that this is not compatible with free speech and intellectual

inquiry....we shouldn't stand by and just allow any form of non-violent extremism."

Cameron couched his speech in terms of fighting <u>Islamist terrorism</u> [20]. However, with his phrase "non-violent-extremists" he was attempting to define a new concept. The idea that the existing <u>legal restrictions placed upon free speech</u> [21] were insufficient to deal with a new, very broadly defined form of threat. That threat was information itself.

Cameron suggested that any who questioned the State's *official truth* were tantamount to terrorists [22]. Calling for online censorship to stop any questions ever being asked, it is this *authoritarian* need to avoid discussing evidence that led his successor, then UK Prime Minister Theresa May, to propose wide-sweeping censorship of the Internet [23].

Just like Cameron's deceptive rhetoric, the <u>Online Harms legislation</u> [24] was presented under the guise of addressing perfectly legitimate concerns. The UK State franchise claimed it was intended to tackle the online abuse of children and terrorist activity.

Yet the focus of the proposed Online Harms legislation was on stopping the sharing of information, entirely unrelated to combatting either child abuse or terrorism. The White Paper, published in December 2019, made this clear.

"Online platforms.. can be used to undermine our democratic values and debate.. There is also a real danger that hostile actors use online disinformation to undermine our democratic values and principles."

"The spread of inaccurate anti-vaccination messaging online poses a risk to public health. The government is particularly worried about disinformation."

"Disinformation threatens these values and principles, and can threaten public safety, undermine national security, fracture community cohesion and reduce trust."

"These concerns have been well set out in the wide-ranging inquiry led by the Digital, Culture, Media and Sport (DCMS) Select Committee report on fake news and disinformation, published on 18 February 2019."

The UK State franchise is certainly not alone in this concern about *trust* in its institutions being *undermined*. The EU established it's External Action Service [25] (EAS) in 2015 to combat *disinformation* and they too were very worried about people asking questions about COVID 19.

While continuing to develop legislation aimed at shutting down free speech and the free and open sharing of information, the EU has created new bodies like The <u>European Digital Media Observatory</u> [26], to coordinate its social media "fact checking" operations.

As David Cameron pointed out, "this is not compatible with free speech and intellectual inquiry." It is antithetical to our way of life and is utterly opposed to the values that supposedly underpin our representative democracies. While censorship of legitimate opinion is repugnant in a free and open society, that is no longer of any concern to our rulers. All that matters to the GPPP is control of information and they will do anything to fully regain it.

Ironically The word "disinformation," relatively new to the western lexicon, stems from the Russian word [27] "dezinformatsiya." The highest ranking Soviet defector ever was the Romanian Lt. Gen. Ion Mihai Pacepa. In his book called *Disinformation*, Pacepa noted that it was possible to spot dezinformatsiya by the lack of cited sources provided in the reporting.

Broadcast media in the UK is <u>regulated by Ofcom</u> [28] and they have been selected as the State Franchise regulators for the forthcoming <u>Online Safety Act</u> [29] (currently at the bill stage.) They imposed fines and <u>publicly censured broadcasters</u> [30] who questioned the State franchise's approved *pseudopandemic* messaging.

In their <u>coronavirus guidance</u> [31] to broadcasters, Ofcom spelled out the MSM's duty to parrot, and never question, the State's policies:

"We remind all broadcasters of the significant potential harm that can be caused by material relating to the Coronavirus.....We strongly advise you to take particular care when broadcasting....statements that seek to question or undermine the advice of public health bodies on the Coronavirus, or otherwise undermine people's trust in the advice of mainstream sources of information about the disease.....Such views should always be placed into context and not be presented in such a way as to risk undermining viewers' trust in official health advice....Ofcom will consider any breach arising from harmful Coronavirus-related programming to be potentially serious and will consider taking appropriate regulatory action, which could include the imposition of a statutory sanction."

This attempt to formulate an inviolable official *pseudopandemic* truth <u>drew a potential legal challenge</u> [32] from lawyers and journalists who formed the Free Speech Union (FSU.) The FSU argued that Ofcom's guidance would effectively stop the MSM questioning the *official health advice* or *mainstream sources*.

High Court judge Mr Justice Fordham <u>denied the FSU's application</u> [33] for a judicial review. In his ruling he said there was "no realistic prospect" of a judge ruling that Ofcom guidance could be "impugned." UK courts are part of the UK State franchise and so this legal observation was accurate. There is virtually no chance of the State franchise ever ruling against any of its GPPP partners. With their role as regulators for the coming <u>Online Harms Act</u> [34] Ofcom is set to be the <u>Ministry of Truth</u> [35] in the UK.

The Chief Executive of the Ofcom board is a former State Treasury and Cabinet Office Director General. Other board members include a former BBC news Controller, a former Director of the Treasury and a policy think tank Chairman, all with extensive ties to the GPPP.

For example, Ofcom's CEO is a trustee of the <u>Patchwork Foundation</u> [36] whose stated mission is to create a *"new era of democracy."* Patchwork's *partnerships* are numerous. They are *supported* by credit agencies, government, investment banks and all the major UK political parties. Ofcom's board makes its rulings based upon the advice of its <u>Content Board</u> [37]. Of its 19 members 14 worked for the BBC.

In addition to the £3.6 billion the BBC received from <u>license fee payers in 2019</u> [38] (a reduction of £170 million on the previous year's total) they also received £1.4 billion from *"other sources."* A £200 million annual increase which more than offset their license fee losses.

A fair slice of that *other* income came from the Bill and Melinda Gates Foundation (BMGF). Over the last decade or so they have given the BBC [39] approximately \$79 million (£58 million).

The BMGF have been staunch financial <u>supporters of the MSM</u> [40] For example, the BMGF are *partners* with The Guardian in their <u>global development</u> [41] project which was established in 2010 to promote Millenium Development Goals (MDG's) and now sells the idea of Sustainable Development Goals (SDG's). The Guardian is by no means alone in taking philanthropic money. It benefits from a <u>global network</u> [42] of *philanthropic* MSM financial supporters who fund <u>many mainstream newsoutlets</u> [43].

Ofcom's rule over MSM broadcasters exemplifies how the *core conspirators* within the GPPP were able to exploit centralised authority, combined with compartmentalisation, to control public opinion. Despite its farcical claim to be independent, Ofcom is deeply embedded within the GPPP.

Working in *partnership* with the State franchise, it determined UK audience's access to information during the *pseudopandemic*. That so many in the UK still imagine they have an independent MSM, capable of questioning power, is a remarkable achievement by the propagandists. The scale of the deception is phenomenal.

In their <u>COVID misinformation guide</u> [44], Ofcom decreed what subjects were off limits for the MSM during the *pseudopandemic*. According to Ofcom, who have no scientific or medical expertise of note, certain subjects were considered *"misinformation."* Among the banned topics was any questioning of face-masks. The media were ordered to instruct people [45] to wear them. Consequently, the MSM insisted their use was justified and even tried to market them as <u>fashion accessories</u> [46]. Questioning this *approved truth* was verboten.

Other topics Ofcom deemed unspeakable included any notion that <u>non ionising</u> <u>electromagnetic radiation</u> [47] might cause COVID 19 symptoms, questioning if

SARS-CoV-2 caused COVID 19 or any suggestion that case rates and deaths were being exaggerated. None of this had anything to do with evidence, science, health, logic or even reason. It was based upon nothing but a commitment to maintain the *pseudopandemic* narrative.

Pseudopandemic facts were whatever the State franchise said they were. Criticism of the State's ostensibly insane response to COVID 19 was forbidden by the State franchise media regulator. The purpose of the MSM broadcasters was to maintain and encourage public *trust* in State institutions. All who openly doubted the *pseudopandemic* were to be silenced.

Questions could be asked, as long as they supported the *pseudopandemic* narrative. The endless criticism of the lack of PPE utilised a technique called Appeal To Fear Propaganda [48]. While appearing critical of State "failures," the underlying message was that the country faced some sort of unparalleled risk from disease, which was false. This propaganda not only promoted unwarranted fear, it had the added advantage of serving as a rebuttal to anyone who accused the MSM of failing to question power.

The UK MSM print media is regulated by the fully *independent* IPSO (the Independent Press Standards Organisation). They are independently funded by the GPPP corporate giants who own the MSM and *partner* with UK State franchise.

IPSO's Chairman is a Conservative Party peer and their board have members drawn from the pharmaceutical industry, Ofcom, the BBC and <u>Reuters</u> [49]. Yet another example of a far reaching GPPP network regulating the media. However IPSO are independent because they have the word "independent" in their name.

You would imagine that leading MSM journalists would be fiercely opposed to this kind of State censorship and rally behind their fellow professionals, no matter what their opinion. A small minority certainly did but, unbelievably, many more were extremely supportive [50] of the idea of a State controlled media.

For some, this appeared to be firmly rooted in their unshakeable faith in their own intellectual superiority. This meant that they, or bodies that they approved of, were the only people clever enough to determine the truth.

However, despite their pretensions of genius, apparently they couldn't recognise the contradictions in their own rationale. For example, one wrote:

"Any control by governments of what we may say is dangerous, especially when the government, like ours, has authoritarian tendencies.. I would like to see an expert committee, similar to the Scientific Advisory Group for Emergencies (SAGE), identifying claims that present a genuine danger to life and proposing their temporary prohibition to parliament."

SAGE are <u>appointed</u> by the <u>State franchise</u> [51]. In all likelihood the journalist in question was simply promoting the State's censorship agenda or perhaps he was just dimwitted.

When criticism of the *pseudopandemic* made it into MSM print, IPSO's task was to remove it. An article published in the Telegraph, highlighting the evidence of <u>established herd immunity</u> [52], suggested that lockdowns did nothing to alter infection rates. Published on the 11th of July 2020, it remained online for a number of months until the winter of 2020. At that point a complaint from one individual was submitted to IPSO and they ordered the Telegraph <u>to remove the article</u> [53].

IPSO don't have any scientists either on their board or on the <u>complaints committee</u> [54] who judge the "legitimacy" of journalism. They ruled that the article was "inaccurate, misleading or distorted information" and gave their detailed appraisal of the prevailing "scientific consensus" as described to them by State franchise approved scientists.

Central to their decision to uphold the complaint was the vital importance they placed upon the article's failure to clarify what "natural immunity" meant. IPSO decided that the journalist had not informed his readers that his use of the phrase "natural immunity" referred to T-Cell immunity. IPSO's complaints committee decided that T-Cell immunity did not "amount" to immunity and only reduced the chances of someone becoming ill with COVID 19. Therefore this was not "natural immunity" as described by the Telegraph.

IPSO were suffering the same malaise common to all who refused to think critically about the *pseudopandemic*. Without reading any of the science themselves, they assumed what they were told about the science was true. Which in this instance, like so many others, it wasn't.

According to the <u>respected scientific journal</u> [55] Science, "T-cells are among the immune system's most powerful weapons." Speaking about the studies that have found pre-existing T-Cell immunity to SARS-CoV-2, Columbia University virologist Angela Rasmussen said "this bodes well for the development of long-term protective immunity."

Californian based scientists <u>discovered T-Cell immunity</u> [56] to SARS-CoV-2 in up to 60% of the population, noting that this probably originated in existing T-Cell immunity to the coronavirus common cold strains. As reported in the banned Telegraph article, the researchers stated:

"Importantly, we detected SARS-CoV-2-reactive CD4 T cells in 40%-60% of unexposed individuals, suggesting cross-reactive T cell recognition between circulating "common cold" coronaviruses and SARS-CoV-2."

There are <u>numerous studies</u> [57] clearly describing how T-Cell immunity works. IPSO were not only wrong, despite not having any scientific expertise, they had set themselves up as the ultimate scientific experts assuming the authority to decree what was legitimate science and what wasn't. Based entirely upon what they were told to believe.

This was standard practice throughout the *pseudopandemic*. Centralised authority of carefully appointed *influencers* could be used for anything from controlling the MSM to manipulating statistics or fiddling the case numbers. The question was why the Telegraph article suddenly became such a sensitive issue.

As 2020 approached year's end, and normal winter mortality loomed, the UK was getting ever closer to being the first GPPP franchise in the world to *authorise* a COVID 19 vaccine. The Telegraph's summer publication, explaining how natural human immunity worked, highlighting the role of T-cells, became increasingly inconvenient. Had this been a *news media* report it could have been labelled "conspiracy theory" and that would have deterred most people from reading it, but the Telegraph was a "trusted source." Something had to be done.

The problem appeared to be that the new COVID 19 vaccines didn't stop anyone from contracting SARS-CoV-2. They just allegedly reduced the chances of someone getting sick from COVID 19 [58]. The UK Chief Scientific advisor Patrick Vallance, claiming the NHS [59] looked like a "war zone," said:

"We think it will stop transmission, but we don't know by how much yet. And you'll need very very high levels of population coverage – 70% or more – in order to get some degree of immunity across the whole population."

Just as Dr van Ranst had been instructed in 2009, so Vallance understood "the crux of the campaign was the vaccination campaign." The GPPP were not interested in anything but lockdowns and vaccines.

Bringing "numbers down" wasn't a problem. Not only is that the way respiratory viruses inevitably behave in a population, the non-diagnostic test regime could be dialled back as needed. Unlike IPSO and the Telegraph, the UK State Franchise Chief Scientific officer was fully up to speed with the WHO's new definition of "immunity." Natural immunity didn't exist, only vaccine derived immunity.

Drawing attention to T-Cell immunity, even inaccurately, could give the public the idea that they possessed adaptive immune systems, able to both ward off initial infection and build <u>cross reactive T-cell recognition</u> [60], thus greatly reducing their chances of a reoccurring infection. Why would they want the vaccine if they knew this?

The WHO could be confident that they would demonstrate how lockdowns and vaccines would "break transmission chains" because, after a year of being told by scientists, physicians and the news media, from around the world, that RT-PCR tests were not diagnostic tools, they <u>suddenly realised this themselves</u> [61].

Changing their diagnostic criteria for a case by lowering the RT-PCR "credible" cycle threshold and advising that testing was only an adjunct to clear symptomatic diagnosis, the WHO were shifting their position to bring cases and COVID 19

mortality down. This coincided with the vaccine roll out and another round of unnecessary lockdowns.

Immediately MSM articles and opinion pieces started appearing making all the arguments that hitherto only the *news media* made. Having spent the best part of a year viciously attacking anyone who questioned the *pseudopandemic*, suddenly, as if by magic, timed with release of the vaccines, the <u>MSM started questioning</u> [62] the way *cases* and *fatalities* were reported.

This *pseudopandemic* propaganda operation was <u>planned long before</u> [63] the WHO declared a global pandemic. The UK State franchise agreed its £119 million pound COVID 19 MSM advertising strategy on March 2nd, more than a week before the WHO declaration on the 11th, and more than 3 weeks before the first *pseudopandemic* lockdown. Such an extensive contract would have taken months to negotiate. Placing the start of the negotiation well before any public acknowledgement of a global pandemic.

This deal was built upon an MSM channel buying program [64] agreed between the Crown Commercial Services and *OMD group* in 2018. Alex Aiken, the Executive Director of UK State communications, described the focus [65] of this *partnership* with the MSM:

"Outcomes can vary from ensuring people live healthier lifestyles and invest in their retirement, to countering terror. Recent geo-political events have also demonstrated the vital role media has played in the UK's fight against disinformation and fake news....with a relentless focus on outcomes we are well placed to deal with any incidents that arise."

MSM sales and advertising revenue [66] have collapsed and the UK State Franchise has become the UK MSM's financial lifeline. They could ill afford to question their main source of income. MSM print media profits disappeared years ago. Even with the financial support of State advertising deals, it has struggled to survive [67]. However, despite the fact that its business model has failed, just like the banks, it seems the MSM is "too big to fail."

Having created a climate of fear based upon fake mortality claims anyone who questioned the pseudopandemic was <u>attacked and dismissed</u> [68] by the MSM as uncaring, selfish "conspiracy theorists" who disrespected those who had died. In truth, critics cared deeply about people being lost to the *pseudopandemic*. They simply recognised that an unknown number of deaths were also being caused by policy.

For example, the UK's online MSM news outlet the Independent, owned by Russian billionaire and former KGB officer Alexander Lebedev, alongside unknown Saudi investors, independently reported the following [69]:

"More than a fifth of people believe that the coronavirus crisis is a hoax....The survey indicates a large number of adults in England do not

agree with the scientific and governmental consensus on the Covid-19 pandemic."

Questioning the *governmental and scientific consensus* was not a claim that the disease didn't exist or that COVID 19 itself was a *"hoax."* The purpose of this persistent *disinformation* strategy was to label any *pseudopandemic* sceptic as a *"COVID denier."* This was then combined with emotionally charged stories about deaths to invalidate criticism by insisting it was morally repugnant.

This ploy was successful and created the desired social division. With millions believing that to question the *pseudopandemic* was disrespectful, a communication impasse between *pseudopandemic* critics and those who unreservedly believed the authorities was created. Consequently the *news media* found it harder to report the evidence to the public.

This generated perhaps the most powerful and insidious form of information control: self-censorship. Rather than fear of the virus, many were unwilling to openly express doubt through fear of social disapproval. We will shortly discuss the evidence that shows this was clearly part of the State's *pseudopandemic* plan for behavioural control.

This left the vast majority, who were somewhat sceptical, in a kind of information limbo, stuck between two opposing positions. They dare not speak out for fear of being labelled a "COVID denier" and were dissuaded from looking at information described to them as anti-vaxxer conspiracy theories.

There was little reprieve for the increasing number who turned towards online information. The GPPP State used "fact checkers" to work with the social media giants to further centralise control of the narrative. State franchises then launched a military hybrid warfare campaign against their own populations, creating a pseudopandemic information war.

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Chapter 11 - Hybrid War

Increasing public reliance upon online information meant that control of the MSM alone was not enough. The Global Public Private Partnership (GPPP) also needed to censure the online *news media* and, in particular, extend their propaganda and censorship reach to the major social media platforms.

While the GPPP already had regulatory and commercial control over the MSM, that dominion had not been firmly established online. While legislation was rushing towards seizing power over online conversations, the Internet still afforded some freedom of speech. Other strategies were required to limit these freedoms. These included the use of the military to fight a *hybrid information war* against the people.

Warfare has been <u>redefined in the 21st century</u> [1]. The State franchise sound-bites have changed. The global military tactician and defence policy makers speak in terms of "new and emerging threats," "non state actors," "resilience" and "the non-military means of aggression."

The hybrid war, waged against the global population, was the military component of the *core conspirators pseudopandemic* campaign. World War Three is, in part, an information war that began with the *War on Terror*. It is the final war for global control and, as usual, the population are both the battle ground and the enemy.

Hybrid war melds conventional warfare, recently fought through <u>proxies such as ISIS</u> [2] or the various re-branded <u>forms of al Qaeda</u> [3], with cyber and information warfare. The *pseudopandemic* utilised mass communication channels to bombard us with propaganda. It is easy to view this as simply a battle for public opinion. Unfortunately, this a war with very real casualties.

The *pseudopandemic* has already cost millions of lives globally, but that number is set for a terrible increase. The long-term impacts of lockdowns and the global economic carnage they wrought have caused mortality that far exceeds anything stemming from a low impact respiratory disease.

The World Bank have calculated an increase in extreme poverty globally of between 71 - 100 million people [4]. The resultant health inequalities will kill millions more. UNICEF researchers have already published appalling estimates in the Lancet [5] anticipating 1.2 million child deaths in low to middle income countries as a result of the destruction of health services, supply chain disruption and other disastrous and entirely predictable consequences of pseudopandemic policies.

The Joseph Rowntree Foundation's (JRF) <u>analysis of the costs of lockdowns</u> [6] in the UK, found that households claiming Universal Credit (State unemployment benefit) rose by 90% overall, nearly doubling to reach 4.6 million. Describing what they called a "wave of unemployment" they found that 4 out of 10 households, already enduring so called "in work poverty," were forced into further deprivation and underemployment.

By focusing upon nothing but the alleged risks of COVID 19, many failed to recognise the key concern stressed by those critical of both the lockdowns and, more broadly, the *pseudopandemic*: the cure was always far worse than the disease. Both the JRF and the World bank, unsurprisingly, reported the deleterious effects of policy as the result of COVID 19. Yet the horrendous consequences the world is now slowly realising were not caused by a disease.

The core conspirators within the GPPP, and their informed influencers, have deceived billions, emotionally exploiting them at every turn. However, they faced very little resistance, as populations implored their rulers to save them from the pseudopandemic. The banal and completely irrational accusation, levelled by so many, that to question the pseudopandemic was to disregard the human costs of COVID 19, was a lamentable propagandist slur.

The listless acceptance of the *pseudopandemic* story was among the objectives of the hybrid information warriors, who drilled the people in their new behaviour. We remain focused upon the UK, but the same methods were used globally.

In a <u>2018 article</u> [7] The Director of Government Communications, <u>Alex Aiken</u> [8] explained how this war on the psychology of the UK public was led by the UK Cabinet Office's Rapid Response Unit (RRU). He wrote:

"It (the RRU) monitors news and information being shared and engaged with online to identify emerging issues.....The unit's round the clock monitoring service has identified several stories of concern.....The unit has tackled misinformation closer to home.....a number of articles from US and UK outlets...... quickly spread via social media, which was then spotted by RRU monitoring......The unit activated social media content which helped to re-balance the narrative."

In the same article, Aiken also revealed how the State franchise *partnership* with the Big Tech' companies was leveraged to shape public opinion:

"The unit (RRU) identified that a number of false narratives from alternative news sources were gaining traction online. These 'alt-news' sources are biased....When people searched for information....unreliable sources were appearing above official UK government information....no government information was appearing on the first 15 pages of Google results......The RRU improved the ranking from below 200 to number 1 within a matter of hours."

Anyone who has ever worked in Search Engine Optimisation (SEO) knows that even the WPP Group [9] would struggle to take a web page's organic Google search ranking from below 200 to number 1 in a few hours. Aiken ostensibly confirmed that the UK State franchise works with its GPPP partner Google to fix the search results. For GPPP sensitive topics, Google doesn't appear to be a genuine search engine at all. For these search results, it acts more like a GPPP propaganda website.

The "alt-news" sources Aiken referred to were the news media. The State franchise calls them biased because they question power and government policy. This is something the MSM no longer do. People freely exchanging information online, outside of MSM control, presented the State franchise with a pseudopandemic threat. Troops were deployed to fight it.

The State MSM were of <u>one unified voice</u> [10] in January 2021 as they all reported how deeply sorry the UK Prime Minister was that more than 100,000 people had died "of" COVID 19. Ignoring all of the questionable procedures and statistical problems we have discussed, this story was reported by practically the entire MSM. Every outlet stated the mortality statistics as a *fact*. None of them questioned it.

The *crux of the campaign* remained solely focused upon vaccines. In his <u>apologetic</u> <u>address</u> [11] to Parliament, Johnson stated:

"At this point, we do not have enough data to judge the full effect of vaccines in blocking transmission, nor the extent and speed with which the vaccines will reduce hospitalisations and deaths, nor how quickly the combination of vaccinations and the lockdown can be expected to ease the pressure on the NHS......The way forward has been clear ever since the vaccines arrived, and as we inoculate more people hour by hour, this is the time to hold our nerve in the end game of the battle against the virus."

While the Prime Minister had no idea if the vaccines would reduce transmission, hospitalisation or mortality he was certain the *way forward* was vaccines. Many social media users felt there was reason to question the Prime Minister's statement. For example, if the vaccines had been properly trialled why were there so many unknowns? In doing so they came into conflict with the dedicated *dezinformatsiya* brigade of the British army.

The State franchise had become concerned about the alleged *militant tendencies* of people who ask questions about vaccines after a study commissioned by the Royal Society indicated that up to 35% of the UK population were considering declining COVID 19 vaccination. This was called *"vaccine hesitancy."* The possibility that some people might have decided not to have one for legitimate reasons wasn't broached.

In November 2020, the British Army's 77th brigade, operating alongside the intelligence agency GCHQ, began their <u>vaccine propaganda campaign</u> [12]. This was reported by the MSM as a battle against "antivax militants."

At the time there was no such thing as an *antivaxxer terrorist*. By a sheer coincidence, adding some credibility to the concept of the *dangerous antivaxxer*, within weeks of the information battle commencing, the world's first suspected *antivaxxer terrorist attack* was offered up to the public <u>by the MSM</u> [13]. Apparently it was a hoax and a 53 year old man was arrested. While there has been no further information on the man's motivation for apparently sending a fake letter bomb, the

timing of the MSM reports could not have been better for 77th brigade's information war.

Formerly the Security Assistance Group (an amalgam of the Media Operations Group, 15 Psychological Operations Group, the Security Capacity Building Team, and the Military Stabilisation and Support Group), 77th Brigade [14] specialises in information warfare (surveillance and propaganda). They state that their objective is to adapt the behaviours of adversaries and describe themselves as an agent of change. One of their main stated roles is to engage in information warfare in support of the State franchise and their "partners."

77th Brigade don't operate in isolation. They are part of a State franchise hybrid warfare offensive, working alongside other specialist information warfare units such as Huteighteen [15]. Within 77th Brigade, the role of the Digital Operations Group [16] is split into two tasks.

The Web Ops Team engages in online surveillance to understand *audience* sentiment. They use social media to *influence perceptions* and promote *operational outcomes*. The content they use is provided by the Production Team. They produce video, audio, written content and other digital products designed to deliver *behavioural change*.

We shouldn't doubt the State's commitment to hybrid war. The <u>British Chief of Defence Staff</u> [17] Sir Nick Carter, speaking to the <u>Royal United Services Institute</u> [18] in 2018, stated:

"Since 2016 we have seen a marked shift to..[a]..sophisticated use of smear campaigns and fake news...[it] has to be defeated....One has to recognise the importance of messaging....I've been very impressed with the talent that's come forward to join the Army Reserve....we have got some remarkable talent when it comes to social media.... I think it's important that we build on the excellent foundation we've created for Information Warfare through our 77 Brigade."

Sharing a platform with the former Director of the CIA, in September 2019, Carter told the Cliveden set [19]:

"The changing character of warfare has exposed the distinctions that don't exist any longer between peace and war....I feel I am now at war.....because great power competition and the battle of ideas with non-state actors is threatening us on a daily basis......The character of warfare is evolving....Information is going to be at the core of so much that we do. Future warfare is going to be very much information-centric."

We all need to rapidly come to terms with the reality that powerful State franchise forces no longer see any distinction between peace and war. All is war and war is perpetual. We are all at war, whether we realise it or not.

Again, General Carter, speaking at a *pseudopandemic* press conference on the 22nd of April 2020, explained that the British Army had been tasked by the GPPP State franchise to promote its policies and actively censor legitimate scepticism. <u>He told</u> [20] the gathered press:

"We have been involved with the Cabinet Office rapid response unit, with our 77 Brigade helping to quash rumours from misinformation, but also to counter disinformation."

77th Brigades role in the *pseudopandemic* hybrid war was outlined in response to a <u>parliamentary question</u> [21] asked by DUP MP Gavin Robinson. Armed Forces Minister James Heappey responded:

"A team from the Ministry of Defence, including members of the Army's 77th Brigade, is currently supporting the UK Government's Rapid Response Unit in the Cabinet Office and are working to counter dis/misinformation about COVID-19."

The RRU proudly announced that they had *rebutted* 70 false claims per week [22] concerning COVID 19. The "other agents" they referred to in their press release, as part of their counter disinformation unit [23], included 77th Brigade and its army of social media troops [24] whose task it was to use hybrid warfare to change our behaviour.

With senior executives of social media networks <u>recruited to its ranks</u> [25], 77th Brigade was busy on social media, actively engaged in *information war*, throughout the *pseudopandemic*. The Brigade was also represented in the UK Parliament. Mark Lancaster (Armed Forces Minister) was formerly their <u>Deputy Commander</u> [26] and the chair of the House of Commons defence committee. Tobias Ellwood MP, remains a serving 77th Brigade <u>Lieutenant Colonel</u> [27].

Tobias Ellwood made a <u>statement to the house</u> [28] on 29th September 2020 in which he advocated that the military and Ministry of Defence (MoD) should take the lead on the mass distribution of COVID 19 vaccines. Was Ellwood speaking as an MP, representing his constituents, or as a serving military propagandist promoting the *pseudopandemic*?

77th Brigade are fighting their information war as part of a much wider GPPP State funded network. A slew of self appointed <u>anti hate campaigners</u> [29] and *Big Tech's* <u>fact checking partners</u> [30] were collaborating to control public access to information throughout the *pseudopandemic*.

In this war "non state actors" defines everyone as the enemy. This nominally includes paedophiles, terrorist organisations and extremist groups. However, it also identifies you and your family as potential national security threats. Everyone is a possible target. Especially when anyone of us might be a potential bio-hazard.

Normal UK parliamentary scrutiny almost evaporated as a result of both the lockdowns and the Coronavirus Act. The UK State franchise exploited this opportunity to give itself *carte blanche* to break the law in pursuit of GPPP goals.

The <u>Covert Human Intelligence (Criminal Conduct) Act</u> [31] allows government agencies, or their operatives, the freedom to perpetrate any crime (as none are ruled out) with impunity. The Act has "legalised" the unfettered use of criminality by the State franchise, without restrictions of any kind.

The police, intelligence agencies and the military (77th Brigade included) and a wide range of other State franchise "authorities" can now ignore the law entirely in their effort to "keep us safe." Ironically, in order for them to do whatever they like to us they have to believe we might commit a crime if they don't. Other reasons include that that we might be some sort of loosely defined national security threat or they could suspect we possibly threaten the economic wellbeing of the UK (whatever that means.)

Hacking your social media accounts and falsifying statements, or planting fabricated evidence of "terrorist" activity on your computer, is all now perfectly legal and justified by the State franchise. No defence against such activity will be possible as the State has made itself immune from all investigation, let alone prosecution.

We can't expect elected representatives to do anything about this. Most of them blindly follow the party whips and the dissenting voices are a tiny minority. Thus far there has been no meaningful parliamentary opposition to the <u>Covert Human Intelligence (Criminal Conduct) Act</u> [32]. It sailed through Parliament. Hundreds of so-called opposition MP's couldn't <u>even be bothered to vote</u> [33].

Professor Michael Yeadon was a high profile scientist and vocal <u>critic of the pseudopandemic</u> [34] who garnered a considerable social media following as a result. Social media posts, allegedly by Prof. Yeadon started being reported, some seemingly posted before the *pseudopandemic* began, which appeared to evidence him making a series of Islamophobic slurs and vulgar comments.

The intonation, vocabulary and opinions expressed were completely incongruous with Professor Yeadon's usual online statements. The Social Media companies then used these tweets, which had only come to their attention nearly a year after they were supposedly posted, to suspend Prof. Yeadon's accounts for breaching their rules on "hateful content."

Choosing not to bother to investigate or report any of the weird anomalies in these social media posts, <u>high profile bloggers</u> [35] and avid defenders of the *pseudopandemic* claimed this evidenced Professor Yeadon's racist bigotry. An *army* of social media accounts then piled in on Prof. Yeadon, viciously attacking him.

None of these attacks were about his scientific credibility, the scientific evidence he presented or his expert opinion, they were all based upon the claimed evidence that

he was an alleged "right wing" extremist. In response to these attacks Prof. Yeadon felt he was was forced to shut down his social media accounts. He wrote:

"I've been cancelled by a series of systemic attacks. Two slanders on the broadcast media (one was BBC which I forced them to retract), several hit pieces and then two html attacks on Twitter, creating offensive fake Tweets leading to account suspension.....I've been the most qualified critic of UK government policy and this is why I have been relentlessly targeted. In private, I'm a gentle person, wholly unsuited and ill equipped to handle this kind of nastiness. So, deprived of a platform, I've nowhere left to go for a while."

While there is only circumstantial evidence that his account was hacked and falsified, as the Covert Human Intelligence Act is now UK law, this is precisely the kind of activity 77th Brigade, GCHQ and other operatives are legally empowered to conduct. All to protect the public from "harmful information," such as highly qualified, eminent scientific opinion.

Any expressed opinion not "on message" was labelled disinformation, because dezinformatsiya was whatever the State Franchise said it was. They determined the official truth. Those who publicly raised doubts about the stories they were told only encouraged others to explore their own misgivings. This was not allowed.

Those who rejected the <u>COVID 19 fear porn</u> [36], who highlighted scientific doubt, statistical anomalies, medical scepticism, or indeed said or shared anything which ran contrary to the official State *pseudopandemic* narrative, were marginalised, publicly ridiculed and silenced by any means necessary. Criminal or otherwise.

If COVID 19 ever was a population level threat, it certainly isn't the most pressing any longer. The people are under attack by their own State. All the necessary components of a fascist *technocracy* are rapidly being assembled. Make no mistake, in the hybrid information war, we are the enemy.

In 2014 there were just 44 Fact checkers worldwide. As of <u>June 2019 there were 188</u> [37]. While the whole of Africa, Asia, Australasia and South America had 67 fact checkers between them, the much smaller geographical and less populated regions of Europe and North America had 121. There must be more *dezinformatsiya* in the US, Canada and Europe than anywhere else in the world.

Fact Checking is a rapidly changing industry. In 2014 nearly 90% of Fact Checkers were directly funded by the MSM. Today that figure has dropped to just 56% with many more claiming they are "independent." These farcical pretensions of independence are risible.

We'll take a look at the UK based fact checker Full Fact. They are not exceptional. Most alleged fact checkers have similar operating models and enjoy the support of many of the same globalist *partners*.

In September 2020 Full Fact <u>published an article</u> [38] titled "How Does A Covid 19 Test Work." In the piece they said:

"PCR tests are generally seen as the gold standard for Covid-19 testing. The US Food & Drug Administration (FDA) says...This test is typically highly accurate and usually does not need to be repeated."

Full Fact's statement that the PCR tests were capable of identifying COVID 19 was *dezinformatsiya*. They can only detect presence of possible SARS-CoV-2 nucleotide sequences.

While the term "gold standard" is often applied to the best available methodology, its use by Full Fact was clearly designed to give the impression that the RT-PCR test was somehow a reliable diagnostic tool for COVID 19. This was also dezinformatsiya.

Full Fact acknowledged that the PCR test was not perfect. However, they then provided a series of false statements to inaccurately contextualise this admission.

They claimed that "very high specificity" meant that PCR tests "don't return many false positives." The opposite was true. It is precisely because PCR tests are so sensitive to whatever nucleotide sequence they are calibrated to find that they can find "anything in anybody."

Making mistakes in publicly accessible information is normal and perfectly understandable. As long as those mistakes are acknowledged and corrected when they come to light it is an acceptable error. However, the fact checkers claim they are next to infallible. Full Fact's self-declaration reads:

"We fight bad information in different ways. We fact check claims...we can stop and reduce the spread of bad information.....We're developing world-leading technology to spot repeated claims, and find out how bad information can be tackled at a global scale."

Fact checkers have been created as watchdogs for the *core conspirator*'s Ministry of Truth. They use infantile terms like "bad information" because their whole raison d'être is founded upon the infantilisation of the public.

We are too stupid and incapable to check the evidence ourselves. We can't possibly make up our own minds and decide what to believe and what to reject. They are telling us that they possess all the facts and truth exists only as they define it. Most of the time their claimed facts aren't facts at all.

Fact checkers are being used by the GPPP as their authorised information controllers. The term *Orwellian* is overused but the very concept of a *"fact checker,"* some officially approved third party who will do your thinking for you, can justifiably be described as such.

Full Fact were given charity status [39]. The UK State franchise Charity Commission accepted Full Fact's charitable purpose:

"To provide free tools, advice, and information so that anyone can check the claims we hear about public issues."

Fact checkers make money by fact checking on behalf of State franchises, multinational corporations, <u>non-governmental organisations</u> [40] (NGO's), wealthy charitable foundations and the mainstream media. The GPPP in other words.

Full Fact's <u>list of financial backers</u> [41], clients and *partners*, reads like a who's who of globalist corporations and philanthropic foundations. They are official fact checking partners of Facebook, receive generous support from Google and, among others, are backed by Luminate.

Luminate are part of the Omidyar Group (and Network) the philanthropic, tax exempt foundation of billionaire eBay founder Pierre Omidyar. They are concerned about what they call an extinction event [42] for *independent media*, by which they mean the MSM not the *news media*.

Luminate *partner* with globalist think tanks like the Royal Institute of International Affairs (Chatham House) who are equally worried [43] about the survival of what they also disingenuously call *independent* media: the MSM they control.

Full Fact's <u>corporate members</u> [44] include the <u>City of London Corporation</u> [45] (the centre of the UK financial sector and a global hub for international finance), the global corporate law firm King & Wood Malleson, St Jame's Place Wealth Management (a huge global capital investment firm), and the defence contractor Rolls Royce. Their board of trustees include former BBC Director of News and Current Affairs James Harding. James was responsible for one of the most egregious pieces of fabricated war propaganda in modern history, when he oversaw production of the BBC's fake documentary Saving Syria's Children [46].

Chair of the board of trustees is Conservative Party donor Michael Samuel and he is joined by fellow Conservative Lord Inglewood and Labour Peer Baroness Royal. The political power *elite* are well represented when it comes to making sure we have the right facts from Full Fact.

Another Full Fact trustee is Lord Sharkey. He is a Liberal Democrat Peer and the former strategic adviser to once UK Deputy Prime Minister Nick Clegg. Clegg joined Facebook in October 2018 to become <u>Facebook Vice President of Global Affairs</u> [47]. Purely by coincidence, in January 2019 Full Fact became <u>approved third party fact checkers</u> [48] for Facebook. Subsequently, again by coincidence, in September 2019 the former politician Nick Clegg announced that Facebook would not "fact check" politician's statements.

While keen to attack disinformation spread by the *news media*, Facebook's fact checking doesn't include any scrutiny of the political statements parroted by the

MSM. Providing of course they are favourable political statements. When they aren't they will certainly be *fact checked*.

Another Full Fact trustee Tim Gordon was also an advisor to Nick Clegg. He co founded <u>Best Practice Al</u> [49] which was the first UK Al firm invited to join the World Economic Forum's (WEF's) Global Al Council (GAIC). The GAIC bring together representatives from tech giants including Microsoft, IBM and Google's Chinese division.

GAIC is one of six WEF global councils focused upon technology and the *fourth industrial revolution*. Their stated purpose is:

"....to provide policy guidance and address governance gaps."

Full Fact's <u>automated AI fact checking</u> [50] is fully funded by regular WEF attendee Pierre Omidyar, with the full support of GAIC members Google, and is therefore completely *independent*. Their automated *pseudopandemic* facts can be trusted, they are an *authoritative* source and so you have no need to do any critical thinking. Full Fact will do that for you.

At the time of writing Full Fact are advertising two posts. One for a *policy & government relations* and another for a *policy & parliamentary relations* manager [51]. In those advertisements Full Fact state:

"Full Fact, [is] an independent charity and team of campaigners and fact checkers.. you'll play a central part in our work to stop the harm caused by bad information.. The pandemic has shown how this work has never been more important.. You will be a key team member in our campaign on the forthcoming Online Safety Bill, making sure we have the relationships with the government and other relevant organisations, as well as building policy propositions to influence this key legislation."

Full Fact are not independent of their wealthy GPPP backers and they will continue their work with the State franchise to develop policy. They are *campaigners* and are, by definition, biased. There is nothing wrong with activism or campaigning, but to do so while pretending you are an independent and objective fact checker is the height of hypocrisy.

Full Fact's *government manager* will be tasked with influencing State franchise "legislation, regulation, policy and practice" and their parliamentary manager will "gain the support" of UK MP's for whatever policies Full Fact's backers want. With their extensive list of multinational corporations funding them, financial resources to grease the wheels for "gaining support" won't be a problem for Full Fact.

Their *human* intelligence operation is little different from any other alleged *fact checker's*. There is nothing particularly innovative or unusual about the skill set they use. In an opinion piece <u>published</u> in the <u>New York Times</u> [52], advocating that we

should forego critical thinking and just believe whatever we are told, the honed expertise of the fact checker were revealed.

A *digital literacy expert* from Washington State University, Michael Caulfield explained the painstaking research he had undertaken to discover that the lawyer and activist Robert F. Kennedy was spreading *dezinformatsiya*. Using techniques he claimed to have developed, he analysed an Instagram post sharing information from Robert Kennedy, Mr. Caulfield then walked the Times journalist through the diligent *fact checking* process:

"He copied Mr. Kennedy's name in the Instagram post and popped it into Google......He navigated to Wikipedia and scrolled through the introductory section of the page, highlighting with his cursor the last sentence, which reads that Mr. Kennedy is an anti-vaccine activist and a conspiracy theorist."

Requiring nothing more to satisfy his *fact checking* curiosity, this was enough for Mr Caulfield to pronounce that Mr Kennedy was spreading disinformation. *"Googling it"* and a quick check of a Wikipedia, a process he invented, was enough *information* for Mr Caulfield. The New York Times were very impressed with his efficiency. Mr Caulfield is a highly paid academic researcher.

However, while the New York Times' opinion piece was mind numbing propaganda, it did at least link to the academic research supposedly backing up the claimed fact checking practice of "lateral reading." For those interested enough to look, which of course you wouldn't be if you followed the advice given in the opinion piece, this took you to an academic article by researchers at Stanford university [53]. This lifted the lid off the fact checkers' lateral reading strategy.

The research highlighted the work of a fact checker called 'C.' They said his approach exemplified *lateral reading*. The researchers noted:

"He typed the organization's name into Google. He clicked on Wikipedia's entry about the College and read that."

The Stanford academics concluded:

"What did fact checkers do that allowed them to quickly and accurately discern the trustworthiness of information?...Fact checkers relied on a robust knowledge of sources to inform their decisions.....they mined Google's snippets for the wealth of information they contain......The immensity of the Internet makes it impossible to be familiar with every entry Google spits out."

The fact checkers *lateral reading* of reliable sources means they "Google it." Just like everyone else who doesn't know any better. They then use completely unreliable sources like Wikipedia as positive proof of whatever claim they wish to make. Wikipedia can be edited by virtually anyone and, beyond basic information such as dates and names, it is someone's opinion.

Like all approved fact checkers Full Fact are members of Poynter's <u>International Fact Checking Network</u> [54] (IFCN). Signatories to the IFCN code include Politifact, Full Fact, Stop Fake and AP Fact Check, to name but a few. Poynter's <u>major funders</u> [55] include the Charles Koch Foundation, the National Endowment for Democracy (NED), the Omidyar Network (Luminate), Google and the Open Society Foundation.

It is a *fact* that the IFCN, the *official* trade organisation for *approved* fact checkers, is funded by, among others, the multinational corporation Koch Industries, the C.I.A (NED), globalist venture capitalists (Omidyar), aggressive internet monopolists (Google) and globalist currency speculator and self-declared *social change agent* George Soros (Open Society). However, Poynter are also scrupulously *independent*.

In May 2019 Poynter were forced to <u>issue an apology</u> [56], of sorts, to a number of *news media* organisations after they issued an index of *'unreliable'* media sources. When some of the listed *news media* organisations inquired about the basis for Poynter's unfounded accusations, requesting Poynter and the IFCN provide some *evidence* to back up their claims, Poynter quickly removed the proffered *"blacklist."*

Having not checked their facts, Poynter's managing editor, Barbara Allen, said the purpose of the blacklist was:

".....to provide a useful tool for readers to gauge the legitimacy of the information they were consuming......We began an audit to test the accuracy and veracity of the list, and while we feel that many of the sites did have a track record of publishing unreliable information, our review found weaknesses in the methodology. We detected inconsistencies between the findings of the original databases that were the sources for the list and our own rendering of the final report."

This was tantamount to the IFCN admitting they chose who to put on their list based upon their *feelings*. When we look at who funds the IFCN it's pretty clear who those *feelings* lean towards. When requested to evidence their decision the IFCN, guardians of the *fact checking* industry, couldn't provide any because the evidence didn't exist. They had no reasonable basis for their opinion and they were falsely claiming something was a *fact* when it was nothing of the sort. However, you can trust them because they call themselves *fact checkers*.

The social media companies are allegedly under political pressure to employ fact checkers and devise ways of stopping the spread of *dezinformatsiya*. However this is itself a duplicitous story. The biggest social media platforms are corporate members of the GPPP. We are going to discuss how this network operates as we explore the *core conspirators* motives for the *pseudopandemic*. However, membership is by appointment and, while there are undoubtedly disagreements between factions, the GPPP's ambitions are shared by all *stakeholder partners*.

By making the big social media players the focus of proposed legislation we are encouraged to think of them as an important part of our lives. They are being presented to us as if they are "essential." They are not. They are just websites, we don't have to use them. We have been corralled into ever smaller groups online, accessing information via a tiny handful of dominant social media corporations. This allows the hybrid warriors to concentrate their fire and gives the fact checkers a fertile environment in which to operate.

If we decide we don't want to bother with them any longer, that will be the end of their business and social control model. Remember Friendster? Exactly!

During the pseudopandemic, Facebook's platform Instagram <u>worked with fact</u> <u>checkers</u> [56], including Full Fact, to deploy a rating system. They applied a rating *"label"* telling users what was true, partly false or false.

Information rated as *partly false* or *false* was then removed from search results and associated hashtags denied. Once the label was activated Facebook and Instagram bots sought out all *"matching"* content and labelled it accordingly. Thus effectively removing any challenge to the *pseudopandemic* from that particular corner of the public domain.

Users were redirected to the State franchise *approved* information provided by the GPPP's *fact checkers*. Facebook stated:

".....If something is rated false or partly false on Facebook, starting today we'll automatically label identical content if it is posted on Instagram (and vice versa). The label will link out to the rating from the fact-checker and provide links to articles from credible sources that debunk the claim(s) made in the post."

Many people pointed out that this seemed to rule out any questioning of the WHO or any critique of political statements. The GPPP *fact checkers* were then dispatched to censor these posts and misdirect the public to the official *dezinformatsiya*.

You may think that people who question vaccines, the wearing of face masks or the *global pandemic* should be surveilled and censored by the military, intelligence agencies, corporate approved fact checkers and the political establishment. Perhaps you think their opinions are a risk to public health and should be removed. However, the hybrid war isn't limited to *anti-vaxxers* or *lockdown* sceptics. It is being waged on all information that runs contrary to the States franchise's narrative.

Defending the *pseudopandemic* may be the current objective, but you have no way of knowing what future issue may require you to exercise your freedom of speech. Only to find it is no longer possible. The danger this <u>cancel culture</u> [57] represents cannot be overstated.

In 1935 in "The Doctrine of Fascism" the Italian dictator Benito Mussolini wrote:

"The Fascist conception of the State is all-embracing; outside of it no human or spiritual values can exist, much less have value. Thus understood. Fascism is totalitarian."

And:

"The Fascist Statemakes its action felt throughout the length and breadth of the country by means of its corporate, social, and educational institutions, and all the political, economic, and spiritual forces of the nation, organised in their respective associations, circulate within the State."

And in "Fascism: Doctrine and Institutions" he said:

"The corporate State considers that private enterprise in the sphere of production is the most effective and useful instrument in the interest of the nation. In view of the fact that private organisation of production is a function of national concern, the organiser of the enterprise is responsible to the State for the direction given to production."

A Fascist State is a totalitarian public-private partnership where all policy, speech and expression, economic activity and production is controlled via a beneficial arrangement between government and a network of non-governmental organisations such as Unions, think tanks, private corporations and "official" charities. Elections are either banned or meaningless, as those who make policy decisions aren't elected.

A technocratic elite of appointed scientific, economic, corporate and political experts meet in committee halls and board rooms to decide policy. The individual is removed from all decision making. There is no diversity of opinion and all information is controlled by the Fascist State.

Any dissent or questioning of the doctrines of the Fascist State is considered to be *disinformation* and is censored. The Fascist State attempts to control opinion through propaganda, censorship and a system of punishment and reward.

Anyone who promotes this form of corporate state, who advocates the corporate censorship of information and decrees that the only source of truth is the public-private State and its representatives; those who propose that the free exchange of ideas, freedom of speech and expression be limited by this corporate State; people who call for those who question the "official" truth to be punished, ostracised or identified as "other" can accurately be described as Fascists. Equally, any state formed through public-private partnership which assumes all authority and then enacts policy to further the interests of the state is a Fascist State.

In a free and open democratic society, that values freedom of speech and expression, the dialectic can be used to exchange logical arguments to arrive at new knowledge and understanding. This is not possible in the *Fascist* State. Opinions are censored to protect the interests of the public-private partnership.

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Chapter 12 - Lockdown Mortality

In the UK the National Health Service (NHS) is akin to a religion. Aneurin Bevan, Labour minister of Health in 1948, is venerated as the creator of the treasured NHS and it is by no means unusual for NHS doctors and nurses to be referred to as *Angels*. Throughout the *pseudopandemic* the *core conspirator*'s MSM, fact checkers and hybrid warriors, exploited the public's emotional attachment to the NHS to spin any criticism of the COVID 19 narrative, especially peaceful protests, as an <u>attack on hard working NHS staff</u> [1].

This devotion to the concept of a universal health care system, free at the point of need, is understandable. However, with an annual budget <u>now in excess</u> [2] (if perhaps temporarily) of £200 billion, politicians of every party political persuasion have long sought to allow private capital <u>access to this tax funded budget</u> [3].

A single round of chemotherapy can <u>cost the NHS £40,000 or more</u> [4]. The NHS offers a lucrative, tax payer funded market opportunity for pharmaceutical corporations. NHS England, NHS Scotland, NHS Wales and the Health and Social Care Service (HSC) in Northern Ireland provide devolved administration of the NHS corporate slush fund. The NHS is funded by the tax payers across the UK.

In 2016 the COVID 19 vaccine manufacturer Pfizer were fined nearly £85 million for profiteering in the NHS drugs market [5]. It was the largest ever UK fine for such a crime, yet it was a drop in the financial ocean for a pharmaceutical corporation like Pfizer. With anticipated first year revenues in excess of £15 billion [6] from their COVID 19 mRNA vaccine gene therapy alone, fines are a cost of doing business for the "Big Pharma."

The common misconception about the global pharmaceutical industry is that their interests lie in providing effective health treatments. This is not how pharmaceutical corporations operate. Their primary goal is to generate profit and deliver healthy yields to their shareholders and investors.

In 2018 the global investment firm Goldman Sachs, one of the world's leading investors in pharmaceutical corporations, published their report <u>The Genome Revolution</u> [7]. As we move into the era of <u>mRNA gene therapy</u> [8], Goldman Sach's analysis highlighted the profitability risk of curing people.

"The potential to deliver 'one shot cures' is one of the most attractive aspects of gene therapy, genetically-engineered cell therapy and gene editing. However, such treatments offer a very different outlook with regard to recurring revenue versus chronic therapies....In the case of infectious diseases....curing existing patients also decreases the number of carriers able to transmit the virus to new patients, thus the incident pool also declines ...Where an incident pool remains stable (eg, in cancer) the potential for a cure poses less risk to the sustainability of a franchise."

While the cold logic of this analysis may be difficult to stomach, it makes sense from a business perspective. The ideal patient is never cured and cures are to be avoided wherever possible.

Perpetual COVID 19 vaccination is fantastic because the "incident pool is stable" and there is "less risk to the sustainability of the franchise." Purely from a financial perspective, a COVID 19 cure is not in the core conspirator's interest. As we shall see, profit is welcome but it is not the GPPP's primary motivation.

The nature of compartmentalisation and authoritarian control meant NHS systems were created which ensured the desired *pseudopandemic* outcomes. We only need look at the COVID 19 death registration process to know that the manipulation was orchestrated from the top of the organisational structure, not by the rank and file.

From the WHO's engineering of IC10 codes and the State's removal of standard operating procedures, to abandoning basic service frameworks and changing data gathering processes, the health system was adapted to maximise the apparent impact of COVID 19. Amid the fear and alarm created by the propagandists, any doctor presented with a patient's positive RT-PCR result, or symptoms of influenza like illness (ILI), would have been inclined to diagnose COVID 19.

Some localised COVID 19 *hot-spots*, especially in low income, high density urban centres, placed pressures on NHS provision. However while critical care capacity was increased, overall bed numbers were reduced. More patients received critical care but, irrespective of MSM claims, the pressure in Intensive Care Units (ICU's) was far from *unprecedented*.

At the time when accurate data was more essential than ever the NHS suspended the reporting of it [9]. The NHS stopped the public reporting of critical care bed occupancy rates and the number of urgent operations it cancelled. They apparently didn't monitor delayed transfer of care, the number of dementia assessments they made or the activities of community mental health teams, and they abandoned any notion of monitoring the quality of ambulance services.

Prior to the eventual release of raw bed occupancy figures, all that could be said was that stories about the NHS being overwhelmed weren't new. The missing data made it impossible to verify these stories at the time. If we take the Guardian as just one MSM example, during the 2020/2021 winter ILI season they published an article titled "Dire warning that London hospitals could be overwhelmed by Covid." This was cited by many as evidence of the unprecedented impact of COVID 19 on the NHS.

However in 2019, when capacity was greater, they published "Hospital beds at record low in England as NHS struggles with demand", in 2018 the headline was "NHS intensive care units sending patients elsewhere due to lack of beds." Then we have "NHS bosses sound alarm over hospitals already running at 99% capacity" (2017); "Hospitals in England told to put operations on hold to free up beds" (2016); "Hospital bed occupancy rates hit record high risking care" (2015); "More patients,

overstretched doctors – is the NHS facing a winter crisis?" (2014); "Hospitals scramble to prevent crisis in NHS's 'toughest ever' winter" (2013) and "Hospitals 'full to bursting' as bed shortage hits danger level" (2012).

We could carry on listing essentially the same MSM story about the NHS reported in practically every winter since 1948. This in no way downplays the very real winter pressures that the NHS frequently faces. The remarkable *pseudopandemic* fact is that the winter of 2020/2021 is one of the few in where the NHS was not close to being "overwhelmed."

The NHS and the Department of Health and Social Care (DHSC) response to the so called *global pandemic* initially seems unfathomable. However, once we understand that policy decisions were guided by *informed influencers* eager to sell a plague level health crisis to the public, we can see that they were carefully calculated.

Based upon the pointless social distancing concept, as more space was required between beds, the UK State franchise <u>reduced NHS England hospital bed capacity</u> [10] by approximately 13,000 in *preparation* for the global pandemic. Similar reductions occurred in Scotland, Wales and Northern Ireland.

Consequently all the stories about the NHS being *overwhelmed* by COVID 19 need to be seen in the context of it being significantly smaller. As the NHS explained:

"Hospital capacity has had to be organised in new ways as a result of the pandemic to treat COVID-19 and non-COVID-19 patients separately and safely.....This results in beds and staff being deployed differently from in previous years.....As a result, caution should be exercised in comparing overall occupancy rates between this year and previous years. In general hospitals will experience capacity pressures at lower overall occupancy rates than would previously have been the case."

This reduction wasn't anything new either. Total NHS capacity, including general, acute, critical, mental health and outpatient "day beds," stood at nearly 300,000 in 1987/88, by 2018/19 more than half had been cut [11]. Meanwhile the budget had increased year on year. Fewer patients were being treated with ever more expensive diagnostics, drugs and therapeutics.

The shift had been away from routine general healthcare in hospitals to increased acute & critical care [12]. This balance shifted further towards critical care in response to the *pseudopandemic*, as the NHS was effectively transformed from a public health service to a COVID 19 only crisis service. Unsurprisingly the impact of this on mortality from every other cause was devastating. All adding to the *unprecedented* COVID 19 mortality fable peddled by the *pseudopandemic* pushers.

Respiratory diseases don't tend to have a major impact in the spring and summer months, therefore NHS planners could expect that a reorganised COVID 19 NHS should have been able to cope. COVID 19 had already been downgraded from a

High Consequence Infectious Disease in the UK, and data from China and elsewhere didn't portend disaster. If health services acted rationally.

The NHS appeared to manage the 2020 pseudopandemic spring outbreak with ease. Hospital daily admissions to the so called "COVID wards" reached a peak of 2930 on April 3rd 2020. Thanks to the restructuring, the Health Service Journal reported on the 13th April [13] that "tens of thousands of beds remain unoccupied amid the coronavirus crisis," as they revealed that 40% of general and acute beds were empty with the NHS having four times as many vacant beds as normal for the time of year.

Even in the so called COVID hotspots of London and Birmingham spare capacity was unusually high at 28.9% and 38.2% respectively. At the same time A&E attendance was at its <u>lowest level since 2010</u> [14]. While the NHS had fewer beds, spare capacity had never been higher. This was a very strange global pandemic.

The pressure on the NHS was predominantly in intensive care units (ICU's). Patients suffering from suspected severe COVID 19 were <u>routinely put on mechanical ventilators</u> [15] (intubation). Intubation requires that the patient be placed into an induced coma. It is a high risk, last resort medical intervention, the monitoring and management of which requires considerable human resources.

While this is a standard treatment for ARDS, typically ARDS corresponds to a loss of elasticity in the lungs and fluid retention (degraded respiratory system compliance) whereas the unusual low blood oxygen levels (hypoxia) and higher carbon dioxide levels (hypercapnia), seen in confirmed COVID 19 patients, frequently did not [20]. It wasn't clear if the treatment benefits of intubation outweighed the invasive risks.

The mortality of patients on mechanical ventilation is very high [16]. In the UK, by mid April 2020, a study by the Intensive Care National Audit and Research Centre [17] found that 66% of COVID 19 patients put on mechanical ventilation died. Other studies [18] suggested the figure was even higher. This compared to a mortality rate of just 19.4% among those who received oxygen without intubation. It should be noted that these patient's infections were generally deemed less severe. Nonetheless the contrast was notable.

Consequently, physicians began to understand that mechanical ventilation for COVID 19 patients was detrimental in many cases [19]. Especially if used too early [20] in the course of the disease. Sadly, it seems premature intubation contributed towards increased mortality.

Persistently referring to the NHS as the "front-line" the pseudopandemic MSM [21] reported a crisis in the NHS and continually made the false claim that it was under unprecedented pressure. It is no surprise at all that people stopped going to hospital A&E as the MSM highlighted the COVID 19 [22] dangers of doing so. The MSM also suggested booked appointments [23] for emergency care, something the NHS then implemented [24] with predictable, calamitous results.

Throughout the 2020 spring outbreak there was plenty of spare capacity in the NHS to potentially increase ICU provision. Yet that is not the impression the public were given. The construction of the evocatively named <u>Nightingale emergency hospitals</u> [25] in the April and May of 2020 was effectively a PR stunt.

COVID 19 was a known low mortality respiratory disease and the NHS had no reason to suspect they would be overwhelmed during the spring and summer months. The forecast addition of other influenza like illnesses (ILI's), in the autumn and winter, suggested this future possibility, but there was no justification for adding temporary *emergency* capacity to a service experiencing its lowest ever warm weather demand.

Having been instrumental in significantly reducing NHS bed numbers, UK Health secretary Matt Hancock announced the £220m Nightingale project. Avidly promoting the *pseudopandemic* narrative, entirely contrary to the reality, he said:

"In the face of this unprecedented global emergency, we are taking exceptional steps to increase NHS capacity so we can treat more patients, fight the virus and save lives."

Nightingales sprang up all over the UK, as unused conference centres and sports facilities were turned into makeshift critical care wards and ICU's. Meanwhile existing hospital wards that could have taken that equipment stood empty. This was all reported to the public as *proof* of the scale of the emergency. The demand never arose. The Nightingales were wound down or repurposed [26] for other uses. Most having never seen a COVID 19 patient [27].

The purpose of the Nightingales was clearly <u>pseudopandemic propaganda</u> [28] not healthcare. When the NHS did try to move a dozen or so COVID patients to the 4000 bed London Nightingale, they were turned away because the *planners* hadn't <u>bothered to staff it</u> [29]. The 2000 bed Birmingham Nightingale was *repurposed* in August 2020. It <u>never treated a single COVID 19 patient</u> [30] and was instead used to stage video conference media events for Matt Hancock.

However, as we headed into the autumn and winter of 2020/21, the period where respiratory illness was likely to have an impact, as NHS capacity had been reduced in *readiness* for the *pseudopandemic*, it was at least feasible that Nightingale provision would be required. Certainly the State franchise had been warning of the *"second wave"* for long enough.

The second wave of hospital admissions peaked in early January and it was at this point that the Health Secretary Matt Hancock announced that the mothballed Nightingales would be reopened at some point. Though he didn't explain who was going to work in them.

Having built Nightingales when they weren't needed, then dismantling them *in preparation* for when they could be, the State franchise then promised to reopen them too late. This even prompted consternation in the MSM [31] as they struggled

to make the required *pseudopandemic* propaganda out of preposterous State policies.

Once again, the Nightingales weren't actually used [32] during the second wave either. They remained largely unusable [33] anyway, as they had no staff, and only treated a tiny number of patients, mainly non COVID 19 patients in Exeter.

Rather than doing anything useful to address the predicted *crisis in the NHS*, perhaps by utilising all the redundant hospital capacity, the UK State franchise instead focused upon spending millions on *white elephants* they couldn't staff and never used. The value of this to the NHS was nothing, in terms of the *pseudopandemic* narrative it was priceless. Not only did it allow *informed influencers* to claim they were taking action, it reinforced the public perception of an *unprecedented* crisis.

This perception was not born out by the evidence. Despite the never ending stream of MSM reports claiming COVID 19 had thrown the NHS into a crisis of <u>unimaginable proportions</u> [34], as usual, the propaganda didn't remotely <u>reflect reality</u> [35].

COVID 19 hospital admissions in the winter of 2020/2021 peaked on the 12th January. There were 5691 NHS England critical care beds available, of which 4905 were occupied. This represented an 82.3 % critical care bed occupancy rate. On January 12th 2020, before the *pseudopandemic*, there were 3652 available and 2996 occupied, representing an 82% occupancy rate. In 2019 the occupancy rate was 83.3%, it was 86.3% in 2018, 86.2% in 2017 and in 2015 it was 89.5%.

While critical care capacity had been expanded to treat COVID 19 patients there was no unusual pressure on critical care in England. The situation was identical in Scotland, Wales and Northern Ireland.

The figures for general and acute admissions did show unusual demand. In fact we only need look at NHS Scotland's figures for <u>outpatient attendances</u> [36] to see what appears to be a massive reduction in healthcare, corresponding precisely with the first lockdown. Up to the end of September 2020 the NHS Scotland hospital bed occupancy rate was just 77%. A remarkably low figure.

Similarly in England, if we again take the peak admission date during the pseudopandemic "second wave" (January 12th 2021) there were 92,270 general and acute beds available of which 82,118 were occupied. This represented a bed occupancy rate of 89%. Taking the same date in 2020 (prior to the pseudopandemic) there were 98,399 available beds with 93,497 occupied. There were more beds and the occupancy rate was higher at 95%.

If we look at previous years, higher bed availability and occupancy rates are consistently observed. For example on 12th January 2015 there were 102,171 beds with 97,444 occupied. This represented a 95.4% occupancy rate. As we have discussed, there is no evidence of any unprecedented mortality during the

pseudopandemic. This was the first pandemic (or epidemic) in human history to be characterised by fewer patients using less healthcare.

The addition of a few thousand critical care beds, at the cost of many more thousands of general and acute beds, meant that the NHS could potentially have been overwhelmed if it had continued to treat other conditions and provide public health services as normal. However, this risk was "managed," not by adding much needed usable capacity, but by severely restricting access to health services.

The key reason why so called "lockdown sceptics" were so heavily critical of the State franchise response to the pseudopandemic, particularly with regard to the NHS, was the terrible impact it would obviously inflict upon people suffering from every other condition. Regardless of the fact that lockdowns were known to be useless, it was the health impact of effectively shutting the NHS to everything but COVID 19 that worried people the most.

Again if we look at the statistics it seems clear that the lockdown itself was responsible for a huge number of unnecessary deaths. The *core conspirators* and their *informed influencers* could be confident that normal respiratory illness would account for significant winter mortality. The systems created for testing and mortality attribution more or less guaranteed that the bulk of normal ILI mortality would be called COVID 19.

Thus the reporting of a "second wave" of the pseudopandemic was secured. As the expected winter ILI's took their toll the resultant mortality was appended to the genuine COVID 19 statistics.

The situation was very different in March 2020. High ILI mortality was unlikely. Therefore it seems the lockdown was used as a policy weapon to exacerbate the scale of the mortality spike we saw. Office of National Statistics [37] data indicates how this was done.

In 2020 the five-year April average (calculated from the previous five years) for people dying in their own home was 9,384.6. However, in April 2020 that figure increased by more than 80% to 16,909. In the same month, deaths in care homes increased by more than 300% above the four-year average of 8,691 as 26,541 vulnerable older people died in care homes. An unseasonable spike in mortality of just over 25,000 people. A high proportion of those deaths were attributed to COVID 19.

On 17th March 2020 all NHS trusts and foundation trusts received a <u>directive from the NHS Chief Executive</u> [38] Simon Stevens instructing them on how to prepare for the *pseudopandemic*. Part of this orientation to a COVID only service included the immediate discharge of patients wherever possible. This was soon followed with the State franchise's Coronavirus enabling Act which removed the duty of the NHS to make an assessment of the patient's eligibility for NHS healthcare. In other words, the NHS could discharge patients without formally assessing their ongoing healthcare needs.

Between the 17th March and 15th April 2020 [39] more than 25,000 vulnerable patients were discharged into chaotic, understaffed, PPE deprived care settings or back into their own homes. Not only did this happen regardless of their COVID 19 status, which was unknown in a significant proportion of patients, it was also absent ongoing healthcare assessment. The almost direct correlation between this practice and the April rise in COVID 19 mortality is stark.

The NHS directive issued by Simon Stevens also initiated GP video consultations and the practical withdrawal of primary healthcare. Not just from care homes but from family homes too. This coincided with a 57% decline in A&E presentations, as people were terrified by the MSM and the State, and obeyed the diktat to *stay home* and *save the NHS*.

There weren't fewer people suffering strokes or heart attacks, they just couldn't access primary healthcare and didn't go to hospital. Even if they called an ambulance, thanks to the restrictions placed upon ambulance services, <u>ambulance response times soared</u> [40] across the country. The average waiting time for a suspected stroke or heart attack rose to more than 32 minutes.

These factors all coalesced precisely with the sharp rise in mortality among people living in their own homes. To simply claim these were COVID 19 deaths, or attributable to the crisis, without a proper investigation is unconscionable.

The circumstantial evidence suggests that a great number of these deaths were hastened by lockdown and NHS policy, not COVID 19. Researchers at the Universities of Loughborough and Sheffield [41] considered the additional drivers of mortality. For the week of the 17th to 24th of April they estimated that likely mortality from COVID 19 was between 54% - 63% lower than the official record claimed.

In every year we see seasonal variations in mortality as the winter months account for more deaths than warmer periods. This variation is also typically seen in excess deaths in the home. Yet, throughout the pseudopandemic, excess deaths in the home were not only higher than average, they were consistently much higher.

While the April peak and normal winter increase is still observable, excess mortality in our own homes has never dropped close to, let alone below, the five-year average. Mortality from all other causes <u>immediately increased</u> [42] as soon as access to health services was denied. Corresponding precisely to the start of the first lockdown.

As early as May 2020 scientists, statisticians and public health experts were expressing alarm about the increase in so called non-COVID deaths. The chair of the Winton Centre for Risk and Evidence Communication at Cambridge University David Spiegelhalter observed [43]:

"As soon as the pandemic started we saw a huge immediate spike in noncovid deaths in [private] homes that occurred close to the time hospitals were minimising the service they were providing....Over the seven weeks

up to 15 May, as the NHS focused on covid, around 8800 fewer non-covid deaths than normal occurred in hospitals."

Either too afraid or unable to access health services, the UK public were dying in their own homes in increasing numbers. While most people would prefer to end their days at home, it is by no means clear how many of these deaths could have been prevented if there had been a fully functioning health service.

By July 2020 the ONS reported that the number of people dying in their own homes exceeded the <u>total number from COVID 19</u> [44]. Remarkably the MSM managed to report this as the pseudopandemic "hastening some deaths." While acknowledging that deaths from COVID 19 were below the 5 years summertime average for ILI's, noting that deaths in the home were more than 12,000 above the average, Greg Seely from the ONS stated:

"Some of the causes involved in these deaths are conditions which can be quickly fatal without treatment if earlier symptoms aren't treated. These include the heart and circulatory-related conditions, diabetes, appendicitis etc, most of which occurred at above average levels."

The MSM didn't report why more people were suddenly dying from non-communicable diseases at home. There was no suggestion that policy had anything to do with it. Although they did report that Mr Seely also said:

"Another explanation for these non-Covid increases is undiagnosed Covid."

COVID 19 wasn't mentioned on any of these people's death certificates. Why Mr Seely thought they might be due to COVID 19, and why the MSM reported it, is mystifying. Equally they might have been caused by tuberculosis or plane debris falling on their houses. But seeing as those causes weren't mentioned on their death certificates, there is no reason to think these were "undiagnosed" either.

The health costs of the effective withdrawal of significant parts of the health services were both predictable and known. In their report <u>As If Expendable</u> [45], the international human rights NGO Amnesty International highlighted the impact of the State franchises policies on the most vulnerable:

"The UK government's response to the COVID-19 pandemic violated the human rights of older people in care homes in England.....A full independent public inquiry should be established without further delay....Crucially, the inquiry should ...examine....key policies and decisions that have impacted the human rights of older people living in care homes in England, notably their rights to life, to health, to non-discrimination, to private and family life and to not be subjected to inhuman treatment."

While this acknowledgement of the devastation caused by the *pseudopandemic* policy response was welcome, once again we see the careful framing of the issue to be limited solely to errors, mistakes and the lessons to be learned:

"Lessons must be learned; remedial action must be taken without delay to ensure that mistakes are not repeated; flawed decision-making processes must be reviewed and rectified, and those responsible for negligent decisions must be held to account."

This prepares the ground for the extent of the debate when the inevitable public backlash arrives. As the magnitude of the disaster becomes apparent the discussions will be limited to "what more could have been done." The whole issues will be tied down in endless committees and long awaited reports that won't find any individual culpability but will blame a series of misjudgements made under extraordinary pressure.

Thanks to the <u>2005 Inquiries Act</u> [46], the State franchise will have extensive control over any *pseudopandemic* public inquiries. At the behest of the *core conspirators*, the *informed influencers* will be able to deny the submission of evidence, withhold witness statements, and will have the power to edit findings before they are published. The whole sorry mess will take years, cost millions and, by the time it reports its findings, most people will have been distracted by the *next crisis*.

In 2019 The <u>WHO stated that non communicable diseases</u> [47], such as heart disease, cancer, Alzheimer's, diabetes and strokes were the world's biggest killers. Yet these health conditions were largely pushed aside during the *pseudopandemic*. A resultant health crisis, orders of magnitude worse than COVID 19, was created. The impacts will be long lasting and take years to fully unfold, but there is no doubt, the lockdown cure was indeed much worse than the disease.

During the *pseudopandemic*, cancer <u>screening and treatment</u> [48] was put on hold in the UK and elsewhere. By June 2020 <u>Cancer Research UK</u> [49] estimate that 290,000 people had missed cancer follow ups, indicating that around 20,000 cancer sufferers, who would otherwise have been detected, remained without a diagnosis in the UK. They also found that 2.1 million people had missed screening appointments.

As early as February 2021 there had already been an 18.2% decrease in cancer diagnosis, corresponding to a <u>6.8% increase in Stage 4 cancers</u> [50]. We are yet to see how extensive the impact of the cessation of cancer screening will be on cancer survival rates, but the early indications are worrying.

Researchers from Oxford University looked at the impact of the first global lockdown and other restrictions on cancer treatment. Their findings made <u>sombre reading</u> [51]:

"In the US, large reductions in cancer registrations were observed for breast (-48%); prostate (-49%); melanoma (-48%); lung (-39%); colorectal

(-40%), and hematologic cancers (-39%).. numbers of ICD codes for six cancers combined (breast, colorectal, lung, pancreatic, gastric, and oesophagal) fell by 46%.. At the largest cancer centre in southern Brazil, a 42% reduction in first-time appointments was reported during the pandemic.. In the Netherlands.. there was a 26% reduction in all cancers registered.. In India, the number of radiotherapy treatments dropped by almost 40%.. and operations by 80%.. In Italy, cancer diagnoses [fell] by 39% compared with the average in 2018 and 2019. Prostate cancer (75%), bladder cancer (66%) and colorectal cancer (62%) had the most significant decreases."

Every time a lockdown was imposed the situation deteriorated. The impact of the psychological manipulation of the UK public has already started to emerge. Male suicide hit <u>a two decade high</u> [52] in September 2020 and by early 2021 senior paediatricians warned that the number of children admitted to hospital for psychological reasons had <u>surpassed those admitted</u> [53] due to physical illness.

The closure of schools and living in isolated households with terrified parents had a sickening impact on children's mental health. The <u>NHS survey</u> [54] of the deterioration in the mental health of young people is distressing:

"In 2020, one in six (16.0%) children aged 5 to 16 years were identified as having a probable mental disorder, increasing from one in nine (10.8%) in 2017.....for the older age group (17 to 22 years); 27.2% of young women and 13.3% of young men were identified as having a probable mental disorder in 2020....Children aged 5 to 16 years with a probable mental disorder were more than twice as likely to live in a household that had fallen behind with payments (16.3%) than children unlikely to have a mental disorder (6.4%)"

The detrimental impact of poor mental health on life expectancy and health outcomes is well established. A study published by the <u>Journal of the American Medical Association</u> [55] demonstrated that mental health issues in early life are particularly damaging, finding that they reduce life expectancy by between 10-20 years.

It is deplorable that so many young people, who faced no risk at all from COVID 19, which almost exclusively affected people nearing or in end-of life care, have had their lives permanently blighted and shortened by the State franchise's pseudopandemic. The MSM insistence that children are *still victims of the virus* is a disgusting propagandist lie [56].

They are victims of the *core conspirators* determination to terrorise the public. It was MSM propaganda that convinced people to accept completely unnecessary school closures and reject the pleas of those trying to highlight the folly of this course. In terms of <u>years of life lost</u> [57] (YLL) the impact on young people's mental health alone will far exceed the years lost to COVID 19.

Unable to deny the obvious, the Scientific Advisory Group for Emergencies (SAGE) published a report in July 2020 [58] that gave estimates of the projected non COVID 19 mortality. SAGE stated that these deaths were unavoidable due to the necessity of the *suppression* NPIs modelled by ICL. Although other scientists were pointing out that their models were junk science based on junk data [59].

SAGE suggested that 16,000 deaths would result in care homes, over a 12-month period; 6,000 deaths would occur due to a lack of emergency medicine, with 12,500 lives lost due to delays in healthcare and they predicted 30,000 deaths from undetected cancers, cancelled operations and the impacts of poverty over the next 5 years.

In December 2020 SAGE updated their predictions and estimated a possible 222,000 UK deaths, <u>due to the pandemic</u> [60]. They claimed 54% of these would be attributable to COVID 19 with just over 102,000 caused by "changes to health and social care made in order to respond to COVID-19."

Other researchers suggested these numbers utterly failed to grasp the scale of the health disaster caused by the *pseudopandemic* NPI response. Professor Philip Thomas from the University of Bristol calculated that the economic impact of lockdown policies could result in <u>560,000 non-COVID deaths</u> [61]. This calculation assumed an average life lost of a few months, but given the age distribution of COVID 19 this comparison isn't unreasonable.

In January 2020 there were an estimated 1,649 people who had been waiting more than a year for NHS treatment. By January 2021 this figure stood at 304,044 [62]. The overall waiting list for non-urgent treatment stood at 4.59 million. Other than COVID 19 patients, the total number of people treated in the NHS for all remaining conditions dropped by 54% in one year. In February 2020, 2 million sought emergency hospital treatment, in February 2021 that figure was 1.3 million.

However, the NHS Confederation warned the problem was much larger. The *pseudopandemic* saw a 5.9 million drop in GP referrals for hospital testing and treatment. These included referrals for conditions which, if left untreated, can and sadly will deteriorate. The NHS Confederation urged the State franchise to be honest with the public. The Chief executive Danny Mortimer said:

"The disruption has been enormous, leading to a considerable number of people waiting far longer for treatment.....The Government now needs to level with the public on the scale of the challenge facing the NHS....without a comprehensive new plan, the government faces the politically unacceptable legacy of hundreds of thousands of patients left with deteriorating conditions for the remainder of the parliament."

Beyond the horrific health disaster directly caused by the State franchise's health policies, the economic fallout of the *pseudopandemic* response will cause almost unimaginable health harm. The virtual shut down of the global economy has

created poverty in both developed and developing nations unlike anything we have seen since the 1930's.

The UK's economy contracted by nearly 10% in 2020. That is the worst economic slump since the 1709 crop failure [63]. The only reason the human cost wasn't much worse is that the economy is currently being propped up by State franchise (tax payer) borrowing and gargantuan levels of quantitative easing (money printing.)

The <u>social determinants of health</u> [64] are indisputable. The prevalence of nearly every health condition, from heart disease and cancer, to dietary related illness and mental health, correlates precisely with income distribution. <u>Data from the ONS</u> [65] shows that the gap in life expectancy between poorer and more affluent communities is 7.5 years for women and 9.5 years for men.

Despite all our medical advances, it only took the austerity caused by the 2008 bank bailouts to see infant mortality increase sharply in the UK. A study published in the <u>British Medical Journal</u> [66] found:

"The unprecedented rise in infant mortality disproportionately affected the poorest areas of the country, leaving the more affluent areas unaffected....about a third of the increase in infant mortality from 2014 to 2017 may be attributed to rising child poverty."

By the end of 2020 the Joseph Rowntree Foundation estimated that the *pseudopandemic* had doubled rates of absolute household poverty with up to <u>2</u> <u>million UK families</u> [67] facing extreme poverty. For the first time in UNICEF history the UK was in receipt of food aid [68].

It is astounding that the MSM propagandists could not only blame the practical withdrawal of public healthcare on a virus with low pathogenicity, they actually attempted to suggest that the health disaster they grossly downplayed was a good thing. In a putrid display of disinformation and spin the BBC asked Has COVID 19 Changed the NHS for the Better? [69]

Claiming that the "pandemic has been a catalyst for innovation in the NHS" and noting that the "changes made to reduce spread of infection are here to stay," they suggested not seeing a doctor at all was "more convenient" for patients. However, in their zeal to promote the end of the State franchise commitment to universal healthcare they conceded the crucial healthcare deception at the heart of the pseudopandemic:

"The Covid pandemic has transformed our hospitals. Car parks are empty, once-bustling corridors are quiet....Before the pandemic nearly all appointments took place face-to-face. Last year probably 90% occurred via telephone or video call...This innovation has been particularly helpful for those who are disabled...Some changes may have happened anyway, but Covid has accelerated them."

It has not been helpful to anyone with life limiting or terminal health conditions. It has been an unmitigated disaster and for the official State franchise propagandists at the BBC to even attempt to spin it in a positive light was obscene.

If we consider the cost of the State franchise's *pseudopandemic* response, both to the NHS and public health in general, the belief still held by many that the State wishes to "keep us safe" is quite clearly nothing but wishful thinking. The NHS faces a backlog which it will not be able to manage. In the short to medium term the health consequences will be dire however, when we look to the long term, the outlook is grave.

The <u>words of George Batchelor</u> [70], a co-founder of Edge Health, who provide data analysis to the NHS, are disquieting. Predicting that health services will be overwhelmed by the backlog, and the other impacts of the Lockdown regime, he stated:

"If projected forwards, these numbers get so large it is hard to relate to them on a personal level."

Edge health estimates that NHS capacity would need to be increased to 125% of 2019 levels with the addition of 700 new operating theatres just to start to address the backlog. The GPPP's State franchise has shown no interest at all in doing anything about it.

With a <u>core inflation rate of 1.5%</u> [71] the nurses *pseudopandemic* 1% <u>pay rise</u> [72] was effectively a pay cut. The Health Secretary Matt Hancock stated that the pay cut was necessary because that was all that was "affordable as a nation," adding that this was due to the economic toll of COVID 19. This is how the State franchise treats the *Angels* of the *pseudopandemic*.

At the same time the Chancellor Rishi Sunak managed to find £15 billion in the budget [73] to honour the State franchises funding of the 2 year "Test & Trace" program that will cost tax payers £37 billion in total. This is how the State franchise treats its pseudopandemic test & trace partners [74] such as Amazon, AstraZeneca, Serco, Deloitte and G4S.

A life lost prematurely to a lack of healthcare or neglect is no less valuable than a life lost to COVID 19. Yet throughout *pseudopandemic* the critics who were desperately trying to highlight the dangers of lockdown policies were labelled by the MSM and popular media pundits [75] as "COVID deniers." The intention was to ensure as few people as possible were alert to the malevolent State franchise policies.

We briefly considered the resources the *core conspirators* had at their disposal. We also explored how they and their *informed influencers* exploited the opportunity presented by a low mortality respiratory disease. The question is why. Why did they do any of this?

What possible motive could these immensely wealthy people have for inflicting humanity with such a damaging psychological warfare program? Why were they so willing, not only to risk the deaths of hundreds of thousands of vulnerable people, but to take active measures to increase those risks? Was it just to sell their scam?

What drives people who have more money than nation states to want more? What is it they seek?

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Chapter 13 - Core Beliefs

In order for a jury to convict the *core conspirators* and their informed influencers the evidence must leave them with no reasonable doubts. They must be satisfied that the accused voluntarily committed acts or wilfully omitted due care (*actus reus*) and were dishonourable or dishonest with an intent to cause harm (*mens rea* - guilty mind).

Similarly the evidence must demonstrate that the *categorical trinity* has been met. The accused must have had the means, the opportunity and the motive to commit the crime. Depending upon where the *pseudopandemic* crimes are tried we might hope that the *core conspirators* and *informed influencers* will be prosecuted either for conspiracy to commit fraud (in Common Law jurisdictions) or a <u>Joint Criminal Enterprise</u> [1] (in International Law.)

We will soon explore, in detail, how the core conspirators acquired the financial means, which they converted into the political, regulatory and propaganda means, to commit the *pseudopandemic* fraud. They seized upon the opportunity presented by COVID 19 to perpetrate the crime. If a clear motive is identifiable then there is a good chance that the categorical trinity can be presented to a court.

Their motive had nothing to do with a pandemic and little to do with making money. The *core conspirator's* motivation was to see their dream of a centralised system of global governance realised.

The *pseudopandemic* was a step along the path towards the *new normal*. A new world order where all resources are controlled and meted out by a technocratic über-class who some refer to as "the elite."

They are neither unusually gifted nor knowledgeable, and cannot justifiably be described as an "elite." They are just a class whose immense wealth enables them to control markets, manipulate geopolitics and shape government policy. Always for their own benefit

Some of that wealth is inherited but none of the *core conspirators* have amassed the kind of wealth needed to control governments without exploiting the global financial and monetary systems. The means of economic manipulation do not serve us. They only serve capital.

If you have sufficient capital the global economy is designed to be gamed in order to accrue more. We live in a world shaped by markets which have been deliberately constructed to enable those with immense riches to enrich themselves further. At the same time, the economy transfers wealth from ordinary working people, through the mechanisms of taxation and debt, to bolster the capital of those who already possess it.

Nothing illustrates this more clearly than the economic shutdown during the *pseudopandemic*. As small to medium size businesses were forced to close,

economic activity nose dived and unemployment (including those furloughed) soared, this tiny *class* accrued more wealth in less time than ever before.

Vast amounts of money was "printed" (virtually not physically) and pumped into the global economy (Quantitative Easing) to give those who have lost their jobs and businesses the impression that the State franchise was willing to support them through hard times. This was a monumental deception. All of this money is debt.

A study commissioned by the global <u>poverty action charity Oxfam</u> [2], published in January 2021, found that this *government* borrowing (fiat currency created by central banks) fuelled a stock market boom that saw incredible wealth funnelled to this *class*. They were the real beneficiaries of so-called *Quantitative Easing*.

The national and global debt is a debt we owe to the hoarders of capital. This is the nature of the global economy. Seen in this context, Oxfam's findings were even more disturbing:

"While the real economy faces the deepest recession in a century....Worldwide, billionaires wealth' increased by a staggering \$3.9tn (trillion) between 18 March and 31 December 2020. Their total wealth now stands at \$11.95tn, which is equivalent to what G20 governments have spent in response to the pandemic. The world's 10 richest billionaires have collectively seen their wealth increase by \$540bn over this period. The greatest economic shock since the Great Depression began to bite and the pandemic saw hundreds of millions of people lose their jobs and face destitution and hunger....It is estimated that the total number of people living in poverty could have increased by between 200 million and 500 million in 2020....The coronavirus crisis has shown us that for most of humanity there has never been a permanent exit from poverty and insecurity. Instead, at best, there has been a temporary and deeply vulnerable reprieve....It simply makes no common, moral or economic sense to allow billionaires to profit from the crisis in the face of such suffering."

The *class* who continue to profit from human suffering, always have. This is nothing new. As we discuss the *pseudopandemic*, the key statement in Oxfam's report is perhaps "the real economy" - faces the deepest recession in a century.

The capital hoarding class sit as a class apart, manipulating global markets, often through orchestrating events or misreporting them for their own advantage. They have long since abandoned the "real economy" and now inhabit the realms of global capital.

They own a world debt that has <u>surpassed \$281 trillion</u> [3], more than 250% of global GDP. Meanwhile they trade their capital in a <u>global financial products</u> <u>derivatives market</u> [4] estimated to contain between \$600 trillion to more than \$1 quadrillion of liabilities (10 times global GDP).

Obviously these derivative liabilities (debts) and world debt can never be repaid. Having squeezed every last drop of finance fuelled *authoritarian* power from the global economy, the current economic system has come to an end. It cannot continue and thus it is to be transformed. As is the monetary system.

The *pseudopandemic* was *set* as the catalyst for this transformation towards a new global economic model and the creation of a global digital currency. Both designed to further empower the *hoarders* as they too transition to a new form of capital. The game is still rigged but the grand chessboard has evolved.

While the lives of the general population have improved, thanks to economic development, the old global economy disproportionately benefited the hoarders of capital. Now the *pseudopandemic* has expedited the reduction of living standards for the many while enabling a power grab by the few.

The population of the Earth will continue to feed the new global economy but will suffer for it. While COVID 19 presents no health threat to children the *pseudopandemic* response, transitioning us to the *new normal* economy, certainly does.

A recent study <u>commissioned by the U.N.</u> [5] estimates that *disruption to services* has already led to the deaths of 228,000 children in South Asia. Though they call this the indirect effect of COVID 19 rather than use the appropriate term "policy."

Those enforcing this transformation upon us are not "the elite." They are the parasite class. This term more accurately describes how they acquired their wealth and, through it, their authority. The core conspirators are members of the parasite class.

The *parasite class* do not hoard capital by virtue of their own hard work. This is not to say that they are not highly motivated or industrious. Many undoubtedly are.

Nonetheless, they continually grow their vast fortunes by milking the global economic and monetary systems which were developed by their predecessors specifically to increase and consolidate their progeny's authority and consequent power. They capitalise upon an advantage hard baked into an unjust global economy which is nothing like a free market.

The *parasite class* are the preordained winners by virtue of the monopolies they control. Competition only exists within the boundaries of the regulations they define. The wrong "competitor" doesn't stand a chance.

This system of *authority* allows those with sufficient wealth to control more than just the flow of capital. It affords them political and social control through which they further enhance their collective authority. Thus a tiny group of individuals, each acting in their own self interests, are able to rig the systems the rest of us are forced to rely upon. They do this for their gain, not humanity's. It is a parasitic system.

All of us accept that groups come together to promote their members interests. From unions to lobbying organisations, political parties and activist movements, we understand that one of humanity's evolutionary advantages is that we can coordinate our efforts to achieve collective goals.

Yet somehow, billions of us appear to think that the people who run some of the largest and most complex corporate structures and logistical operations on the planet are incapable of collaborating to protect and further their own agenda. Despite the mass of <u>documented historical</u> [6] and contemporary evidence, proving that they do, those who point out this reality are labelled *"conspiracy theorists"* and ignored.

"Class" is used here purely to refer to the hierarchical class structure of society. It is not used to advance any argument either for socialism or *equality*.

Human beings are unique and individually sovereign. We are not and cannot be equal in all things. To imagine that we can become *equal*, via some intervention by the State, denies our inalienable right to make the most of our abilities. The continual claim of a *"more equal society"* assumes that government, founded upon authoritarian power, is capable of creating the artificial social construct of *equality*: something its own existence renders impossible. Some will always be more equal than others in any system of *authority*.

To dispute the *claimed authority* of the *parasite class* is not an argument against wealth or personal property. The removal of these economic goals would deny an important human motivation: the drive to prosper. Acting in our own self interest is not "bad," it is essential. Wealth is not the issue. The issue is systemic corruption and the grossly unequal distribution of resources producing inequality of opportunity.

The *parasite class* fervently believe in three deleterious concepts. *The Divine Right of Kings*, Eugenics (*Population Control*) and *Technocracy*. These warped abstractions have festered in their imaginations creating a self serving belief system. In order to understand their motivation we need to consider their foundational beliefs.

Their belief in the <u>Divine Right of Kings</u> [7] is not monarchism. Unlike James I, they aren't claiming they are the anointed ones. It is just that they assume the absolutism of supreme authority and assert the alleged right to rule. They use the same old, tired rhetoric of all tyrants, just clothed in modern mores.

They do not recognise the need for any kind of democratic mandate or even popular support. As self-appointed rulers their authority springs solely from their claim, not any foolish concept of political legitimacy. They are able to rule through financial power and our acceptance of the concept of *authority*. We concede that some human beings have the right to tell other human beings what to do. They don't, this isn't an inalienable right and therefore is not a right that exists. It is a mythology.

The parasite class try to avoid revealing their faith and sense of entitlement, but it exudes in abundance from everything they do and say. They cloak their language with a facade of altruism but their arrogant assumptions are transparent. For example, the World Economic Forum's (WEF) mission statement [8] reads:

"The World Economic Forum is the International Organization for Public-Private Cooperation. The Forum engages the foremost political, business, cultural and other leaders of society to shape global, regional and industry agendas.....Our activities are shaped by a unique institutional culture founded on the stakeholder theory."

No one gave the members of the WEF the *authority* to *shape* global and regional agendas. They just assumed it.

Every year the WEF hold their most prominent meeting in Davos-Klosters, Switzerland. Elected politicians represent a minority of those in attendance, which is by invitation only. With an <u>estimated 3000 invitees</u> [9], 53 Heads of State were selected to attend DAVOS 2021 (which was cancelled.)

Who determines that these CEO's, tax exempt foundation philanthropists, academics, scientists, entrepreneurs, media moguls and global "celebrity" influencers are the *leaders of society?* Whose society? It seems the WEF are among the *stakeholders* who make that decision.

Which voices don't they want to hear? What economic analysis, expert opinions, political philosophies, scientific research or policy proposals hold no interest for the WEF and their stakeholder members?

The WEF have also asserted their authority over three key global policy areas which they have decided are within their remit. They say they are mastering the *fourth industrial revolution*, addressing global *security issues* and *solving problems* they claim to have identified with the *global commons*.

There has been no public debate on whether or not we agree with their definitions of any of these "problems." No one, anywhere on Earth, voted to empower the WEF to decide what we should or should not do about these alleged challenges. They have adopted and wholeheartedly embraced the Divine Right of Kings.

The WEF brings together many of the world's most prominent corporations, investment firms, banks, hedge funds and philanthropic foundations (The Bill and Melinda Gates Foundation - BMGF - being one) to share their ideas with a few, hand-picked, politicians. They list many of them <u>as WEF partners</u> [10].

In the same way that Bill and Melinda Gates were used as talking heads to foster the *pseudopandemic* throughout 2020, and then as image leaders for COVID vaccines, so the WEF has been the public face of the planned economic recovery. However, like the BMGF, the WEF too are part of the wider Global Public Private Partnership (GPPP) network. They are little more than the window through which we can see the GPPP in operation.

Stakeholder theory is the quasi-intellectual label the WEF like to use to describe the GPPP's notion of Stakeholder Capitalism. They are careful to use the right "propaganda" phrases and fluffy words, such as sustainability, inclusion and diversity, but essentially stakeholder capitalism means global governance by multinational corporations. Democratic accountability is an anathema to stakeholder capitalism.

In his December 2019 article What Kind of Capitalism Do We Want [11], Klaus Schwab, co-founder and current executive chairman of the WEF, wrote:

"Stakeholder capitalism, a model I first proposed a half-century ago, positions private corporations as trustees of society, and is clearly the best response to today's social and environmental challenges."

Is it the best response? Many might argue that a significant number of today's social and environmental challenges were largely caused by private corporations. Why would anyone want them to be *trustees* of anything?

"Trustee" is an interesting word choice. It has a very clear legal definition [12]:

"The person appointed, or required by law, to execute a trust; one in whom an estate, interest, or power is vested, under an express or implied agreement to administer or exercise it for the benefit or to the use of another."

Stakeholder Capitalism claims that private corporations have an *implied agreement* (it certainly isn't *express*) to *administer or exercise power* over society and the environment. This is allegedly for the *benefit* of *another*. The "other" supposedly being humanity. In reality the "other" is the *parasite class*.

Using the WEF as a point of reference, we can see what the purpose of the *pseudopandemic* was. When they launched their so called <u>Great Reset</u> [13], the WEF described the objectives of the *pseudopandemic* quite succinctly:

"The Covid-19 crisis, and the political, economic and social disruptions it has caused, is fundamentally changing the traditional context for decision-making. The inconsistencies, inadequacies and contradictions of multiple systems—from health and financial to energy and education—are more exposed than ever....Leaders find themselves at a historic crossroads....As we enter a unique window of opportunity to shape the recovery, this initiative will offer insights to help inform all those determining the future state of global relations, the direction of national economies, the priorities of societies, the nature of business models and the management of a global commons."

The claims, inherent to the Great Reset, are nothing new. It is just a public relations rebranding exercise for an idea that is hundreds, if not thousands, of years old. The *parasite class* have always ruled and they have always sought to centralise and extend their authority over as much of the globe as possible.

During the *pseudopandemic* the WEF deliberately garnered public attention to espouse their Great Reset *dreamscape*. Essentially promoting a global coup d'état, the WEF have *run point* for the GPPP on the new global *stakeholder* economy.

Consequently, some WEF spokespersons, such as Klaus Schwab, have necessarily sought more media exposure. But the WEF are not the architects of a new system of global governance. Though they are certainly avid proponents.

The core conspirators are among the society of the elect who drove the pseudopandemic push towards a new monetary and economic world order. This has been packaged, for propaganda purposes, as the *Great Reset*. The ubiquitous "build back better" sound-bite, simultaneously regurgitated by political puppets around the world [14], is simply another catchphrase of the *Great Reset marketing strategy* [15]. As we shall see, it is based upon sustainable development goals.

Though they called it a *crisis*, COVID 19 was an *opportunity* as far as the GPPP were concerned. They were not in the least bit concerned about the disease itself. It presented no threat to them and they knew it.

In June 2020, in his book called *the Great Reset*, co-written with Thierry Malleret, Klaus Schwab said that the COVID 19 "global pandemic" was:

"One of the least deadly pandemics the world has experienced over the last 2000 years....the consequences of COVID-19 in terms of health and mortality will be mild...It does not constitute an existential threat, or a shock that will leave its imprint on the world's population for decades."

Obviously this stands in stark contrast to the message given to us by the GPPP's State franchises and their mainstream media (MSM). The *pseudopandemic* engineered the public perception of the *crisis* that afforded these global *leaders* the *opportunity* to fundamentally change the traditional context for decision-making.

In many nations that traditional decision making was called *representative democracy*. The *core conspirator's* network, fronted by the WEF, considered the idea of this *multiple system* of numerous elected national governments, each supposedly making decisions in their own national interests, to be full of *inconsistencies*, *inadequacies* and *contradictions*.

COVID 19 was an *opportunity* which offered the justification to *shape the recovery*. Representative democracy and national sovereignty was by no means a perfect system but, as a concept, it is certainly preferable to rule by *stakeholder capitalism*.

The WEF are among those proposing that we "build back better" by allowing unelected global corporate leaders to seize authority over the entire Earth and all of humanity. The GPPP will determine the future state of global relations, the direction of national economies, the priorities of societies, the nature of business models and the management of a global commons.

The WEF's use of the indefinite article for "global commons" is notable. It states that a global commons is yet to be fully defined. This has enormous significance.

The United Nations is an integral *stakeholder partner* within the GPPP. Through its various programs, agencies and affiliated bodies, such as the U.N. Environment Program (UNEP), the World Health Organisation (WHO) and the Intergovernmental Panel on Climate Change (IPCC), it provides a centralised global authority hub.

GPPP think tanks like the Club of Rome, The Council on Foreign Relations, Le Cercle and Chatham House, funnel policy and strategic planning into the U.N. which then distributes them as policy initiatives to GPPP State franchises (governments) around the world. For example, the U.N. Agenda 2030 and Agenda 21 Sustainable Development Goals (SDG's) have been translated into the sustainability plans, programs and strategies operated by local councils at the county, city and borough levels across the UK.

This mechanism is mirrored in nearly every nation on Earth, allowing the GPPP control of the policies affecting billions of lives. Hence the WEF stakeholder capitalist's <u>impassioned support for SDG's</u> [16].

In 2011 the United Nations Environment Program (UNEP) published "Global Commons The Planet We Share" [17]. They defined the global commons as:

"The shared resources that no one owns but all life relies upon."

The 2010 plenary also created the United Nation's Systems Task Team (UNSTT). In 2015 the UNSTT published "Global governance and governance of the global commons in the global partnership for development beyond 2015" [18]. They explained what they meant by "global commons:"

"International law identifies four global commons, namely the High Seas, the Atmosphere, the Antarctica and the Outer Space.....Resources of interest or value to the welfare of the community of nations – such as tropical rain forests and biodiversity - have lately been included among the traditional set of global commons."

They added:

"Stewardship of the global commons cannot be carried out without global governance."

Speaking in December 2020 [19] the United Nations Secretary General Antonio Guterres expanded the definition of *a global commons*. In addition to the oceans and everything in them, the atmosphere we breathe, the continent of Antarctica and the solar system (to start with), we can add all land, water, all species, agriculture, fisheries, (global food supply), global energy production, our consumption (our behaviour), our faiths (our beliefs), our identities (who we are) and nature itself (everything).

A "global commons" is GPPP code for planet Earth, everything on it (including us) and all of its natural resources. The Earth and nature is the new commodity to be quantified, catalogued, divided and owned in the new global economy. It is not our planet, it is theirs. That is the claim of stakeholder capitalism.

In order for this global seizure of everything to work, we must be willing to accept this new state of affairs, recently termed the "new normal." This has been sold to us via the pseudopandemic.

We should be under no illusions as to what this means. In September 2020 the WEF put out a Great Reset <u>promotional video</u> [20] in which they stated "you'll own nothing and you'll be happy." What they meant was that the GPPP stakeholders they represent will own everything and they will be happy. Though "ownership," in the financial sense, is perhaps the wrong word. It is possession of the requirements for life that they seek, and the ultimate global dictatorial authority that comes with it.

The *parasite class* led GPPP are not imbued with god like omniscience. They are ordinary people, perfectly capable of making mistakes. Their promotional video backfired horrendously as it alerted a minority of millions to their *pseudopandemic* scam. The video was swiftly removed from the public domain.

It was inspired by an article, published by the WEF in 2016, originally titled "Welcome To 2030: I Own Nothing, Have No Privacy And Life Has Never Been Better." [21] Following the video calamity they changed the title of the article and added an explanatory note which did little to alleviate any misgivings. The realisation that this is the "thinking" behind stakeholder capitalism is a concern. You can still read the article with its original title, but only via Forbes [22].

The article was written by the former Danish Environment Minister, climate activist and WEF young global leader <u>Ida Auken</u> [23]. She presented the potential future where we will *own nothing and be happy*. Her explanatory note now says that she merely intended to start a debate and that her article did not attempt to describe a utopia. It certainly didn't, but the fact that she thought some might interpret it is such is baffling given the dystopian nightmare she described.

The U.N. Agenda 2030 <u>Sustainable Development Goals</u> [24] and associated SDG's are milestones along the path towards U.N. <u>Agenda 21</u> [25]. When GPPP stakeholders say they are committed to SDG's they mean *Agenda 2030*, in the short term, and ultimately *Agenda 21*. The most alarming aspect of Ida's article is not her suggestion that we might become AI controlled slaves whose lives are ordered by GPPP resource allocation, but that Agenda 21 (and 2030) contain the proposed legislative framework to make this hell a reality.

Agenda 21 has a lot to say about what it calls "human settlements." It lays out how they will be planned, constructed and managed by a public-private partnership. However, in constructing human settlements, human beings do not appear very high on the priority list. Objective 5.29 states:

"In formulating human settlements policies, account should be taken of resource needs, waste production and ecosystem health."

It isn't clear in either Agenda 21 or 2030 what will happen to the people who don't want to live in their allocated *settlement*. Ida may have been on to something when she wrote:

"My biggest concern is all the people who do not live in our city... Those who felt obsolete and useless when robots and AI took over.. Those who got upset with the political system and turned against it. They live different kind of lives outside of the city."

It appears that *human settlements* will be planned based upon resource allocation, waste management and environmental protections. This planning will be conducted by the democratically unaccountable public-private partnership (the GPPP). They will decide what resources the local settlement can access. Objective 7.30. d. states:

"Encourage partnerships among the public, private and community sectors in managing land resources for human settlements development."

Objective 10 of Agenda 21 spells out how land will be managed by the GPPP:

"The broad objective is to facilitate allocation of land to the uses that provide the greatest sustainable benefits and to promote the transition to a sustainable and integrated management of land resources.. evaluation systems for land and.. strengthen institutions and coordinating mechanisms for land and land resources"

Land will be allocated via GPPP management processes based upon sustainability goals. This will be supported by State franchise policy which will plan and evaluate land systems and resources. GPPP institutions will coordinate the mechanisms of this land allocation as the population transition to the new system.

This means the GPPP will have to manage everything to *keep us safe*. They will need to implement:

"Practices that deal comprehensively with potentially competing land requirements for agriculture, industry, transport, urban development, green spaces, preserves and other vital needs."

We won't be able to choose where we live due to "the adverse consequences of unplanned settlements in environmentally vulnerable areas." Therefore "appropriate national and local land-use and settlements policies" will be required for this purpose. This means the GPPP will have to create "protected areas."

This will necessitate supranational and global governance because "protected areas in transboundary locations" will cross national borders. The GPPP can

manage this if they "enhance the capacity of governmental and private institutions, at the appropriate level, responsible for protected area planning and management."

As Ida Auken envisaged:

"Nobody would dare to touch the protected areas of nature because they constitute such value to our well-being."

You certainly won't be able to build a house in a "protected area," or even near one, because the GPPP have to "promote environmentally sound and sustainable development in areas adjacent to protected areas with a view to furthering protection of these areas." They will extend the areas for protection through "appropriate land-use policies" and the introduction of "planning regulations specially aimed at the protection of eco-sensitive zones against physical disruption."

Privately owned land will also fall under the control of the GPPP as they seek to "encourage the conservation of biodiversity and the sustainable use of biological and genetic resources on private lands." In our sustainable future, where we own nothing, the idea is that we will be allowed to be "land users." Fortunately for us the GPPP will "establish appropriate forms of land tenure that provide security of tenure for all land users."

In order to divide the Earth's resources and allocate them to themselves the planet needs to be turned into assets with some sort of unit value. Agenda 21 explains how this process will occur:

"All countries should consider... undertaking a comprehensive national inventory of their land resources in order to establish a land information system in which land resources will be classified according to their most appropriate uses.. Build an inventory of different forms of soils, forests, water use, and crop, plant and animal genetic resources."

To protect the Earth from the harm caused by humanity, *population control* will be required. To ensure we stay away from "protected areas" and remain within the confines of out allocated "human settlements" a policy framework for the GPPP stakeholder management of the global population is proposed in Agenda 21:

"An assessment should also be made of national population carrying capacity. special attention should be given to critical resources, such as water and land, and environmental factors, such as ecosystem health and biodiversity. Population programmes should be consistent with socioeconomic and environmental planning. Population programmes should be implemented along with natural resource management and development programmes.. that will ensure sustainable use of natural resources."

The *population carrying capacity* of the nation will be calculated. Population programmes will be implemented to ensure the sustainable use of natural resources based upon that calculation.

Many people point out that Agenda 21, written in 1992, and Agenda 2030, produced in 2015, aren't treaties and can't be enforced in international law. They claim that they are simply an environmentalist's wish lists, based upon nothing more than the worthy intention to manage the *climate crisis* for the benefit of the whole of humanity.

This assumes the people who designed these sustainable goals share that concern and didn't, in fact, intend to exploit people's fear of climate change to further their own agenda. Regardless of their legal status Agenda 21 and 2030 have already had an immense global impact.

There is not a single policy area or administrative region in the entire developed world that hasn't been influenced by sustainable development. At a global policy level the obsession with Sustainable Development Goals is even more pronounced. They may be a *wish list* but they are *wishes* being enacted as hard policy everywhere.

We are about to discuss numerous examples of planned policy initiatives that have come to fruition as a result of the *pseudopandemic*. For example, SDG 11 (b) of Agenda 2030 states:

"By 2020, substantially increase the number of cities and human settlements adopting and implementing integrated policies and plans towards.. adaptation to climate change, resilience to disasters, and develop and implement, in line with the Sendai Framework for Disaster Risk Reduction 2015-2030, holistic disaster risk management at all levels."

The Sendai Framework for Disaster Risk Reduction [26], written in 2015, states:

"The recovery, rehabilitation and reconstruction phase, which needs to be prepared ahead of a disaster, is a critical opportunity to Build Back Better."

The *pseudopandemic* has substantially increased the global integration of plans to adapt to climate change and build resilience to disasters. Right on schedule, the *pseudopandemic* provided the GPPP with the opportunity to "Build Back Better." Fitting in perfectly with Agenda 2030 and Agenda 21.

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Chapter 14 - Population Control Eugenics

History and John Stuart Mill teaches us: "bad men need nothing more to compass their ends, than that good men should look on and do nothing."

The ugly reality exists and our desire to look away does nothing to address it. The *parasite class'* commitment to *population control* has a long history. Protecting the planet is just an excuse to pursue it.

Faith in their own divine right to rule gave them the conceit to assume the power of life and death. They sought to legitimise this through the <u>pseudo-science of</u> eugenics [1].

In 1798, the economist Rev. Thomas Robert Malthus published *An Essay on the Principle of Population As It Affects the Future Improvement of Society.* He ventured that human population would grow exponentially and outstrip the food supply, thus resulting in famine and political upheaval. In order to avert what his acolytes still see as the inevitable disaster, Malthusian doctrine declares that human population growth must be *limited*.

Malthusian thinking influenced Darwin's theory of evolution, first published in *the Origin of Species By Means of Natural Selection* in 1859. In the preface Darwin wrote that his theory was:

"An application of the theories of Malthus to the entire animal and vegetable kingdom."

Later, in his 1871 publication *the Descent of Man*, Darwin stated that *weaker races* would be diminished and potentially wiped out. Darwin saw war, famine, disease and other destructive forces as part of the process of *natural selection*.

In 1883 <u>Francis Galton</u> [2] (Darwin's cousin) coined the term *eugenics* to provide an alleged scientific basis for the highly dubious sociopolitical philosophy of <u>Social</u> Darwinism [3].

Social Darwinism advocated that human society functioned like a biological organism. Just as the *theory of evolution* suggested that the struggle for life resulted in adaptation which gave species physical advantages, so Social Darwinism claimed that society was also a biological system of sorts. It was competitive by nature and therefore individuals and cultures with better "social standing" would and should dominate. Thereby facilitating an ordered society for the *public good*.

Galton proposed the *law of ancestral heredity*. He believed that it wasn't just physical traits that were inherited but also a range of other attributes, from talents to morality.

Based upon his cousin's scientific ideas, he considered it possible to control human populations through selective breeding. Galton's *eugenics* was a social movement,

rather than a science. He advocated positive eugenics, breeding "good stock," and negative eugenics, limiting "defective stock." Thus Galton grandiosely defined eugenics as:

"The science of improving the human stock by giving the more suitable races or strains of blood a better chance of prevailing speedily over the less suitable."

The son of a banker, who despite considerable advantage didn't make the most of his education, Galton's predetermined intention was to use the scientific principles developed by others to justify the prevailing social order. In 1865 he published Hereditary Talent and Character [4]. Galton made it clear what his purpose was:

"The power of man over animal life, in producing whatever varieties of form he pleases, is enormously great. It would seem as though the physical structure of future generations was almost as plastic as clay, under the control of the breeder's will. It is my desire to show....that mental qualities are equally under control."

Galton believed nature, rather than nurture, determined good character, morality and intellectual superiority. Qualities he attributed in abundance to the ruling class of which he was a part. He set about proving his own conviction that it was the philanthropic duty of his class to control the population through selective breeding.

In <u>Hereditary Genius</u> [5] (1869) he attempted to provide a scientific rationale for his hypothesis. Galton wasn't particularly innovative. His notion of hereditary characteristics was based upon Darwin's concept of *inheritance* and the experiments of Gregor Mendel, who described *dominant* and *recessive traits* in his work with the selective breeding of pea plants.

We now know that genes determine a wide variety of characteristics in human beings. There is evidence that genes <u>can affect our behaviour</u> [6], predisposing us towards gregariousness, empathy or aggression for example. To this limited extent, some of Galton's wider theories had some merit.

However, eugenics itself was pure *pseudo-science*. It was formed from little more than a series of assumptions drawn primarily from the misinterpretation of other's ideas. It deployed meaningless terms to describe assumed genetic characteristics that didn't exist. Social deprivation was not the consequence of injustice or subjugation but rather "bad breeding." Other allegedly *undesirable* characteristics such as disability, psychiatric disorders and substance dependence were equally considered the product of *unsuitable* breeding among the *defective stock*.

Today we know that genes do not express themselves (take effect) in isolation of our environment. <u>Epigenetic modification</u> [7] is the process by which our environment, and the resultant physiological and psychological effects, alter gene expression. There is an intricate relationship between combined gene expression,

life events, environmental stimulus, biological disturbance and more which determines how genes impact our lives.

Eugenics lent itself to, and was eagerly adopted by those who considered themselves the rightful *leaders* of society. Those born to rule, with their attributes of genius, temperance and foresight had a duty to dominate society for the *public good*. It was vital that the *good stock* prevail.

Therefore steps must be taken to ensure that the *good stock* proliferate while the *bad stock*, those who serve no *useful purpose*, should be eliminated. The promise of some "scientific" justification for imperialism, colonialism, racism and the tyrannical control of the masses was warmly welcomed by those who profited from these practices.

Despite it being unmitigated nonsense, as we shall see, those who consider themselves our rightful rulers still cling to this drivel today. Over the next 150 years the eugenic faithful had to adapt their ideas, repeatedly renaming their cult beliefs. They invented new causes to sell their xenophobia to the public.

If we accept that the *parasite class* consider most of humanity to be "defective stock" and wish to depopulate the planet, their actions can clearly be seen to consistently work towards such ends. However, in order to be able to see this unpalatable truth we first need to understand how it has evolved.

By the 1920's the enthusiasm for eugenics had given rise to mass forced sterilisation programs in the US and elsewhere [8]. The poor were seen as *feckless, imbecilic* or *degenerate*. A drain on the national economy to be limited wherever possible.

In the 1927 case of *Buck vs Bell* the US Supreme Court found that the mandating of forced sterilisation in Virginia was not contrary to the US constitution. In the ruling <u>Justice Wendell Holmes inr. stated</u> [9]:

"It is better for all the world if, instead of waiting to execute degenerate offspring for crime or to let them starve for their imbecility, society can prevent those who are manifestly unfit from continuing their kind. The principle that sustains compulsory vaccination is broad enough to cover cutting the Fallopian tubes."

The case itself, like Malthusian beliefs, Social Darwinism and eugenics, <u>was spurious</u> [10]. It was concocted to gain State franchise legitimacy for the eugenic agenda promoted by the Rockefeller and Carnegie foundation, who funded the *Eugenics Record Office (ERO)* and other *"elite"* eugenic societies and foundations.

In 1922 The American Eugenics Society (AES) formed with the generous support from members of the *prestigious* Galton Society of America. AES members included Margaret Sanger who was instrumental in the creation of the <u>Citizen's Committee for Planned Parenthood</u> [11]. Sanger would go on to become the founder of <u>Planned Parenthood</u> [12].

Speaking in a 1957 TV Interview with Mike Wallace, Sanger said:

"I think the greatest sin in the world is to bring children into the world that have disease and have parents, that have no chance in the world to be a human being, practically; delinquents, prisoners, just marked when they are born. That to me is the greatest sin people can commit."

We have every reason to believe Sanger meant every word. In her 1922 publication *Women and the New Race* [13] she wrote:

"The most merciful thing that the large family does to one of its infant members is to kill it."

Sanger and Planned Parenthood, along with the Population Council and other eugenic organisations and foundations, presented their eugenicist ambitions as altruistic. In Sanger's case she promoted birth control primarily as an issue of female emancipation and latterly women's rights. Like most members of the *parasite class* she was careful to shroud her ideology in the pretence of playing the concerned citizen.

While there are many social benefits to birth control, the individuals behind most of the world's leading *family planning* charities and NGO's were and are eugenicists. This doesn't mean that the people who staff these organisations have an *evil agenda* but it is an obvious fact that birth control leads to population reduction. Sanger had little interest in improving the lives of millions. She was focused upon ending them.

It is not unreasonable to question why multinational corporate members of the GPPP are <u>supporters of Planned Parenthood</u> [14] and other similar organisations. Do they fund them because they care about a woman's right to choose or could it be that they are committed to *negative eugenics* intended to rid society of "defective stock?"

By framing their charitable works in seemingly benign terms, and offering what appear to be humanitarian programs, we are deceived and unable to recognise the insidious agenda lurking beneath. Although we have <u>Sanger's own words</u> [15] through which to view it:

"All of our problems are the result of overbreeding among the working class."

But it wasn't just the working class that Sanger and her fellow eugenicists wished to eliminate. She was an ardent racist:

"Birth control is not contraception indiscriminately and thoughtlessly practiced. It means the release and cultivation of the better racial elements in our society, and the gradual suppression, elimination and eventual extirpation of defective stocks— those human weeds which threaten the blooming of the finest flowers of American civilization."

Sanger of course saw herself as one of the "finest flowers." While she was definitely a racist we cannot really call her a white supremacist. The white poor were also to be eradicated. Sanger found virtue only in her own narrow class of wealthy eugenicists. Clearly she was incapable of empathy or compassion: sociopath seems a fitting description.

A co-signatory to the Citizens Committee On Planned Parenthood was the cofounder of the American Eugenics Society Frederick Osborne. In 1952 <u>John D.</u> <u>Rockefeller III</u> [16] set up the Population Council where he remained its president until he was succeeded in 1957 by Osborne. The Population Council says of itself:

"From its beginning, the Council has given voice and visibility to the world's most vulnerable people......We work in developed countries, where we use state-of-the-art biomedical science to develop new contraceptives and products to prevent the transmission of HIV."

"From its beginning" the Population Council was an avowedly eugenicist and racist organisation. The people behind it considered "the world's most vulnerable people" to be "human weeds."

These population control organisations present a complex reality. Providing access to contraception or attempting to limit our collective impact upon the environment aren't acts of *evil*. A woman does have the right to take control of her own fertility, but it must be her informed choice; we have misused natural resources and we have caused environmental damage, which we need to reduce and rectify where possible.

The problem is that these compartmentalised, authoritarian organisations are controlled by people, with an undeclared ambition, who don't care about these issues. They possess the means to limit and control the scientific and academic research upon which those with misguided but humanitarian intentions base their decisions and policies.

The *parasite class* appoint *informed influencers* who manipulate organisations from within. In this way even those who mean no harm can contribute to the sum of parts which collectively work towards malevolent objectives, simply by following policy and instructions.

The parasite class commitment to eugenics lies at the heart of many powerful global institutions. For example the *evolutionary biologist* Julian Huxley was instrumental in the formation of the United Nations Educational, Scientific and Cultural Organization (UNESCO.) He wrote its <u>preparatory commission document</u> [17] and stated:

"It is, however, essential that eugenics should be brought entirely within the borders of science, for, as already indicated, in the not very remote future the problem of improving the average quality of human beings is

likely to become urgent; and this can only be accomplished by applying the findings of a truly scientific eugenics."

This does not mean that everyone who has ever worked on a UNESCO project is a eugenicist or even understands what eugenics is. However, eugenics is a founding principle of UNESCO and there are those who wield influence over it who both appreciate *eugenics* and remain committed to it.

1952 also saw the creation of the <u>International Planned Parenthood Federation</u> [18] (IPPF), based in London and focusing on population control in developing nations. It was formed by a resolution of the <u>Third International Conference on Planned Parenthood</u> [19]. The conference was convened at the invitation of the Indian branch of the UK Family Planning Association (FPA).

Sanger was the inaugural president of the IPPF. Today, the IPFF works on projects in partnership with intergovernmental organisations like the WHO, the United Nations Development Program (UNDP), the United Nations Children's Fund (UNICEF), the United Nations Population Fund (UNFPA), and the Organization for Economic Co-operation and Development (OECD).

The FPA was founded in 1939 by the National Birth Control Council in the UK. Then chairman of the Malthusian League, Dr Charles Vickery Drysdale was instrumental in its formation. As was the famous *women's rights* campaigner Marie Stopes. Both Stopes and Drysdale cited Sanger as a strong influence on their views.

Like Sanger, Stopes exploited legitimate concerns about female emancipation and women's health rights to advance her racist and eugenicist ideas. Stopes joined the Eugenic Society (now renamed the Galton Institute) in 1912. Other prominent members have included the economist John Maynard Keynes and the aforementioned scientist Julian Huxley.

In her 1924 book *Radiant Motherhood*, in a chapter titled <u>A New And Irradiated</u> Race [20], Stopes wrote:

"When Bills are passed to ensure the sterility of the hopelessly rotten and racially diseased...our race will rapidly quell the stream of depraved, hopeless and wretched lives which are at present increasing. Such action as will be possible when these bills are passed will not only increase the relative proportion of the sound and healthy among us who may consciously contribute to the higher and more beautiful forms of the human race, but by the elimination of wasteful lives....will check an increasing drain on our national resources."

This is the essence of the eugenicist ideals. They see themselves as the only possible leaders of society and believe vast swaths of humanity are nothing more than a drain on resources which naturally, and rightfully, belong to them. Their faith in their own physical and intellectual superiority, though entirely misplaced,

demands of them that they act. Thus saving humanity (and now the planet) is predicated upon the assumption that most people must be wiped out.

In 1935 Stopes attended the Third Reich's *International Congress for Population Science* in Berlin. An admirer of Hitler and a firm believer in the creation of a master race, she sent the Fuhrer some of her love poetry and, at the height of the Holocaust, <u>penned this little ditty</u> [21]:

"Catholics and Prussians, The Jews and the Russians, all are a curse, or something worse..."

The Rockefeller's were also keen supporters of the German eugenicists. They funded Germany's Kaiser Wilhelm Institutes (KWI's). Leading beneficiaries of their largess included the KWI's head of research Ernst Rüdin. He helped to draft the 1933 German Law for the Prevention of Defective Progeny [22]:

Eventually, under Nazi rule, eugenics led to its natural conclusion with the *Rassenhygiene* (racial hygiene) movement used by the Nazi's as their insane justification for the Holocaust. It also informed the Nazi's <u>Aktion T4</u> [23] program which murdered 70,000 German children, senior citizens, and psychiatric patients between 1940 and 1944.

Following WWII, unsurprisingly, *eugenics* fell out of public favour. However, the ideological adopters of eugenics didn't change their beliefs, they merely re-branded them.

During the 1950's the American Eugenics Society (AES) moved into offices provided to them by the Population Council. The Population Council also continued to fund their eugenicist and Malthusian research, absorbing the AES into the organisation in 1972.

Recognising that the public were no longer willing to entertain eugenics, in 1968, by then a Population Council serving board member and no longer president, Frederick Osborne said [24]:

"Measures for improving the hereditary base of intelligence and character can be made effective on a voluntary basis without arousing in the individual any conscious concern for eugenic results. It is well that this is so. Eugenic goals are most likely to be attained under a name other than eugenics."

Always intent upon deception, with the emergence of genetic science, in 1972 the American Eugenics Society (AES) became the Society for the Study of Social Biology and changed its quarterly magazine from *Eugenics Quarterly* to *Social Biology* and now *Biodemography and Social Biology* [25]. The AES stated [26]:

"The name change of the Society does not coincide with any change of its interests or policies."

This practice of hiding eugenicists beliefs by changing names and inventing new justifications was also popular across the Atlantic. In 1989 the British Eugenics Society changed its name, but not its purpose, to the Galton Institute [27]. They also changed their quarterly publication from the Eugenics Review to the Galton review.

In 1972 the GPPP policy think tank the *Club of Rome*, published their inaugural treatise <u>The Limits To Growth</u> [28]. It is perhaps the first time that a highly questionable computer model, producing a poorly evidenced, ill conceived interpretive conclusion, had truly global significance. A technique which Imperial College London would later go on to perfect.

Based on their "projections" the Club of Rome, who first convened in 1968 at the Rockefeller's private estate in Bellagio, decided that continual economic growth could not be sustained in conjunction with population growth. The problem, as ever, was that there were just too many people. Something needed to be done.

Just as the *pseudopandemic* suppression model is supposedly a scientific certainty today, so *The Limits To Growth* claimed legitimacy from the scientific consensus of the 1970's. In 1968 the biologist and ecologist <u>Paul Ehrlich</u> [29] and his wife Anne (Club of Rome member) published *The Population Bomb*. This had a significant global impact. Primarily because it was touted by the mainstream media wherever possible.

The Ehrlichs predicted famine, economic collapse, war, disease and climate change as a consequence of uncontrolled population growth. The solution they suggested was a global government administered program of <u>population control</u> [30]. The introduction to the Population Bomb began with the words:

"The battle to feed all of humanity is over. In the 1970s and 1980s hundreds of millions of people will starve to death"

Like all advocates of eugenics and Malthusian inspired *population control*, the Ehrlich's were unreservedly wrong. While Anne Ehrlich continued her policy think tank work behind the scenes, Paul Ehrlich was elevated to the status of global academic superstar. Interviewed the world over, proselytising his eugenic inspired nonsense to the world and universally feted in the mainstream media (MSM). In an Interview with the New York Times in 1969, he said:

"Government might have to put sterility drugs in reservoirs and in food shipped to foreign countries to limit human multiplication."

In 1974 the *scientific consensus* on population control emboldened then US Secretary of State Henry Kissinger to commission and contribute to a report by the US National Security Council called the <u>National Security Study Memorandum 200</u> [31] (NSSM-200), often referred to as *the Kissinger Report*. He argued that maintaining access to the mineral wealth in least developed countries (LDC's) was

essential for continued US economic expansion. The population growth in these poorer nations was therefore a problem which needed to be controlled.

Kissinger recommended that the U.N. should instigate population control policies with support from the broader GPPP:

"Assistance for population moderation should give primary emphasis to the largest and fastest growing developing countries......the U.S. will look to the multilateral agencies, especially the U.N.. Fund for Population Activities.....In population reduction programs, external technical and financial assistance....would have to come from other donors and/or from private and international organizations......Wherever a lessening of population pressures through reduced birth rates can increase the prospects for..stability, population policy becomes relevant to resource supplies and to the economic interests of the United States."

Using the same trick as the American Eugenics Society, population reduction (negative eugenics) was relabelled "family planning."

"Most experts agree that, with fairly constant costs per acceptor, expenditures on effective family planning services are generally one of the most cost effective investments for an LDC....We cannot wait for overall modernization and development to produce lower fertility rates naturally."

In 1977 Paul and Anne Ehlrich published "Ecoscience" with John Holden [32], who President Barack Obama later appointed as Director of the White House Office of Science and Technology Policy. Maintaining the eugenic tradition, they recommended forced abortion, government custody of children born to single parents, mass sterilisation of the population, State mandated birth control and the denial of the right to a family for those deemed to cause "social deterioration."

For this fascist, technocratic policy to succeed the Ehrlichs and Holden stated that a regime of global governance would be required:

"Perhaps those agencies, combined with UNEP and the United Nations population agencies, might eventually be developed into a Planetary Regime—sort of an international superagency for population, resources, and environment. Such a comprehensive Planetary Regime could control the development, administration, conservation, and distribution of all natural resources, renewable or nonrenewable......The Regime might also be a logical central agency for regulating all international trade.....including all food on the international market."

In 1987 the Brundtland Report (<u>Our Common Future</u> [33]) was released by the U.N.. <u>Gro Harlem Brundlandt</u> [34] was by then the Prime Minister of Norway, but had previously been appointed chair of the World Commission on Environment and Development (WCED) by the Secretary-General of the United Nations, Javier Pérez

de Cuéllar. Both Javier Pérez de Cuéllar and Gro Harland Brundlandt were members of the Rockefellers Club of Rome.

The Report Stated:

"Excessive population growth diffuses the fruits of development over increasing numbers instead of improving living standards in many developing countries; a reduction of current growth rates is an imperative for sustainable development..... a nation proceeds towards the goals of sustainable development and lower fertility levels, the two are intimately linked and mutually reinforcing."

Public outcry following the Nazi's atrocities compelled the *parasite class* to continually rebrand eugenics, often by obscuring it within other causes. In climate change, as with COVID 19, they found an opportunity to remodel the world as they wished. Always searching for an existential threat with which to terrorise the population into acceptance of their global governance, human induced global warming suited their purposes perfectly.

In 1991 the Club of Rome published the <u>First Global Revolution</u> [35]. In it they revealed how they resolved the eugenicists sales pitch problem:

"In searching for a common enemy against whom we can unite, we came up with the idea that pollution, the threat of global warming, water shortages, famine and the like, would fit the bill. In their totality and their interactions these phenomena do constitute a common threat which must be confronted by everyone together. But in designating these dangers as the enemy, we fall into the trap....namely mistaking symptoms for causes. All these dangers are caused by human intervention in natural processes, and it is only through changed attitudes and behaviour that they can be overcome. The real enemy then is humanity itself."

A global threat, defined by the *science* they selectively funded and controlled, one requiring not only global governance but literal population control through behaviour change, was a *parasite class* eugenicist's dream come true. Unfortunately for the rest of us, not only were their beliefs about population potentially lethal they were completely wrong. The last thing any of us need to solve the alleged *climate crisis* is centralised global governance and GPPP *stakeholder capitalism*.

We undoubtedly face "global issues" requiring "global solutions," but rather than working together, each of us acting in our own best interests, utilising the vast span of human knowledge, experience and expertise to address our problems, we are instead allowing a tiny clique of unimaginably wealthy individuals to dictate those solutions to us.

The population control eugenicists in the Club of Rome, and their salesmen like Paul Ehrlich, were and are talking nonsense. Not only does eugenics fail

scientifically, the planet is neither overpopulated nor facing a population crisis. At least not the one described by the GPPP.

We should have figured this out, but propaganda and *dezinformatsiya* are powerful weapons. Ehrlich predicted that the 1980's would see 4 Billion people starve to death and that England wouldn't exist by 2000. These are just a couple of examples of the doom laden soothsaying he, and all the other eugenicists, consistently engage in. In terms of being almost perfectly incorrect he is one of the few "scientists" who can rival Neil Ferguson.

Suspecting that they might be talking out of their hats, the experimental psychologist, business economist and statistician <u>Julian Simon</u> [36] thought he would do something the world's MSM, the scientific orthodoxy and political class were incapable of. He checked the data to see if there was any basis for the Ehrlich's, and other *population bomb* mythologists, claims.

He discovered that there was no evidence. In *The Ultimate Resource* Simon used extensive economic and statistical analysis to clearly demonstrate that human ingenuity and scarcity in a free market (supply and demand) combined to make population growth the driver of resource utilisation. The Ehrlich's view of human beings, as little more than a drain on precious natural resources, entirely overlooked an inconvenient truth (from a eugenicist's perspective.)

Human ingenuity is the fountain of all <u>scientific, technological and social</u> <u>advancement</u> [37]. The more people there are, the greater the talent pool. The more scientists, engineers, philosophers, teachers, doctors, academics, farmers, nurses and labourers that exist, the higher the productivity and greater the efficiency.

Population growth, far from being the harbinger of doom, has consistently been the catalyst for economic development and technological advancement. It is also a self-regulating mechanism and nothing to be in the least bit concerned about. The problem is not the number of people, it is their deliberately restricted access to resources.

<u>For example</u> [38], since 1970 the population of India has grown from 550 million to around 1.2 billion today. Yet, <u>until the pseudopandemic</u> [39], famine had reduced, millions had been lifted out of poverty, the middle class expanded significantly and life expectancy increased from 49 to 65 in the same period.

This trend has been reflected globally. Between 1960 and 2016 the global population more than doubled. Yet we saw less hunger, less disease, less poverty, improved access to education, higher standards of public health, immense technological innovation and an expanding global economy. The *pseudopandemic* was designed to end this trend.

It is worth revisiting the wise words of George Carlin [40]:

"They want obedient workers. Obedient workers, people who are just smart enough to run the machines and do the paperwork. And just dumb

enough to passively accept all these increasingly shitty jobs with the lower pay, the longer hours, the reduced benefits."

The parasite class *stakeholder capitalists* do not want a well-educated, invigorated population demanding social and political change. They particularly do not want them to have unfettered access to the *global commons* they consider to be rightfully theirs.

However, from humanity's standpoint it is antithetical to the concept of social progress to deliberately limit available human and other resources. In her 1965 work *The Conditions of Agricultural Growth* [41] Danish economist Ester Boserup demonstrated, quite literally, that necessity drove technological innovation and efficiency.

Like Malthus, Boserup's focus was upon agriculture and she presented the data which showed that as the Earth's population grew it produced more food through better utilisation of land and improved farming techniques. Boserup demonstrated that, contrary to the *population control* lie, the human population was not a resource cost.

Boserup and Simon were right, the Ehrlichs and Malthus were wrong. When Malthus formulated his hypothesis the global population was approximately 800 million. Today it stands at 7.9 billion. Overpopulated by more than 5 billion people, according to the Ehrlichs. However, food production has continually outstripped population growth.

According to the World Bank [42] in 2015 food loss and waste (FLW) was estimated to be around 30% of the global food supply, equating to 1.3 billion metric tonnes per year. Yet by 2019 the UN's annual Food and Agriculture Organization (FAO) review [43] estimated that an additional 60 million people had suffered food scarcity since 2014, with more than 690 million people undernourished.

You would imagine that it would be patently obvious that the problem was not food production but rather distribution. We aren't incapable of producing the food the global population needs but rather have allowed *stakeholder capitalist* to protect a rigged commodity market to garner profit from tax payer subsidy and waste.

Having identified the FLW problem, people dying from starvation and malnutrition was not the first problem that sprang into the minds of the World Bank:

"FLW is a widespread issue, posing a challenge to food security, food safety, the economy, and environmental sustainability......It strongly contributes to climate change because greenhouse gases are emitted during food production and distribution activities, and methane is released during the decay of wasted food."

The World Bank did not see FLW as a missed opportunity to feed those in need. They saw it as a carbon cost which threatened sustainable development.

For the World Bank to consider FLW an issue of economic concern is expected, but for them to view it primarily a problem of security, sustainability and global warming suggests an ideological commitment to these concepts rather than any practical prioritisation of need. There is further reason to suspect this is the case.

The 2015 high level plenary on Millennium Goals led to the U.N. General Assembly Agenda 2030 resolution called "<u>Transforming our world: the 2030 Agenda for Sustainable Development</u> [44]. The U.N. Stated:

"We are determined to protect the planet from degradation, including through sustainable consumption and production, sustainably managing its natural resources...The scale and ambition of the new Agenda requires a revitalized Global Partnership to ensure its implementation. We fully commit to this. This Partnership will work in a spirit of global solidarity.....bringing together Governments, the private sector, civil society, the United Nations system and other actors and mobilizing all available resources....The task team will initially be composed of the entities that currently integrate the informal working group on technology facilitation, namely....the United Nations Environment Programme, the United Nations Industrial Development Organization, the United Nations Educational, Scientific and Cultural Organization.....the World Intellectual Property Organization and the World Bank."

There are many who believe the climate presents a threat to our existence. However, the alarming *projection* of the *climate scientists*, such as the 2000 claim by the Climatic Research Unit (CRU) at the University of East Anglia that UK snowfall was a <u>thing of the past</u> [45], or UNEP's claim that there would be 50 million *"climate refugees"* [46] by 2010, have not materialised.

Regardless of whether or not to you accept the anthropogenic global warming hypothesis, the fact is the GPPP (including the World Bank) are leading the development of the new global, carbon neutral, net zero economy. It is manifestly naive not to at least consider the possibility that saving the Earth may not be their entire motivation.

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Chapter 15 - Sustainable Eugenics

Another unquestioned *scientific consensus* is that man made global warming (anthropogenic climate change - AGW) is leading us all towards global disaster. Like the *pseudopandemic*, this is based upon predictive computer models, not the scientific observation of measurable events. *Overpopulation* is a climate alarm threat, but only according to the models.

If the people promoting global sustainable development have a proven historical commitment to eugenics and population control, perhaps we should question this claimed scientific consensus. If, in addition, sustainable development goals also strengthen their authority and enable those same people to achieve other stated aims we have further grounds for scepticism.

Sustainable Development Goals, to save the planet, apparently also require the <u>Climate Bond Initiative</u> [1] (CBI). This is intended to be a \$100 +trillion bond market to invest in "protecting" the global commons. Until very recently worldwide interest rates have been <u>extremely low</u> [2] and yet, at the same time, the CBI was offering between an 8% - 12% yield for venture capitalist *stakeholders*.

The idea of commodifying nature was first formally proposed by then chairman of Banque Privée, Edmond de Rothschild, at the 4th World Wilderness Conference [3] in 1987. This introduced the Rothschild backed Bank the Global Environment Facility [4] (GEF – named in 1991) initially as a subsidiary, and then later as a partner of the World Bank. Announcing his idea, Edmund de Rothschild said:

"The concept of an international conservation banking program involves all sectors of the human community. Governmental and intergovernmental agencies, the public and private agencies, large charitable foundations, as well as ordinary individuals worldwide. By thinking forward as to how to reach out to the public at large, to every corporate entity throughout the world, to put aside, hopefully tax free, a part of their profits to fund our ecological and environmental protection. This international conservation bank must know no frontiers, no boundaries."

This was a clarion call to the GPPP to set about the creation a new global economic system. One where investment was measured in terms of its *ecological and environmental value*. The *stakeholder capitalists* at the meeting recognised the need to sell this idea to the public. Another delegate, Montreal banker David Lang, suggested the following approach:

"I suggest therefore that this be sold, not through a democratic process, that would take too long and devour far too much of the funds to educate the cannon fodder, unfortunately, that populates the earth. We have to take almost an elitist program, [so] that we can see beyond our swollen bellies, and look to the future in time frames and in results which are not

easily understood, or which can be, with intellectual honesty, be reduced down to some kind of simplistic definition."

Despite the fact that Mr Lang couldn't form a coherent statement, his *elite* intellect enabled him to appreciate the eugenicist sentiments of those gathered. The cannon fodder's (human beings) existence was *unfortunate*. David Rockefeller, undoubtedly in full agreement with Lang, was also present at the conference.

This explains why the Rockefellers, staunch eugenicists and arguably the wealthiest oil tycoons in history, are funding the CBI. They are devoted to the so called Green New Deal and pledged \$1 billion to fund a *sustainable* and, of course, *inclusive* green COVID 19 recovery [5]. Something the world's MSM reported without an ounce of scrutiny or indeed irony.

The man behind the Club of Rome, David Rockefeller, whose brother founded the Population Council, speaking to the Business Council of the United Nations in 1994, said:

"The negative impact of population growth on all of our planetary ecosystems is becoming appallingly evident. The rapid and growing exploitation of the world's supply of energy and water is a matter of deep concern.....The United Nations can and should play an essential role in helping the world find a satisfactory way of stabalising the world population."

It must be another, in a never ending succession of extraordinary coincidences, that the people who are the architects of the new global *zero carbon economy* are also the same people who are devout eugenicists and population control enthusiasts. That many of the same are also the driving force behind the *pseudopandemic*, the economic outcome of which is almost indistinguishable from the proposed carbon neutral economy, is just another almost unbelievable coincidence.

None of the financial infrastructure under rapid construction has anything to do with saving the planet. CBI stakeholder capitalists are receiving a healthy return on their investment because a global system of environmental taxation [6] is being constructed to subsidise green technology and sustainable development. Continuing the process of transferring wealth from the population to the parasite class.

Once again, in response to another *invisible* threat, the tax paying *cannon fodder* are among the commodities being traded. It seems some things never change.

The Rockefeller's (Club of Rome) determination that humanity is the enemy is only a self-defeating paradox if you consider yourself part of humanity. If you believe, as the *parasite class* do, that you are a breed apart, then human beings are little more than livestock to be farmed. If the eugenicists commitment to *population control* was really about building a better *sustainable*, *inclusive* and *diverse* global economy,

then by far the best thing they could do is stop hoarding capital and misusing it to exert economic control over the rest of us.

The evidence strongly suggests that there is a direct correlation between population growth and economic development. We only need to look at India to see this process in action. Among the many research papers pointing to this reality, a 2013 study looking at economic development in Kenya, published in the International Journal of Economics & Management Sciences [7], concluded:

"The results indicated population growth and economic growths are both positively correlated and that an increase in population will impact positively to the economic growth in the country. The study concludes that in Kenya population growth promotes economic growth and subsequently economic development."

It is also beyond doubt that <u>economic development mitigates population growth</u> [8] as people generally elect to have fewer children when resource availability is optimal. Other species tend to <u>limit their populations</u> [9] according to resource availability either through gene expression, that reduces fertility, or by dying off. Human beings are unusual in that they use their intellect to control their own reproduction.

Our innate capacity to innovate practically defines us as a species. The sum of our collective knowledge and expertise drives greater productivity and innovation. The most valuable resource on Earth is humanity itself.

Yet freeing up the global economy is not the kind of philanthropy the *parasite class* are invested in. In fact, in global terms, philanthropic giving has long been a deception to blind us all to theft. Nor are they actually interested in any genuine humanitarian benefit from their *population control* ruse.

For us to continue to allow the hoarding of capital by a tiny clique of self-appointed rulers, especially if that capital is transformed into the *shared resources* that *all life relies upon*, is global, collective insanity. It has led the most avid, if clueless, climate change zealots to <u>seriously advocate cannibalism</u> [10]. This literally suicidal approach to resource management is inefficiency personified.

Instead of allowing the natural evolution of the global population, and reaping the benefits, enforced *population control* by authoritarian diktat of the eugenicists has done nothing but create problems. In 1969 the <u>United Nations Fund for Population Activities</u> [11] came into being. Despite their subsequent denials, the UNFPA were <u>significant contributors</u> [12] to China's disastrous "*one child policy.*"

Following the application of their brutal population control measures, wholeheartedly endorsed by the U.N..'s eugenicist affiliates, China are now facing a demographic nightmare. The male population in China far exceeds the female population, the working age population has collapsed while the retirement age group has ballooned by comparison.

In 2014 the Chinese government were forced to acknowledge that their working age population is now in decline. The same problem is faced <u>across Asia</u> [13] the US, Central & South America and Europe.

The Kissinger Report resulted in <u>all manner of atrocities</u> [14], not just in China. Among a litany of eugenic crimes, it led to the forced sterilisation of Peruvian women, proliferation of the Ugandan AIDS epidemic and what amounted to female euthanasia in India.

Fertility rates have <u>plummeted across the world</u> [15]. In 1950 the average number of live births per woman stood at 4.5, by 2017 it was 2.4. Population growth is slowing to a crawl. Despite Malthusian fears, the U.N. predict it will only grow by about 39%, to reach <u>an estimated 11 billion</u> [16], by the end of the century.

Given that we already have more than a 20% wasted global food surplus, even if we don't increase food production efficiency, which is extremely unlikely, there is no reason to fear future food shortages. However, this assumes we collectively act in our best interests and adapt sensibly to climate change. This shouldn't be any cause for alarm. We have been adapting to climate change for thousands of years.

Alas, sensible adaptation is not what the GPPP wants. Instead they see *global warming* as an opportunity. They intend to capitalise nature itself, seize control of every natural resource on Earth, hoard them and mete them out to the population in exchange for their obedience. They propose nothing short of global, corporate slavery.

They don't care that the overpopulation crisis is a myth, or that the real crisis is an aging population. Modern manufacturing technology has meant they no longer need our labour. Getting rid of the older generation as quickly as possible and collapsing the birth rate further, is fine by the *parasite class*. Our only value to them now is as consumers and once they have the power to allocate to themselves as much of the Earth as they want, they won't really need to sell us anything either.

This explains their unshakeable, continuing commitment to population control. Which, in reality, has always meant population reduction. Again, we can use the Bill and Melinda Gates foundation (BMGF) to take a glimpse at this eugenic obsession.

Speaking to Bill Moyers, in a PBS interview recorded in 1998 [17], Bill Gates Said:

"When I was growing up, my parents were always involved in various volunteer things. My dad was head of Planned Parenthood. And it was very controversial to be involved with that. And so it's fascinating. At the dinner table my parents are very good at sharing the things that they were doing..... So I always knew there was something about really educating people and giving them choices in terms of family size."

Bill Gates' father was active in the early days of Planned Parenthood, as it started to re-brand the American Eugenics Society, and was a long-time board member

alongside Sanger. In an <u>interview with Salon magazine</u> [18] William H Gates snr. spoke tenderly about his son's fascination with population control:

"It's an interest he has had since he was a kid. And he has friends who are interested in supporting research into world population problems, people whom he admires -- it's just a matter of a fit between his proclivities and mine."

In 1999, shortly before formally launching the BMGF, in an interview <u>with George</u> magazine [19], Bill said:

"I fund education projects, I fund population control."

Certainly the BMGF have been very generous in their support for eugenicist organisations. Since 2017 they have donated \$22 million to <u>Planned Parenthood</u> [20] and more than \$18 million to the Population Council.

In 2010 Bill gave a TED talk titled "Inovating To Zero." Bill's proclivities extend beyond eugenics. He is also very worried about climate change, food security and other humanitarian concerns. In the talk Bill said:

"The world today has 6.8 billion people. That's headed up to about nine billion. Now, if we do a really great job on new vaccines, health care, reproductive health services, we could lower that by, perhaps, 10 or 15 percent."

Bill was talking about the fact that improved healthcare leads to a lower birth rate. This is true, but as we have just discussed that improved healthcare comes from economic development, not vaccines. It isn't clear whether Bill knew the human fertility rate had been dropping like a stone for 60 years when he said he could assist it to drop further using "vaccines."

His passion for solving the *population problem* is shared by his former wife and foundation partner Melinda. In a 2010 CBSNews 60 Minutes promotional piece for the BMGF, she said:

"If you get into this work and you start to save these children will women just keep overpopulating the world? Thank goodness the converse is absolutely true.....if she knows that two will survive into adulthood she will naturally bring down her population.....We're seeing that play out in all the population numbers across the globe. In fact the population rate is coming down faster than predicted 10 years ago."

As we have repeatedly discussed, Bill and Melinda Gates are not acting alone. Like the Ehrlich, Rockefeller, Schwab, Carnegie, Rothschild and Koch families they are part of a parasitic global network which has evolved politically, economically and culturally over millennia.

They are what Council on Foreign Relations member and academic David Rothkopf described, in appreciative terms, as the *Superclass*. Although there is nothing *super* about slavery, usury, bribery, coercion, deceit and genocide. They are a group of perhaps a few thousand who are, as <u>Rothkopf pointed out</u> [21], "people who influence the lives of millions across borders on a regular basis."

The eugenics strain within the GPPP also continues to evolve. From the beginning, the only offered solution to the *pseudopandemic* was vaccination. Despite possible alternative treatments, vaccines were always the *crux* of the campaign. The new normal, for the greater good, is the biosecurity State and vaccines are essential if it is going to work.

The world biosecurity State will serve the capital (global commons) interests of the GPPP. Our conditional participation will only be permitted while we comply with the orders handed down to us by our rulers: the *stakeholder capitalists*.

The new biosecurity normal is intent upon removing our bodily autonomy. The *core conspirators* do not merely wish to control the population, they mean to alter it. This is no secret, no hidden agenda. It is as blatant as any ideology proudly declared by members of any cult.

In his 2016 book The Fourth Industrial Revolution, Klaus Schwab wrote:

"The mind-boggling innovations triggered by the fourth industrial revolution, from biotechnology to AI, are redefining what it means to be human....Already, advances in neurotechnologies and biotechnologies are forcing us to question what it means to be human"

In 2018 he elaborated further on these ideas. In *Shaping the Future of the Fourth Industrial Revolution* he wrote:

"Fourth Industrial Revolution technologies...will become part of us.....Today's external devices...will almost certainly become implantable in our bodies and brains....We will become better able to manipulate our own genes, and those of our children."

This may seem like the day dreams of a sci-fi addict, which it probably is, but Klaus Schwab is a key figure in the class who have the means, the opportunity and the motive to direct technological and scientific research and development. Much of what he described is already science fact, not fiction. The US Defence Advanced Research Projects Agency (DARPA) openly admits the advances it has made in Brain Computer Interface [22] (BCI) technology.

The policy framework to facilitate this cybernetic transformation of human beings has already been proposed. The Canadian State franchise policy think tank *Policy Horizons Canada* published their report, <u>Exploring Biodigital Convergence</u> [23] in February 2020. In it they considered the policies adjustments that will be needed to expedite our alteration. The key concepts explored included the "full physical"

integration of biological and digital entities." The report outlines some of the technology already at the disposal of the parasite class:

"Robots with biological brains and biological bodies with digital brains already exist, as do human-computer and brain-machine interfaces.. digitally manipulated insects such as drone dragonflies and surveillance locusts, are examples of digital technology being combined with biological entities. By tapping into the nervous system and manipulating neurons, tech can be added to an organism to alter its function and purpose. New human bodies and new senses of identity could arise as the convergence continues.. we could see a shift away from vitalism – the idea that living and nonliving organisms are fundamentally different because.. the idea of biology as having predictable and digitally manageable characteristics may become increasingly common as a result of living in a biodigital age."

The lead author of this report was Kristel Van der Elst. She is Director General at Policy Horizons Canada, and a special advisor to the European Commission. She is also the former head of *Strategic Foresight* at the <u>World Economic Forum</u> [24].

The GPPP's military industrial complex is leading the way with genetic science. The ability to edit genes has led them to invest heavily in gene-drive technology [25]. This allows genetic engineers to select "suits" of genes to be propagated in a population.

Gene drives are often referred to as *gene extinction* technology. It offers the potential to use *mutagenic chain reactions* [26] to drive genetic mutation through a species with the potential to *switch off* fertility, and thus ensure its extinction within a generation. A new kind of biological weapon some have named the *gene bomb*. Its appeal to eugenicists is obvious.

History gives us no reason to think they wouldn't apply this technology to the human population. They have certainly applied their eugenic principles many times before under the guise of public health.

Scientists have rightly raised significant concerns about the catastrophic harm gene editing technology could cause. Professor Kevin Esvelt <u>from MIT asked</u> [27]:

"Do you really have the right to run an experiment where if you screw up, it affects the whole world?"

You might expect extreme caution would be warranted. Especially seeing as the potential unforeseen consequences of removing entire species from an ecosystem are, well, "unforeseen." Yet sterile, transgenic insects have been engineered. A team of Japanese scientists have already created a mosquito that can deliver a vaccine [28]:

The *stakeholder capitalist*'s ability to control centralised global authoritarian structures and intellectual property rights means they have possession of these technologies. Another suicidal oversight on our part. Fearing where all this was

heading, in 2016 The UN Convention on Biodiversity (CBD) proposed a moratorium on gene drives.

Perhaps we might have welcomed an opportunity to discuss the implication before agreeing to surge ahead with the genetic editing of sentient life. However the *stakeholders* within the GPPP were not keen to allow us to exercise that right and the proposed moratorium was not permitted [29]. The BMGF (stakeholders) employed the PR firm Emerging AG to ensure the moratorium didn't occur [30].

Consequently the <u>BMGF were free to go ahead</u> [31] and fund Oxitec, a UK based US science R&D company, to use gene drives to exterminate insects which "spread disease." <u>Oxitec stated</u> [32]:

"Our insects contain a self-limiting gene, and when this gene is passed on to their offspring, offspring do not survive to adulthood, resulting in a reduction in the pest insect population."

It will come as no surprise that the BMGF also funded Imperial College to use <u>CRISPR-Cas9 gene drives</u> [33] to genetically engineer a strain of sterile mosquitos that *won't spread Malaria* due to their pre-programmed extinction. These are not just theoretical exercises. Oxitec released <u>750 million Genetically Modified</u> <u>Organism</u> [34] (GMO) mosquitoes into the Florida Keys to see what would happen.

To point out that one of the most influential foundations, funding both global COVID 19 vaccine programs and gene extinction technology, is run by a man and a woman who both have a life-long population control obsession, is a "conspiracy theory." It is also an unassailable fact.

Eugenics originated in the UK and there is a rich vein of eugenic ideology permeating the British State franchise and wider GPPP establishment. Like Bill Gates, the UK prime minister Boris Johnson, who Bill met privately to discuss the *pseudopandemic*, has also adopted the family's eugenic tradition. Johnson acknowledged this in his 2007 Telegraph article [35] Global Over-Population Is The Real Issue.

Bemoaning the unfortunate demise of eugenics' popularity, and recalling the heady days of the Ehrlich's fame, he wrote:

"There was a time, in the 1960s and 1970s, when people such as my father, Stanley, were becoming interested in demography.....it was perfectly respectable to talk about saving the planet by reducing the growth in the number of human beings."

Stanley Johnson [36], Boris's father, was very interested in *demography*. His career as a banker at the World Bank and head of Prevention of Pollution Division for the EU Commission led him to receive the Greenpeace award for services to the environment and an ambassadorial role with the United Nations Environmental Program (UNEP). Throughout his environmental *good works* his unfaltering commitment to getting rid of people has been outstanding.

In a 2012 interview with the Guardian newspapers environmental editor John Vidal, Stanley Johnson said:

"You have to get population under control.. if you have a declining population, which is what I would aim for, then even a stable economic growth situation will give you rising per-capita income.. In Britain I would put it at 10 or 15 million, I think that would be absolutely fine. That would do us really splendidly. The government of this country has to start talking seriously about immigration.. there is a really serious differential between the fertility of the immigrant population to, what you might call, the indigenous population.. This is very political stuff."

Putting aside the fact that population growth is the driver of economic, technological and scientific innovation, when Stanley said removing 50 million people from the UK would *do us really splendidly* we might ask who the "us" in that sentence referred to. Seeing as there is not a single historical precedent for a smaller UK population delivering either better economic growth or improved living conditions for the population at large, it seems likely he meant the *stakeholder capitalists*.

Like his father before him, Boris Johnson also presented all kinds of evidence free, statistically and historically illiterate arguments to forward his homicidal, niche ideology. In his 2007 article he ignored the global food surplus and wrote about the *food crisis* instead. He claimed high food prices were a function of population, rather than mention the scourge of political policies, such as the <u>EU's Common Agricultural Policy</u> [37], which artificially raised prices by effectively removing the free market.

Widely acknowledged as someone who is not a "details man," it seems Boris Johnson isn't an evidence man either. This is born out by his led by science approach to the pseudopandemic, advised by the computer salesman Bill Gates and the consistently wrong Prof. Neil Ferguson.

Averse to responsible political leadership and declining to seek evidence from a broad range of scientific opinion, he appeared to prefer any which supported his policy agenda and ignored the rest. To what extent that choice was influenced by his wish to reduce the population is hard to say. He said population growth was an "impending calamity," and called for a "grown-up discussion about the optimum quantity of human beings in this country and on this planet."

While there is no reason to believe any eugenicist's claims, if for a moment we accept their call for an adult debate, which, like all ideologues, they aren't really interested in, then we should ask them to clarify which of us should die first. Although, in light of the *pseudopandemic*, perhaps we can make an educated guess.

The debate over such concerns, death panels, healthcare rationing, enforced euthanasia, compelled abortion, mass sterilisation programs and so forth, has

allowed eugenicists to hide behind faux scientific credibility to this day. Now they have found refuge in Bioethics.

While new bio-technologies raise some novel ethical conundrums, much of Bioethics appears to be preoccupied with, and based upon, the tired old eugenicist myths. Primarily that human beings are a problem that need to be controlled by the right people.

US President Joe Biden appointed oncologist and bioethicist Dr Ezekiel Emanuel to his *coronavirus task force*. Emanuel, whose brother urged him never to let a crisis go to waste, has previously suggested that the Hippocratic Oath <u>should be abandoned</u> [38] because it gets in the way of putting a fair price on human life. He has publicly advocated voluntary euthanasia (how voluntary is a valid question) and believes people should decline health treatment once they reach 75 years.

So it is no surprise he was the lead author on the academic article <u>Fair Allocation of Scarce Medical Resources in the Time of Covid-19</u> [39]. In it, he and the other researchers wrote:

"The choice to set limits on access to treatment is not a discretionary decision, but a necessary response to the overwhelming effects of a pandemic....Treating people equally could be attempted by random selection, such as a lottery....giving priority to those who can save others, or rewarded by giving priority to those who have saved others in the past."

In Emanuel's clearly eugenicist view, he was promoting the "death panel." This is the idea that some group of suitably qualified and experienced stakeholder experts should evaluate the worth of a human being, providing access to healthcare for some while denying it to the unworthy. This is pure eugenics. Eugenicists have always claimed their moral and intellectual superiority gave them the right to judge the value of human life.

These people never acknowledge that scarcity of medical resources is a political and economic policy decision, not some natural function of society. Nor do they ever mention that the hoarding of capital by the *parasite class* artificially limits resource availability. Instead they falsely claim scarcity is inevitable, due to population growth, and therefore they must decide who lives and who dies.

Emmanuel is a fellow of the Rockefeller funded Hastings Center health policy think tank, where he is joined by other bioethicists like Peter Singer. In his book <u>Practical Ethics</u> [39] Singer made the moral argument for infanticide. Debating at what point children see themselves as "distinct entities" he suggested that 2 or 3 years old children have no concept of death, therefore killing them was fine:

"A newborn baby is not an autonomous being, capable of making choices, and so to kill a newborn baby cannot violate the principle of respect for autonomy."

With people like Emanuel in key positions within the Biden administration, and with addition of its *COVID-19 Ethics Resource Center*, built upon the contribution of Peter Singer and other eugenicists, it is with reasonable justification that the Hasting Center state:

"The Hastings Center shapes ideas that influence key opinion leaders, including health policy-makers, regulators, health care professionals, lawyers, legislators, and judges."

In the UK, the Galton Institute, formerly the British Eugenics Society, describes itself as a *learned society*. Unable to resolve the eugenicist identity crisis, the Galton Institute's website <u>recently informed visitors</u> [40]:

"The Council of the Galton Institute is actively deliberating a name change and a working group has been set up to address the issue."

And further [41]:

"The current Galton Institute has disassociated itself completely from any interest in the theory and practice of eugenics, but recognises the importance of the acknowledgement and preservation of its historical records in the interest of improving awareness of the 20th century eugenics movements."

Perhaps the continual attempts to distance themselves from the atrocities committed in the name of their *pseudoscience* would be plausible if they didn't still venerate and practice it. The Galton Institute's other statements demonstrate just how far they have *disassociated* themselves from eugenics. In 2016 they created their philanthropic foundation the Artemis Trust [41]:

"The Artemis Trust is wholly owned by the Galton Institute. It was established in 2016 and evolved from the Birth Control Trust..The wider ranging objectives of the Artemis Trust are:

To preserve and protect the physical and mental health of people, particularly but not only those from poorer communities, in particular by:

- assisting in the provision of fertility control and other measures to improve reproductive and sexual health; and
- advancing education in all aspects of reproductive and sexual health.

We are currently committed to a project.. to improve access to family planning services in marginalised rural communities in Kenya."

Acting entirely contrary to real economic and scientific evidence, which clearly indicates that population growth benefits Kenya's economic development, the Galton Institute, who have completely *dissociated* themselves from *coercive*

eugenics, but recognise its importance and are committed to preserving its history, are currently practising *population control* in Kenya. This does not benefit any Kenyans but it does suit the eugenic ambitions of the *parasite class*.

Regardless of Galton's questionable scientific contribution, accepting the apologist's view that his political beliefs were "of his time," today's eugenicists are no different to the early adopters who snatched at his ideas. The extent to which they understood or even cared about his concept of heredity seems dubious in many cases.

Eugenics served their world view and it was the faux scientific legitimacy which appealed to subsequent generations of eugenicists. The *scientific* reinforcement of their bigotry and delusions of grandeur was the alluring feature.

Eugenics is the self-justification the *parasite class* have imbibed. It spurs their conviction that they are the rightful rulers of the Earth and should hold dominion over all. Our lives belong to them. They decide if we deserve to receive healthcare and they determine if we should be allowed a family. They order our society and decree if we should live or die.

Seizure of the *global commons* by the *stakeholder capitalists* is a eugenic ideal. The *new normal* biosecurity state, where we are required to prove our biological worthiness before being allowed our allotted quota of their resources, is a eugenicist and population control concept.

The *pseudopandemic* has introduced us to the administration system for this new eugenic normal. *Technocracy* can be defined as:

"A government or social system that is controlled or influenced by experts in science or technology."

For the *parasite class* to achieve their dream all they need to do is maintain their control over the right experts to formulate the global policy they desire. The wrong scientific or academic opinion can simply be censored and ignored. It comes as no surprise therefore that once again the eugenicists are at the heart of creating the global technocracy.

Vice president of the Galton Institute Professor Dian Donnai co-authored the paper The Rise of Point of Care Genetics [42]. In it, she and her co authors wrote:

"The SARS-CoV-2 outbreak has necessitated innovation in many areas, including the development of molecular point-of-care tests (POCTs)..This could result in a new testing paradigm, where genotype is used to routinely tailor management.. By collaborating with industry to develop robust diagnostics and working alongside clinicians to integrate these tools into clinical pathways."

"Clinical pathways" determine the healthcare we receive. POCT's of our *genotype* will define us biologically but ignore who we are. "Collaborating with industry"

ensures the stakeholder capitalists will oversee the process of allocating our healthcare in the best interests of the resource management and the *public good*.

The POCT grid will see a nationwide system of check points. Reporting who you are, where you live, what you are doing, your medical records, your biometric data and your *immunity status* (vaccine dependent) to the State franchise.

It is the promise of this intended system of enslavement which motivated the core conspirator's *pseudopandemic*. It is the *new normal*. It is the biosecurity State. It is a Technocracy.

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Chapter 16 - Technocracy Rising

The *core conspirators* and *informed influencers*' motivation for the *pseudopandemic* was to rapidly transition the world's population into a new system of centralised, authoritarian global governance. This system is designed to be a technocracy and it is totalitarian. Many components of this global governance framework already exist.

The World Heath Organisation (WHO) delivers global governance of public health; global access to technological development is meted out through the World Intellectual Property Organization [1]; the Organisation for Economic Co-operation and Development (OECD) works with partner State franchises to coordinate policy; global trade is monitored and controlled through the trade agreements overseen by the World Trade Organisation; the direction of education, academia, the sciences and cultural development is steered through the U.N. Educational, Scientific and Cultural Organization (UNESCO); the parasite class' seizure of the global commons is nearing completion, using Sustainable Development Goals (SDG's), primarily under the U.N. Development and Environmental programs (UNDP & UNEP) and the necessary global scientific consensus on climate change is overseen by the U.N. body, the Intergovernmental Panel on Climate Change (IPCC).

From a historical perspective, the *parasite class* are a collective of mass polluters, robber barons, land grabbers and the world's leading exponents of worker exploitation, market manipulation, monetary extortion (usury) and oppression. However, by establishing *global governance* in the form of intergovernmental institutions which are *"led by science"* and the *"worlds' leading experts,"* the GPPP have managed to convince billions that they are now committed to sustainable, net zero, environmentalism.

In order to requisition, commodify, audit and ultimately divide up the *global commons* among themselves and their *stakeholder partners*, the worldwide operating system the GPPP intend to use is *technocracy*. Once the wider population figure out what has happened, this will enable them to shutdown resistance through *literal* population control via the global surveillance grid, nearing completion thanks to the *pseudopandemic*.

Every human being will be individually monitored by Artificial Intelligence (AI) networks which will punish or reward them, depending upon their behaviour. Biosecurity and environmental concerns are set to provide the justification for this enslavement.

Much like eugenics, Technocracy was the *social science* certainty of its day and has subsequently faded from the public consciousness. Yet, as with eugenics, it has remained central to the *parasite class'* creed. They have continued to develop and adapt it as technology has emerged. Having successfully introduced it to China, they are close to implementing it globally. Thanks, in no small part, to the *pseudopandemic* that began in China.

In 1911 arguably the worlds first *management consultant* Frederick Winslow Taylor published <u>The Principles of Scientific Management</u> [2]. His publication came at the culmination of the *Progressive Era* in the United States.

This was a period marked by the political activism of the US middle class who mainly sought to address the underlying social problems, as they saw them, of excessive industrialisation, immigration and political corruption. So called *Taylorism*, fixated with the imminent exhaustion of natural resources and advocating efficient *scientific management* systems, was in the spirit of the age.

Taylor wrote:

"In the past the man has been first; in the future the system must be first.....the best management is a true science, resting upon clearly defined laws, rules, and principles, as a foundation.....the fundamental principles of scientific management are applicable to all kinds of human activities, from our simplest individual acts to the work of our great corporations."

Taylorism advocated science driven efficiency reforms across society. An *efficient* system should not be run by politicians or religious leaders but by "experts" such as engineers, scientists, logistical experts, economists and other academics. The focus should always be on systemic *efficiency* and the proper use of precious resources, including labour.

Though Taylor's ideas were influenced by Social Darwinism he wasn't a eugenicist. However, his ideas were adopted by eugenicists. Once again it "fitted" with their belief in their unassailable right to rule.

Just as they could optimise and control the human population, so they could employ the *right experts* to make socioeconomic and industrial systems more efficient. They could promote this as being for the *public good* while at the same time consolidating their own power and reaping a greater financial harvest from a more efficient industrialised society.

Taylor's *Principles of Scientific Management* chimed with the theories of economist and sociologist <u>Thorstein Veblan</u> [3]. He proposed that economic activity wasn't just a function of supply and demand, utility, value and so forth but rather it evolved with society and was thus shaped by psychological, sociological and anthropological influences.

Both Taylor and Veblan were focused upon improving the efficiency of industrial and manufacturing processes. However, they also recognised that their theories could be extended to the wider social context. It was the more expansive application of their ideas that beguiled the *parasite class*.

Veblan famously spoke about "conspicuous consumption" to describe how the affluent displayed their social standing through their ability to engage in pursuits and buy items that were essentially purposeless and wasteful. This conspicuous

leisure and *consumption* cascaded down through the class structure, as those aspiring to signal their own status emulated the wealthy.

He argued that this was a major contributory factor toward unacceptable resource waste and inefficiency. Consumer society ultimately produced more goods and services than it needed simply to meet the artificial demand created for, in his view, avoidable and unnecessary social demand.

Veblan was strongly opposed to this inefficient use of resources which he blamed on the "business classes" and financiers. He valued their contribution to the industrial age but felt they were no longer capable of managing modern industrial society.

Initially Veblan argued that the workers must therefore be the architects of the necessary social change that would create economic and industrial reform. However, in *the Engineers and the Price System* [4] he shifted his focus away from workers as the drivers of change towards technocratic engineers.

He called for a thorough analysis of the institutions which maintained social stability. Once understood, those with technological expertise should reform the institutions and thereby engineer society and improve efficiency. Veblan referred to these social change agents as a "soviet of technicians."

In 1919 Veblan was among the founders of the John D. Rockefeller funded private research university in New York called the New School for Social Research. This soon led to the creation of the <u>Technical Alliance</u> [5] as Veblan joined a small team of scientists and engineers, notably Howard Scott, to form a fledgling *technocratic organisation*.

Scott didn't like Veblan's description of a soviet of technicians, reportedly calling it [6] a "cockeyed thing." The clear association with communism probably wasn't welcome from a PR perspective and Scott felt it undermined what he was trying to achieve with technocracy.

Veblan's involvement with the Technical Alliance was relatively brief and some have suggested that his contribution to technocracy was minimal, accrediting Scott as the great mind behind it. Regardless of the extent of Veblan's personal involvement in the movement, his socioeconomic theories permeate technocracy.

In 1933 the Technical Alliance reformed after an enforced hiatus prompted by Scott's exposure as a fraudster (he falsified his engineering credentials). They renamed themselves Technocracy inc.

Despite his public humiliation, Scott was a skilled orator and remained the spokesman for Technocracy inc. He worked with, among others, M. King Hubbert. Hubbert would later become globally renowned for his <u>vague and generally inaccurate</u> [7] "peak oil" theory.

Scott and Hubbert collaborated to write <u>Technocracy Inc's study course</u> [8] to formally introduce the world to *technocracy*. The logo selected for Technocracy inc. looks like a red and white "yin and yang" symbol. This represents the *Great Chinese Monad* or *the Diagram of the Great Extreme*. On <u>their website</u> [9] Technocracy inc. say that it symbolises the balance between production and consumption or the balance between humans and the environment. They claim:

"Technocracy was the first organization to begin talking about sustainability before the terms sustainability or 'going green' were even coined."

Given that the Study Course was written in 1934, *Diagram of the Great Extreme* seems the most appropriate symbolic reference. At the time, the proposed technocracy was technologically impossible and sounded pretty crazy. However, we are certainly more familiar with these ideas today. Hubbert wrote:

"Technocracy finds that the production and distribution of an abundance of physical wealth on a Continental scale for the use of all Continental citizens can only be accomplished by a Continental technological control, a governance of function, a Technate."

The Technate, a technocratic society initially envisaged to encompass the North American continent, would be administered by a central planning body formed of scientists, engineers and other suitably qualified technocrats. Technocracy would require a new monetary system based upon a calculation of the Technate's total energy usage. People would be allocated an equal share of the corresponding *energy certificates* (as a form of currency) denominated in units of energy (Joules.)

A new price system was envisaged with all commodities and goods priced according to the energy cost of their production. A cabbage might be 20 Joules or a refrigerator 50,000 Joules. Purchases using *energy certificates* would then be reported back to the appropriate department of the technocratic central planning committee. The transaction would be catalogued and analysed, enabling the central planners to precisely calculate the rolling energy balance, between energy production and consumption, for the entire Technate.

In order for this system to work, all consumer's energy expenditure (including all daily transactions using *energy certificates*) would need to be recorded in real time; the national inventory of net energy production and consumption would have to be constantly updated, around the clock; a registry of every commodity and product needed to be scrupulously maintained, with every individual living in the Technate allocated a personal energy account. This would be updated to record their energy usage and personal net energy balance.

Hubbert & Scott made it clear that, for technocracy to work, an all pervasive energy surveillance grid would be required. All citizens would be individually identified on the grid and every aspect of their daily lives monitored and controlled by the technocratic central planners.

Technocracy is a totalitarian form of surveillance based, centralised authoritarian governance which abolishes national sovereignty and political parties. Freedoms and rights are replaced with a duty to behave in the interest of a *common good*, as defined by the technocrats, in pursuit of equality. All decisions about production, allocation of resources, all technological innovation and economic activity is controlled by a technocracy of experts (Veblan's *soviet of technicians*.)

In Technocrat Magazine in 1938 technocracy was described as:

"The science of social engineering, the scientific operation of the entire social mechanism to produce and distribute goods and services to the entire population."

For the *parasite class* and their GPPP stakeholder partners it was an irresistible idea. In order to control everything all they would need to do is whisper in the ear of a few hand-picked technocrats. While in the 1930's the Technate was an impracticable proposition, it was still something to inspire them and work towards.

Understanding that technological development would eventually enable the Technate to be realised, in 1970 Professor Zbigniew Brzezinski (1928 - 2017) wrote <u>Between Two Ages: America's Role In The Technetronic Era</u> [10]. At the time he was a professor of political science at Columbia university where Scott had first met Hubbert in 1932. He had already been an advisor to both the Kennedy and Johnson campaigns and would later become National Security Advisor to US President Jimmy Carter (1977 - 1981).

Brzezinski was a significant influence on late 20th Century US foreign policy, far beyond his years in the Carter administration. The Democrat counterpart to Republican Henry Kissinger, he was a centrist and his deep dislike of the Soviet Union often placed him on the right of Kissinger on related issues. He supported the Vietnam War and was instrumental in *Operation Cyclone* which saw the US arm, train and equip <u>Islamist extremists in Afghanistan</u> [11].

He was a member of numerous policy think tanks including the Council on Foreign Relations, The Center For Strategic & International Studies, Le Cercle and was a regular attendee at the annual *parasite class* soiree the Bilderberg conference [12]. In 1973 he and David Rockefeller formed the Trilateral Commission policy think tank. Brzezinski was very much part of the *Deep State milieu* and the GPPP.

Between Two Ages is a geopolitical analysis and set of policy recommendations born from Brzezinski's view that digital technology would transform society, culture, politics and the global balance of political power. It also provides us with a clear view of the mindset of the parasite class. It should be acknowledged that Between Two Ages is another among the many publications written by people with the economic and political authority to "influence the lives of millions across borders on a regular basis."

Brzezinski didn't reference technocracy directly, perhaps wary of its rather sketchy reputation following Scott's disgrace. However, he did describe it in detail throughout the book:

"Technological adaptation would involve the transformation of the bureaucratic dogmatic party into a party of technocrats. Primary emphasis would be on scientific expertise, efficiency, and discipline... the party would be composed of scientific experts, trained in the latest techniques, capable of relying on cybernetics and computers for social control."

He theorised about, what he called, the *Technetronic Age* and offered a vision of the near future, from the perspective of the 1970's. Brzezinski predicted that this *Age* would arise as a result of the Technetronic Revolution. This would be the *third revolution* to follow the industrial revolution. Klaus Schwab would later call this the *4th Industrial Revolution*.

Brzezinski wrote:

"The post industrial society is becoming a 'technetronic' society: a society that is shaped culturally, psychologically, socially, and economically by the impact of technology and electronics—particularly in the area of computers and communications."

He then went on to describe what he thought life in the Technetronic Age would be like for ordinary men, women and their families. He envisaged that our lives would be controlled by computer technology and *led by science*:

"Both the growing capacity for the instant calculation of the most complex interactions and the increasing availability of biochemical means of human control augment the potential scope of consciously chosen direction..

Masses are organized in the industrial society by trade unions and political parties and unified by relatively simple and somewhat ideological programs.. In the technetronic society the trend seems to be toward aggregating the individual support of millions of unorganized citizens, who are easily within the reach of magnetic and attractive personalities, and effectively exploiting the latest communication techniques to manipulate emotions and control reason."

Brzezinski foresaw that the Technate's need for a system capable of *instant calculations* would be met, thus enabling the required 24/7 monitoring and control of the most complex interactions. He noted how the political leaders of industrial societies used *simple ideological programs* to *organise* the *masses* but how, in the future, communication technology would enable *personalities* to be used to *manipulate emotions and control reason*.

He also explained how technology would enable extensive behaviour modification and manipulation of the population. He foresaw (suggested) how this could be weaponised:

"It may be possible—and tempting—to exploit for strategic political purposes the fruits of research on the brain and on human behavior.. one could develop a system that would seriously impair the brain performance of very large populations in selected regions over an extended period."

Zbigniew Brzezinski wrote enthusiastically, through a paper thin veil of cautionary predictions, about how a *global scientific elite* (the *soviet of technicians* described by Veblan) could not only use extreme, all-pervasive propaganda, economic and political manipulation to determine the direction of society but could also exploit technology and behavioural science to genetically alter and brainwash the population. Describing the form of this society and the potential for technocratic control he wrote:

"Such a society would be dominated by an elite whose claim to political power would rest on allegedly superior scientific know how. Unhindered by the restraints of traditional liberal values, this elite would not hesitate to achieve its political ends by using the latest modern techniques for influencing public behavior and keeping society under close surveillance and control."

He claimed the technetronic age he described was inevitable. Therefore he asserted that the future of the United States (and the planet) must be centrally planned. These planners would eventually displace "the lawyer as the key social legislator and manipulator." Consequently, he decided there was an urgent need to develop this network of planners by fusing government with academia and private corporations.

He stated that political parties would become increasingly irrelevant, replaced by regional structures pursuing "urban, professional, and other interests." These could be used to "provide the focus for political action." He understood the potential for this localised, technocratic administrative system:

"In the technetronic age the greater availability of means permits the definition of more attainable ends, thus making for a less doctrinaire and a more effective relationship between 'what is' and 'what ought to be."

He also suggested a redefinition of freedom. Liberty would be achieved through centrally planned public commitment to social and economic equality, administered and overseen by technocrats:

"The positive potential of the third American revolution lies in its promise to link liberty with equality."

Brzezinski recognised that it would be impossible to impose world *government* directly. Rather it should be gradually constructed through a system of global *governance* comprised of treaties, bilateral agreements and intergovernmental organisations:

"Though the objective of shaping a community of the developed nations is less ambitious than the goal of world government, it is more attainable.....it attempts to create a new framework for international affairs not by exploiting these divisions but rather by striving to preserve and create openings for reconciliation."

One *opening* that he was particularly interested in was China. Tensions between Russia and China had continued to rumble on and, as Brzezinski wrote *Between Two Ages*, they had spilled over into <u>a border conflict</u> [13]. He saw that the Sino-Soviet split had created an opportunity to shape China's modernisation:

"In China the Sino Soviet conflict has already accelerated the inescapable Sinification of Chinese communism. That conflict shattered the revolution's universal perspective and—perhaps even more important— detached Chinese modernization from its commitment to the Soviet model. Hence, whatever happens in the short run, in years to come Chinese development will probably increasingly share the experience of other nations in the process of modernization. This may both dilute the regime's ideological tenacity and lead to more eclectic experimentation in shaping the Chinese road to modernity."

These ideas were firmly in Brzezinski's mind when he and committed eugenicist David Rockefeller, whose family had been bankrolling technocratic initiatives for more than 50 years, first convened the <u>Trilateral Commission</u> [14]. They were eventually joined by other so called *thought leaders* like population control expert Henry Kissinger, Club of Rome environmentalist Gro Harlem Brundtland and the president of the Council on Foreign Relations Richard Haass, who more recently wrote <u>World Order 2.0</u> [15].

Like all globalist think tanks, the Trilateral Commission claim that they don't really have any power and are just a talking shop for the most powerful people on Earth to kick around a few ideas and enjoy a chat. They say they come up with the odd policy initiative but can't do anything to make governments adopt them.

This is the line <u>the official</u> "debunkers" [16] would have you believe. They accuse all who point out that governments commonly adopt policies that originate in the globalist think tanks of being "conspiracy theorists." Accordingly, they encourage the blank dismissal of evidence, purely by slapping the "conspiracy theorist" label on the people trying to share it.

Presumably, acknowledged political heavyweights like Kissinger and Brzezinski, and financial behemoths like the <u>Rockefellers and George Soros</u> [17] put their secretive discussion out of their minds entirely as they set about controlling policy and global development. At least, that is what we are expected to believe.

Anyone who seriously claims that policy think tanks don't create policy are either peddling *dezinformatsiya* or don't understand what they are talking about. The

representative governments we elect aren't in charge. This is the nature of realpolitik and we just need to grasp that fact. As Philip K. Dick observed:

"Reality is that which, when you stop believing in it, doesn't go away."

We allow this kind of opaque gathering of *leaders* to rule over us, primarily through our apathy, our belief in authority and stubborn refusal to confront reality.

Collectively they form something often referred to as the <u>Deep State Milieu</u> [18].

Humbling as it may be, the uncomfortable truth is that we are viewed as nothing more than expendable pawns in a *great game* played out by avaricious tyrants who see genocide as a tactic. Among the worst of them was Mao Zedong whose "*great leap forward*" saw 40 million people brutalised and starved to death in just three horrific years (1959 - 1961).

Apologists claim this was all a terrible mistake but it was nothing of the kind. In the certain knowledge that food supplies were running out, in 1958 Mao said "to distribute resources evenly will only ruin the Great Leap Forward" and later the same year:

"When there is not enough to eat, people starve to death. It is better to let half the people die so that others can eat their fill."

In his zeal to <u>create a communist utopia</u> [19], Mao presided over a system that seized food from starving millions and exported it to fund his political reforms and determination to rapidly industrialise the economy. It wasn't an error or an unfortunate oversight. While many were so terrified that they submitted fake reports of surpluses that didn't exist, it is clear that the leadership of the People's Republic of China (PRC) knew exactly what the human costs were. They just didn't care.

Nor did David Rockefeller, as evidenced by his 1973 op-ed for the <u>New York Times</u> [20]. He and his Chase Group banking empire delegation had visited Maoist China. In his account of the trip, Rockefeller dismissed the mass murder of millions as *"whatever."* It was the product of genocide that Rockefeller was interested in:

"One is impressed immediately by the sense of national harmony....There is a very real and pervasive dedication to Chairman Mao and Maoist principles. Whatever the price of the Chinese revolution it has obviously succeeded, not only in producing a more efficient administration, but also in fostering...a community of purpose."

The *Trilateralist* Rockefeller could see the opportunity the Chinese dictatorship presented the *parasite class*. In full agreement with Brzezinski, he wrote:

"Too often the true significance and potential of our new relationship with China has been obscured.. In fact, of course, we are experiencing a much more fundamental phenomenon.. The Chinese, for their part, are faced with altering a primarily inward focus.. We, for our part, are faced with the

realization that we have largely ignored a country with one-fourth of the world's population."

The "we" Rockefeller referred to was not us. He meant the GPPP and his fellow stakeholder capitalists.

The totalitarian order in China impressed him as he hoped it would. He wasn't the first Trilateralist to see the technocratic possibilities in China. The sheer scale of the market was an enticing prospect and the promise of the *Technetronic Age* raised the real potential to build the world's first Technate.

Completely discounting the appalling loss of human life, Rockefeller wrote:

"The social experiment in China under Chairman Mao's leadership is one of the most important and successful in human history. How extensively China opens up and how the world reacts to the social innovation.. is certain to have a profound impact upon the future of many nations."

The GPP's task was to crack open the Chinese market while maintaining totalitarianism. China would need help with its economic development and technical support to build the technological infrastructure necessary for technocracy to work. This process had already begun, but with Rockefeller, Brzezinski, Kissinger and others committed to the cause, the target of constructing a Technate was firmly in the Trilateralist's sights.

The Trilateralists set about assisting China to develop both economically and technologically, while remaining careful to avoid applying too much pressure for political reform. Totalitarianism was a system they supported and wanted to exploit. In their 1978 Paper No. 15 on East-West Relations [21] they suggested:

"To grant China favourable conditions in economic relations is definitely in the political interest of the West.. there seems to exist sufficient ways for aiding China in acceptable forms with advanced civilian technology."

In the same paper the Trilateralists announced that they weren't entirely averse to helping China modernise their military capability, though they stressed this should only be for defensive purposes. They accepted that a modern, militarised China might turn to expansionism and seek to regain territory it historically claimed as its own, in particular Taiwan. They judged this was a reasonable risk to take.

They were playing the great game. Human lives were of no concern.

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Chapter 17 - Constructing The Technate

Just as Ghebreyesus career path to the top of the World Health Organisation (WHO) was shaped by the support of Bill Gates, so Henry Kissinger's relationship with the Rockefellers was conducive to his own advancement. The official story of his secret 1971 discussions with Chairman Mao and Chinese Premier Chou En-lai (officially acknowledged in 2001 [1]) was that President Nixon had sent him to normalise relationships with China as a counterbalance to the Soviet Union [2].

What is mentioned less frequently is that Kissinger was also a Board Trustee of the Rockefeller Brothers Fund. His relationship with David Rockefeller stemmed back to 1954 when Kissinger was appointed to run the Rockefeller Brothers study group out of the Council on Foreign Relations (CFR). Kissinger's visits to China also opened up investment banking opportunities for Rockefeller's Chase Group (called Chase Manhattan at the time.)

Following Mao's death in 1976 Deng Xiaoping rose to power, becoming the Paramount Leader [3] of the People's Republic of China (PRC) in 1978. Just two weeks after assuming power, on January 1st 1979 he became the first communist Chinese leader to conduct a formal state visit to the US.

He was received with full state honours by the Carter administration, as advised by Trilateralist Brzezinski. Deng Xiaoping immediately set about instigating a series of social and economic reforms which were called "reform and opening up" in China and "the opening up of China" in the West.

Deng Xiaoping was one of a group of eight high ranking Chinese officials who had survived the brutal repressions of <u>cultural revolution</u> [4]. The reverently named *Eight Immortals* were credited with <u>turning the Chinese economy</u> [5] from an unstable mess, riven with extreme poverty, into the thriving economic engine it is today. This would have been impossible without considerable inward investment and the transfer of technology which China received from the GPPP.

This GPPP investment was the initial source of China's economic growth miracle. Immediately prior to the *pseudopandemic* in late 2019 <u>The World Economic Forum</u> [6] (WEF) reported:

"High levels of government spending and foreign investment have enabled China to roughly double the size of its economy every eight years since the introduction of economic reforms in 1979."

CITIC (China International Trust & Investment Corp - now CITIC Group) was effectively China's <u>state run investment arm</u> [7]. In June 1980 CITIC chairman Rong Yiren attended a meeting with David Rockefeller and the representatives of 300 Fortune 500 companies [8] in the Chase Manhattan offices in New York.

The <u>purpose of the meeting</u> [9] between CITIC and the GPPP was:

"[To] identify and define those areas of the Chinese economy most susceptible to American technology and capital infusion"

Kissinger and Rong reportedly <u>established an investment company</u> [10], with Trilateralist Kissinger appointed as a special advisor to CITIC. The initial phase of China's economic transformation were <u>banking reforms</u> [11] allowing much greater Foreign Direct Investment (FDI.)

FDI's aren't just capital investments. They typically come with a transfer or sharing of expertise, technology and even workforce. Common types of FDI's are mergers, acquisitions, management services, logistical and manufacturing agreements.

The GPPP began to pour into Beijing's <u>Central Business District</u> (CBD) [12]. By 2009 there were 114 Western companies with a substantial presence and investments established in Beijing. <u>By 2020</u> [13] there were 238 Fortune 500 companies and more than 10,000 foreign-funded enterprises. Beijing CBD now houses the regional headquarters of 89 multinational corporations.

According to <u>Chinese state media</u> [14] between 1983 - 1991 FDI in China went from a value of \$920 million to \$4.37 billion. By 2019 total FDI had risen to more than \$2.1 trillion. At the same time the transition economy of China, just like every advanced economy, rapidly <u>expanded its money supply</u> [15].

All of this monopoly money, a mixture of FDI and domestic (digital) currency printing, fuelled the amazing pace and scale of economic and technological development of China. In exchange for access to their market, China required that investors sign so called Forced Technology Transfer [16] (FTT) agreements. As the western MSM constantly pushed the notion of the *rising threat* of China, the frequent accusation was of alleged Chinese industrial espionage and "technology theft" [17].

Like so much propaganda aimed at us, this was just a story. In truth no one was forcing anyone to transfer technology to China. In fact, Trilateralists like US President Bill Clinton went to considerable lengths to make sure China could get hold of the technology, including military technology, it needed.

In 1994 the Clinton administration <u>scrapped cold war export controls</u> [18] thereby enabling more sensitive technology to be transferred to China. Claiming that they would not allow defence technology, such as supercomputer or potential uranium enrichment technology to go to China (or Russia), they soon lifted this restriction by shifting oversight from the State and Defense Departments to the Commerce Department.

Another half truth was that manufacturers took advantage of cheaper labour costs in China <u>leading to job losses</u> [19] in more advanced economies. While it is true that the practice of offshoring jobs had been ongoing for decades, many to China, the focus of GPPP investment in China was frequently Research and Development (R&D).

In 1994 China ranked 30th [20] in terms of US overseas R&D investment, by 2000 it was 11th. Between 1994 to 2001 multinational corporation (MNC) investment in China quadrupled. As a ratio of overseas R&D investment, the GPPP were providing 3 times the amount of *technology infusion* to China than anywhere else.

While the *pseudopandemic* sharpened the decline in total global FDI, it <u>continued to rise in China</u> [21]. The 4% increase of FDI into China saw it surpass the US as the world's leading recipient of direct investment. In 2020, while FDI into other advanced economies collapsed, China received FDI valued at \$163 billion.

In addition to the huge growth stimulus, pumped into the Chinese economy over the last four decades, a significant number of foreign / Chinese industrial R&D alliances were established. These were separate business organizations that targeted specific research or technological development projects. They were formed through collaboration between academic & scientific research establishments, NGO's, government institutions and private enterprise.

Between 1990 and 2001 the US established 105 such alliances. Japan had the second largest number of R&D partnership alliances (26), followed by Germany (15), the United Kingdom (14), Singapore (12), and Canada (11). The overwhelming majority of these R&D collaborations operated in China.

The US National Center for Science and Engineering Statistics issued a report in 2001 in which they stated:

"A substantial number of MNCs from advanced economies have established R&D or technical centers in China in recent years.. in key industrial sectors, such as telecommunications, electronics, chemicals, and auto manufacturing. U.S. companies with major R&D activities or facilities in China include DuPont, Ford, General Electric, General Motors, IBM, Intel, Lucent Technologies, Microsoft, Motorola, and Rohm & Haas."

Between 2001 to the financial crash in 2008, both FDI in R&D and Chinese R&D investment really took off. While the pace of FDI dropped off from 2010 onward, by 2016 China's own outward foreign investment had surpassed the FDI they received. An astounding economic turn around in less than 40 years. A 2019 report by the World Bank [22] stated:

"China's spending on research and development (R&D) rose to 2.18 percent of GDP in 2018, up from 1.4 percent in 2007.. Its spending on R&D accounts for around 20 percent of the world total, second only to the United States. Its number of patents granted annually for inventions increased from 68,000 in 2007 to 420,000 in 2017, the highest in the world.. China is also a hotbed for venture capital in search of the next technology. China has evolved from being a net importer of FDI to a net exporter.. Despite experiencing a sharp decline in 2017, China's outbound investments were the third-largest in the world.. China remains an attractive destination for foreign investments due to its large domestic

market. Foreign enterprises such as BASF, BMW, Siemens, and Tesla have recently announced new or expanded investments in China."

A focus for <u>apparent western concern</u> [23] has been China's Belt and Road Initiative (BRI.) This enormous infrastructure project (known in China as One Belt, One Road - OBOR) is establishing a network of modern trade routes across Eurasia linking Asia, Africa, Europe, South East Asia and Australasia, easing both international trade and, in particular, Chinese exports.

Beyond China's borders there are 140 countries involved in the BRI [24] to a varying degree. In its 2018 research paper [25] looking at Foreign Direct Investment in the BRI project, the World Bank refers to those directly involved in its construction as BRI nations. While China's direct investment in BRI nations has grown, the majority of its FDI goes to non-BRI nations. These are nations which are not in the scope of the infrastructure project.

China is the largest single nation investor in OBOR / BRI. This transition occurred after the 2008 financial crisis saw non-BRI nations (such as the US and the UK) pull back on their FDIs into the BRI countries.

This non-BRI nation investment picked up again as quantitative easing (money printing) monetary policies in western nations took effect after 2010. The World Bank report:

"The majority of BRI countries' FDI inflow comes from non-BRI countries."

In other words, neither China nor the higher income countries that are involved in the BRI are providing the bulk of FDI. <u>BRI nations</u> [26] such as Italy, Saudi Arabia, Austria, New Zealand, South Korea and Singapore are net recipients of FDI from non-BRI nations like the US, UK, France and Germany.

The majority of the investment, expertise and technology that is building the BRI infrastructure is coming from the GPPP. The notion that western politicians, corporations and financial institutions are worried about the Belt and Road Initiative is just an MSM fable. In reality they are working hard to construct it in *partnership* with China.

Economic reform, digital money printing and GPPP investment has certainly increased wealth in China. According to the World Bank [27] GDP per capita grew from \$156 per person in 1978 to more than \$10,000 in 2019. This has moved China to the status of an upper - middle income country.

By June 2020 [28] there were 358 US billionaires with a mean net worth of \$83.1 Bn each. In China there were 142 with a mean net worth of \$103 Bn each. At the end of 2019 more than 100 million Chinese people were in the top 10% of the worlds wealthiest. An estimated 850 million people had seemingly been lifted out of absolute poverty.

In 2000 total household wealth in China stood at \$3.7 trillion, by the end of 2019 it had reached nearly \$64 trillion. Of this net wealth 23% of it was owned by 142 people among a population of 1.4 billion.

While income had improved for millions, like every crony capitalist nation, <u>wealth</u> inequality had become much worse [29]. In 1978 the top 10% of Chinese citizens possessed about 22% of total wealth in China, the bottom 50% possessed approximately the same. By 2015 The top 10% held an estimated 42% while the lower 50%'s share of China's total wealth had plummeted to below 15%.

President Xi Jinping's claim that China had <u>eradicated extreme poverty</u> [30] involved some sleight of hand. Constructing the Technate led to the mass urbanisation of the Chinese population, leaving many rural areas with ageing populations and significant unemployment. China defines the absolute poverty income threshold as less than \$1.70 per day. The World Banks defines it as less than \$1.90 per day.

However, that threshold is for low-income nations which <u>China is no longer</u> [31]. For middle income nations, with higher prices, the World Bank defines relative poverty as living on less than \$5.50 per day, leaving an estimated 373 million Chinese in abject poverty.

A major caveat to all the figures we are discussing is their frequent disassociation from reality. In 2007, over dinner with the US ambassador, the current premier of the State Council of the PRC Li Keqiang told the ambassador [32] that China's GDP figures were "man-made" and unreliable. He suggested a better measure, subsequently named the *Li Keqiang index*, should be based upon energy consumption, rail freight and loan dispersal.

We shouldn't imagine this is a uniquely Chinese problem. Global markets are <u>hopelessly corrupt</u> [33] and all financial and State franchise fiscal claims should be read with a healthy degree of scepticism.

Hedley Donovan, one of the founding members of the Trilateral Commission alongside Brzezinski and Rockefeller, was the former editor in chief of Time Magazine. In his editorial Made in China: The Revenge of the Nerds [34] he wrote about what the Trilateralists had achieved in China:

"In the twenty years since Deng Xiaoping's reforms kicked in, the composition of the Chinese leadership has shifted markedly in favor of technocrats.. Now they hold sway in the Politburo, the Central Committee, the National People's Congress, and even provincial, municipal, and county governments. It's no exaggeration to describe the current regime as a technocracy. You might say that technocratic politics is a natural fit with the Chinese political culture.. During the 1980s, technocracy as a concept was much talked about, especially in the context of so-called 'Neo-Authoritarianism.'.. The basic beliefs and assumptions of the technocrats were laid out quite plainly: Social and economic problems

were akin to engineering problems and could be understood, addressed, and eventually solved as such.. Scientism underlies the post-Mao technocracy, and it is the orthodoxy against which heresies are measured."

Historical, cultural, economic and political factors combined to make China the perfect state for the Trilateralist's Technate. In 2016 professor of the philosophy of science and technology at Renmin University <u>Liu Yongmou wrote</u> [35]:

"Since the Reform and Opening initiated by Deng Xiaoping in 1978, any casual observer of China's leaders might note how many of them were educated as engineers. Indeed, at the highest level, former presidents Jiang Zemin (1993–2003) and Hu Jintao (2003–2013) as well as Xi Jinping (2013–present) all studied engineering. A number of Chinese who studied in the United States during the 1920s returned home influenced by American technocratic ideals of such figures as Thorsten Veblen and Howard Scott.. Deng, moved engineers into critical government positions.. The technocratic practice of scientific management.. offered a bridge between engineering and economics.. In China today, there exists a more favorable attitude toward technocracy than is found elsewhere."

Many, such as <u>Daniel A. Bell</u> [36], have argued that technocracy delivers a more conscientious, efficient and focused society. This assumes that the people in charge are conscientious. Under the guiding hand of the Trilateralists, the GPPP and the CCP, China has evolved into a technologically advanced feudal society.

Technocracy is a totalitarian system where individual identity is sacrificed to <u>communitarianism</u> [37]. The Technate citizen has no option but to act in pursuit of the *common good*. The Technate in China was not designed to liberate the people, either politically or economically, but rather to facilitate technocratic population control. There is no freedom of association or speech in China. While dissident groups still push for reform they need to be extremely careful [38].

China's internet is highly regulated and with their "Measures on the Administration of Internet Information Services" the ruling CCP prohibited news bloggers [39] from commenting on any policies or political developments without a license from the Cyberspace Administration. Ensuring that only State franchise approved media are permitted to parrot State franchise propaganda.

The Chinese have to register their personal details to use the Internet; the independent sale of SIM cards and network adapters is prohibited, and they require similar registration upon purchase and prior to use; the Chinese authorities can block foreign websites, restricting citizens access to information from outside China and it is a crime for anyone to facilitate the *illegal* flow of prohibited information into China. The Technate have effectively created the crime of *information smuggling*.

It is not just people's use of the Internet and political activities that are controlled by China's technocratic State franchise. With their Social Credit System every aspect

of citizen's day-to-day lives is monitored and directed under the technological authority of the Technate.

Published in 2014, the State Council Notice for <u>planning a Social Credit System</u> [40] (SCS) stated that the purpose of their plan was to:

"Construct a social credit environment of honesty, self-discipline, trustworthiness, and mutual trust."

This was unadulterated technocracy. The Document stated:

"The establishment of a social credit system is an important foundation for comprehensively implementing the scientific viewpoint of development.. Accelerating and advancing the establishment of the social credit system is an important precondition for promoting the optimized allocation of resources.. and promoting the optimization and upgrading of industrial structures."

The idea was seen as *progressive* by many in the West. For example, academics at the <u>Michigan Institute of Technology</u> [41] spoke about the SCS in very favourable terms:

"China's social credit system is designed to incentivize lawfulness and integrity. Citizens can earn points for good deeds like volunteering, donating blood, or attracting investments to the city; they can lose them for offenses like breaking traffic rules, evading taxes, or neglecting to care for their elderly parents."

It soon became apparent the Technate was not the project of self proclaimed socialist ideologues in the CCP and the Council, but rather a public private partnership between them and the venture capitalists invested in the Big Tech industries. Sesame Credit would gather and analyse the data from China's technology giant Tencent and all communications shared on their WeChat messaging platform. China's ride hailing service Didi Chuxing was also brought on board along with Baihe, China's most widely used dating app.

Sesame Credit was created in 2014 by Ant Financial (Ant Group - who own Alipay, the Chinese payment system with 700 million users), an affiliate company of Jack Ma's Alibaba Group [42]. Through its e-commerce, financial services and online payment systems, China's Technate has an invasive reach into people's lives. Sesame Credit provides every citizen with a credit score based upon their behaviour, hoovering up data from their social media likes and dislikes, private communications, purchases, where they go, who they meet and even their love lives. But it doesn't stop there.

To register their SIM cards and new SMART phones Chinese users must use <u>face scan technology</u> [43] by law. This data then informs China's already extensive and rapidly expanding national network of facial recognition cameras. This biometric surveillance grid, allowing entry to everything from bus depots to safari parks, is

integrating with alleged emotion-recognition technology [44] to assess an individual's mood and "predict" their behaviour. Fingerprints and other biometric data are regularly harvested and all of it fed into the GPPP central planner's Artificial Intelligence (AI) systems.

Today, smart cities, 5G smart grids, AI, the internet of things (IoT), cloud and quantum computing and all the other components of the *4th Industrial Revolution*, described by Klaus Schwab and predicted by Brzezinski, places global technocracy within relatively easy reach of the *parasite class*. It is the system we are passively allowing to be constructed around us.

For the central planners of the *new normal*, biosecurity based technocracy, technological infrastructure is not the problem. They have already established this system in China and stand ready to export it globally. The final hurdles they need to overcome are not technological, they are sociopolitical.

Somehow, they needed to convince us to buy into their system of technocratic enslavement. Their motive for the *pseudopandemic* was to create the conditions that would deceive us, not merely into accepting technocracy but to actively welcome it. They must have been pleasantly surprised by how easy it was.

The most notable aspect of the supposed COVID 19 outbreak in China is not that it occurred so close to the Wuhan laboratory where gain of function coronavirus research [45] was underway. It is that the world's first Technate, able to control information technology with a vice like grip, should be the source of the scary images and media horror stories which propelled the global population into a state of panic and fear.

The Chinese Technate is the model for the rest of the world. In a 2009 interview Trilateralist George Soros explained why the GPPP had done so much to modernise China [46]:

"You really need to bring China into the creation of a new world order; a financial world order.. I think you need to have a new world order [and] China needs to be part of the process of creating it, and they have to buy in, they have to own it in the same way that the United States, the Washington consensus, owns the current order.. China will emerge as the motor replacing the US consumer.. China will be the engine."

This was the Trilateralists plan. Their Technate would be the engine of, what they called, a new international economic order. Brzezinski was among the Trilateralists who understood that authoritarian political power sprang from economic power and that global authority would be achieved, not through the politics of nations, but by a privately owned, global *corporatocracy* efficiently managing economies. In Between Two Ages Brzezinski wrote:

"The nation-state as a fundamental unit of man's organized life has ceased to be the principal creative force: International banks and multi-

national corporations are acting and planning in terms that are far in advance of the political concepts of the nation-state."

We should be wary of seeking to understand the Trilateralists model of technocracy using the political and economic analysis we are familiar with. Neither free market liberalism nor Marxist theory provide an adequate framework to describe the emerging Technate.

Technocracy is *communitarian* and centrally planned. The individual is subordinate to socio-economic priorities set by the technocrats. All citizens must adapt their behaviour to serve the *common good* determined by the *soviet of technicians*. Naturally this has led many critics of technocracy to see it as little more than repackaged communism.

However, the *parasite class* led GPPP never intended for the Technate to be ruled by the *soviet of technicians*. For them, "*soviet*" was literally translated to mean council: a council they appoint to serve and protect their capital interests. This requires a certain degree of economic liberalisation although the Technate is very far from being a free market economy.

Once again, just as they have with eugenics, they seized upon an idea to further their own plans for global governance. While the system they are constructing is technocracy, they rule it and engineer its policies to maintain their profits and consolidate their authoritarian rule.

With the GPPP leading it, technocracy has been developed as a *neofeudal* system. It enslaves the population under the guise of *communitarianism* while enabling a class of <u>crony capitalists</u> [47] to run riot with extreme market liberalisation and capitalist monopolies. These are the *stakeholders* who will both order the Technate and apportion the *global commons* to themselves.

Capitalism <u>can be defined</u> [48] as an economic system based upon the private ownership of the means of production, where private property rights are sacrosanct. Income distribution occurs through the operation of free markets and freedom is theoretically secured through every citizen's right to private property, beyond the reach of the State.

The *stakeholder capitalists* at the WEF weren't joking when they suggested we would own nothing. Their *capitalist* utopia is one in which they are the only people with any private property rights. This process of transition is called *sustainable development*.

Critics of free market capitalism, most notably Marxists, have maintained that the dog-eat-dog nature of laissez-faire capitalism is ultimately destructive and that the free market has failed to deliver anything approaching a reasonable income distribution or freedom for the population. The problem with this critique of *free market capitalism* is that we don't live in a free market society [49] and haven't done so for at least 150 years. Arguably we never have.

The alleged free market, that western politicians and the media like to exult, is a *corporatocracy* regulated by the GPPP's State franchises. It is a system of *monopolistic crony capitalism*, where the State franchise exist to serve the hoarders of capital, maintain their monopolies and exclude the wrong capitalists.

The *parasite class* have always been able to rig the markets in their favour using the brute financial power they acquired from centuries of hoarding capital and lucrative tax payer funded "government" contracts. Their global system of Central Banking controls the money supply; their State franchises use fiscal policy, limiting our incomes through taxation; they determine property and commodity prices, creating scarcity or over supply as they wish; they control asset prices through regulation, monetary policy or stage managed global events and even limit our ability to build wealth for our own families through mechanisms like capital gains and inheritance tax.

Meanwhile, they live beyond the reach of the tax system themselves. They are tax collectors not tax payers. Using very expensive corporate tax avoidance schemes including offshore banking, shell companies and tax write-offs & exemptions (such as philanthropic foundations) they continue to accrue wealth while controlling the population's ability to access any themselves. Our representative democracies are not societies which enjoy open access to a free market. There is no *legal* free market.

Feudalism is the social structure [50] which results from an economic system designed to protect the right, claimed by oligarchs, to possess all resources. While this definition perhaps fails to do justice to the rather more nuanced complexities of past feudal societies, it is a fair reflection of the basic premise.

The technocracy we are being corralled into is neither a form of socialism nor a model of free market capitalism. Undoubtedly we will be encouraged to believe the Technate serves the common good and *keeps us safe* from unseen dangers. However it will be exploited by our neofeudal overlords: the GPPP *stakeholder capitalists* led by the *parasite class*.

The political ideologies we favour are of no use to us if we hope to resist technocracy. Resistance can be achieved easily enough if we unite and simply refuse to comply. For this to be effective it must be done *en masse*. We must set aside all divisions and devote our entire attention to resistance. We can argue about the society we want to create later, but unless we act now the Technate will crush us all, regardless of our beliefs.

In their pursuit of technocracy the *parasite class* have performed another nifty trick. While they advocate a new form of *responsible capitalism* [51], with multinational corporations leading on environmental protection and safeguarding public health, they are both robbing and enslaving us.

There is sometimes <u>an uneasy relationship</u> [52] between the appointed technocrats and the new breed of billionaires leading the technological revolution. In China the

flamboyant and outspoken Jack Ma saw his planned Initial Public Offering (IPO) of Ant Group stock scuppered by a <u>regulatory crack down</u> [53] led by, among other CCP heavyweights, Li Keqiang.

This move followed shortly after Ma's speech at the Bund Finance Summit in Shanghai, widely considered the catalyst for his IPO veto. Ma was <u>addressing an audience</u> [54] that included representatives of the world's most powerful policy think tanks and globalist institutions. Among the delegates were Jim O'Neil (Royal Institute For International Affairs), Robert Rubin (Council on Foreign Relations), Jean-Claude Trichet (Trilateral Commission), Alderman William Russel (City of London) and Benoît Coeuré (Bank for International Settlements).

The western MSM correctly reported that his speech was controversial but misled the public in regards to the reason why. They characterised Ma's Bund address as an attack on the Chinese financial system. To a degree it was but, from the CCP perspective, he said nothing overtly controversial as he publicly supported the principle of President Xi Jinpings regulatory reforms.

A <u>translation of his speech</u> [55] reveals the real reason why Ant Groups IPO was brought to heel. Jack Ma criticised the Bank of International Settlements, their Basel Accords and, most tellingly, their plans for a global digital currency. He questioned the western financial order and the Trilateralist's treasured *corporatocracy* asking if what they were offering was "worth having."

He referred to the "old men" of banking not, as the western media have suggested [55], as a sleight upon China's regulators, but as a thinly veiled attack on the parasite class controlling the world's monetary system. Jack bit the hand that feeds him. No one saw him for months afterwards and his company's IPO was shut down.

The GPPP are serious about their Technate. It is inspired by a generational commitment to eugenics and population control, founded in a deeply held belief in their divine right to rule. It is the ultimate in social engineering and they have their eye on the big prize: The Earth and everything on it.

Some upstart billionaire wasn't going to trash talk their global project and get away with it. Membership of the *parasite class* is by invitation only.

The Chinese people face a harsh future in the Technate, as do we all if we allow its global expansion. While many in China have benefited from economic liberalisation the sociopolitical cost has been severe and once the full financial impact of the *pseudopandemic* hits, incomes for the many will almost certainly fall again.

In 2019 China's *National Public Credit Information Centre* [56] revealed they had stopped the sale of 23 million travel tickets to people placed on official social credit "blacklists." This was the <u>fulfillment of their promise</u> [57] to "stop people who have committed misdeeds" from accessing public transport. Crimes committed included "spreading false information."

Students have been barred from university <u>due to their parents</u> [58] low credit scores; the facial recognition system has been used to publicly shame people for minor misdemeanours, flashing <u>their image and details</u> [59] on public information billboards; misdemeanours include meeting, calling or communicating online with someone who has low credit score; posting "fake news," buying the wrong products or accessing forbidden information can see you *blacklisted*.

In September 2020 China completed trials of its Central Bank Digital Currency in Shenzhen. The Digital Currency Electronic Payment (DC/EP) is a digital issuance of the yuan (CNY) and Chinese online retailers are already accepting [60] it as payment.

Combined with the Social Credit System the social engineering capability this delivers to technocrats and central bankers is almost beyond comprehension. Not only will the Technate monitor and record every transaction, once the population has no option but to use the DC/EP those with low social credit could be denied access to money unless they comply. The dreaded *knock on the door* will become the dreaded beep of a *contactless payment refusal*.

When the *pseudopandemic* began in western nations the rhetoric of the politicians and the mainstream media was in full flow, claiming that China was a threat to the *international rules based system* and *our way of life*. In response to the *pseudopandemic* the western GPPP State franchises then imported all of China's lockdown policies and response measures.

Far from being opposed to China, it wouldn't be the nation it is today were it not for the wholehearted financial and technological assistance provided to it by the people who now tell us to fear it. While we have been embroiled in the debate about meaningless political, cultural and national divisions, delineated by our propagandist media, the GPPP have not only constructed a Technate in China they are now using the *pseudopandemic* to export technocracy globally.

Once again we have been duped. Imagining that technocracy is necessary to *keep us safe* from a low impact disease that does little to increase the population's mortality risk. Bombarded by propaganda and *dezinformatsiya*, in our bemused and suggestible psychological state, we are ripe for the imposition of the global Technate and the biosecurity based behaviour change it brings with it.

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Chapter 18 - Pseudopandemic Motive

Some people believe that SARS-CoV-2 was deliberately created by and released from the Wuhan Institute of Virology [1]. Others point out that the US National Institutes of Health were among those funding the gain of function research [2] as part of an ongoing international biological R&D program in Wuhan. There is also evidence that SARS-CoV-2 was present in waste water samples long before it was reportedly discovered [3] in Wuhan.

At this stage, debating the origin of the SARS-CoV-2 seems like a self defeating exercise. It simply keeps us distracted from addressing the far more pressing problem.

The *pseudopandemic* was a global fraud committed by the *core conspirators* who are members of the *parasite class*. The priority now should be that we collectively refuse *en masse* to obey their diktats. Next we need to <u>start making decisions for ourselves</u> [4] and ignore the political puppets we are given, while we consider what form of society we want to create. Following that we need an investigation to identify the guilty and bring them to justice before they cause more havoc.

We need to build decentralised <u>systems of exchange</u> [5] and the mutual support networks we will need to live outside of the digital gulag. Some degree of compliance is likely to be unavoidable but our objective should always be to minimise it. We either accept that our health and our lives will be manipulated and controlled by AI algorithms and technocrats or cooperate with each other now to develop our own independent and lawful systems that circumvent and, as far as possible, ignore the Technate.

The G7 Rapid Response Mechanism [6] was announced in the UK, by then Prime Minister Theresa May, in June 2018. It was an agreement between the G7 State franchises (US, Canada, UK, Germany, Italy, France, Japan and the EU). It created the idea of "unified international response" to world events. The G7 committed to agree a narrative and promote it in unison. The evidence, supporting or questioning that narrative, wasn't important. All that mattered was that they all stuck to the same story.

The UK's *selected* Prime Ministers are *supported* by a team of more than <u>2700</u> <u>technocrats</u> [7] in the Cabinet Office and its agency the Crown Commercial Service (CCS.) The CCS oversees all procurement, meaning it spends tax payer's money on the things it claims we need.

In 2018 the CCS <u>awarded an £800M</u> [8] (\$1.1 B) contract to the OMD Group's OmniGOV project for what it calls *media buy ins*. The CCS stated that the purpose of the media buy in was to:

"Provide the best possible outcomes for communication campaigns.. The successful media buying agency.. will work in partnership with media buying agencies to deliver.. fully integrated campaigns for government."

Following the WHO's declaration of the *pseudopandemic* OMD Group (a subsidiary of Omnicom Group) developed its <u>Learn Fast Act Fast</u> [9] strategy. This was intended to help its clients (including the UK state franchise) to "navigate the road to a new normal." OMD Group deepened their "rapid response capabilities" which enabled "more informed decisions while providing a single version of the truth."

This ambitions of its <u>parent company Omnicom</u> [10] don't have anything to do with making money, despite making a profit of about \$1 billion in 2020. Instead they say that they exist to care for people and *communities*. *The* four key areas they focus on, rather than profits, are "community, people, environment and governance." They even have their own human rights policy and say that they recognise their "responsibility to protect human rights."

Their chairman and CEO Jon Wren said:

"Building social value, investing in people, respecting the environment – all have assumed their rightful place, not only as key elements of corporate reputation, but as hallmarks of good management and long-term business growth."

Tax payers are forced by law to give their money to the GPPP's State franchises. In turn the franchises then award lucrative contracts to their GPPP corporate *partners*, transferring the wealth from the tax payer to them. In this particular example, Omnicom have used the siphoned tax revenue to run propaganda campaigns which aim to convince us to *trust* the State franchise, believe in the *pseudopandemic* and continue the wealth transfer process.

OmniGOV were behind the "hard hitting" media campaigns designed to convince the public of the horror of the pseudopandemic. They were instrumental in the infamous look them in the eyes [11] offensive. Ignoring the fact that lockdown policies had no impact on the spread of disease and increased the mortality risk, OmniGOV accused those who questioned the pseudopandemic of killing their fellow citizens. It isn't really clear how this constituted "investing in people."

The Cabinet Office has effective control over *national security* and the intelligence agencies. It oversees the civil service and partners with the Treasury to determine the national budget and spending priorities. It takes the lead on *critical policy issues*, It manages the UK's cyber security and coordinates the government's response to *crisis situations*.

It is a technocracy in waiting with responsibility for *efficiency and reform* and has publicly declared its intention to "reform" our constitution. No one in the UK elects the Cabinet Office and its leadership is appointed by the GPPP's State Franchise representatives. Regardless of who you vote for the Cabinet Office remains. It is the permanent "government."

The Cabinet Office is the corporate headquarters of the UK GPPP State and is currently <u>headed by Simon Case</u>. [12] He is a former close aid of the British Royal

family and previous <u>head of strategy</u> [13] for the intelligence agency GCHQ (Government Communications Headquarters).

While it seems that the *parasite class* lack many of the qualities we value such as compassion, empathy and humility, we shouldn't underestimate their attributes. They are adaptable, focused and most importantly determined. Their collective will to act is their strength and, due to their authoritarian power and disregard for human life, extremely dangerous.

The WHO Director General's address to the <u>Munich Security Conference</u> [14], just four weeks before he officially announced the *pseudopandemic*, was telling. Especially given the audience.

The Munich Security Conference (MSC) <u>describes itself</u> [15] as "the world's leading forum for debating international security policy." It assembles so called decision-makers and thought leaders from within the GPPP.

Beyond a small group of invited politicians the overwhelming majority of the 450 delegates are not elected representatives of any of us. Yet they all gather in Munich, every year to discuss "pressing issues of international security policy."

Among the UK attendees [16] of the 2020 Munich Security Conference was Sophie, Countess of Wessex (née Rhys-Jones) representing the British Royal Family. With a background in public relations and a close relationship with the Queen she was the trusted envoy for the Royal household (the House of Guelph [17]) She was joined by the Western European Director of MI6 (Secret Intelligence Service - SIS) Justin Hewitt and then Foreign and Commonwealth Office political director Richard Moore, who subsequently advanced to become the head of MI6 [18]. Another UK delegate was serving 77th Brigade Officer and MP Tobias Ellwood.

The Bill and Melinda Gates Foundation were represented by their Director Orin Levine and Senior Director of Communication Emily Floeck. The Royal Institute of International Affairs (Chatham House) Research Director Patricia Lewis, George Soros (Open Society Foundation) and his son Alexander (a World Economic Forum young global leader) were also invited to attend. The World Economic Forum president Børge Brende joined the other delegates.

The Council on Foreign Relations sent nine delegates from both their US and European branches, and the Rockefeller Brothers Fund president Stephen B. Heintz was among those listening to the presentations. China dispatched two Technate officials, Google (YouTube & Alphabet) sent five representatives and Facebook sent two, including their head of global policy and former UK Deputy Prime Minister Nick Glegg. The head of the *Institute for Global Change* policy think tank Tony Blair, was also eager to hear the *core conspirators* plans.

Perhaps the most powerful UK delegate was the civil servant Mark Sedwill. Under his stewardship a single point of policy control was created uniting the Home Civil

Service, the National Security Council (NSC) and the Cabinet Office (including the Crown Commercial Service.)

The intelligence agencies came under the control of the NSC, the Cabinet office oversaw the Rapid Response Unit, 77th Brigade and other hybrid warfare units; collectively the NSC and the Cabinet Office managed the Foreign and Commonwealth Office (FCO) who, in turn, controlled the Counter Disinformation and Media Development program. With control over the CCS, Sedwill effectively centralised authoritarian control over the entire *national security* apparatus and the *pseudopandemic* hybrid war effort of the UK State Franchise.

The oft mentioned *revolving door* between the GPPP and politics is plainly a reward mechanism for faithful political service. It also facilitates direct corporate control of the State franchise. For example, former UK Prime Minister David Cameron employed Australian financier Lex Greensill as a special advisor giving him his own office [19] in 10 Downing Street. In return Greensill gave Cameron a lucrative lobbying Job [20] when he left politics.

Similarly, Mark Sedwill, having centralised authority over the UK State franchise *pseudopandemic* operations, also benefited from the *revolving door*. In January 2021, shortly after leaving the civil service, he was appointed as a <u>special advisor to Rothschild & Co</u> [21]. This seemed a strange appointment as Sedwill has no experience of banking or financial asset management. The global financial empire stated that Sedwill would:

"Assist in advising Rothschild & Co on its strategic ambitions.....across its Global Advisory, Wealth & Asset Management and Merchant Banking businesses."

Public health obligations, controlling the behaviour of billions, is a key aspect of the *new normal* biosecurity technocracy. In order for the population to be frightened enough to accept or even demand this new dictatorship, we were terrorised and paid the GPPP, via OmniGOV, for the pleasure.

For the terror campaign to work the GPPP could not allow any dissent. Neither evidence nor "facts," questioning the pseudopandemic, were permitted to leak into the single version of the truth. They could limit the public's face to face interaction using lockdowns and by closing public spaces and social venues, but shutting down the free exchange of information on the Internet offered additional challenges.

Ghebreyesus speech at the Munich Security Conference was focused on these concerns. His priority was the *infodemic*, by which he meant the people who would challenge the *pseudopandemic* narrative by highlighting the evidence bringing it into question. He spoke directly to the Social media and big tech representatives present about their responsibility to work with the gathered hybrid warfare specialists to shut down any inconvenient truth or dissent.

He also stressed the need for unity, clarity of purpose and roused his audience to condense their collective will into action. The *pseudopandemic* was the *common cause* to unite the entire GPPP. Covid 19 was mentioned in brief but was not seen as the main issue. The control of information was the priority.

In keeping with the WEF's appraisal, the disease itself was described as a *window* of opportunity. As stipulated in Agenda 2030 it was the chance to "Build Back Better." Ghebreyesus told the gathered GPPP representatives:

"Health security is.. not just the health sector's business. It's everybody's business. There are.. scenarios in which a coordinated response between the health and security sectors is essential.

The emergence of a pathogen with pandemic potential, moving rapidly from country to country.. is what we are seeing now with the outbreak of COVID-19.

We're encouraged that the global research community has come together to identify and accelerate the most urgent research needs for diagnostics, treatments and vaccines. We're encouraged that we have been able to ship diagnostic kits.. to some of the countries that need it most..

But we also have concerns...

We're concerned about the levels of rumours and misinformation that are hampering the response..

Two years ago, WHO and the World Bank founded the Global Preparedness Monitoring Board, an independent body to assess the state of the world's readiness for a pandemic. My sister Gro Brundtland, the cochair of the Board, is actually here..

Today, I have three requests for the international community....

First, we must use the window of opportunity we have to intensify our preparedness.. But we're not just fighting an epidemic; we're fighting an infodemic..

Fake news spreads faster and more easily than this virus, and is just as dangerous. That's why we're also working with search and media companies like Facebook, Google, Pinterest, Tencent, Twitter, TikTok, YouTube and others to counter the spread of rumours and misinformation..

We call on all governments, companies and news organizations to work with us to sound the appropriate level of alarm..

We must be guided by solidarity, not stigma. I repeat this: we must be guided by solidarity, not stigma. The greatest enemy we face is not the virus itself; it's the stigma that turns us against each other. We must stop stigma and hate!.

In our fractured and divided world, health is one of the few areas in which international cooperation offers the opportunity for countries to work together for a common cause..

This is a time for solidarity, not stigma."

Ghebreyesus heavily stressed the point that *solidarity* must defeat *stigma*. This peculiar, somewhat anachronistic turn of phrase was clearly intentional. Notably the virus was not the *greatest enemy*, according to the head of the world's leading public health authority. "Stigma" and disunity were.

He was addressing the GPPP who had already constructed their first Technate in China. The *communitarian* nature of technocracy shares some aspects of socialist political theory.

"Solidarity" is a word strongly associated with the trade union movement and socialism. <u>It means</u> [22]:

"Unity or agreement of feeling or action, especially among individuals with a common interest; mutual support within a group."

Stigma has multiple connotations [23]. It can be interpreted as:

"A mark of disgrace associated with a particular circumstance, quality, or person."

In the medical context it denotes:

"A visible sign or characteristic of a disease."

Ghebreyesus odd phrase could be interpreted as "this is a time for unified action, not any concern about a disease."

We should also look at <u>its etymology</u> [24]. The Latin plural of stigma (a mark on the skin) is "stigmata." The English derivation of the plural is "stigmas," meaning "marks resembling the wounds on the body of Christ." In this sense "stigmas" are the mark of Christ. They are a sign from God.

Ghebreyesus not only emphasised, he strongly reiterated this point:

"We must be guided by solidarity, not stigma. I repeat this: we must be guided by solidarity, not stigma.. We must stop stigma and hate!. This is a time for solidarity, not stigma."

The "we" he was referring to were the GPPP thought leaders. He urged them to stand united in both feeling and action, to support each other and defend the cohesion of their group. Protect the GPPP pseudopandemic in other words.

He implored them to reject the mark of disgrace their actions would invite. A lack of unity was the problem they faced not a disease. They must not allow any moral squeamishness to divide or stop them.

Unity of purpose was everything. They were to be guided by their determination to act and ignore God's law (Natural Law). As if they were <u>devotees of Thelema</u> [25] Ghebreyesus was seemingly advocating that "do what thou wilt shall be the whole of the Law."

This may seem implausibly esoteric but we shouldn't dismiss it too easily. Among the group Ghebreyesus was addressing were a number steeped in a very particular tradition. They were gathered to consider *global security policy* and were concerned with how to *keep and develop the public's trust* in their respective State Franchises during the *pseudopandemic* chaos they were about to unleash.

They were to protect the GPPP's *commercial and financial interests*. The security of the State franchise network was crucial, in the short term, in order to *enable the business of the* GPPP. They were devising *best practice guidelines and approaches required to protect* their assets as they set about establishing a global system to seize all assets.

As Klaus Swchwab acknowledged in *the Great Reset*, COVID 19 was not a disease which either the WHO, or the *thought leaders* present, were concerned about. The Director General's presentation was marked by a broad disinterest in the potential health impact of a virus, focussing instead upon the *security* implications of the *infodemic*.

He was speaking on the 15th February, 11 days after <u>peak case rate in China</u> [26]. With a daily mortality high of 142 out of a population of 11 million in a densely packed urban Wuhan, the WHO already knew that COVID 19 was a low mortality disease. There was no reason for the WHO to think COVID 19 had any *pandemic potential*. The only way it could be described as such was by applying the WHO's own customised definition.

The WHO Director General's claim that they were accelerating research to provide *diagnostics*, *treatments and vaccines* was true in only one regard. The WHO were not interested in either treatments or diagnostics. They did everything they could to block the trialling of effective treatment protocols and their diagnostic tests were designed solely to give State franchises control over claimed *case numbers*.

When the team led by world renowned cardiologist and professor of medicine Dr Peter McCullough published their peer reviewed article <u>Rationale for Early Outpatient Treatment of SARS-CoV-2</u> [27] in August 2020, they observed that of the 50,000 or so published papers on COVID 19 none offered any official advice to doctors on how to treat it.

When his team recommended effective treatments, such as hydroxychloroquine, in their paper it immediately became one of the most cited scientific papers in the world. Clearly the medical profession were desperately searching for relevant quidance.

To publicise his findings his daughter helped him make a video discussing the paper. This too went viral in a matter of days. In the video, hosted on YouTube, Professor McCullough, respected cardiologist and editor of two prestigious medical journals, showed some slides drawn from his peer reviewed paper.

YouTube (Google / Alphabet) removed his video because it <u>violated their terms</u> [28] by contradicting WHO *approved* COVID 19 medical information. The WHO have not spoken to Professor McCullough and have never mentioned the paper.

Google (YouTube) weren't about to let *stigma* override their *solidarity* with the GPPP. They were ready and willing to act to fight the *infodemic*.

Vaccines were the only thing the WHO were interested in. Not because they would provide any public health benefit, as the disease didn't warrant a global vaccination program, but because they were the key to unlock the global biosecurity based technocracy.

Generating the mandate for a global vaccination program was among the *core conspirators* principle motivations for the *pseudopandemic*. This would enable them to create bio-metric identity based smart grid through which to control the behaviour of individual citizens. This is the *biosecurity state* that will enable the technocrats to manage their citizenry.

The most consistent sound-bite during the 2020 *pseudopandemic* was "the new normal." Most people seemed to think it indicated little more than a notification from the government that post COVID 19 public health protections would need to be strengthened.

The "new normal" is the name for a society marked by significant economic austerity where behaviour will be controlled by limiting access to services and resources. The apparatus that will enable this conditional rationing will be the biosecurity surveillance state operated by technocrats under the rule of the GPPP stakeholders.

Communitarian principles and a prescribed set of ideological commitments will define the common good. So called local communities will be run by civil society. This will enable GPPP think tank policy to direct regional populations through behavioural change as political parties become increasingly irrelevant.

Only the selected *community groups*, who support the GPPP global agenda, will be allowed to participate in *civil society*. They must agree to the definition of the *common good*, stipulated by the GPPP, as prerequisite to participation.

Individuals or groups who do not agree with the official interpretation of the *common good* or those who oppose the behavioural requirements imposed upon them, will initially be ignored. If they refuse to comply and continue to question the *public good* they will face an escalating scale of punishments.

In his 2011 essay titled <u>The New Normal</u> [29] and in his 2014 book of the same name, <u>Amitai Etzioni</u> [30] debated where the line between the common good, especially collective security, and individual rights and freedoms should be drawn. While he warned against this decision being devolved to a group of unelected technocrats, nonetheless those advocating unelected technocrats pounced upon his ideas.

The *new normal* is derived from Etzioni's *communitarian* theories. Like Brzezinski, he too was a professor at Columbia University, where Scott and Hubbert first developed technocracy. He also joined Brzezinski in the White House as a Senior Advisor to the Carter Administration (1979-1980.) He is the current Director of the Center for Communitarian Policy Studies at the George Washington University.

Communitarianism is a political philosophy based upon the socialist utopia proposed by Henri de Saint-Simon, Charles Fourier and others. It was the utopian socialist John Goodwyn Barmby who first coined communitarian to elucidate their view that identity is a product of familial, social and community interactions. They considered that individual identity was formed from group (community) identity.

Like Brzezinski's, Etzioni's ideas have continued to impact State franchise policy. *Communitarianism* is highly critical of authoritarian state power but, as we have already discussed, the *parasite class* don't care about the philosophical foundation of sociopolitical or socio-economic theories, only how they can be adapted to achieve their goals.

Etzioni and other communitarians, reject both technocracy and the imposition of order through coercion or enforcement. Instead they suggest normative means such as education, leadership, consensus, peer pressure and the use of role models to deliver social change. This is in keeping with the *utopian socialist's* repudiation of the class struggle.

The 1991 Responsive Communitarian Platform [31] was the original manifesto of Etzioni's Communitarian Network. It argued for civil society, defining it as both the moral and political space between community and State. It suggested that global problems could only be tackled with the participation of civil society:

"A communitarian perspective must be brought to bear on the great moral, legal and social issues of our time.. Moral voices achieve their effect mainly through education and persuasion, rather than through coercion.. they exhort, admonish, and appeal to what Lincoln called the better angels of our nature.. this important moral realm, which is neither one of random individual choice nor of government control, has been much neglected.. we see an urgent need for a communitarian social movement to accord these voices their essential place.. civil society is a constant, ongoing enterprise."

By offering *local communities* the opportunity to engage with other *stakeholders* in this *civil society*, communitarians contend that those who already wield authoritarian

power will suddenly embrace power sharing. In his essay for the UK policy think tank DEMOS [32] (funded by George Soros' Open Society Foundation) Etzioni outlined this as a synthesis between state, market and community.

In the UK this notion of *civil society* has been called the *Third Way* by former Prime Minister Tony Blair's Labour government and the *Big Society* by David Cameron's Conservative led government. Today *civil society* is the preferred sound-bite, but they all essentially mean the same thing: local governance by community groups pursuing global governance agendas.

Contrary to the communitarians' hopes, *civil society* is a form of centralised authoritarian control based upon the illusion of an alleged balance between the state (public sector), the market (private sector) and the community (social sector.) Communitarians naively consider this a viable way to achieve an egalitarian "progressive" society. It is the disassociation of communitarianism from the reality of authoritarian power, exemplified by their rejection of the class struggle, that allows their ideas to be so easily exploited by the *parasite class*.

Communitarianism misinterprets the relationship between state and market. It wrongly assumes they are distinct and that elected governments represent the people. As the State franchise (public sector) is a constituent member of the GPPP and is in *partnership* with global corporations (private sector), a communitarian political model creates a corporate system of rule. Their proposed *civil society* gives the GPPP direct access to and power over every aspect of our polity.

On one side of the *civil society* equation we have the union between the state and the market (GPPP.) They have immense economic, financial and political power and are the only people with the legal authority to initiate force. The other side is "balanced" by some nebulous concept of *community* which has absolutely no power at all.

What is a community? Who speaks for the community and who do they represent? We often talk about our *local community* but what does that actually mean? Do we mean our neighbourhood or do we mean the people with whom we share common interests, or does community mean something else?

We live in towns, cities, counties and nations but we do not all agree upon what should happen within these political boundaries. There is no uniformity of opinion among alleged *local communities*. The claim of any *community* leader that they represent their supposed *community* seems an arrogation. Often disagreement within communities is fiercer than the antagonism between them.

This is no pedantic criticism of communitarianism. They are suggesting that this thing they call *community* can counterbalance the might of the GPPP in a three way relationship of equals. Even if this triad existed, Etzioni's own definition gives no indication that power sharing is possible:

"Communities provide bonds of affection that turn groups of people into social entities resembling extended families. Second, they transmit a shared moral culture.. from generation to generation, as well as reformulating this moral framework day by day. These traits differentiate communities from other social groups.

Contemporary communities evolve among members of one profession working for the same institution..; members of an ethnic or racial group even if dispersed among others; people who share a sexual orientation; or intellectuals of the same political or cultural feather.. Groups that merely share a specific interest.. to prevent the internet from being taxed or to reduce the costs of postage.. are solely an interest groups.. They lack the affective bonds and shared culture that make communities.. places that truly involve people rather than focusing on a narrow facet of their lives."

Etzioni defines *community* as groups of individuals who share some values and have an emotional attachment to each other. To some greater or lesser extent they formulate their own identity through their affection for other group members. These *communities* are not the same as special interest groups who are more task oriented.

Throughout human history power has been wielded by groups of free thinking individuals who were united behind a *specific interest*. They have consistently subjugated *communities* through coercion and the use of force. As individuals with free will we can certainly form a *specific interest group* united to resist global tyranny. As a disparate array of emotionally bound *communities*, each formed around a never ending list of competing and often fiercely opposed belief systems, we have no chance.

The *parasite class* led GPPP are fully aware of this, hence their obsession with controlling our behaviour and huge investment in propaganda. They are a task oriented and highly motivated *specific interest* group. Individuals within it may not like each other one bit, there are clear tensions between them, but they are all committed to a parrow facet of their lives.

Save in the vaguest of terms, the communitarian's concept of *community* is practically meaningless. This does not mean that groups of individuals don't share values, nor that they are incapable of working collaboratively. We often join forces on ventures of immense complexity, involving thousands. But these collective efforts coalesce around specific aims and objectives.

Throughout the *pseudopandemic* we were told that people like the SAGE 'NERVTAG scientist Neil Ferguson spoke for the *scientific community*. However, we know that they only spoke for themselves and the interests they represented. Significant numbers of scientists, even some among SAGE, often more suitably qualified, disagreed with the *official* scientific opinion of the *selected* spokespersons.

The *scientific community* doesn't have a single consensus of opinion on anything. Scientists don't maintain a collective emotional attachment to each other and, apart from adherence to a couple of conventions, such as logic and the empirical method, they don't share values or morality either.

As such, in communitarian terms, there is no such thing as the *scientific community*. The GPPP vehemently insist that one exists because of the advantages it brings them.

By presenting the opinions of a small band within SAGE as the *consensus* of the *scientific community*, the GPPP State franchise were able to accuse anyone who questioned their *pseudopandemic*, especially dissenting scientists and physicians, of being "anti-science." This then formed the basis for the wide sweeping *pseudopandemic* censorship of science and medicine.

This reveals the deceit of the *civil society* being foisted upon us by the GPPP. Some groups, who may consider themselves to be *community representatives*, are invited to *speak for* a much larger population of individuals whose voices will be unheard in the civil society pretence of democracy.

These *community representatives* won't speak for anyone other than their own *community* and the extent to which they can lay claim to that is questionable. The wider population of individuals said to comprise the *local community* won't be represented by anyone but their lives will be controlled through governance by *civil society* nonetheless.

The refrain of *local community* is now inserted into nearly every State franchise policy. Regardless of the communitarians' wishes, their ideas have been poached to form a civil society of *stakeholder capitalists*. These selected stakeholder community groups will either be the ones that are most closely aligned with the GPPP agenda or those easiest to manipulate. Other groups, perhaps formed in opposition to the biosecurity technocracy, who might be more resistant to manipulation, won't be invited to join *civil society*.

Not only will the communitarians' progressive *civil society* serve the Technate, just as dissenting scientists were deemed to be *anti-science*, so those who refuse to accept technocratic dictatorship will be considered *anti-social*. They will be pariahs blamed for undermining the *common good* of the *community*.

Communitarian philosophy provides the GPPP with the rationale for excluding its critics and those who aren't *on message*. According to the *Responsive Communitarian Platform* civil society will enable *local communities* to address global concerns:

"There are, of course, plenty of urgent tasks—environmental ones—that do require national and even international action.. Many social goals require partnership between public and private groups.. There is a great need for study and experimentation with creative use of the structures of civil

society, and public-private cooperation, especially where the delivery of health, educational and social services are concerned.

We should not hesitate to speak up and express our moral concerns to others when it comes to issues we care about deeply.. Those who neglect these duties, should be explicitly considered poor members of the community.. A good citizen is involved in a community or communities.

We know that enduring responsive communities cannot be created through fiat or coercion, but only through genuine public conviction.. Although it may seem utopian, we believe that in the multiplication of strongly democratic communities around the world lies our best hope for the emergence of a global community that can deal concertedly with matters of general concern to our species as a whole."

The GPPP intend to exploit *civil society* by actively engaging them in *urgent tasks* necessary to address *international* concerns. The GPPP will determine what those concerns are and will then invite community *representatives* to validate the policies they want. If you oppose them you are not a *good citizen*. The members of the *local community* who question the GPPP definition of the problem or their proposed policy solutions, even if they form their own groups, won't be *engaged* but rather censored, excluded and berated.

The contradictions in communitarian philosophy verge upon the absurd. In their attempt to advance democratic communities, based upon inclusive community engagement, they would see any and all who do not agree, not only excluded from their community but censured as *poor members of the community*.

This is perfect for the GPPP. They willingly operate within a system of compartmentalised authority headed by the *parasite class*. Not because they share values or affection for each other but out of unbridled self interest. Their corporate profits are served by maintaining this system. No matter what the politics of nation states may be and regardless of any policy changes, they always win.

Even a supposed global pandemic and the destruction of the global economy has seen an <u>inordinate transfer of wealth</u> [33] to the GPPP. They have been able to use the engineered economic turmoil and lockdown restriction to massively cut their costs by making vast numbers of their employees redundant. At the same time most of the created monopoly money has been fed to them and the markets. They profit from war, famine, pestilence and disease.

PayPal's chief of finance John Rainey, in an interview for the Washington Post at the height of the *pseudopandemic*, said:

"I don't think we've ever been more excited or energized about our prospects."

The President and CEO of Nike John Donohoe was similarly upbeat:

"These are times when the strong can get stronger."

Donohoe was absolutely correct. Shortly we will look at the core conspirators financial motives, one of which was to destroy small to medium size businesses leaving global corporations as the only surviving *stakeholder capitalists*.

Etzioni and his fellow progressive communitarians do not seem to understand that it is the authoritarian power structure which defines global issues. Through the *new normal* civil society the communitarians are not engaging in a *meaningful dialogue* with the GPPP, they are colluding with them.

Reluctant to contradict the opinion of the group which defines their identity, communitarians have to give up independent critical thinking to maintain their own sense of self. This breeds unquestioned certainty, intolerance for any opposing views and an inability to engage in logical discourse. Those who do not share the prescribed group ethos, or those who question the evidence base underpinning the groups certainty, are not fellow human beings but rather "other."

Communitarianism, and the progressive mindset it has spawned, is a gift to the GPPP. The Responsive Communitarian Platform explains how communitarian *democrats* deal with dissent:

"Responsibilities are anchored in community.. communities define what is expected of people; they educate their members to accept these values; and they praise them when they do and frown upon them when they do not.. Whenever individuals or members of a group are harassed, many non-legal measures are appropriate to express disapproval of hateful expressions and to promote tolerance among the members of the polity."

In the *new normal* you will be told what is expected of you. If you think those expectations are unreasonable or possibly counterproductive, you will be reeducated to *accept* the required *values*. If your re-education fails and you still don't agree with the espoused global values of *civil society*, and if you then persist in raising your objections, you are guilty of harassment and *hate*.

Open and free democracies are supposedly based upon a raft of cherished freedoms, including freedom of speech, assembly, expression, religion and petition. The communitarian view that these principles can be upheld while insisting that only their opinions are valid is utterly delusional.

This makes the *progressive communitarian* the GPPP's agent of change. By using the appropriate catchphrases (sustainability, inclusivity, resilience etc.) the GPPP can tell the *progressives* what they want to hear, reinforcing their identities for them. With the right experts thrown in, and by limiting the information available to the group, the GPPP can create a generation of technocratic zealots.

This is why corporations like Omnicom market themselves with a word salad of disingenuous platitudes. They wish to engage as *stakeholders* in *civil society*

effecting change in *local communities* to achieve *global goals*. For no other reason than their own self interest.

It appears that their business practices are the antithesis of the moral virtues they claim to embody. It is hard to see how OmniGOV's terror campaign, driving the pseudopandemic fear, can possibly add any social value. However, the progressive community groups who wholeheartedly believe everything the GPPP tell them are incurious enough to be reassured by the rhetoric they want to hear.

Writing in 2010 Klaus Schwab stated [34]:

"According to the stakeholder approach, the management of the enterprise acts as a trustee for all stakeholders.. It is based on the principle that each individual is embedded in societal communities in which the common good can only be promoted through the interaction of all participants.. If we want to keep society together, a sense of community and solidarity are more important now than ever before. This communitarian spirit is the basis of the stakeholder principle. We need to embrace that stakeholder principle, not just within the narrow confines of companies, but at a national and global level as well."

The *civil society of stakeholders* is being promoted as the solution both to the inherent deficiencies of representative democracy and global problems. However, it is just another deceptive element of the GPPP's global power and resource grab.

In communitarianism the GPPP have found a sop to placate the subjects of their planned technocracy. People can get involved in their local community as long as they are working towards the *common good* defined by the *parasite class*. The Technate will be imposed no matter what. However, it will be so much easier for the GPPP if we believe in it too.

The GPPP, led by the *core conspirators* within the *parasite class* and their *informed influencers*, are determined *specific interest group* who are collectively taking action to achieve their goals. *Community* engagement in a civil society, founded upon the identity politics of communitarians, isn't a solution. It is part of the problem.

The willing citizen in the *new normal*, convinced that they are the only moral voice, are assisting the GPPP to seize the *global commons*. No matter how well meaning they are, they are the defenders of the *sustainability* the GPPP hide behind. By placing their faith in the new form of *democracy* constructed around *civil society*, they are hastening its extinction.

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Chapter 19 - Faith In The Eco-Dictatorship

In 1877 one of the most powerful and influential men in the British Empire (and consequently the world), Cecil Rhodes, wrote "Confession of Faith." [1] He laid out a vision for a global empire to be formed by the Anglo-American establishment [2]:

"I contend that we are the finest race in the world and that the more of the world we inhabit the better it is for the human race.. Why should we not form a secret society with but one object.. making the Anglo-Saxon race but one Empire.. a society not openly acknowledged but who would work in secret for such an object.. A society which should have members in every part of the British Empire working with one object and one idea.. For fear that death might cut me off before the time for attempting its development I leave all my worldly goods in trust.. to try to form such a Society with such an object."

Following his death in 1902, Rhodes' bequeathed fortune financed the creation of the Round Table Movement [3]. They set about forming a global network of policy think tanks whose membership would be drawn from the people who had the means and the opportunity to "influence the lives of millions across borders on a regular basis."

The post WWI Paris Peace Conference in 1919 saw a group of delegates, led by prominent Round Table member <u>Lionel Curtis</u> [4], establish the British Institute of International Affairs which soon received its Royal Charter to be renamed the Royal Institute of International Affairs [6] (RIIA). It is often referred to as Chatham House (it's St. James' Square, London HQ.)

They devised the **Chatham House Rule** [5] which states:

"When a meeting, or part thereof, is held under the Chatham House Rule, participants are free to use the information received, but neither the identity nor the affiliation of the speaker(s), nor that of any other participant, may be revealed."

While the rule itself isn't enforceable by law, any organisation, including the institutions of government, can cite it as a matter of policy. Anyone who breaches it will face disciplinary action. When the people at the meeting, enforcing the policy, are able to buy nations that 'discipline' is not something easily ignored. No matter who you are.

This enabled the construction of a global network of power brokers who can hide in the open thanks, in no small measure, to the Chatham House Rule. The RIIA gave rise to the Council of Foreign Relations, the Trilateral Commission, Le Cercle, the Club of Rome and many other influential policy making groups.

The RIIA is the original foreign policy think tank and arguably the global hub of the Deep State milieu. Their membership list [6] forms a foreign policy directorate with a

global reach. Institutes of government (State franchises), including intergovernmental and supra-governmental organisations are just a part of the RIIA collective.

Their members include the Bill and Melinda Gates Foundation, the Open Society Foundation, The Royal Society, Astrazeneca, Gilead, Bloomberg, The City of London, The European Commission, the European Union, BAE systems, Lockheed Martin, Goldman Sachs, the Bank of England, HM Treasury, the Bank of Japan, the Bank of Italy, Morgan Stanley, De Beers, BlackRock, China International Capital Corporation, KPMG, Moody's, Kings College London, the Royal College of Defence Studies, the Foreign, Commonwealth & Development Office, the Ministry of Defence, Department for Digital, Culture, Media and Sport, the Department of Heath and Social Care, the British Army and all foreign embassies to the UK. The list goes on.

Able to meet behind the closed doors of Chatham House, absent public scrutiny, the RIIA are a GPPP think tank which creates the policies that shape the lives of billions. When they make something public only a fool would ignore it or imagine that they don't intend to act to realise their ambitions.

Published in April 2021 <u>Futurescape - What London Will Look Like In 100 Years</u> [7] provides us with an outline of the RIIA's policy trajectory. The RIIA's Managing Director of Research Partnership Rose Abdollahzadeh said:

"Work on Futurescape began in January 2020 with the transition to sustainability at the heart of our ambitions.. Everything featured in the Futurescape time periods either already exists, or is in development.. it is highly achievable and plausible if society wants to make it happen.. The pandemic has.. significantly accelerated certain changes."

Futurescape is a visualised *computer model* of our planned future split into four periods. Up to 2035, then 2060, 2090 and finally to 2121, the planned conclusion of Agenda 21. Dressed in the fluffy sound-bites of the permitted communitarian mindset what it portends is horrific. It is worth remembering that the RIIA have access to resources on a scale few of us can relate to. Nothing they suggested was unintentional and the imagery they used matters.

As the viewer is taken to 2035, the first thing to note about the RIIA's sustainable utopia is that there aren't many of us left around to see it. Piccadilly, usually bustling with people, is presented as a landscape of urban tranquillity and open green spaces. It shows just a few people dotted here and there.

You might consider this simply a necessity of the presentation, enabling the viewer to see the highlighted buildings and other design features, yet this reduction in our numbers is also a eugenicist obsession. Furthermore, our *sustainable* future appears to be firmly based upon a much smaller population.

In <u>Electrifying the UK</u> [8], a study led by Michael Kelly (Emeritus Prince Philip Professor of Technology at the University of Cambridge and Chief Scientific Advisor to the UK Department for Communities and Local Government), an assessment was made of the raw materials and resources needed to power the UK's existing vehicle road fleet if limited to electric vehicles only.

Assuming no quantum leap forward in battery technology, at current levels, the UK alone would require a little less than twice the annual global production of cobalt. It would need three quarters of the world's production of lithium carbonate, nearly the entire global production of neodymium and more than half the world's production of copper. Then there is the problem of using renewable energy to generate the required electricity to charge all our vehicles in a net zero carbon economy.

Dinorwig Power Station is the biggest hydro-power plant in the UK. If its entire output were solely dedicated to charging cars it would be able to charge 150,000 small cars, which is about 0.7% of the current UK vehicle fleet. Windmills aren't going to cut it, which leaves us needing a massive increase in nuclear power, with all the additional environmental and health risks.

This calculation doesn't include the renewable energy we will need to heat our homes, cook food, manufacture goods, provide healthcare or any of the vast array of power requirements we routinely take for granted. As we race towards a *net zero carbon* future no one seems to care about what this actually implies.

Certainly none of this matters to climate change extremists as they would quite like us to eat each other, but for the rest of us this presents a tricky conundrum. If we consider transport alone, as the UK State franchise has committed to stop-sales-of-all-new-petrol-and-diesel-cars [9] by 2030, the expectation is either that we practically give up our freedom to roam and rely upon public transport, access to which will be conditional in the biosecurity state, or we won't need the current number of vehicles.

The extent of austerity caused by the deliberate crashing of the global economy probably means the vast majority of us won't be able to afford one. However, the RIIA's Futurescape also suggests the current demand for vehicles won't exist because we won't.

In 2035 we'll be eating *meat alternatives* and "experimental" food. Our behaviour will be tightly controlled. Social credit linked to digital currency issued by central banks is the planned control mechanism. The RIIA announce:

"Goodeeds department store only accepts Care Pounds. A government certified cryptocurrency earned through social contributions and time spent on community projects."

By 2060, either through some as yet undiscovered scientific miracle or much smaller demand, everything will be powered by renewable energy. Apparently sea levels will have risen so high that London has a canal transport system.

Consumerism will be replaced by the exchange and recycle culture in the *circular economy*. Micro-farms will grow food locally and we will have to eat insects.

By 2090 homo sapiens will be extinct or nearing extinction. A new species of genetically modified humanoids with AI implants and cybernetic adaptations will prevail. *Earthism* is the new global religion. By 2021 everyone lives in smart cities and both individual humanoid lives and society is run by AI.

In this *utopia*, described by the RIIA, the people just accept that they have to eat insects and experimental food. They are happy to have no financial or economic freedom and enthusiastically embrace the compulsion to work in *community projects*. They also willingly submit to being genetically engineered and having Al controlled implants inserted into their bodies with their minds linked to the digital hive.

Who knows, perhaps this will prove to be the case? However, as Rose Abdollahzadeh pointed out, it all depends upon our compliance. We will either *make it happen* or, through our apathy, let it happen. If we don't want this future we need to act quickly as the *pseudopandemic* has been used to initiate our transformation towards the *futurescape*.

The *new normal* society will encourage us to eschew consumerism as a criterion for measuring success in favour of the joy we will experience through our achievement of sustainability. Amitai Etzioni was among the communitarians who suggested happiness as mensuration of social progress. He noted that faith was an important factor for improving people's level of contentment.

Etzioni considered that belief in a god wasn't necessary and that the reason why people with faith were found to be happier was due to their shared community spirit, higher levels of social interaction and sense of common purpose. This could just as easily be found in a commitment to environmentalism and sustainability. In The Surprising Link Between Sustainability and Social Justice [10] he wrote:

"Can one identify other sources of contentment for those who, while having achieved an income level that enables them to meet their 'basic' needs, will live in a more austere, less growth-centered, environment? What other sources of legitimacy can be developed that are not based on a continually rising standard of living? I see great merit in shifting the focus of our actions from seeking ever-greater wealth to investing more of our time and resources in social lives, public action, and spiritual and intellectual activities.. Such a society has a much smaller ecological footprint than the affluence-chasing society and hence helps cope with the triple challenge: the deteriorating environment, smart machines killing many jobs while generating few, and rising discontent."

The debt fuelled economic growth that has seen our absolute quality of life improve, is set to end. The monetary policies pursued during the *pseudopandemic* demonstrate that the *parasite class* have no long term plans for the global economy

in its current form. The global depression we are about to embark upon will be unlike anything we have experienced before.

We face a future of long term austerity. The GPPP require us to have a new faith to replace our consumerism as we learn to *own nothing* and be *happy*. Devotion will be practised by working towards sustainable development goals (SDG's). It is essentially the <u>worship of Gaia</u> [11] or, as the RIIA call it, *Earthism*.

The 1987 Brundtland Report, which strongly advocated the eugenicist principle of population control, called for the creation of a "new charter" to set "new norms" to guide the transition to <u>sustainable development</u>. [12]. This led in 2000 to a <u>special ceremony</u> to launch <u>the Earth Charter</u> [13].

The Earth Charter is a quasi-religious document which has been endorsed by State franchise and *civil society* groups globally. It frequently strays into mystical claptrap as it attempts to seed the new faith. It is riddled with the catchphrases of global governance we are now familiar with:

"We must recognize that in the midst of a magnificent diversity of cultures and life forms we are one human family and one Earth community with a common destiny.. Humanity is part of a vast evolving universe. Earth, our home, is alive with a unique community of life.. The spirit of human solidarity and kinship with all life is strengthened when we live with reverence for the mystery of being."

It certainly offers one truth but, reading between the lines, that truth is the hard nosed global ambition of the GPPP. It promotes eugenic inspired population control, technocracy, biosecurity, communitarian austerity and above all global governance:

"The global environment with its finite resources is a common concern of all peoples.. The dominant patterns of production and consumption are causing environmental devastation, the depletion of resources,.. Communities are being undermined.. An unprecedented rise in human population has overburdened ecological and social systems. The foundations of global security are threatened.. when basic needs have been met, human development is primarily about being more, not having more.. We have the knowledge and technology to provide for all and to reduce our impacts on the environment. The emergence of a global civil society is creating new opportunities.. for a sustainable way of life as a common standard by which the conduct of all individuals, organizations, businesses, governments, and transnational institutions is to be guided and assessed."

A core tenet of the GPPP's new religion is their faith in financial technology (fintech). To suggest that this is part of the restructuring of the global economy and that it is unrelated to combatting climate change is already heresy. Speaking in 2015, then Executive Secretary of the United Nations Framework Convention on

Climate Change (UNFCCC), one of the leading architects of the Paris Climate Agreement, Christiana Figueres, stated the following [14]:

"This is probably the most difficult task we have ever given ourselves, which is to intentionally transform the economic development model.. the first time in the history of mankind that we are setting ourselves the task of intentionally, within a defined period of time to change the economic development model that has been reigning for at least 150 years.. That will not happen overnight and it will not happen at a single conference on climate change.. It is a process, because of the depth of the transformation."

Apparently, if you ever reference this statement you are spreading *dezinformatsiya*. We are expected to ignore it and pretend the U.N. never said it. To question the motivations of those behind the climate change agenda is "anti-science," "climate denial" or something like that. We are also told that the numerous scientific doubts [15] about humanity's impact upon climate change don't exist. We must have faith in the scientific consensus as expressed by the *right* scientists.

Speaking after US President Biden's *Earth Summit*, where he committed to halve US Co2 emissions in <u>less than 9 years</u> [16], UK Prime Minister Boris Johnson said that the *pseudopandemic* had <u>presented us with the chance</u> [17] of *"building back greener."* For Boris and other GPPP *partners*, sustainability means *green finance*.

The population have to combat climate change by giving up their freedoms and living a more austere, limited existence. The GPPP will combat it by creating a new global financial and monetary system which will enable them to steal all of the Earth's resources.

The global financial institutions and Central Banks also want to *do the right thing*. The UK State franchise is eager to set itself up as a global hub for green finance and created its <u>UK Centre for Greening Finance</u> [18] in February 2021. They will use *computer models* to *predict climate change* risks and advise banks, lenders, investors and insurers where to invest, creating new financial products that will combat climate change.

In 2018 the City of London Corporation partnered with the UK State franchise to create the <u>Green Finance Institute</u> [19] (GFI.) They say they want to channel *global finance* into *local solutions* to save mother Earth. The GFI bring together:

"Global experts and practitioners to co-design sector-specific solutions that channel capital towards an inclusive, net-zero carbon and resilient economy. We are the UK's principal interface between the public and private sectors, identifying and unlocking barriers to deploy capital at pace and scale towards impactful, real-economy outcomes.. The Green Finance Institute works with finance practitioners, policymakers, business innovators, academics and non-profit professionals to identify the required policy, technology and financial pathways that will enable the transition to

a green economy.. We also support the greening of the domestic and international financial system through close collaboration with financial regulators and policymakers, and international dialogue and partnerships."

The *greening of international finance* will require phenomenal levels of investment which will be extracted from us. With the US, China and France leading the world in <u>issuing green bonds</u> [20] the green bond market is set to achieve a value of \$2.36 trillion by 2023 [21]. This is just the start. Speaking at the GFI launch, then UK Chancellor Philip Hammond said:

"If we are collectively to meet our global climate goals, we will need to mobilise \$90 trillion by 2030 and it is my ambition that the UK leads the world in financing this investment."

Hammond had every reason to believe this figure would be achieved. It won't be possible for a business to operate unless they obey the State franchise regulations created to achieve global Sustainable Development Goals (SDGs.) The cost of this transition to a *resilient* global economy will be beyond the reach of most small to medium size enterprises (SMEs).

Prior to his departure from the post of governor of the Bank of England, Mark.

Carney warned [22] that companies unable to meet the SDG regulatory standards "will go bankrupt without question." In other words, lines of credit, without which even multinational corporations cannot hope to function, will be limited only to those who can afford to implement the required changes. Carney reinforced his message [23] and signalled to his GPPP partners how the new financial system would benefit them:

"There will be industries, sectors and firms that do very well during this process because they will be part of the solution. But there will also be ones that lag behind and they will be punished."

These are times when the strong can get stronger.

The promise from world leaders at the Earth Summit was that achieving SDGs would create jobs. This only refers to the new forms of employment, it says nothing about whether these new jobs will be in sufficient numbers to replace the old jobs lost to the *green* revolution.

All the evidence indicates that the *net zero* economy won't be based upon anything close to the employment levels we are accustomed to. Leaving families reliant upon the State franchise Central Bank Digital Currency (CBDC) doled out in the form of Universal Basic Income (UBI.)

The RIIA have already modelled this. In their *Futurescape* the remaining population work a four day week. Low levels of employment are factored in to GPPP driven model of *sustainability*. The planet might be *protected* but we will face increased risk and uncertainty.

In 2018 PricewaterhouseCoopers (PwC), GPPP partners in both the RIIA and the WEF, modelled the Workforce of the Future [24]. They presented a number of scenarios based upon megatrends and their assessments of how we might adapt to these apparently unavoidable impositions. Whichever model they outlined the common theme was increasing automation and AI domination of the workplace. Job losses are unavoidable they say, although new jobs will be created.

However, the scope and range of these new jobs appears to be extremely limited. These created jobs will be done by what they describe as "pivotal people" with a very particular skill-set who will be valuable to their corporate employers. They predict:

"Those workers performing tasks which automation can't yet crack, become more pivotal – and this means creativity, innovation, imagination, and design skills will be prioritised by employers. This view is supported by business leaders worldwide who responded to our most recent CEO survey. These are the 'pivotal' people.. Finding and keeping these pivotal people will be a huge challenge.. That's why organisations will need to pay careful attention to the employee value proposition – the reasons why these extraordinary people were attracted to working with them in the first place."

It seems there will be meagre employment opportunities for the rest of us in our sustainable future. The few remaining jobs will be limited solely to those tasks that cannot be performed by automation or AI. Only the *extraordinary* people, with skills suited to the GPPP, will be of any value. There are many reasons to place considerable credibility in the 2013 study by <u>Oxford University researchers</u> [25] which predicted that 47% of all jobs will be lost.

Again we can look to the RIIA think tank to understand what this will mean for us. The RIIA commissioned the Royal Society to <u>conducted a review</u> [26] of the available literature on the impact of AI and automation. They found a distinct lack of research assessing the implications for us as individuals. They observed:

"This evidence shows that the use of digital technology in work is linked with increasing polarisation of work between jobs mainly performed by workers with low levels of formal education ('low-educated') and jobs performed by high-educated workers.. Individual losses from displacement related to automation have not yet been estimated but a broader literature suggests that these losses can be significant and persistent.. This may nevertheless lead to significant increases in inequality, particularly if employers have significant market power."

The economic response to the *pseudopandemic* has ensured that some employers have increased their already significant market power towards market domination. They are among the corporate members of a GPPP which has exploited the *pseudopandemic* to transition us all into the *stakeholder capitalist* led market.

In this sense, lockdowns have also been used to introduce younger people to the concept of a low employment society. Those of us who lived through the 1980's are already familiar with that experience and the social and economic deprivation it guarantees.

The new stakeholder economy is not based upon mass employment. Carney's successor as Governor of the Bank of England (BoE) Andrew Bailey has already stated that it would be important to get rid of "unproductive jobs" and that job losses, as a result of the "COVID 19 crisis," were inevitable [27].

No job is *unproductive* for the person who receives payment for doing it. For them it provides the means to live and support their family.

The intrinsic theme running throughout everything branded *sustainable* is population reduction. It is very difficult to see how an entire civilisation with slowing but appreciable population growth can be fully automated without a corresponding increase in energy demand. While the GPPP promise a sustainable, greener future, as yet no one has explained where an AI designed automated society of cybernetically and genetically engineered humanoids will get its energy from if not fossil fuels.

For example one of the targets for the European Union's (EU's) <u>European Green Deal</u> [28] (EGD) is to achieve *zero carbon steel production* by 2030. In addition to the staggering amount of energy needed to extract, ship and process iron ore to make pig iron, steel manufacturing is an incredibly energy intensive process. The idea that current technology could enable this process to be *carbon neutral* is ludicrous. Steel production is just one of the thousands of high energy industrial processes we need.

The EGD doesn't even mention nuclear power instead saying "a power sector must be developed that is based largely on renewable sources." It is entirely reasonable to wonder what on Earth they are rambling on about. Unless we intend to relinquish our grasp of reality entirely and replace it with nothing but a mystical faith in *Earthism*, it seems the only way to reach this sustainable nirvana without nuclear power is to massively reduce demand.

The current options for renewable sources are hydro electric, solar, wave (tidal) and wind power. Burning biomass is also called *renewable* though it <u>produces more Co2 emissions</u> [29] than coal. The country leading the renewable energy revolution in Europe is Germany. With its *Energiewende* (Energy Transition) policy initiative Germany has largely replaced its nuclear generating capacity with wind power and, to a lesser extent, solar energy.

During the *dead of winter*, when the German people need energy the most, wind power only works when it is windy, which often it isn't, and solar barely works at all or not at all when the panels are covered in snow. Energy grid instability is an <u>increasing problem in Germany</u> [30]. This winter (early 2021) German national broadcaster RBB reported that Germany's energy suppliers were running at full

capacity with the coal fired power plant in Lausitz straining under the demand of Berlin's power requirements. With no spare capacity they were on the brink of disaster.

Harald Schwarz, professor of power distribution at the University of Cottbus, told RBB that he was very sceptical of *Energiewende* as it suggested to him that the gap between supply and demand would widen dangerously. He said that the reality of energy supply had been "totally neglected" by policy makers and that Germany would be forced to rely upon energy imports from nuclear powered France, Polish coal producers and Russian natural gas suppliers. Highlighting the *Energiewende* folly he added:

"With this supply of wind and photovoltaic energy, it's between 0 and 2 or 3 percent – that is de facto zero.. We have days, weeks, in the year where we have neither wind nor PV.. These are things, I must say, that have been physically established and known for centuries, and we've simply totally neglected this during the green energies discussion."

The RBB report was censored by the GPPP in order to protect their SDG deception. Deutsche Bank are certainly aware of the issues raised by Professor Schwartz. They <u>published an article</u> [31] in November 2020 where their senior analyst, Eric Heymann, outlined the crux of the problem in detail:

"The latest Sustainable Development Scenario of the International Energy Agency.. expects renewable energy sources to have a share of 35% in total energy consumption.. even in this optimistic scenario, renewable energies are far away from being the main pillar of global energy supply.. The impact of the current climate policy on people's everyday lives is still quite abstract.. Climate policy comes in the form of higher taxes and fees on energy... We take key consumption decisions.. how we heat our homes, how many electronic devices we have.. If we really want to achieve climate neutrality, we need to change our behaviour in all these areas of life.. A major turnaround in climate policy will certainly produce losers among both households and corporates. In addition, prosperity and employment are likely to suffer considerably."

Much like the Earth Charter that inspired them, the UN's Agenda 21 and 2030 SDGs are replete with all the warm words and reassurances that propagandists like to use. SDGs will supposedly deliver a world free of poverty, hunger and disease. They are said to be a plan of action for people, planet and prosperity. Who could ever disagree with these humanitarian goals? Anyone who does can thus be ostracised for questioning the dangerous insanity of the GPPP's *sustainable development goals*.

The SDGs are *newspeak*. It is clear from the research of the Royal Society and PwC, the statements from the BoE, the analysis of academics like Professor Shwartz and many others that the model of sustainability we are expected to follow

has not been developed with humanity in mind. There is no risk assessment which assesses the human cost of abandoning fossil fuels without having anything (other than nuclear power) even remotely capable of replacing them.

If we do, as suggested by our great leaders, social chaos and unrest are assured. This is undoubtedly why Deutsche Bank asked:

"There are no adequate cost-effective technologies yet to allow us to maintain our living standards in a carbon-neutral way. That means that carbon prices will have to rise considerably in order to nudge people to change their behaviour. Another (or perhaps supplementary) option is to tighten regulatory law considerably.. to what extent may we be willing to accept some kind of eco-dictatorship (in the form of regulatory law) in order to move towards climate neutrality?"

The *eco-dictatorship* will be the technocracy we are currently hurtling towards thanks to the *pseudopandemic*. Carbon pricing (trading) will certainly be one of the *nudges* used to force us to accept this tyranny but biosecurity will be the primary means of controlling our behaviour.

Billions across the world, convinced by the *scientific consensus* on climate change, are already demanding that we commit ourselves to the new net zero, carbon neutral economy. If we follow the edicts of the GPPP our future does not look good. To illustrate the point we can look at the proposals for *sustainable* farming.

We have just experienced the collapse of global trade and the disruption of supply chains. Early research showed that the first lockdown quadrupled the UK demand for <u>emergency food relief</u> [32]. Unemployment, household debt and weaknesses in the state benefits system was a major driver of food insecurity throughout the <u>pseudopandemic</u>.

In the UK we are currently capable of producing about 55% of the <u>food we consume</u> [33] and are heavily reliant upon food imports for our survival. Our dependence is higher still, as we export much of the food we produce. Following the shortages we have already seen in many supermarkets during the *pseudopandemic*, rather than aim to strengthen our ability to feed ourselves the UK State franchise approach to *sustainable* farming is seemingly to reduce food production even further in favour of *green spaces*.

The Agriculture Act 2020 created the <u>Environmental Land Management Scheme</u> [34] (ELMS). Under this sustainability plan, land owners will receive subsidies for producing what the Act defines as *public goods*. Given the mounting food insecurity you might imagine that this meant food. Unfortunately, *sustainable public goods* are better air and water quality, thriving ecosystems, soil quality and any measures taken to mitigate against *modelled predictions* of the *projected* environmental hazards caused by *potential* climate change.

ELMS will be allocated using the Basic Payment Scheme (BPS). BPS is paid out on a scale dependent upon the size of the farm. The UK State franchise plan for *sustainable farming* is to pay the agricultural sector to produce less food.

Every single sustainable policy and initiative, originating at the global level and then filtering down through the State franchise system to the local level, consistently points towards a reduction in demand. Sustainable reforms to employment, energy, economic and farming policy all lead to the same conclusion: a smaller human population.

Speaking to the Association of British Insurers in February 2021, the head of the UK Environmental Agency Sir James Bevan spoke about how terrible climate change is *predicted* to be. He outlined what he claimed were Reasonable Worst Case (RWC) scenarios. Based upon these *models* the picture he painted was terrifying:

"The RWC for climate sounds like this: Much higher sea levels will take out most of the world's cities, displace millions, and make much of the rest of our land surface uninhabitable or unusable. Much more extreme weather will kill more people through drought, flooding, wildfires and heatwaves than most wars have. The net effects will collapse ecosystems, slash crop yields, take out the infrastructure that our civilisation depends on, and destroy the basis of the modern economy and modern society."

Faced with the climate Armageddon, promoted by the GPPP and their MSM partners for at least the last 50 years, it is not surprising that the vast majority believe population reduction is necessary. Yet these RWC scenarios are not facts. They are not based upon empirical evidence, statistical analysis or observed phenomena. Like the *pseudopandemic* they are based upon computer models and only describe what might be, not what is.

Despite all the plant food we have pumped into the atmosphere since the industrial revolution we have yet to see any of these nightmare predictions materialise. The Polar Bears are not disappearing [35]; the increase in Co2 levels have not corresponded to an increase in extreme weather events, which were more frequent in the first half of the 20th century than they are today [36]; there is no increasing trend [37] in landfall hurricanes and the total area of wild fire destruction has not increased [38].

Of course we shouldn't ignore climate change. NOAA's confirmation that we are entering a grand solar minimum [39] and that global temperatures will fall is something we will have to deal with. It also guarantees that State franchise commitment to keep global temperature rises below 1.5 degrees Celsius (set at the COP 21 summit Paris Agreement in 2015) will be achieved no matter what they do. Nor should we ignore the fact that the eugenics obsessed *parasite class* are not only behind the climate change alarmism, the sustainable solutions they propose are all, *coincidentally*, predicated upon population reduction.

Whenever anyone points this out the inclusive *communitarian* riposte is always that it is ridiculous to suggest those who profit most from the fossil fuel based economy would be behind *carbon neutrality*. However, *carbon neutral* doesn't mean big polluters have to significantly cut their Co2 emissions. They can *offset* them using carbon or emission trading.

For the GPPP the part of the vaunted <u>Kyoto Protocols</u> [40] that mattered most was the establishment of emission trading and flexible mechanisms. State franchises in developed nations (Annex B Parties) were allocated emission units to encourage them to *decarbonise* their industrialised economies. Each were allocated *Assigned Amount Units* (AAU's) restricting the Co2 they were *permitted* to emit.

However, if they exceeded reduction targets they would have spare AAU's which they could sell as licensed *emission permits* to the highest bidder on the newly created *carbon market*. Countries that hadn't met their targets could buy permits to allow them to continue business as usual. Therefore the *price* of the *emission permits* was set by the market.

For now, let's put aside the fact that this was all dependent upon scrupulous honesty and highly accurate, corruption free monitoring, registration & tracking systems. We'll just accept that, on the face of it, this sounds like a reasonable way to rid the atmosphere of allegedly excessive plant food (Co2). It compelled the world's *biggest polluters* (the industrialised nations) to reduce their Co2 emissions. This seemed to present a considerable cost for the GPPP heavyweights and, for some, a potential threat to their economic models.

Which is why so called *flexible mechanisms* were <u>written into the protocols</u> [41]. Emission Trading, the Clean Development Mechanism (CDM) and Joint Implementation (JI) were the three basic *mechanisms*. Emission trading meant the movement of capital between State franchises to meet their respective energy requirements while hypothetically reducing their emissions. The CBM and JI mechanisms were designed to ensure they didn't have to reduce them in practice.

The JI mechanism allowed the developed nations to collaborate on emission reduction projects. The *investing* nation received credited emission reduction units (ERU's) for the calculated lowering of emissions, measured in units of tonnes of Co2. These were tracked and recorded in the emissions registry. For example, Germany earned 400,000 ERU's for investing in the construction of a <u>French</u> biomass power plant [42] in the Marne Valley.

While this increased rather than decreased French Co2 emissions, that didn't matter to the German or French State franchises. For Germany it meant they could spend the ERU's their *investment* earned on their own energy generation. Thereby avoiding the need to reduce their own emissions by that amount while claiming they were implementing *Energiewende*.

The French State franchise got a new power plant they could run at extremely low cost. While the biomass power plant continued to put increased levels of Co2 into

the atmosphere they could register it as *carbon neutral* and earn ERU's to then trade as *emission permits*, thereby largely covering the running cost of their highly inefficient power plant.

There were 192 signatories to the Kyoto Protocols and 37 developed nations were both blamed for climate change and expected to achieve their green house gas (GHG) emission reduction targets. With regard to the flexible mechanisms the U.N. stated:

"These mechanisms ideally encourage GHG abatement to start where it is most cost-effective, for example, in the developing world. It does not matter where emissions are reduced, as long as they are removed from the atmosphere. This has the parallel benefits of stimulating green investment in developing countries and including the private sector in this endeavour to cut and hold steady GHG emissions at a safe level."

The <u>Clean Development Mechanism</u> [43] (CDM) allowed the GPPP to earn Certified Emission Reduction credits (CER's) by *investing* in emission reducing projects in developing nations. This enabled the GPP to *assist* developing nations to "*leap frog*" industrialisation which would otherwise be reliant upon horrible, affordable, readily available, stable energy sources like coal. Thus forcing developing nations to commit to some vague form of sustainable, minimal eco - development.

While advanced industrialised nations, who participate in the transatlantic *Anglo-American Establishment*, have enjoyed the fruits of industrialisation, the people living in impoverished developing nations were not to be afforded that opportunity because of "sustainability." Once again we see that people do not matter when it comes to SDGs.

In 2018 Carbon Market Watch <u>released a report</u> [44] which highlighted what sustainable development meant for people living in developing nations. They gave some examples of some CDM projects:

"In Uganda, a private company blocked access to land vital for the livelihoods of local communities in order to claim credits for planting forests in that area. In India, a waste incinerator project diverted waste from landfills, where it would get sorted by local informal workers, and burned them in a facility located close to villages. In Chile and Guatemala, hydroelectricity projects exacerbated land right conflicts, destroyed social cohesion within villages, and damaged ecosystems and biodiversity."

Private corporations could get in on the scam, hoovering up the *global commons* in developing nations, through the system of <u>carbon credits</u> [45] with each credit denominated as one tonne of GHG reduction. Again this didn't mean any reduction in existing GHG emission (predominantly Co2) but rather facilitated offsetting them by *investing* in *efficiency* projects in developing nations.

Progressive celebrities flew around the world in their private jets promising to *offset* their carbon emissions by planting trees [46]. Multinational corporations carried on pumping out high emission totals by bribing corrupt officials in developing nations, turfing communities off ancestral lands and planting untended carbon sinks where once they grew food. This was a system for the *haves* but not *the have nots*. Lecturing people about their commitment to the environment signalled the virtue of those who could afford it.

The corporate feeding frenzy in the carbon market led to profiteering based upon ludicrous claims of *sustainability*. The Indian energy giant Reliance registered their *high efficiency* coal fired power station in Krishnapatnam in Andhra Pradesh under the CDM mechanism. The UN sanctioned the registration and <u>awarded Reliance</u> \$165 million [47] in carbon credits. Coal fired power stations were built across India, in China and elsewhere while receiving carbon credits either to subsidise construction or to be traded for profit.

A carbon trading gold-rush boomed as State franchises and global corporations threw themselves into emission trading with polluters eager to invest in CBM to more than offset their emissions and trade the accrued carbon on the global carbon market. In 2019 the Financial times [48] reviewed what this meant in terms of actually reducing global emissions:

"It is much easier to buy the credit than verify the reduction.. projects may not represent a net gain to the environment. A 2016 study found that 73 per cent of carbon credits provided little or no environmental gain.. That figure rose to 85 per cent of projects under the UN's Clean Development Mechanism."

The whole system was hopelessly corrupt and contributed nothing to any genuine reduction of CO2 emissions. Developing nations were stopped from producing future emissions, ensuring they remained relatively poor, allowing developed nations to claim a reduction that didn't exist to *offset* their own emissions. Merely giving the appearance of *sustainability*. It was little more than a form of neocolonialism.

However rank corruption and profiteering wasn't the problem, according to the WEF. The real issue, they said, was that there was "no standardized way to trade carbon credits and no way to verify the compensating activity behind them." Although it took them, and the global financial institutions that run the green economy, 20 years to figure this out.

In November 2020 the City of London Corporation (global financial market), the Green Finance Institute (the City plus the State franchise) and the World Economic Forum (global corporations) convened the <u>Green Horizon Summit</u> [49]. Mark Carney, (now UN Special Envoy for Climate Action and Finance, the UK State Franchise special Advisor to the COP 26 conference and a <u>Board Trustee of the</u>

<u>WEF</u> [50]) discussed the analysis from <u>The Taskforce on Scaling Voluntary Carbon</u> <u>Markets</u> [51]. The report noted:

"The global community needs to reach 'net zero' emissions by no later than 2050. This will require a whole-economy transition. Every company, every bank, every insurer and investor will have to adjust their business models, develop credible plans for the transition and implement them.. To facilitate this global decarbonization there is a need for a large, transparent, verifiable and robust voluntary carbon market. The scaling up of markets has the potential to help support financial flows to developing countries, as activities and projects in these countries can provide a cost-effective source of these carbon emission reductions."

Rather than pause for a moment, to question if any of this is necessary, the solution, according to the GPPP, is to increase the scale of the money-go-round. Despite commitments to *inclusivity*, developing nations will continue to be the carbon sinks and credit generators for the neocolonialist offset swindle.

There is no choice in any of this. People like Carney aren't elected by us, small businesses haven't been asked for their contribution, it is simply global economic planning by authoritarian diktat. Everyone will have to adjust their business models and those who can't will be *punished*.

The transition to *Futurescape* requires staggering levels of global investment. This investment will be raised through the issuance of *green bonds*.

A bond is effectively an i.o.u (fixed income instrument) which the issuer (borrower) offers in exchange for investment from the lender (creditor.) Bond issuers, such as State franchises, financial institutions like the World Bank and global corporations, issue bonds to raise finance for large scale projects. This enables them to fund operations which a single lender might be unable to finance alone.

State franchise bonds have their own names. US bonds are *Treasuries*, in the UK they are "gilt-edged securities," or simply gilts, and in Germany they are *Bunds*.

The bond will have a maturity date, called the *principle*, which determines when the bond (loan agreement) must be repaid to the lender. This *maturity* will offer a fixed interest payment to the lender. The interest received, either as a series of scheduled payments (coupons) during the loan period or a fixed repayment when the bond matures, is called the bond yield. Consequently, bonds are considered *fixed income securities* and can be traded on the bond markets. They are a form of asset.

Bonds can be bought by a wide variety of professional investors. Corporate bonds can be bought directly by insurance companies, pension funds, banks or private venture capitalists etc. State franchise bonds are auctioned to *primary dealers*. The primary dealers in the UK are called <u>Gilt Edged Market Makers</u> [52] (GEMM's).

They include Goldman Sachs, Deutsche Bank, JP Morgan and HSBC. The primary dealers can then resell their bonds on the bond secondary markets to any investor.

The <u>Green Bond</u> [53] is the investment vehicle for the transition to the carbon neutral, net zero global economy. Philip Hammond's ambition to liberate \$90 trillion in investment meant a potential \$90 trillion green bond market. The International Capital Market Association (ICMA) has issued a set of *guidelines* outlining the kind of projects which can legitimately be called sustainable development to be financed by bond *investors*.

They consist of any investment in renewable energy or energy efficiency; anything called pollution control or any investment in agriculture, aquaculture or land management (buying land); investment in protecting the natural environment, such as conservation projects (buying land); transportation infrastructure, buying more land, low emission vehicles, eco-efficient products, low carbon construction and something called climate change adaptation (which could be anything.)

As long as you can put the *sustainability* label on whatever you want to make money out of, or offer some half baked argument that what you intend to do is *green*, then the idea is that State franchises, global financial institutions and multinational corporations will raise the necessary investment capital through *green* bonds. From which *private investors* will earn a yield (profit).

This is why groups like the *Rockefeller Foundation Endowment Fund* are divesting from their <u>fossil fuel investments</u> [54]. They are no longer concerned about stimulating world demand for oil. The population control technocracy will be based upon *green finance*, trading carbon credits backed by *green bonds* providing profits (yields) directly to the investor. All funded by the *tax payer*.

As we *transition* the GPPP can continue to rely upon an *offset* but stable fossil fuel energy supply while those who can't will be stuck in the development backwater of renewable energy shortages. Leaving them vulnerable to "*flexible investment mechanisms*" harvesting an ever increasing volume of their natural resources.

The Rockefeller's claim the reason they are pulling some of their investments out of fossil fuels is because they want to "promote the well-being of humanity throughout the world, based on science and innovation." It is just an extremely fortunate coincidence for them that they are also leading the way in a parasitic system that is going to hoover up wealth and grab vast swathes of the Earth (and the oceans, the atmosphere and space) in the process.

No matter what the origin of SARS-CoV-2 may be, the *pseudopandemic* was planned. Our freedom of movement was restricted, our access to shared resources limited, supermarket shelves were laid bare and we were required to adapt our behaviour to an emergency situation. As the GPPP install the *new net zero normal* the economic, political, social and cultural impact will be immense.

The *parasite class* and *stakeholder capitalists* who form the GPPP have financed the international *scientific consensus* on climate change. They have constructed the intergovernmental system which issues the approved, sustainable and resilient truth. The same people also created the *scientific consensus* on the *pseudopandemic*.

The *pseudopandemic* response ensured that we worked from home or stayed at home. We didn't travel, didn't go to pubs, restaurants or cafes. We didn't socialise or attend events. Our world became a lot smaller and we increasingly relied upon the services provided to our homes. This is exactly the *behavioural change* we will be required to make in the low carbon, net zero economy.

The *pseudopandemic* was used to introduce us to the permanent state of intermittent lockdowns which Deutsche bank alluded to as the *eco-dictatorship*. These will enable the GPPP to seize the *global commons* as they propel us towards their Agenda 21 *Futurescape*.

If society wants to make it happen.

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Chapter 20 - Behaviour Change

The *pseudopandemic* accelerated the pace of the socio-economic adaptation required to meet Sustainable Development Goals (SDGs). This transition will produce a few winners and a tremendous amount of losers. Once reality dawns, the losers are unlikely to react very well.

The core conspirators and their informed influencers need to have their technocratic dictatorship established as quickly as possible. One of the main motives for their pseudopandemic was to use behavioural change to transition us into the biosecurity surveillance state they need to control us. Fear was used to radically alter our culture and our society while quelling possible resistance. The long term objective is to transform humanity.

The basis of our democratic society is freedom. Freedom of speech and expression, the freedom to roam, freedom of association, freedom to protest and to petition, freedom of religion and tolerance for others views are the foundational principles we supposedly believe in. Yet, for the vast majority of us, it seems a low level public health threat was sufficient reason to cast these principles aside.

Many did so as a result of the propaganda and disinformation that convinced them that they, and their families, faced a significant threat. Others did so believing the new rules were temporary.

Even 15 months after we were first given the sound-bite of "three weeks to flatten the curve," as the restrictions and the intrusions continue, many still cling to this hope. Sadly their faith is misplaced. The new normal is, and always was, intended to be permanent and compliance with the rules only encourages further State franchise oppression.

In order for their neofeudalism to take hold globally, the *parasite class* needed to psychologically condition the population to accept it. The *pseudopandemic* was created as the existential threat and the mainstream media (MSM) and hybrid warfare troops were deployed to use it to terrorise the population. The resultant fear then compelled the majority to adapt their behaviour as instructed, in order to *stay safe*.

This new conditioned behaviour was a key objective of the *core conspirators* and their *informed influencers*. It established our behavioural commitment to biosecurity. This is a critical social control mechanism for the proposed Technate. Again we focus here upon the UK as an example, but the same methods were used in every *pseudopandemic* State.

Behaviour change techniques were outlined in the UK Cabinet Office's 2010 document Mindspace: Influencing Behaviour Through Public Policy [1]. Behaviour change (modification) was adopted by the UK State franchise as the primary means of *literal* population control. They formed the Behavioural Insights Team, often

called the "nudge unit," later <u>privatising it</u> [2] to export their expertise to other State Franchises.

The authors of the seminal MINDSPACE document included representatives from the Bill and Melinda Gates Foundation (BMGF) funded Imperial College London and the Rand corporation. MINDSPACE is a project of the *Anglo-American Establishment*. Rand are a US military industrialist complex *think tank* who former UK Chancellor Denis Healey described as "the leading think-tank for the Pentagon."

The behaviour modification described in MINDSPACE is based upon changing *the context* of decision making. By creating the environment within which we make decisions, the behavioural results can be predetermined. Problems are defined for us, thereby limiting the possible solutions to the intended outcomes. We think we have free choice but our options are restricted only to those permitted by the GPPP's State franchise.

The MINDSPACE research team described the behaviour modification process:

"People's behaviour may be altered if they are first exposed to certain sights, words or sensations. In other words, people behave differently if they have been 'primed' by certain cues beforehand.. Emotional responses to words, images and events can be rapid and automatic.. people can experience a behavioural reaction before they realise what they are reacting to.. Provoking emotion can change health behaviours.. Approaches based on 'changing contexts' – the environment within which we make decisions and respond to cues - have the potential to bring about significant changes in behaviour... People are more likely to register stimuli that are novel (messages in flashing lights), accessible.. and simple (a snappy slogan).. We find losses more salient than gains, we react differently when identical information is framed in terms of one or the other (as a 20% chance of survival or an 80% chance of death).. This shifts the focus of attention away from facts and information, and towards altering the context within which people act.. Behavioural approaches embody a line of thinking that moves from the idea of an autonomous individual, making rational decisions, to a 'situated' decision-maker, much of whose behaviour is automatic and influenced by their choice environment.. citizens may not fully realise that their behaviour is being changed – or, at least, how it is being changed."

The State franchise formed our *choice environment* by using the BMGF financed Imperial College *suppression* model. This placed us all under house arrest and removed most of the freedoms we once had. We broadly accepted this because our *context* had been *changed*. Apparently, there was a highly lethal global pandemic.

This oppression increased the sensation of fear. We were "exposed to certain sights," via the global mainstream media, priming us with cues, heightening our emotional response. COVID 19 wasn't a significant public health threat but the

pseudopandemic lockdowns convinced most that it must be. Why would the government take such measures otherwise?

This avoided the need for the State franchise to make convincing arguments with facts and information. Propaganda was used to frame public opinion within an altered context. This moved us away from being autonomous individuals, who make rational decisions, towards situated decision makers with automatic behaviours, controlled by our choice environment.

We had to take the tests, stop working, stay at home, shut our businesses, stop taking the kids to school, wear our masks, social distance and obey. Our *behaviour* was *being changed* but few of us *realised* it or understood *how*. Once we were accustomed to the checks, the surveillance and the testing, the solution was offered: vaccines and the accompanying biometric identity to enable us to *"return to normal."*

This isn't a "normal" that removes the checks, the surveillance or the testing, this is "the new normal" with all of those new restrictions remaining in place to keep us safe. However, the vaccines and the associated biometric identity will at least allow us some freedoms. As long as we continue to obey.

The practical implementation of psychological operations (psy-ops) led the Behavioural Insights Team to update their methodology for policy makers. In partnership with the Cabinet Office they released their <u>EAST Framework</u> [3] (Easy - Attractive - Timely - Social) in 2014. This built upon MINDSPACE and advised policy makers how to design imagery and visualise slogans to maximise the psy-op impact.

They also highlighted how the private sector, especially marketing corporations like Omnicom (OmniGOV), were "particularly adept at making things more attractive." Other marketing techniques they suggested including the use of fake "scarcity." They highlighted that people are more likely to be attracted to something if they believe supplies are limited.

Despite the hundreds of millions of vaccines pre-ordered by the UK State franchise we were deluged with MSM stories about <u>vaccine scarcity</u> [4]. We were shown messages in flashing lights and bombarded with accessible and simple slogans like "flatten the curve," "hands, face, space," and "build back better." Losses were accentuated and gains ignored.

For example, the UK State franchise still does not report COVID 19 recovery rates. The <u>rationale given</u> [5] for not informing the public was that the modelling used to calculate it was complex. Presumably the modelling upon which the entire <u>pseudopandemic</u> was based wasn't complex. The real reason recovery rates weren't reported was to frame <u>identical information</u> in terms of <u>losses</u> not <u>gains</u> in order to manipulate our <u>automatic</u> behavioural response.

The UK mainstream media (MSM) is <u>directly funded by the UK State franchise</u> [6] and is paid to run propaganda campaigns through the Crown Commercial Service (CCS) *media buy ins*. Manning Gottlieb OMD (MGOMD) ran the <u>OmniGOV</u> <u>operations</u> [7] which used the MSM to deliver *hard hitting* messaging to *prime* our *emotional response*. This shifted our *focus of attention away from facts and information*.

In March 2020, less than two weeks after the WHO's declaration of the global pandemic, the Scientific Pandemic Influenza group on Behaviour (SPI-B) outlined how we should be primed [8]. They stipulated the behavioural change techniques to elicit the required behavioural response. The aim was to manipulate us into obeying without question. Spi-B advised that the State franchise should:

- 1. Use the media (MSM) to increase sense of personal threat.
- 2. Use the media (MSM) to increase sense of responsibility to others.
- 3. Use social disapproval for failure to comply.

A free, plural and independent media could not be "used" to terrorise people. Only a controlled MSM propaganda machine could possibly be instructed to do this.

In September 2019, one of the world's most powerful propaganda organisations, the BBC, convened the <u>Trusted News Summit</u> [9]. This took advantage of the Chatham House rule and, according to then <u>BBC Director General Tony Hall</u> [10], the meeting was held "behind closed doors." The BBC formed a global media alliance with The European Broadcasting Union (EBU), Facebook, the Financial Times, First Draft, Google, The Hindu, The Wall Street Journal (News Corp), AFP, CBC/Radio-Canada, Microsoft, Reuters and Twitter.

They agreed to collaborate and to take collective action against whatever they decided to label as *disinformation*. They also committed to disseminating official truth on command. Claiming information was a threat to people's lives and that outright censorship was a democratic principle, they decided to *move quickly* to undermine any information they wished to censor. They were especially eager to have *fast* and *responsive* information control. They formed a global rapid response *Trusted News* cartel.

The prevailing myth, still imagined by so many, that western democracy is in part built upon a *free and independent media* gives the MSM unwarranted credibility. The *trust* they demand from the public is designed to reinforce the credibility of their stakeholder message. Sadly, many still freely give their allegiance, abandoning critical thought in favour of faith in *trusted sources*. This leaves them wide open to suggestion and renders the western MSM the perfect vehicle for large scale behaviour change psy-ops like the *pseudopandemic*.

Spi-B advised the State franchise how to capitalise upon that "trust." In order to minimise non compliance they suggested using social disapproval propagated by the MSM. People were primed with emotional cues to believe their own failure to comply would pose a threat to their safety. Not only would they be in danger

themselves, others would disapprove of their actions, shaming the non-complaint (complacent) for their failure to uphold the *public good*. Spi-B recommended:

"Guidance now needs to be reformulated to be behaviourally specific......The perceived level of personal threat needs to be increased among those who are complacent, using hard-hitting emotional messaging.....Messaging needs to emphasise and explain the duty to protect others....Consideration should be given to use of social disapproval."

The GPPP's *Trusted News* cartel worked in *partnership* with GPPP State franchise to ensure our "emotional responses to words, images and events" were "rapid and automatic." We were *primed* to accept our transition to a biosecurity state, without realising it.

The WHO's Technical Advisory Group (TAG) is their <u>behavioural insights team</u> [11]. The WHO announced the formation of their <u>behavioural change unit</u> [12] one month prior to declaring the *pseudopandemic*. Speaking in August 2020 the <u>WHO Director General said</u> [13]:

"In the face of the COVID-19 pandemic, countries are using a range of tools to influence behavior: Information campaigns are one tool, but so are laws, regulations, guidelines and even fines.. That's why behavioral science is so important. It helps us to understand how people make decisions, so we can support them to make the best decisions."

Within weeks of establishing TAG the WHO had not only evaluated all the metrics of the claimed *infodemic*, they had formulated a policy response, financed and completed the necessary research and, in April 2020, published a recommended global strategy called <u>Managing the COVID - 19 Infodemic</u> [14].

The WHO Information Network for Epidemics (EPI-WIN) suddenly emerged to "form the basis for a COVID-19 infodemic framework" which would guide the actions that governments and public health institutions should take. EPI-WIN would track and monitor information online and work with social media "amplifiers" to address "myths" and disseminate "trusted information." The objective was to:

"Amplify the right public health messages in ways that.. can lead to the right changes in behaviour.. Computational social science approaches offer a way to define and quantify the socio-behavioural dimensions of the infodemic, monitoring both the emotional and the cognitive domains."

Their first priority was to disseminate *trusted* information and translate that into *actionable behaviour change*. This would be delivered through strategic *partnerships* with social media and technology platforms and other *stakeholders*. TAG was empowered to "guide" these global psy-ops.

The <u>members of the TAG</u> [15] include Dr Cass Sunstein, former advisor to Barrack Obama and more recently appointed to the Department of Homeland Security by Joe Biden; Dr Varun Gauri, the founder and co-head of the World Bank's

behavioural science unit and a member of the World Economic Forum Council on Behaviour; Dr Maria Augusta Carrasco, a former Behavioural Science Consultant to the World Bank; the Deputy Director for Communications at the Indian Office of the Bill & Melinda Gates Foundation, Ms Archna Vyas and Susan Michie, senior consultant to the Spi-B team [16] who recommended the UK State franchise use the MSM to increase the level of fear and create social division.

In her Spi-B role Michie works alongside Dr David Halpern. He was the co-author of MINDSPACE and the Chief Analysist for the Cabinet Office's Prime Ministers Strategy Unit under former Labour Prime Ministers Tony Blair and Gordon Brown. He was also the co-founder of The Behavioural Insights Team and led their transition into the private sector.

In 2018 <u>Public Health England</u> [17] acknowledged the claim that climate change was "the greatest public health threat of our time." Therefore it is no surprise that Sir Patrick Valance, the UK's Chief Scientific officer throughout the pseudopandemic, whose background is in the pharmaceutical industry and public health policy, was appointed <u>as the Scientific Advisor</u> [18] to 26th United Nations Climate Change Conference (COP26).

Given the claimed critical need to remodel the global financial and economic order to save the planet, making UK MP Alok Sharma <u>COP26 President</u> [19] also made sense. As a former corporate risk assessor for Deloitte and investment banker, he was ideally suited to preside over a climate change conference.

The merging of climate change with public health was formalised when the UK Health Secretary Matt Hancock announced the creation of the <u>UK Health Security Agency</u> [20] (UKHSA). The State franchise claimed that the pseudopandemic had highlighted their need to maintain a *"relentless focus on our health security."* The Health Secretary <u>stated</u> [21]:

"I want everybody at UKHSA, at all levels, to wake up every day with a zeal to plan for the next pandemic."

While pandemics usually come around every 100 years or so the *pseudopandemic* has changed that reality. Pandemics, in various forms, are now a permanent fixture as we all relentlessly focus upon our collective *health security*.

UKHSA takes over the function of Public Health England, NHS Test and Trace and will oversee the Joint Biosecurity Centre. Under its *authority* practically everything becomes a potential public health threat. Announcing the formation of UKHSA, the UK State franchise declared:

"The threats we face in future will be different; from new infectious diseases, new environmental threats or biohazards, to new behavioural challenges. So too will the opportunities to do more about them, through use of new technologies, analytics, cutting edge science and personalised behavioural approaches."

If we exhibit the *wrong* behaviour (behavioural challenges) we will become clear and present *biohazards*. UKHSA consider us to be the threat they are preparing to combat. However, it isn't just protecting the green economy and defending the *public good* from *bio-terror* which demand our *behaviour change*:

"The factors most critical to good physical and mental health such as work, education and transport, housing and air quality.. means that transforming public health requires very different ways of working across government.. Health will no longer only be the business of the DHSC, but a core priority for the whole of government... We will enable more joined-up, sustained action by national and local government and our partners."

The work we do, the official truth we are taught, the transport we use, the homes we live in and even the air we breathe have been transformed into *core public health priorities*. Every aspect of our lives has become the *business* of the GPPP's State franchise in response to the *pseudopandemic*.

In order to tackle the emerging health threats relating to our jobs, education, freedom of movement, housing, respiration and the environment (climate change,) UKHSA must work with its *partners*. These are "citizens, communities and industry:" civil society and the GPPP are UKHSA's stakeholder partners.

UKHSA rebranded the National Institute for Health Protection (NIHP,) formed only a few months earlier. The NIHP, and thus UKHSA, was created in partnership with their <u>GPPP stakeholder partner McKinsey</u> [22] and other private *interests*. McKinsey, who are World Economic Forum *partners*, are a global consultancy firm who assist public and private organisations to "make change that matters." They state that they are able to look beyond coronavirus to help agencies like UKHSA "walk the path to the next normal." They add:

"The coronavirus is not only a health crisis of immense proportion—it's also an imminent restructuring of the global economic order."

Working with *communitarian civil* society and their corporate stakeholder partners, via UKHSA, the State franchise will:

"Harness the power of technology and innovation for public health, investing in critical capabilities in data science, digital, behavioural science, and genomics.. We need to consider how best to engage with citizens and drive behaviour change in the 21st century."

UKHSA will "work with academia and industry to provide effective preparation and response to the full range of threats." It will also be a "key part of the country's critical national infrastructure and security infrastructure" and it will "be close to policy making and able to exert influence over the system to ensure threats to health security are acted on and brought under control."

UKHSA will also detect diseases and "new environmental hazards," responding rapidly to new threats. However, these threats won't necessarily exist for UKHSA to

respond to them at "pace and scale." They could be threats that might exist at some point in the future.

Through "world class health surveillance, joined-up data, horizon scanning and early warning systems" UKHSA is yet another all powerful GPPP institution which claims the power of prospicience. It says it is capable of:

"Anticipating and taking action to mitigate infectious diseases and other hazards to health before they materialise, for example through vaccination and influencing behaviour."

The *pseudopandemic* itself was based upon the farcical predictive computer models of Imperial College. Similarly, the threat of climate change, which is "the *greatest public health threat of our time*," is also based upon models and predictions of future disasters.

Now, under the all seeing eye of UKHSA, we are being asked to change our behaviour, our economy and our entire social and political structure. This is based upon their prediction of threats which they claim will harm us if we don't do as they command. Another State franchise agency which appears to be operating a protection racket.

Speaking to the Houses of Parliament on May 17th, the <u>Health Secretary Matt Hancock said</u> [23]:

"I can report to the House that there are now fewer than 1,000 people in hospital in the United Kingdom with coronavirus, and the average number of daily deaths is now nine.. There are now 2,323 confirmed cases of B1617.2 in the UK; 483 of these cases have been seen in Bolton and Blackburn.. In Bolton and Blackburn.. we have surged in our rapid response team.. who visited approximately 35,000 people this weekend to distribute and collect tests... this is the biggest surge of resources into any specific local area that we have seen during the pandemic so far. It has been co-ordinated by.. the new UK Health Security Agency.. The next biggest case of concern is Bedford, where we are surging testing. I urge everybody in Bedford to exercise caution and engage in testing where it is available... All this supports our overriding strategy, which is gradually and cautiously to replace the restrictions on freedom with the protections from the vaccines. The data suggests that the vaccine has already saved more than 12,000 lives and prevented more than 33,000 people from being hospitalised."

Hancock alleged that this was because the State franchise had "a very good surveillance operation across the UK." The data he used to suggest the number of lives saved by the vaccine was *modelling* of the most absurd kind by Public Health England. We will cover this shortly.

The B1617.2 Variant of Concern (VoC) was initially called the *Indian variant* and later renamed the *Delta Variant*. This VoC was *surging* wherever the UKHSA's

rapid response team were focusing their testing regime. Having surged in Bolton and Blackburn they were next moving on to surge in Bedford which had been designated as the *next hotspot*.

It is unknown how the UKHSA could possibly make such a precise distinction between these VoC. On the 14th May 2021, the *reliable source* Nature reported that researchers were still trying to sequence the B.1.617 variant genome. A speculative PCR test had only <u>just been developed</u> [24]. Yet speaking just 5 days later in the UK, The Health Secretary Matt Hancock reported that UKHSA had been surging in B.1.617 *VoC hotpots* for weeks.

This was all based upon tests which, even if they were calibrated to a new VoC, were both incapable of diagnosing anything and highly prone to false positives. The data from these dubious PCR based guesses were analysed by another State franchise's *stakeholder partner*. GlaxoSmithKline's <u>WellcomeSanger Institute</u> [25] genomic research laboratory, named in honour of Nobel prize winning biochemist Frederick Sanger, were telling UKHSA where to surge.

The "variant" claims used the standard pseudopandemic operating procedure. They were based upon dubious science which then informed equally specious computer models producing nonsensical predictions. This was good enough to extend the lockdowns in the Summer of 2021 [26]. Unsurprisingly it was Imperial College London (ICL) who first came up with the speculative computer simulation which launched the VoC story.

They alleged the B.1.1.7 VoC had <u>rapidly spread to the US</u> [27] and Europe, meaning continuing biosecurity measures for everybody, everywhere. They claimed B.1.1.7 was a "global lineage variant" and there were supposedly a number of other potential strains that sprang from it. Amid all the panic, few seemed to notice that there wasn't any evidence that these scary VoC's presented any additional threat.

The ICL team were led by the close associate of Neil Ferguson, Prof. Erik Volz. Backing up his friend and colleague <u>Ferguson said</u> [28]:

"We can still get a very large epidemic, which unfortunately could kill many, many people, so what the modelling and all the analysis and all the groups feeding into SAGE says is, we need to be very cautious in how we relax restrictions and try to ensure we get as high a vaccine coverage as possible. We couldn't have predicted this new variant coming up, but the new variant without doubt will make the relaxation of restrictions more difficult because it is substantially more transmissible......So it will be a gradual process to the autumn."

The UK State franchise were able to use ICL's fantasy to <u>announce another round of lockdowns</u> [29]. Firmly sticking to the favoured *pseudopandemic* tactic of calling tests "cases," the R number could be adjusted as required, using the *new variant models*.

The new strain of B.1.1.7 that Volz, Ferguson, ICL and SAGE (NERVTAG) considered a VoC, was named N501Y. They claimed it presented 70% increased transmission risk. This was based upon a comparison made between *models* for N501Y and another *strain* A222V. Just as they did after releasing Report 9, the ICL team <u>immediately started back-pedalling</u> [30] on their assertions. Speaking to the COVID-19 Genomics UK (COG-UK) consortium about how these models worked, Volz said:

"[The] model fit is not particularly good.....there are lots of outliers early on and there are lots of outliers quite late.....we wouldn't expect that a logistical growth model is necessarily appropriate in this case."

This didn't stop Volz and the ICL from using the "not particularly good" model to make the comparison. He said that they had to work with "very noisy sampling," that data was "limited" and the "inappropriate" datasets were incomplete. He added it was too early to tell with any accuracy what the impact of N501Y might be. Despite the fact that ICL didn't have any clear data to justify any of their claims the UK State franchise again used BMGF funded ICL "science" to justify further lockdown chaos.

At the most basic epidemiological level, the *new variant* narrative was, and is, ridiculous. Professor Michael Yeadon pointed out that the notion of greater risk from SARS-CoV-2 VoC took <u>no account of existing human immunity</u> [31]. Even if a variant could spread more readily, it could only do so among an ever dwindling number of potential hosts. This is why pandemics don't last forever and is one of the leading reasons we aren't extinct.

The alleged SARS-CoV-2 genome is vast in comparison to the tiny genetic variations quibbled over by SAGE, ICL and NERVTAG and then labelled VoC. The human immune system adapts to defend itself against the whole virus genome by breaking it down into its constituent nucleotide components. Prepared to resist each and every one of these genetic signals, it won't be fooled by any minor genetic mutation in one nucleotide chain. As professor Yeadon stated:

"What is happening in the name of saving lives simply doesn't stand up to scientific scrutiny."

Science is never "settled." It constantly evolves and adapts to account for new evidence. Inevitably this process leads to occasional errors. However, ICL's team of gamers are consistently wrong. Yet, in terms of influencing global policy, no other scientific body has ever had such a profound impact. They are either extraordinarily inept scientists who are incredibly lucky or, at some level, they are tasked to create science-to-order for their GPPP paymasters.

Referencing the newly discovered B.1.1.7 *British variant*, physicians at <u>Johns Hopkins Medical Centre</u> [32], who understood disease epidemiology, explained why Ferguson's and ICL's apparent surprise at the emergence of a new variant spoke volumes:

"Mutations in viruses...are neither new nor unexpected...This particular strain was detected in southeastern England in September 2020. In December, it became the most common version of the coronavirus, accounting for about 60 percent of new COVID-19 cases....We are not seeing any indication that the new strain is more virulent or dangerous in terms of causing more severe COVID-19 disease."

As viruses are effectively parasites, there is no evolutionary advantage for them to kill their hosts. Virus variants tend to become predominant if they can infect more hosts while killing fewer of them. If successful enough they may change the phenotype (characteristics of the virus) in which case this could be considered a new "strain."

More lethal variants lose out to less lethal ones. New strains tend to be less dangerous than their predecessors. This is why coronavirus accounts for approximately 30% of common colds [33].

Variants of concern (VoC) are a limitless source of ongoing biosecurity *measures* for the GPPP. With US scientists estimating a minimum of <u>350,000 SARS-CoV-2</u> <u>variants</u> [34] by mid 2020, the scope for future iterations of the VoC story, vaccines and further lockdown measures are endless.

Phase two of the biometric control grid in the UK was planned to see more venues allow entry only to those with the appropriate digital biometric ID. The State franchise claimed that this system wouldn't be used in pubs, shops and on our high streets. However, an unnamed spokesperson made it clear that it will [35]:

"It may be that certification has a role to play in other venues to stop closures in the autumn or winter if there's a big surge."

As we headed into the summer of 2021, facing rising resistance from more mass, unreported pro-freedom demonstrations, the UK State franchise backtracked <u>a little more</u> [36]. Unnamed *official* sources said that they had decided not to implement the so called *vaccine passports*. However, the *Trusted News* cartel added:

"A government update.. said there was nothing stopping companies asking for proof of Covid-19 status before granting entry.. Work on the NHS app, which is being converted to be able to show proof of a jab.. is likely to continue.. Government ministers may also choose to look again at Covid-19 passports for the autumn and winter, arguing that a sudden deterioration in the Covid situation could see the idea return."

We don't need computer simulations or *horizon scanning* to know what the *biosecurity response* to the inevitable winter *surge* will entail. We have already experienced it and felt its choke hold on what used to be our free and open, democratic societies.

If we don't comply with our orders, or decline the drugs we must take, the threat is clear. COVID 19 did not present an existential threat to us but the State franchise response to their *pseudopandemic* certainly does.

In the UK, the biosecurity lockdown means absolute State franchise dictatorship. If you, your household, your street, your town, your city or the whole country is placed under UKHSA designated biosecurity restrictions it means:

You are not allowed to have friends and family in your own home, or visit them in theirs, unless you are in a small group prescribed by the State and are visiting them for essential reasons, as determined by the State. The State will deny you access to indoor public spaces unless you strictly comply with their restrictions. The only exemptions to this rule will be determined by the State.

You cannot leave your home unless it is for a purpose prescribed by the State. You cannot run a business unless the State considers it essential and all non essential products and services will be provided to you by the State franchise's *partners*. You will not work in a job deemed non essential by the State.

Your freedom of movement is terminated by order of the State. The right to visit other countries, or to travel beyond your exclusion zone, is limited only to that which is prescribed by the State.

You cannot gather for any reason by order of the State. If you are allowed to access public spaces, the State commands that you remain *socially distanced* and you cannot meet anyone unless they are in the group allotted to you by the State. Gathering indoors is permitted only for essential purposes, as defined by the State.

You cannot socialise by order of the State. Social meeting places such as community centres, gymnasiums, theatres, pubs and cafes will be placed off limits to you, by order of the State.

Your children must obey the same rules, by order of the State, because they too are biohazards.

This system will be monitored and enforced using our tracked and traced biometric ID passports (vaccine passports). In order to regain some semblance of what used to be your life, the UK State franchise, which recognised that your *human rights* were meaningless, has set the initial set of rules you must obey before they will allow you to to live in their new biosecurity State. They <u>call this a "roadmap"</u> [37] and, paraphrasing, we can say the State franchise decrees the following:

The State needs to be satisfied that enough people have been vaccinated. If it decides more people must be forced or coerced take the vaccine then it will keep the restrictions in place until they do. This will enable the State to blame those who refuse the vaccine for any unnecessary lockdowns the State wishes to maintain. If you are not vaccinated and have not been issued your biometric ID you will be excluded from society.

The number of hospitalisations and the mortality figures must be reduced and this can only happen as a function of vaccination. The State and its *partners* have complete control over this system. They can adjust testing parameters and methods as they see fit to create or reduce "case" numbers as they wish. As the State's test program is also the <u>primary basis for attribution</u> [38] of COVID mortality, these figures can also be adjusted by the State.

The State will make a *prediction* as to whether or not there is a risk of a *surge in cases*. Wherever it identifies the possibility of a future surge, that area will be designated as a *hotspot* and locked down. The State will decide if this surge could *overwhelm* the NHS. As every influenza like illness (ILI) can be called COVID 19, a "*surge*" is guaranteed every winter, if the State so chooses. As the State has control over both testing and NHS capacity it can create a potential "*overwhelming surge*," and subsequent national lockdown, at its whim.

Lifting the restrictions, or reimposing them, also depends upon the State franchise's assessment of the risk from new Variants of Concern (VoC.) Again, with complete control over testing and with thousands of variants emerging all the time, any one of these could be found to be a VoC by order of the GPPP's State franchise and its stakeholder partners.

The *Trusted News* cartel fully endorsed this oppressive dictatorship. They were particularly keen to blame it upon anyone who didn't comply with their biosecurity orders. The assistant editor of the UK's comically named *Independent* newspaper wrote [39]:

"What shall we do about the anti-vaxxers?.. The time has come when the hard choices are looming closer. If we don't want this Covid crisis to last forever, we need some new simple, guidelines: No jab, no job; no jab, no access to NHS healthcare; no jab, no state education for your kids. No jab, no access to pubs, restaurants, theatres, cinemas, stadiums. No jab, no entry to the UK, and much else."

This *"journalist"* was by no means the first to promote the idea of a fascist, apartheid regime. This theme has been recurrent <u>throughout the pseudopandemic</u> [40].

In pursuit of the *public good* people like the UK State franchise justice secretary Robert Buckland said compulsory vaccination could be written into employment contracts. He is among the many who think it is OK to starve people in order to force them to take drugs they don't want. As previously stated, this model of public health based biosecurity is not unique to the UK State franchise but they are, in many respects, leading its global development.

Shortly after its formation UKHSA <u>announced its</u> *partnership* [41] with the US CDC's National Centre for Epidemic Forecasting and Outbreak Analysis. UKHSA created

the Centre for Pandemic Preparedness (CPPP) and the collaboration between the two State franchises promised to increase:

"Disease surveillance, as well as genomic and variant sequencing capacity worldwide."

In support of this endeavour UKHSA also established the <u>New Variant Assessment Programme</u> [42] (NVAP.) This will detect and assess new variants and then forward those nucleotide sequence *discoveries* to other State franchises so that they can do their own *surging*. Thus creating centralised control over a global system of biometric surveillance and selective lockdowns.

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Chapter 21 - Pseudopandemic Vaccines

In 2016 the Chilcot Report into the Iraq War found that the former UK Prime Minister Tony Blair had colluded with the US administration to launch an illegal war in Iraq without justification. He had "exaggerated" the threat, which barely existed. Effectively misleading both to the British public and Parliament. He deceived some into supporting his war. His actions led to the violent deaths of an estimated 1 million [1] Iraqi civilian men, women and children in less than 5 years.

In June 2021 the U.N. rejected the appeal of Bosnian Serb commander and war criminal Ratko Mladic. The life sentence he received for his role in the killing of approximately 8,000 Bosnian Muslim (Bosniak) men and boys in Srebrenica in 1995 was upheld. Unfortunately, there are many reprehensible war criminals far worse that Mladic still at large.

Tony Blair is now the head of the global policy think tank the <u>Institute for Global Change</u> [2] (ICG.) His think tank *partners* with, among others, the Bill and Melinda Gates Foundation, The Rockefeller Foundation and USAID. The ICG is deeply embedded in the GPPP.

They ICG claim to have identified the main problem with global politics:

"Our current political landscape is marked by extremism, with 'us' and 'them' attitudes pervading debate on a global basis."

Given airtime by the BBC, in June 2021, Tony Blair said:

"It is time to distinguish, for the purposes of freedom, from restriction between the vaccinated and unvaccinated.. if we do have to adjust some of the freedoms, because of the rising pressure from new variants, it's important to make sure that those people who are vaccinated have the maximum freedom they can.. what I am not sympathetic to is people who are able to get the vaccine and just refuse to get it.. If you are vaccinated the evidence is absolutely clear. It reduces the risk of transmission, it reduces the risk of hospitalisation and death.. the reason we ensure people are vaccinated is because it then reduces the risk of transmission."

This was *extremism* and the politics of "us" and "them." Vaccines are drugs injected into the human body. If you don't accede to having your bodily integrity violated by the State franchise, Tony Blair thinks your freedoms should be removed: imprisoned in other words. He claimed this was for the *public good*. This was not a defensible justification. He was promoting medical tyranny.

If people are so afraid of the virus that they cannot countenance the unvaccinated walking in their midst, then society will have to adapt to that new reality. Perhaps it will mean some form of separatism, but to advocate, as Blair did, that those who do not yield to his demands should be punished was an example of the very worst kind

of bigoted discrimination. It was an ideologically fascist statement. Perhaps that wasn't a surprise.

Even if the vaccines are everything he claimed, it makes no difference to the principle. Either our body is our own or it is not. If society decrees that our body is not our own then we are slaves. There can be no equivocation.

Like Gates, Blair is not a scientist or a doctor, he has no particular medical knowledge or scientific expertise. Possibly this explains why, in addition to encouraging a medical dictatorship, nearly everything he said about the COVID 19 vaccines was wrong.

It is perfectly possible to question a vaccine, or a group of vaccines, without denying the potential public health benefits of others. Vaccines are not all the same and doubting some does not infer a rejection of all. Although that is what the *pseudopandemic* propagandists want you to believe.

In November 2020 Pfizer and BioNTech announced they had <u>concluded their phase three trial</u> [3] of BNT162b2. This wasn't true, they had barely completed phase 1 of the trial. Pfizer's phase III NCT04368728 trial won't be completed until January 2023 and is <u>still in the recruitment phase</u> [4] (at the time of writing.) None of the COVID 19 vaccines have completed clinical trials. For example, AstraZeneca's will be complete in February 2023 [5].

The British Medical Journal were among those who recognised that the vaccine trials were, in any event, <u>incapable of assessing either efficacy or safety</u> [6]. All the pharmaceutical corporations provided were some interim trial results, but these too had numerous problems.

The Lancet reported that the selective use of data was just one among many issues undermining the interim vaccine reports [7]. There was a lack of consistency with definition of disease, reporting bias was evident, study protocols differed between vaccines and even changed mid trial in some instances. Endpoints were mixed, meaning it wasn't clear from the interim analysis who would be the primary beneficiaries, if any, from the claimed efficacy.

These full clinical trials were designed to be blind, randomised control trials (RCT's). The vaccine's efficacy and safety would supposedly be measured by comparing the outcomes of a placebo group, who did not receive the vaccine, with the vaccinated group. According to all of the various vaccine trial protocols this would generally be measured over approximately a two to three year period.

However, the pharmaceutical corporations decided to ignore their own trial protocols. Long before they were due for completion they *unblinded* their studies. They gave the vaccine to their placebo control group. This meant that none of the current COVID 19 vaccines were studied in randomised control trials. The British Medical Journal stated [8]:

"The BMJ asked Moderna, Pfizer, and Janssen (Johnson and Johnson) what proportion of trial participants were now formally unblinded, and how many originally allocated to placebo have now received a vaccine. Pfizer declined to say, but Moderna announced that 'as of April 13, all placebo participants have been offered the Moderna covid-19 vaccine and 98% of those have received the vaccine.' In other words, the trial is unblinded, and the placebo group no longer exists."

Without completed clinical trials of any kind, the COVID 19 vaccines were only approved for "emergency use." The interim trial results for the Pfizer BioNTech trial C4591001 (NCT04368728) were cited throughout the Medicines and Healthcare Products Regulatory Agency (MHRA's) *Authorisation for Temporary Supply* [9]. However, when independent researchers used freedom of information requests (FOIR) to ask about why the trials didn't assess the vaccine's impact upon pregnant women the MHRA stated [10]:

"The above trial was not conducted in the UK, the MHRA did not assess its content and are therefore not in a position to answer specific questions relating to it."

This indicates that the MHRA hadn't read the interim trial data they cited prior to granting emergency approval of the vaccine. Further, given how frequently it was referenced in the authorisation report, it is not unreasonable to question if the MHRA wrote it.

The MHRA weren't the only regulator who seemingly didn't bother reading the pharmaceutical corporations interim trial results before approving their COVID 19 vaccines. A FOI by Doctors for Covid Ethics (DFCE) to the Australian regulator (TGA) found that they hadn't looked at any-of-the-data [11] from the Pfizer trials and had simply accepted the corporation's claims.

In the UK and Australia at least, this indicated that there was no regulatory oversight of the COVID 19 vaccines prior to their emergency approval. The pharmaceutical corporations could claim anything they liked about their product as the regulators made no effort to verify the data or even assess the contents of their study reports.

Tony Blair was absolutely clear that the vaccines reduced the risk of hospitalisation and death but without any completed clinical trials he had absolutely no basis for anything he said. Once the vaccines were being used on the public the evidence certainly didn't support Blair's absolutism.

For the period between February 1st to June 7th <u>Public Health England</u> [12] reported that, of the 19,573 unvaccinated Delta VoC "cases" they monitored, 23 died. This meant the unvaccinated Delta case fatality rate (CFR) was 0.117%. Of the 9,344 vaccinated Delta "cases" they monitored, 19 died. The CFR for the vaccinated was 0.203%, nearly double the rate among the unvaccinated group. The

following week, for the period up to the <u>14th June 2021</u> [13] the unvaccinated CFR had dropped to 0.095% while the vaccinated CFR had risen slightly to 0.209%.

The numbers of "cases" were virtually meaningless, so we can't draw any reliable conclusions from the PHE figures. We can, however, conclude that Blair had no reason to be certain, and the questionable evidence that does exist suggests he was wrong.

There is no current evidence that the two most common COVID 19 vaccines (nor any of the others) are any better at reducing infection or transmission rates than natural infection and subsequent natural immunity. A casual glance at the mortality figures over the late spring of 2020, when there were no vaccines, contrasted with the same period in 2021 shows no difference in mortality trends. They are practically identical. There is no observable vaccine effect.

On April 30th 2021 the UK State franchise launched a committee review of the evidence surrounding the proposed vaccine passports (certificates.) In the <u>corresponding press release</u> [14] they stated:

"Vaccine certificates' would provide proof of vaccination to confirm an individual is at lower risk of suffering severe covid symptoms. However it is not yet known what effect the vaccine has on transmission."

They claimed they didn't know what the effect on transmission or infection rates were five months into their mass vaccination program. This probably wasn't true. It seems they did have a reasonable idea they just preferred not to mention it. The truth was that the vaccines didn't appear to make any difference to our SARS-CoV-2 immunity.

The UK <u>COVID 19 Infection Survey</u> [15] (CIS) attempts to measure the prevalence of SARS-CoV-2 antibody responses in the population. Two <u>comparative studies</u> [16] used CIS data to compare the antibody response elicited by the Pfizer and Astrazeneca vaccines to those following infection without the vaccines. The findings revealed:

"21 days after a single dose of either the AstraZeneca or the Pfizer vaccine the rates of all new SARS-CoV-2 infections had fallen by 65%...Among people who had a second dose of the Pfizer vaccine, infections were 70% lower and symptomatic infections 90%, similar to the effects in people who had previously been infected naturally (70% and 87% reductions, respectively)."

The lack of confidence in the vaccines appears to be underlined in the SAGE Spi-M-O <u>March 2021 report</u> [17] looking at the possible impact of easing restrictions. Predicting, using *computer models*, a return of infections, they stated:

"The resurgence in both hospitalisations and deaths is dominated by those that have received two doses of the vaccine, comprising around 60% and 70% of the wave.... accounting for more serious illness than unvaccinated

individuals..... most deaths and admissions.... are in people who have received two vaccine doses... This is because vaccine uptake has been so high in the oldest age groups.... 95% over 50-year olds."

While 95% of those most at risk from SARS-CoV-2 will have been vaccinated they will still, according to Spi-M-O's *model*, comprise up to 70% of all future claimed COVID 19 deaths. While models aren't evidence they are the basis for policy and so we will refer to them here. It is far from clear from these models how the marginal claimed benefits of vaccines outweigh the alleged risk.

Currently the UK State franchise claim that <u>24 million people</u> [18] have been fully vaccinated (two doses) in the UK. However their statistics for <u>vaccine adverse</u> <u>reactions</u> [19], reported via the MHRA's Yellow Card system, suggest the health risks of vaccination may be worse than they are for COVID 19.

By late May 2021 there were 822,845 adverse drug reactions, many of them serious, and 1,180 deaths reported for all COVID 19 vaccines in the UK. However, in 2018 the MHRA, who are responsible for monitoring and supposedly investigating adverse events, stated:

"It is estimated that only 10% of serious reactions and between 2 and 4% of non-serious reactions are reported."

This suggested the possibility of approximately 11,000 UK vaccine related deaths by the end of May 2021. With another 30 million adults to be vaccinated and plans to vaccinate children, given that genuine COVID 19 mortality is a low percentage [20] of the claimed figure, the direct harm caused by the vaccine could certainly exceed the harm caused by COVID 19.

The constant refrain from regulators and vaccine manufacturers is that there is no proof determining how many deaths are caused by the COVID 19 vaccines. This is true to the extent that postmortem examinations and investigations by the regulators would be needed to clearly establish vaccine mortality. To date they have not shown any willingness to carry out those investigations. However they do at least concede that the COVID 19 vaccines can be lethal.

The UK State franchise information for recipients of the <u>Astrazeneca COVID 19</u> vaccine stated [21]:

"Extremely rare cases of blood clots with low levels of platelets have been observed following vaccination with COVID-19 Vaccine AstraZeneca... Some cases were life-threatening or had a fatal outcome. It is important to remember the benefits of vaccination to give protection against COVID-19 still outweigh any potential risks."

In order to know that the COVID 19 vaccine benefits outweigh the risks there would need to be a thorough risk assessment which compared an accurate analysis of the vaccine risks with an accurate analysis of the COVID 19 risks. The UK regulators

are among those who have not undertaken any such assessment. Their claims of beneficial COVID 19 vaccine are based upon nothing.

The <u>Norwegian Health Authorities</u> [22] did undertake a risk assessment. Their data showed that the risks from the Astrazeneca vaccine outweighed the risk of COVID 19 for Norwegian people under 65. They halted the use of the Vaxzevria vaccine.

The situation was no better anywhere else. All vaccine adverse drug reaction reporting systems under-report incidents and the official figures present a small percentage of the actual total. Nonetheless, in the US [23] there were 12,625 hospitalisations and 4,201 apparent deaths by mid May 2021. In the EU the vaccines had seemingly accounted for 9,306 deaths [24] by the beginning of May 2021.

These numbers must be seen in context of millions of administered vaccines but these appear to be exceptionally dangerous drugs with risk profiles that would usually warrant immediate withdrawal. Without any meaningful trial data we have no any way of knowing what the long term health impacts will be. Irrespective of the numerous reasons for concern about relative health harm, the rationale for vaccinating the entire population was as lacking as it was for lockdowns.

In particular there is no possible justification for vaccinating the young. The COVID 19 health risk for all healthy young people, under the age of 18, is zero. There is no evidence that they present a SARS-CoV-2 infection risk to anyone and the scientific evidence which does exist clearly indicates that they do not infect others. Therefore any suggestion that COVID 19 vaccines could harm children only adds to the obvious conclusion that there is no public health rationale to vaccinate children and young people.

Researchers for the US Center For Disease Control (CDC) found that the two doses of the mRNA COVID 19 vaccine significantly increased heart inflammation (myocarditis and pericarditis) among those <u>under the age of 24 [25]</u>. The risk for those aged 18 - 24 increased by 136%, for those aged 15 - 18 it rose by 316% and, for those aged 12 - 15, by more than 100%.

Among the many doctors, scientists and other concerned professionals who recognised the clear evidence of unacceptable COVID 19 vaccine risks, in early June 2021 Dr Tess Lawrie (MBBCh, DFSRH, PhD) was concerned enough to write to the MHRA [26] urging a halt to the vaccine roll out. Dr Lawrie is a medical researcher, public health policy advisor and contributing research author to the prestigious Cochrane Review. She and her team analysed the adverse reaction reporting in the UK. Writing to the Chief Executive of the MHRA, June Raine, she stated:

"The MHRA now has more than enough evidence on the Yellow Card system to declare the COVID-19 vaccines unsafe for use in humans.. the mechanism for harms from the vaccines appears to be similar to COVID-19 itself."

On June 4th 2021 the MHRA extended the emergency COVID 19 vaccine authorisation to allow the injection of children [27] aged between 12 - 15 years. Perhaps the MHRA don't communicate with the CDC or weren't aware of their findings. Having received the analysis from Dr Lawrie, the high risk vaccination of children remained on schedule and the MHRA gave no indication of their intention to rescind the authorisation. Announcing the authorisation, June Raine said:

"We have carefully reviewed clinical trial data in children aged 12 to 15 years and have concluded that the Pfizer/BioNTech COVID-19 vaccine is safe and effective in this age group and that the benefits of this vaccine outweigh any risk."

As the risk to children from COVID 19 was zero there were no potential benefits to vaccinating them. There were clearly risks associated with the vaccines and Raine's claim that the vaccine benefit outweighed the risk was wrong. Given previous statements from the MHRA, nor was there any reason to believe that they had carefully reviewed the interim clinical trial data. There was good reason to suspect that they hadn't even read it.

In the UK, as elsewhere, the COVID 19 vaccines do not have market approval and are <u>black triangle medications</u> [29] because the MHRA only has "relatively limited information about their safety from clinical trials." Given that they didn't apparently read it, presumably this is extremely limited. Regardless, the vaccines were approved under Regulation 174 of the Human Medicine Regulations 2012 (as amended) which permits the emergency approval of unlicensed medications.

The MSM <u>made fantastic claims</u> [29] that the vaccine reduced the risk of developing COVID 19 by 90%, 95% or even 99%. As usual this was profoundly misleading. All claims about vaccine efficacy have been calculated based upon their *relative* not *absolute* risk reduction. This made a huge difference in the way the data was presented to the public.

In the initial phase I of the NCT04368728 (C4591001) trial, which was *blinded*, following infection with SARS-CoV-2, 8 of the 18310 vaccinated participants went on to develop COVID 19 symptoms compared to 162 of the 18319 unvaccinated participants. The vaccinated had a 0.044% of contracting COVID 19 post infection and the unvaccinated 0.88% risk.

Pfizer claimed a 95% risk reduction by using relative risk, expressed as 100(1 – (0.044/0.88)). Yet we can see that the risk was tiny for both vaccinated and unvaccinated participants. The absolute risk reduction was 0.84% (0.88-0.044). This ruse of relying upon relative risk reduction has been consistently used by all the vaccine manufacturers and is the only way the *Trusted News* cartel have reported the alleged *benefits*. In reality the interim trials suggest a negligible benefit from vaccination.

Public Health England (PHE) published estimates of just how <u>successful vaccines</u> were [30]. These were utterly ridiculous. For the 3 month period ending in March

2021 they claimed that the vaccines had saved 10,400 lives in England. They defined a COVID 19 death in the usual way as mortality within 28 days of a positive test. Consequently, their initial starting figure was wrong.

In an underwhelming display of mathematical folly they proceeded to make an estimate of vaccine effectiveness based upon their own previous estimates which were constructed from a number of unwarranted assumptions for which they presented no evidence. Next they applied the assumed estimate they made up to the original incorrect mortality figure to make a modelled prediction, based on another set assumptions, of the estimated number of lives saved.

This was neither science nor statistical analysis. It wasn't even a badly constructed computer model. It was just gobbledegook.

When we combine study findings, post vaccine roll out mortality spikes among the most vulnerable, official adverse reaction data and MHRA statements, with what little trial data there is, the public health rationale for using these vaccines to combat COVID 19 does not exist. However this didn't stop the UK Health Secretary Matt Hancock from citing PHE's laughable claims as *proof* of vaccine effectiveness.

As far as anyone knows the vaccine neither lowers the risk of infection nor transmission. If someone has not been infected they are just as likely to contract SARS-CoV-2 from a vaccinated individual as they are from someone who hasn't been vaccinated. Currently the most vaccinated country in the world is the Seychelles. With a population of just under 100,000, approximately 62% have been fully vaccinated. Currently (June 2021) They are experiencing a surge in cases [31].

Fact checkers were dispatched to claim that there was some evidence that vaccines reduce transmission (the risk of infecting others). In their effort to concoct this justification <u>Full Fact</u> [32] not only cited the CIS studies we have just discussed but also the comical number salad churned out by Public Health England, presumably without reading any of it. They probably just "Googled it."

Their primary "proof" that the COVID 19 vaccines really did reduce the transmission rate, was a pre-print non peer reviewed paper written by State franchise scientists base upon the <u>SIREN study</u> [33]. This said nothing at all about transmission of the virus but claimed more than a 70% reduction in infection rates following two doses of the Pfizer mRNA gene therapy.

SIREN allegedly evaluated infections among 20,641 vaccinated and 2683 unvaccinated health workers. They monitored each group at two week intervals for a number of months. They then calculated the total accumulated number of days each cohort had been monitored, divided that by the number of positive RT-PCR results per cohort, to derive a figure of incidents per 10,000 days cumulative monitoring.

For the unvaccinated this was said to be 14 incidents per 10,000 days and for the vaccinated this dropped to 4 incidents per 10,000 days, following the second dose. Subsequently, the SIREN scientists reported:

"Our study demonstrates that the BNT162b2 vaccine effectively prevents both symptomatic and asymptomatic infection in working age adults; this cohort was vaccinated when the dominant variant in circulation was B1.1.7 and demonstrates effectiveness against this variant."

The problem with this study is that they did not appear to monitor both groups using the same method. The 2683 unvaccinated subjects were monitored for a total of 710,587 cumulative days. That equates to approximately 265 days per subject. They monitored the 20,641 vaccinated subjects for a total of 108, 256 days. This equates to 5.25 days per subject.

You could say that the unvaccinated were seemingly exposed to potential infection for 260 days more than the unvaccinated (using the SIREN method) or perhaps you could phrase it as the unvaccinated chance of infection was 50 times greater than the vaccinated. You might even compare like with like and assume that the vaccinated would have developed 250 incidents per 10,000 day, if the experimental conditions had been the same for both cohorts.

It doesn't really matter because, however you look at it, these results were null. The SIREN scientists claim of vaccine reduced infection rates were unfounded.

Full Fact used this pre-print nonsense as substantiation for their stated *fact* that "multiple, reliable forms of evidence show that vaccines greatly reduce a person's chance of contracting or passing on a virus." This was definitely not a fact. It was the epitome of dezinformatsiya.

The only difference between being vaccinated or unvaccinated is that vaccination supposedly reduces the risk of you becoming seriously ill. This risk reduction is tiny and needs to be balanced against the risk of being harmed by the vaccine, which may be higher. Unfortunately, the official statistics are so unreliable it is practically impossible to make this judgement.

Without any completed clinical trials the COVID 19 vaccines were, by definition, experimental drugs. The people who received the BNT162B2 mRNA gene therapy for example, were unwitting subjects in a global clinical trial. The UK National Institute for Health & Care Excellence (NICE), which sets UK healthcare standards, defines an experimental treatment as [34]:

"A new treatment (for example, a new drug) that is being studied to see whether it has an effect on the course or outcome of a condition or disease."

However, the UK factchecker Full Fact may suspect NICE are agents of *dezinformatsiya* as they <u>categorically state</u> [35]:

"This claim that the Covid-19 vaccines are experimental is simply not true, and something we have corrected multiple times."

The <u>Nuremberg Code on human experimentation</u> [36] stipulates that consent must be both expressly obtained and fully informed. Any use of "force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion" contravenes the Code.

Once approved for public use, the UK State Franchise and its MSM propaganda partners did not inform the recipients of the COVID 19 vaccines that they were subjects in a medical trial (experiment). Neither did they inform them that there was no completed clinical trial data that would enable anyone to judge if the risks outweighed the benefits for any of the vaccines.

The State franchise were willing to deny people the opportunity of informed consent, they deceived them into participating in medical experiments and showed no regard for the Nuremberg Code or public health. Simply *trusting* what you were told by the GPPP was very high risk.

We are currently being offered vaccines we don't need to free us from lockdown restrictions that don't work which were instituted in response to a threat that was fabricated. COVID 19 was the problem, lockdowns were the reaction and vaccine passports are the solution.

The practically meaningless system for declaring COVID 19 mortality was useful before the vaccine roll out because it massively inflated the *pseudopandemic* mortality statistics. However, because it recorded COVID 19 death regardless of the cause of death, once the vaccine had been deployed the same system would also record COVID 19 as the cause of death for those who had been vaccinated against it. Spi-M-O highlighted the PR and marketing problems this would create.

While the WHO have consistently been wrong, they acted preemptively to mitigate the vaccine marketing problem. By the time Spi-M-O were ringing the alarm bell they had already reduced the cycle threshold (Ct) on the PCR tests to dial COVID 19 mortality down for the vaccines.

However, for the GPPP State franchises reliant upon WHO statistical manipulation this still didn't solve the problem. It resulted in an equal reduction of all claimed *pseudopandemic* deaths. It didn't fix the relative percentage of vaccinated people who would still be recorded as COVID 19 victims.

The Centers for Disease Control & Prevention (CDC) in the US proposed a novel solution [37]. They called COVID 19 deaths among the vaccinated "breakthrough cases." They suggested that breakthroughs could be blamed on variants. Officials could subsequently claim that COVID 19 deaths among the vaccinated were due to the variant they were not vaccinated against. Therefore, while it appeared that the vaccine had not protected them against COVID 19 nor could it be said that the vaccine failed.

They also came up with a clever way to reduce the number of "breakthrough cases." These would not include the asymptomatic and would only count those hospitalised. In addition, if someone tested positive or seemingly died of COVID 19 after vaccination their sample would be "confirmed" by testing it using no more than 28 PCR cycles [38] while testing everyone else using higher cycle thresholds. Thus creating an entirely false case comparison between the two groups.

Creating a two tier system for attributing COVID 19 case numbers and mortality dependent upon vaccine status seemed to address the problem. It remains to be seen how other GPPP State franchises will deal with the vaccine marketing conundrum their own *pseudopandemic* mortality definition has boxed them into. The GPPP certainly aren't infallible.

With vaccines crucial for biometric identity, speaking on BBC Newsnight in January 2021, Professor Devi Sridhar, who is a Rhodes Scholar and also member of the WEF Global Agenda Council, while acting in her role as Chair of Global Public Health at the University of Edinburgh and special advisor to the Scottish government, said:

"2021 is the year of the variant in vaccines. The mRNA vaccine manufacturers have said that in weeks, they can change their vaccines. So then it becomes a race to see how quickly we can redesign the vaccines, roll them out and get them into people's arms faster than, as I say, a new variant could spread."

As pointed out by Professor McCullough MD, among many others, this was pseudo-science. Not only was Sridhar suggesting some previously unknown form of viral mutation, she was presenting a very strong argument for not vaccinating anyone.

In his testimony to the Texas Senate Health Committee Dr McCullough stated:

"People who develop COVID have complete and durable immunity. And (that's) a very important principle: complete and durable. You can't beat natural immunity. You can't vaccinate on top of it and make it better."

Ignoring medical science by assuming a medical necessity that didn't appear to exist, the pharmaceutical corporation *stakeholders* soon announced they had developed new adaptable vaccines that <u>could be tweaked</u> [39] to deal with variants. The *Trusted News* cartel took them at their word, investigated nothing and reported this as if it were an established fact. That they can be *tweaked* is true, that they need to be tweaked for variants is the *dezinformatsiya*.

Moderna, mRNA vaccine manufacturers, were the first to announce their tweaking capability. This was in keeping with <u>their previous statements</u> [40]:

"We set out to create an mRNA technology platform that functions very much like an operating system on a computer. It is designed so that it can plug and play interchangeably with different programs."

BioNTech, co developers of the BNT162b2 mRNA "vaccine" with Pfizer, explain how this programming occurs [41]:

"Messenger ribonucleic acid (mRNA) vaccines are a novel technology.. These vaccines contain information from messenger RNA, including the 'blueprint' or code of a specific virus trait (virus antigen).. The mRNA transfers the information.. to our cell machinery that makes proteins.. mRNA vaccines against COVID-19 are designed to provide our bodies with the code.. In contrast to conventional vaccines.. mRNA vaccines.. contain.. only the information that our own cells need to produce a virus trait.. No virus is needed to make a batch of an RNA vaccine."

Gene expression is the process by which the information encoded in a gene is used to direct the assembly of a protein. mRNA vaccines manipulate gene expression. The US Food and Drug Administration (FDA) offer the following definition of gene therapy [42]:

"Human gene therapy seeks to modify or manipulate the expression of a gene."

mRNA vaccines are indisputably *gene therapy* and not "vaccines" in any traditional sense. They can be defined as vaccines only in so far as they stimulate an immune response, but the mechanism by which they do so is novel technology. Human populations have never been exposed to this technology before. Not only are there no completed clinical trials, the intention is to release this technology upon the entire global population in less than a couple of years.

Stimulating an immune response is not the only possible use of mRNA technology. Gene expression produces the proteins that control nearly every function of the body. Presently there is no evidence that any of the current crop of mRNA or other COVID 19 vaccines have been deliberately engineered to cause harm. There is plenty of evidence that they do, but not that it is intentional. Although we cannot rule out the possibility.

The *pseudopandemic* vaccination was intended to habituate us to a continual process of vaccination. Once people accept the concept of their regular mRNA software updates the potential for future weaponised use of mRNA technology is clear. As previously mentioned, DARPA were <u>deeply involved</u> [43] in the development of Moderna's mRNA therapeutics platform.

The *parasite class* are eugenics obsessives whose long stated ambition is population control. Latterly that ambition has moved towards our extinction as a species to be replaced with genetically engineered cyborgs. DARPA are already suggesting <u>cybernetically enhancing troops</u> [44]. mRNA technology lends itself to this transformation. It would be suicidal naivete to ignore this potential.

Even if it is possible to develop vaccines on the hoof, it would be impossible to trial them for safety and efficacy if the VoC changed every three or four months. By the

time one was developed it would be redundant. Moreover, why would you want to take a vaccine that protected you against a single spike protein mutation in one variant when natural immunity confers longer lasting, durable immunity against the whole viral genome?

That the vaccines are based upon the <u>production of a spike protein</u> [45] is very concerning. The <u>Journal of Hematology and Oncology</u> [46] published a paper in September 2020 which showed that the spike protein in the SARS-CoV-2 virus causes the thrombosis and inflammatory response which can be fatal for vulnerable COVID 19 patients. Further research has shown that these spike proteins can bind to the walls of small blood vessels <u>causing further thrombosis</u> [47]. German scientists called this apparent problem *Vaccine-Induced Covid-19 Mimicry Syndrome* [48].

The evidence suggests that the spike protein of the SARS-CoV-2 virus is the culprit for much of the morbidity and mortality associated with genuine COVID 19. Yet the vaccines artificially induce the production of this spike protein or a portion of it. *Tweaking* vaccines, based upon this protein production, seems counterproductive. But only if the intention is to save life.

Fortunately for the GPPP's pharmaceutical partners, they have no liability for the damage their vaccines may cause, nor do they need to bother trialling these *tweaked vaccines* for them to automatically receive regulatory approval. The MHRA are among regulators from around the world who, having already approved vaccines without them completing any clinical trials, will "fast track" future tweaked vaccines without requiring them [49] to undergo any trials at all.

They have given the global pharmaceutical industry the liability free ability to give human beings drugs without any clinical assessment of their efficacy or safety. The MHRA state:

"Time-consuming clinical studies that do not add to the regulatory understanding of a vaccines safety, quality or effectiveness would not be needed."

This total disregard for public health epitomises the *pseudopandemic*. It doesn't matter if the vaccines work or if they are safe, all that matters is that the public take them because that enables the State franchise to roll out biometric vaccine passports and certificates.

This is why GPPP stakeholders like Tony Blair are so desperate for us all to be injected with COVID 19 vaccines. Concluding his speech on the platform given to him by the *Trusted News* cartel, he said:

"The NHSX people have done a good job with the NHS app but we need to make that interoperable with other systems so that you can use this as proof of vaccination throughout the world. The world will move to biometric ID. They'll do so because in the end it is better for people. This

is a completely sensible way to go.. it will facilitate the access to government services.. In every single field of our work, our leisure, the way we interact with each other, technology is going to change everything. Biometric ID is just one part of a much bigger picture.. We are going to have to create a global infrastructure to deal with future pandemics.. what has happened to us is probably going to be part of normal life for the foreseeable future."

The *pseudopandemic* was the spring board for the global roll out of COVID 19 vaccines. These provide the GPPP the foundation for constructing their *new normal* global biosecurity state. This will be a compartmentalised, authoritarian global Technate and our biometric identities will enable total control of every individual on Earth while we are cybernetically and genetically transformed into a new species.

A significant minority understand this. They are resisting using lawful protest, non compliance and are trying to raise awareness through spreading information. The GPPP have already designated them *extremists* and have plans for them too.

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Chapter 22 - Making An Extremist

The "infodemic" preoccupying the GPPP predominantly took the form of the news media and citizen journalists reporting the scientific literature, qualified expert medical opinion and official statistics. Their readers, listeners and viewers then shared this evidence online. The news media reporting became sceptical of the official narrative as questions remained unanswered and content was censored.

Ordinary people formed groups online that focused upon the scientific, statistical and medical evidence which appeared to contradict the official *pseudopandemic* narrative. In turn this led to an organic protest movement and huge, unreported protest marches. Research <u>conducted by MIT</u> [1] stated that these online communities tended towards the following:

"Their approach to the pandemic is grounded in more scientific rigour, not less... the groups we studied believe that science is a process, and not an institution... anti-maskers often reveal themselves to be more sophisticated in their understanding of how scientific knowledge is socially constructed than their ideological adversaries.. Data literacy is quintessential criterion for membership within the community."

These online groups, questioning the *pseudopandemic* using science and statistics, were diligently appraised by the approved fact checkers. Referring to what had become a resistance movement, the founder of Full Fact, <u>Will Moy, said</u> [2]:

"A year of conspiracy theories and false health advice has shown the threat bad information poses to all our lives."

The kind of *conspiracy theories* and *bad information* that the wider public were not allowed to know about included the contents of the open letter written by the physicians at the *Health Advisory and Recovery Team* which urged the MHRA not to allow the vaccination of children [3]. They highlighted that there was no reason to vaccinate them as COVID 19 didn't harm them and they presented no infection risk. The potential for vaccine adverse reactions appeared to outweigh any possible health benefits.

The *Trusted News* cartel were silent on the issue and the *conspiracy theorists* were unable to share this information with others on social media. Facebook whistleblowers <u>leaked internal documents</u> [4] from the social media giant which showed they had a system in place to monitor, block and demote any criticism of vaccines, even if it accurately reported *"true events, or facts."*

The medical profession in particular had to be careful what they said. Any criticism of the *pseudopandemic* could end their careers. In Canada for example the College of Physicians and Surgeons of Ontario (CPSO), who regulate the practice of medicine, issued a <u>warning to physicians</u> [4] working in the province:

"The College is aware and concerned about the increase of misinformation circulating on social media.. physicians.. are publicly contradicting public health orders and recommendations. Physicians.. have a professional responsibility to not communicate anti-vaccine, anti-masking, anti-distancing and anti-lockdown statements and/or promoting unsupported, unproven treatments for COVID-19. Physicians must not make comments or provide advice that encourages the public to act contrary to public health orders.. Physicians who put the public at risk may face an investigation by the CPSO and disciplinary action"

Around the world dissenting physicians were threatened. In Ireland, Dr Marcus de Brun, a former member of the Irish Medical Council, was among a number of doctors who <u>faced censure</u> [6] for questioning the *pseudopandemic*. In the UK Dr Iqbal Adil (MB BS, FRCSEd. FRCSI), a consultant general surgeon in the NHS, <u>was suspended</u> [7] by the UK General Medical Council, and labelled a "conspiracy theorist," for publicly raising his doubts about the official truth.

Doctors were not free to use their clinical judgment, they could not prescribe the treatments they thought best for their patients. There was a medical dictatorship in place throughout the *pseudopandemic*, centrally controlled by the WHO, and any professional challenge to their *authority* was met with retribution.

Scientists who questioned the approved science were viciously attacked by the *Trusted News* cartel, their names besmirched and reputations trashed. They were *deplatformed* by the main social media channels and their published peer reviewed papers buried, ignored or retracted. They and anyone who tried to report their work were found guilty of *anti-science* by the GPPP and its *Trusted News* cartel.

On the paradoxically named <u>2021 World Press Freedom</u> [8] Day the U.N. set the ball rolling on the global censorship endgame. The theme of the day was the malevolent misappropriation of *"information as a public good."* It moved information into the realms of *the global commons*, preparing the grounds for the GPPP to bring it under their *authority*.

Far from questioning power, the U.N.'s version of *press freedom* meant the totalitarian exercise of power through a tightly controlled propaganda operation. They stated:

"The theme is of urgent relevance to all countries across the world. It recognizes the changing communications system that is impacting on our health, our human rights, democracies and sustainable development."

Anything can be a *public health* risk, that is why the *core conspirators* and their *informed influencers* deployed the *pseudopandemic* psy-op. The biosecurity state it has enabled means the complete behavioural control over humanity. Communication systems and information itself are a *health risk* now. Therefore, just as all fascists, tyrants and kings have claimed, information must be controlled by them for the *public good*.

The new de facto head of the *Trusted News* cartel, the current director general of the BBC Tim Davie, abused the public by perverting the notion of press freedom to make his <u>argument for a neofeudal technocracy</u> [9]. Using a mixture of deception, misdirection, omission and arrogance, he oozed slick propaganda. Mr Davie said:

"In the midst of the Covid pandemic, it is clearer than ever why people need access to trusted, impartial news. Trusted information is an essential public good... This growing assault on truth represents a profound threat to the health of societies and democracies worldwide. We stand in solidarity with journalists and other media organisations who continue to fight for truth and media freedom."

You may have noticed that Mr. Davie was using the same words that were in the U.N. press release. This is because the head of the BBC and the global *Trusted News* cartel thinks that *trusted, impartial news* is the parroted repetition of official policy announcements. There is no analysis, no questioning of power, no context, no objectivity and no honesty. It is simply the delivery of policy directly into the minds of the public.

As Davie stood in *solidarity* with the global security apparatus, committing to fight the *infodemic*, he pronounced that questioning anything declared by the *Trusted News* cartel was an *assault on the truth*. Hitting us hard with the idea that that information is a *public good* (global commons) it was his assertion that we must trust him and his cartel that was most striking. "*Trust*" is the last thing we should invest in the GPPP's mainstream media propaganda machine.

The Oxford English Dictionary [10] definition of "trust" is:

"Firm belief in the reliability, truth, or ability of someone or something...

Acceptance of the truth of a statement without evidence or investigation."

The *trust* that the *Trusted News* cartel demand from us is a *belief* (faith) in their claim to tell *the truth.* We are being coerced, by OmniGOV (Omnicom) and others, to accept whatever they say *without evidence or investigation*. The global MSM are actively encouraging us not to think. We must simply *trust* them and obey.

We have already discussed some examples, but with their article <u>You Must Not Do</u> <u>Your Own Research When It Comes To Science</u> [11] Forbes epitomised the hybrid information war we are in. They wrote:

"Research both sides and make up your own mind. It's simple, straightforward, common sense advice. And when it comes to issues like vaccinations, climate change, and the novel coronavirus SARS-CoV-2, it can be dangerous, destructive, and even deadly.... It's part of why scientific consensus is so remarkably valuable... It truly is one of the most important and valuable types of expertise that humanity has ever developed."

Consensus is not a form of *expertise* and consensus itself is often disastrous. The Chinese Communist Party were in consensus when they agreed to implement Mao's "great leap forward," 44% of the German population shared a consensus when they elected Hitler in 1933, the "scientific community" maintained the consensus that eugenics was scientifically credible and the medical science consensus for decades was that smoking was harmless.

Questioning the *consensus* does not suggest that we should ignore the weight of evidence, quite the opposite. However, as previously mentioned, *consensus* is not evidence. Consensus leads us to *settled science* which, if ever true, would mean a lot of redundant scientists as new scientific discoveries would be impossible. *Settled science* is claimed omniscience. It is truly *anti-science*.

Consensus is even more dangerous when it is asserted but doesn't exist. Science, especially medical science, has been ruthlessly suppressed and censored throughout the *pseudopandemic*. Some of the world's leading epidemiologists, virologists, immunologists, biochemists, statisticians and physicians were labelled *cranks* and often "conspiracy theorists" or "anti-vaxxers" because they did not agree with the policy response to COVID 19. Science had very little to do with it. This was political oppression.

Doctors for Covid Ethics (DFCE) wrote an article expressing their deep <u>concerns</u> about the COVID 19 vaccines [12]. They are a group of some of the most eminent scientists and physicians in the world.

This could not be shared by anyone on social media without the GPPP's fact-checking *partners* either removing it immediately or applying warnings claiming that they and the social media companies were now the *authority* on medical science. This included Facebook's fact checker, *Fact Check*, who are funded by the <u>Robert Woods Johnson foundation</u> [13] which is a major shareholder of Johnson & Johnson stock, J&J manufacture the COVID 19 *Janssen* vaccine.

No *Trusted News* Cartel outlet reported the DFCE's concerns, only the *news media* did so. While Davie, and the other gathered *dignitaries* attending the World Press Freedom Day events were pretending they valued *impartial news*, their GPPP *partners* were busy deplatforming and censoring any independent *news media outlet* that dared to question the *pseudopandemic*. It wasn't long before the original DFCE article was scrubbed from the Internet and *memory-holed* for *violation of the rules* [14].

It is against this background of the outright censorship of science that we are witnessing the deification of the *scientific consensus*. The kind of extremely well funded scientific consensus which wholeheartedly supports and never questions GPPP State franchise policy.

Only officially approved science had merit during the *pseudopandemic*. Scientific objections to the official science, no matter how well evidenced or how eminent the scientists raising them, were *anti-science*. You had to obey *official science* and if

you didn't then you were a threat to national security. You were *anti-science* and an *extremist* to be dealt with under anti-terrorism legislation.

At the end of March 2021, the *"respected scientific journal"* Scientific American published <u>The Antiscience Movement Is Escalating, Going Global and Killing Thousands [15]</u>. The article was written by Peter Hotez. He opened with this paragraph:

"Antiscience has emerged as a dominant and highly lethal force, and one that threatens global security, as much as do terrorism and nuclear proliferation. We must mount a counteroffensive and build new infrastructure to combat antiscience, just as we have for these other more widely recognized and established threats."

Hotez continued:

"The destructive potential of antiscience was fully realized in the U.S.S.R. under Joseph Stalin. Millions of Russian peasants died from starvation and famine during the 1930s and 1940s because Stalin embraced the pseudoscientific views of Trofim Lysenko... Soviet scientists who did not share Lysenko's 'vernalization'... starved to death in a gulag."

The irony of his analogy would be comical were it not for the implicit threat he makes. Hotez is demanding that *Lysonkoism*, under the control of the GPPP stakeholders including the WHO, The U.N., GAVI, CEPI and the Bill and Melinda Gates Foundation, be established on a global scale. While decrying anything which challenges the official scientific truth as "antiscience" Hotez is absolutely arguing for, not against, Lysenkoism. The implied threat is obvious. He added:

"We are approaching three million deaths from the COVID-19 pandemic, and it is increasingly apparent that the SARS CoV2 alone is not responsible... Thousands of deaths have so far resulted from antiscience... Containing antiscience will require work and an interdisciplinary approach... we might look at interagency task forces.. among the agencies of the United Nations... We must be prepared to implement a sophisticated infrastructure to counteract this, similar to what we have already done for more established global threats. Antiscience is now a large and formidable security issue."

The scientific foundation of the *pseudopandemic* was Lysenkoism. It was GPPP approved *antiscience* designed to provide fake scientific legitimacy for destructive policies.

Unlike the DFCE, Hotez didn't offer any evidence to back up any of his claims. Nor did he have to. His baseless diatribe was published in Scientific American. This is a *trusted source* and that is all you need to know. Whatever is said by a *trusted source* is true and anything which questions it is dangerous *extremism* which

presents a global security threat on the same scale as *terrorism* and nuclear proliferation.

The claimed threat of *non-violent extremism*, promoted in the UN by Cameron in 2014 and placed at the core of the UK's Online Harms censorship, has turned into hard global security policy. Under the guise of protecting public health, the surveillance systems, search powers, detention without trial and other components of the police state, allegedly designed to fight the global *war on terror*, are now being turned inwards, towards anyone who has the temerity to question *official* GPPP Lysenkoism.

The German domestic intelligence agency (BfV) have placed members of the German anti-lockdown protests <u>under state surveillance</u> [16]. They say that the *coronavirus denier* movement has become aggressive, alleging attacks on the police. They reportedly announced their decision to keep tabs on "conspiracy theorists" whose crimes included *defying civil authorities*, political protests and *mistrust* of democracy and its institutions.

In February 2021 the UK Commission for Countering Extremism (CCE - part of the UK State franchise Home Office) issued its <u>suggested legal framework</u> [17] for *countering* what it called *hateful extremism*. Using *card stacking* propaganda techniques, the report initially defined *hateful extremists* as those who exercise extreme bigotry and advocate violence.

Few of us would object to extreme racists, terrorist fund raisers and people advocating violence being questioned. It is illegal to encourage any crime and so the police already have the *legal authority* to arrest anyone who actively incites criminal activity, either online or off. However, by *stacking* these moral *cards* as the initial justification for their definition, our *emotional response* was set by the CCE and we were enticed to *react* with *automatic* approval *before we realised* what we were approving.

The CCE also considered a *hateful extremist* to be anyone who is:

"Likely to cause, harm to individuals, communities or wider society."

The 2000 Terrorism Act the UK State franchise defined a terrorist as anyone who:

"Creates a serious risk to the health or safety of the public"

In the UK, if you are deemed likely to cause a risk to public health you will be treated as a potential *terrorist*. There is no limit to the activities the GPPP can consider a *likely risk to public health*.

Hateful extremists include people who haven't harmed anyone. These are people who could possibly harm someone at some point in the future perhaps, or not. Rhetorically we might ask who knows? Regrettably, there would be little point as the GPPP's UK State franchise has already figured this out.

As there is no definition of harm, defining the *future crime* of the *hateful extremism* is entirely at the State franchise's discretion. The purpose of the proposed online regulation, advocated by the CCE, is not necessarily to apprehend all *hateful extremists* for the crimes they haven't committed yet, that would be silly, but rather to create a statutory framework to stop them committing the crimes they haven't committed yet.

Tackling future *infodemic* crimes is the priority. It has been convenient until now for the GPPP to exploit our belief in free and open democracy, they haven't felt the need make up the laws that end free speech and freedom of expression. They have instead relied upon their corporate *stakeholder partners* to do the heavy lifting. It is the concept of the *hateful extremist* guilty of a *future thought crime* that will provide the statutory powers enabling *official* censorship. The CCE suggest:

"If a legal framework for hateful extremism is developed, as we recommend, this could be incorporated into the Online Harms Bill and provide clarity for both social media companies and the future regulator, Ofcom."

As the UK State franchise Home Office is effectively recommending this to itself, it seems likely that *hateful extremism* will be part of the Online Harms censorship grid. So who, according to the CCE, are hateful extremists? They claim:

"Extremist narratives underpin some of the best-known and most recent conspiracies.. The FBI reportedly considers prominent conspiracy theories.. as potential motivators which could trigger domestic extremists to enact violence.. Many conspiracy theories or narratives based on disinformation.. can spread rapidly over social media. This has intensified during the COVID-19 pandemic.. Extremist groups and individuals are exploiting the pandemic by spreading disinformation.. The effectiveness of the Online Harms Bill in tackling conspiracy theories and disinformation is critical."

There is not a scrap of evidence to support anything the CCE said. The FBI's opinion is not evidence. Claiming something *could trigger* idiots to act is not a valid justification for censorship. Watching BBC news reports of the Syrian conflict was enough to *trigger* thousands of British citizens to join ISIS. *Catcher in the Rye* allegedly *triggered* a lunatic to murder John Lennon. People can be *triggered* by anything because they have free will. This does not provide any basis for censoring the BBC or burning J.D. Salinger novels.

Another motivation for the *pseudopandemic* was to crystallise the "dangerous disinformation" narrative in the public's imagination. Information may or may not constitute dezinformatsiya but the only way to make that judgement is to consider the evidence underpinning the reporting of it and, if it is lacking, decide if the motive was to intentionally deceive for some nefarious gain. Simply asserting that

something is *dezinformatsiya* without examining the evidence provided, as the CCE suggest, is fallacious bilge.

The CCE's February report doesn't provide much clarity on who the *hateful conspiracy theorist extremists* are. For this we need to consider their July 2020 report titled How Hateful Extremists Are Exploiting The Pandemic [18]. This is far more revealing. It states:

"During the COVID-19 pandemic we have seen an increased visibility of conspiracy theories ranging from anti-vaccine, anti-establishment to anti-minority and antisemitic."

We can gather from this that the CCE have attached *racism* and *antisemitism* to people advocating vaccine safety studies and asking questions of authority. Card stacking, they then have used the *transfer* propaganda technique. In doing so they are exploiting the Holocaust to create disinformation designed to further their political agenda. Showing a total disregard for Jewish victims is irrelevant to the CCE. All that matters is that they get what they want.

We will not refer to the people who are the target of CCE dezinformatsiya as *hateful extremists*. We will refer to theme as "*people*." People don't have "*extremist narratives*" they have "*legitimate opinions*." The CCE continue:

"Extremists will seek to capitalise on the socio-economic impacts of COVID-19 to cause further long term instability, fear and division in Britain. Government needs to include clear plans to counter extremism in their response to this and future crises... the Ministry of Housing, Communities and Local Government must drive forward a COVID-19 cohesion strategy to help bring different communities together to prevent extremist narratives from having significant reach and influence."

Here we see the CCE (State franchise) refer to their own deliberate destruction of the global economy and small to medium size businesses around the world, as the socio-economic impacts of COVID-19. This is dezinformatsiya. In addition they are using appeal to fear propaganda to exploit anxieties and concerns about social division and instability which was a key objective of the State franchise throughout the pseudopandemic. The CCE refuse to take any shared responsibility for this but instead seek to blame the people. The CCE further state:

"Conspiracy theories have been a key tactic used by extremists to recruit and divide communities... They are difficult to challenge as their proponents commonly respond to attempts to invalidate them by claiming that they are being censored. Moreover, social media companies can serve to fuel conspiracy theories as platforms can be slow to takedown content."

In order to invalidate an idea you need to engage with it. If an idea, or expressed opinion, is *taken-down* then that is censorship. That the CCE think that the *taking-*

down content is not censorship is confusing enough, but for them then to suggest that censorship constitutes *invalidating* an idea borders upon idiocy.

If someone is stood on Speaker's Corner explaining why it is the Sun and not a trace atmospheric gas, that controls the climate, sticking your fingers in your ears and shouting "la la la" is not an *invalidation* of their argument. It isn't clear that the CCE understand this.

To challenge scientific and medical evidence, to reinterpret statistical data or debate an opinion, you cannot simply censor it. Some form of dialectic is required. A *takedown* of content is the antithesis of dialectical reasoning. It is inimical to our culture. It is the modern day version of book burning. The CCE add:

"A study from the University of Oxford found that people who held coronavirus conspiracy beliefs were less likely to comply with social distancing guidelines or take up future vaccines. They tested conspiracy theories which claimed that... Bill Gates created the virus to reduce the world population."

The argument here appears to be that anyone and everyone who does not fully comply with the diktats of the biosecurity Technate has been infected with *wrong-think*. It is impossible that they genuinely disagree with *pseudopandemic* policy or don't want the vaccine. No matter what, regardless of the evidence, the people must not think that Bill Gates is a eugenicist. Clearly this matters to the GPPP.

Building upon this idea, the CCE wrote:

"The scale of online extremist content and engagement with such material is deeply concerning. Research by the Institute for Strategic Dialogue (ISD) found hundreds of thousands of Far Right posts around COVID-19 and millions of engagements with known disinformation... about 'elites' such as Bill Gates, George Soros, the Rothchilds and Jeff Bezos and false information about their role in the creation of the virus."

To paraphrase: To question the GPPP, the *parasite class* the *core conspirators*, their *informed influencers* and the *pseudopandemic* is *far right hateful extremism*. The democratic principle of questioning power is now an act of extreme hate. The millions of people who think this is an important democratic principle are all *far right hateful extremists*.

The GPPP need *the people* to stop asking why the richest and most powerful people in the world just happen to be the only people in the world who benefit from a global pandemic. *The people* must shut up about the evidence and stop sharing scientific papers, statistical data, medical testimonies, official documents, news reports and expert opinion that question their rightful leaders.

The CCE have more clarity to offer:

"Extremists promote hostile and supremacist beliefs towards a group of people who are perceived as a threat to the wellbeing, survival or success of a defined 'in-group'. Who is seen as the 'out-group' depends on the ideological worldview of extremists, but it often includes people with a protected characteristic.

Popular videos claimed that 'the Rothchilds' are key players in a global plot to use the disease as a pretence to impose a totalitarian world government. This video was viewed over 5.9 million times... the scale and reach of .. antisemitic conspiracy theories remains extremely concerning."

It appears with this statement we are getting close to the nub of the CCE's totalitarian labelling system. Among those who are the only people on Earth to benefit from the *global pandemic*, a minority happen to be Jewish. The CCE recognise that they can exploit this and label *people* who ask uncomfortable questions as antisemites. They can then *officially* call all of these people *far right hateful extremists* and use this deceit to censor them and, more importantly, the evidence they share.

Finally we get to the CCE's (State franchise') primary concern. The CCE round off their description of far right hateful extremism with the following:

"Research indicates that a 'lack of trust in the system is generally higher amongst those who are most prone to believing conspiracy theories'... A reduction of trust in the Government and state institutions can be exploited by extremists to spread their hateful and divisive narratives."

Bluntly, if you do not unquestioningly *trust* the GPPP's State franchise, if you question anything they decree and if you do not comply with your orders, you are not just a *conspiracy theorist*, you are a *hateful far right extremist*. A *terrorist* in other words.

This is the culmination of Cameron's *non-violent extremist* idea. It has been many years in the making and he was by no means the first to propose it but, via the *pseudopandemic*, the GPPP are ready to present the world with their ultimate global terrorist: anyone who does not obey.

Ofcom will be empowered by the UK's proposed Online Safety Act. They will have the *authority* to order social media platforms to "take down content or to restrict access to it." Ofcom will demand that internet services take down whatever the GPPP decree to be disinformation or misinformation. This will be based upon Ofcom's judgment regarding the "harm" caused by information. The CCE's definition of hateful extremism will undoubtedly inform that determination.

As expected there is no definition of "harm" in the Online Safety Bill [19] (the proposed Act.) Harm is a vague, malleable concept that can be adapted to suit. We get a clue, regarding how Ofcom will interpret it, from the CCE's July 2020 report. It

suggests six categories for official *harm* which the CCE apply to the *whole of* society:

- Censorship and restriction of freedom
- · Crime, violence and harassment
- Mental health and wellbeing
- Social division and intolerance
- Economic harms
- Delegitimising authority/undermining democracy

If this, or anything like this definition is used by the Internet regulator Ofcom then freedom of speech and expression online will be a thing of the past. It suggests "harm" will include anything which upsets someone (wellbeing.) If you question civil society you will be causing social division and therefore "harm." If you strongly disagree you will be harmfully intolerant.

Most importantly *harm* will be anything which jeopardises the commercial interests of the GPPP (economic harm) or questions their puppet selection process (undermining democracy.) You will never, under any circumstances, *delegitimise* their authority.

People advocating proper evaluation of drug safety were *hateful extremists* according to the CCE. The scientific papers, medical opinions and evidence supplied by professional bodies like the DFCE and HART was the *false health advice* Moy referred to. The CCE and Moy are among those who advocate the omniscience of Hotez and others who claim that a *scientific consensus* exists.

Their globalist message is that you should not think for yourself. *Trust* them and live in fear because they say you should.

The UK State franchise response to the *infodemic* problem was the Online Safety Bill. Once enacted it will compel social media platforms and search engines to "take down" the wrong science and inconvenient statistics. This will ensure social media only permits the sharing of reports from the *Trusted News* cartel and removes the news media's ability to question power.

This proposed *new normal* censorship grid will enable the GPPP to operate its *Rapid Response Mechanism* without challenge. The supporting narrative, justifying this global censorship grid, will be provided by the *Trusted News* cartel based upon the spurious claims of bodies like the CCE. They will exploit the baseless definition of *hateful extremism* to *situate* the citizenry within the approved *choice environment*.

Those who express doubt about the necessity for public health biosecurity, who resists the imposition of the Technate, who refuse to comply, exercise the democratic right of protest or question the authority claimed by our self appointed rulers will be demonised by the politicians, the remaining media, the fearful and the self righteous.

"A nation that is afraid to let its people judge the truth and falsehood in an open market is a nation that is afraid of its people."

[John. F. Kennedy - 35th president of the United States]

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Chapter 23 - The Biosecurity State

The UK State franchise has repeatedly tried to introduce various forms of <u>national identity cards</u> [1] which have consistently been rejected by the population. Thanks to *pseudopandemic* behaviour change that resistance appears to have collapsed. It has been replaced with fear driven *automatic* behaviour in the new *choice environment*. We are being <u>conditioned to trust</u> [2] our new digital identities. In February 2021 the UK State franchise announced:

"The government has today published its draft rules of the road for governing the future use of digital identities. It is part of plans to make it quicker and easier for people to verify themselves using modern technology... Digital identity products allow people to prove who they are... The new 'trust framework' lays out the draft rules... The framework, once finalised, is expected to be brought into law.... Establishing trust online is absolutely essential."

Reading this you would imagine that the electorate wanted biometric ID's or felt the need to *verify themselves*. It may be quicker and easier to register your biometric ID, but seeing as this wasn't something anyone previously needed to do, the claimed time cost benefit is questionable.

Being able to inventory every citizen using biometric ID has been the GPPP's ambition for many years. At the <u>U.N. ID2020 summit</u> [3] in 2016 the gathered thought leaders discussed how they could achieve Sustainable Development Goal 16.9. This objective alleges that being able to *prove* your identity is a *human right*. The GPPP decided that State franchises should:

"Provide legal identity to all, including birth registration, by 2030"

The BMGF, WHO, UNICEF, World Bank and Rockefeller Foundation ID2020 partnership agreed how vital it was to enforce "legal identity" on everyone by 2030. Like finance restructuring and carbon bond markets, it contributes nothing towards saving the planet. The GPPP don't care what the real issues are but, once again, the pseudopandemic created the perfect opportunity for them to achieve their ID2020 SDG 16.9 aspirations.

The global ID2020 *partnership*'s claim that *proof of identity* is a right is laughable. It is an inalienable right to say who you are but you only need to *prove* it when someone else demands that you do. It remains up to you to decide whether or not you do, in fact, need to *prove* it. That decision will be based upon how much you want whatever they are offering in exchange for your *proof*.

This new human right is not a *right* at all. It is a dictatorial decree that you present your biometric ID (papers) when commanded to do so by the *authorities*. For example, it will be required to access State franchise services and benefits.

In the new world order of carbon neutral austerity, net zero unemployment will give us plenty of time to work in *civil society* community projects. We will be rewarded for our commitment to SDG's and public health. Our Central Bank Digital Currency (CBDC) will be issued to us as Universal Basic Income (UBI) or some variation of it.

We will discuss why this is a practical certainty shortly, but for now let's just consider how this system will work. In the UK, the *Trusted News* cartel are already creating our choice environment [4]. They are busy promoting UBI as the solution to *our problem* of increasing poverty and economic inequality.

The *furlough* job retention scheme appears to have been a trial for UBI. Yet another GPPP objective advanced by the *pseudopandemic*. The argument the *Trusted News* Cartel forward is that furlough was such an amazing success that it has "taken the brakes" off the discussion about UBI. It was described as:

"A tax-free, unconditional, non-contributory flat amount given to everyone in the country including children, though at a reduced rate and paid to parents."

UBI will probably have *universal* appeal. What is there not to like about free money? Seeing as this central bank / State franchise money will supposedly be free, why limit UBI? Why not give everyone a \$1 billion CBDC yuan, or whatever the next CBDC reserve currency will be, then we will all be billionaires?

In 2018 The Royal Institute of International Affairs (Chatham House) invited Facebook co-founder Chris Hughes to explain to them [5] how UBI "might work in practice." In 2017 the World Economic Forum (WEF) made their argument as to Why We Should All Have A Basic Income [6] and it was a key topic for debate at Davos the same year. Others, such as philanthropists [7] Mark Zuckerberg, Elon Musk and Richard Branson, have all expressed their enthusiasm for UBI.

Why would the people who have profited most from the hoarding of capital now think giving free money to everyone is a good idea? If we look at the India's Aadhaar biometric ID program [8] perhaps we can figure it out.

In 2009 Indian information technology billionaire <u>Nandan Nilekani</u> [9] was behind the Aadhaar program to provide 1.2 billion Indians with biometric ID. This biometric ID network enables Indian people to access State franchise money. The *Unique Identification Authority of India* explained <u>how the system works</u> [10]:

"Aadhaar is a strategic policy tool for social and financial inclusion, public sector delivery reforms, managing fiscal budgets.. and promote hassle-free people-centric governance.. The Aadhaar identity platform.. enables the Government of India to directly reach residents of the country in delivery of various subsidies, benefits and services"

The iris recognition technology *partners* of the Aadhaar program are Idemia. Formerly called Morpho, they also supply facial recognition technology to <u>China's</u>

<u>Technate</u> [11] and biometric ID solutions in the US. Idemia receives development support through its participation in the <u>GSMA Inclusive Tech Lab</u> [12]. GSMA state:

"GSMA Inclusive Tech Lab aims to leverage technologies like open APIs, Artificial Intelligence and digital identity to promote access to financial services, healthcare and mobility.. The Lab receives strong support from the Bill & Melinda Gates Foundation."

In their effort to meet SDG 16.9 and force everyone to submit to biometric ID, the World Bank formed ID4D [13]. It didn't progress far until, in 2016, the ID4D Multi-Donor Trust Fund (MDTF) was established. This invigorated the program and attracted funding from the Omidyar Network, the French, Australian and UK State Franchises. In particular, the World Bank thanked the BMGF for what they called their "catalytic contribution."

Nandan Nilekani is also a development partner in the ID4D collaboration, he is also a core funding partner with the BMGF and the Rockefeller Foundation in the Go Impact philanthropic partnership [14]. Not only are the BMGF funding the development of the Aadhaar program <u>Gates wrote an article in 2019</u> [15] heaping the accolade of "hero" on Nilekani. He then stated that he was supporting ID4D to bring the Aadhaar program to other countries [16].

The BMGF are among the founding members of the <u>Better Than Cash Alliance</u> [17] who have been arguing for *digital payment platforms* for nearly a decade. They are also partners with Mastercard and Trust Stamp in West Africa and have already developed a vaccine passport <u>linked to payment systems</u> [18].

Nothing is free. UBI will be conditional. You may not have to work for it but you will have to behave yourself. The only way to access your UBI will be for you to prove your identity to the satisfaction of the State franchise. Biometric ID, such as a vaccine passport will be required.

Gates is among those who understand that biometric ID can be used as a *strategic policy tool* to promote *governance*, the *delivery of various subsidies* and limit access to *services*. UBI affords total control of the individual by the centralised authority. With *Trust Stamp* the BMGF have already created a model to link UBI payments to your vaccine status.

In China the Technate's social credit system grades a citizen's compliance, the vaccine passports we are getting are far more *draconian*. Total obedience to the State franchise's *public health* demands *are* required if you are to be *allowed* anything approaching a *normal* life. The only question is what those public health demands will be. They could be anything. Vaccination is a prerequisite regardless.

The *pseudopandemic* established the global vaccine mandate which in turn enabled the GPPP to create the framework of a global biometric identity system for every *citizen*. This avoided the thorny problem of democratic legitimacy. Fear inducing *pseudopandemic* propaganda produced the desired outcome that appeals

to the electorate could not. This plan was jeopardised when some US states began reopening their societies while others didn't. The GPPP response exposed the charade.

Case numbers are meaningless, in order to assess lockdown effectiveness in the US we need to look at hospitalisation and relative death rates. The evidence shows that US hard lockdown states <u>had worse outcomes</u> [19] than those which had less restrictive or no lockdowns.

Realising that this would throw a rather large spanner in the US *pseudopandemic* machine, some leading scientific *experts* were dispatched to shore-up the narrative. Dr Leana Wen, the former President and CEO of Planned Parenthood, is a consultant for the WHO and the China Medical Board. Her World Economic Forum (WEF) profile [20] notes that she is also a governor of the WEF's Young Global Leaders forum, providing *guidance* to people like Ida Auken, Alex Soros and others. Dr Wen expressed her concerns to CNN [21]:

"My main concern is that we're not going to reach herd immunity because of vaccine hesitancy...there's the anti-science, anti-vaxxer community, but there are many other people, millions of people, who, for whatever reason have concerns for the vaccine, who just don't know what's in it for them. We need to make it clear to them that the vaccine is the ticket back to prepandemic life [and] the window to do that is really narrowing. These states are reopening, they're reopening 100%...We have a very narrow window to tie reopening policy to vaccination status...because otherwise, if everything is reopened, what's the carrot going to be? Are we going to incentivise people to get the vaccine?...The CDC and the Biden administration need to come out a lot bolder and say, if you're vaccinated you can do all these things, here are all these freedoms you have, because otherwise people are going to go out and enjoy these freedoms anyway."

The GPPP could not abide people enjoying their freedoms without the required permits. The US *pseudopandemic* operation responded to the WEF's demands almost immediately. The *Trusted News* cartel reported the CDC's offer [22] that the vaccinated no longer needed to wear masks. This advice wasn't given in the UK because the political situation was different. Real medical science had nothing to do with it.

The only science in operation was *behavioural science*. US President Jo Biden stated on Twitter [23] "the rule is now simple: get vaccinated or wear a mask until you do. The choice is yours." This was not a choice. It was the control of automatic behaviour by situating decision makers within their choice environment.

Some US states, such as Texas, didn't fall for it. They reopened fully, in defiance of federal demands to maintain strict lockdowns and *pseudopandemic* safety

measures. As expected, when the National Bureau of Economic Research <u>studied</u> the impact of Texas reopening [24] they found:

"No evidence that the reopening affected the rate of new COVID-19 cases in the five-week period following the reopening. ...State-level COVID-19 mortality rates were unaffected by the March 10 reopening."

The Texans understood that the risk was low and that lockdowns, masks and other nonsensical responses to the *pseudopandemic* wouldn't make any difference to the spread of a respiratory disease. They judged that the ongoing risk of economic and public health harm from the restrictions outweighed the negligible risk of harm from COVID 19. <u>President Biden</u> [25] called this "Neanderthal thinking."

Vaccine uptake is vital to the GPP's plans and they became increasingly frantic. Tactics to entice people who didn't want the vaccine included the governor of Ohio offering five lucky vaccine subjects \$1 million in a <u>vaccinated only lottery</u> [26] and judges in Georgia giving <u>sentence reductions</u> [27] to anyone who agreed to get the jab.

If there were a genuine global pandemic no one would need to be *incentivised* to take the vaccine. The obvious deaths would be motivation enough. Wen's statement and the other acts of desperation revealed that the purpose of vaccination had nothing to do with any public health threat. The intention was to control the public's behaviour using their *vaccination status biometric identities*.

When respiratory infections inevitably return, as they always do with the onset of winter, the State franchise can claim the predictable increase in mortality is caused by another Variant of Concern (VoC). Alternatively, if vaccine uptake is low, they could blame the unvaccinated. Sadly it seems, whatever story they make up many will *trust* it. Regardless, the outcome will be that more vaccines and lockdown measures will be required.

The cycle of "test and release" lockdowns is set to continue irrespective of how many people are vaccinated. A 100% vaccination rate will not bring an end to the current Lockdown system, which is openly planned to remain until at least the end of 2023 in the UK.

Shortly after all the media hype in the UK about the terrible Indian *pseudopandemic* the UK selected scientific experts at SAGE reported the <u>Indian B.1.617.2 variant</u> [28]. They used this to produce some more scary models. The *Trusted News* cartel then reported the *new normal* reality.

They began preparing the *choice environment* for the UK's *situated decision makers*, reporting that future plans for hopeful holiday makers were uncertain and <u>might have to be cancelled</u> [29]. They added that people might still be *allowed* to travel if they had their vaccine certificates.

The *carrot and stick* method advocated by Wen will never be all carrot. It was designed to keep the public disorientated and unable to rationalise their *decision making*. Thereby further weakening their resistance to behavioural change.

For months the UK State franchise maintained that they had no plans for vaccine passports or certificates. Meanwhile, they used tax payers money to commission at least eight private companies [30] to develop vaccine passports and certificates.

Biometrics means the measurement and recording of biological characteristics such as blood type, fingerprints or facial features. Biometric ID incorporates these characteristics into a formal identification document, card or app.

Biometric Residence Permits (BRPs) have been used by foreign national residents in the UK for more than a decade. BRPs record an individual's fingerprints and a scanned facial image and are required to <u>access services and benefits</u> [31]. All traditional UK passports (for foreign travel) issued since 2010 have been <u>biometric</u> [32]. All UK driving licenses are biometric, our obligatory photographs must be machine readable.

There is no apparent need for the State franchise to require more biometric data to meet SDG 16.9. The documents we already commonly use are perfectly capable of *proving* our identity. New biometric identities are required by GPPP State franchises because they want more control. It is for their benefit and the benefit of their GPPP stakeholder partners, not ours.

The *Trusted News* cartel use the terms *passport* and *certificate* interchangeably but they are distinctly different concepts. Vaccine *certificates* have been suggested as a means to control international freedom of movement. This is what most people would call a *passport*. Paradoxically it is the vaccine passport (or immunity passport) that is intended for internal biosecurity.

Few people have any appreciation of how much personal information we are handing over to the GPPP as a result of the *pseudopandemic*. The extent of the surveillance grid is almost unimaginable.

NHS England are preparing to transfer the individual medical records of 55 million adults and children to NHS Digital [33]. This will happen automatically unless people *opt out*. Unfortunately, there is little point in *opting-out*. There is a caveat stated by NHS Digital [34] under which you can't deny the GPPP unfettered access to you private medical records:

"To help the NHS respond to coronavirus, your information may be used for coronavirus research purposes even if you have chosen not to share it."

NHS England state that the data will be used for the planning and commissioning of public health and care services, the development of health and care policy and public health monitoring and interventions. It will enable research into public health inequality, help develop new treatments such as *vaccines* and will help them

understand the impact of *coronavirus* on the population. To do this NHS Digital need to share our data:

"NHS Digital can provide controlled access to patient data to the NHS and other organisations who need to use it to improve health and care for everyone."

The data will first undergo a process of "pseudonymisation" which will replace personal details with a unique code using "de-identification software" before being distributed to other organisation. According to the UK State franchise [35]:

"This is done by using different environments to manage the data with additional controls around the public health data and broader analytical functions."

This obviously begs the question who the other organisations are and who manages the *different environment*. This is simply referred to as the "central system." However, for reasons we are about to discuss, it seems "central system" means the intelligence agencies, the military, global corporations and pretty much anyone else who wants to take a look.

NHS Digital can only share the data with critical *stakeholders*. They provide a list of those who could be given our personal medical histories [36]:

"The Department of Health and Social Care, Public Health England, Other government departments, the NHS, primary care networks (PCNs), clinical commissioning groups (CCGs) and integrated care organisations (ICOs), local authorities, research organisations, universities, charities, clinical research organisations and pharmaceutical companies."

Medical records are coded using a code system which reveals an individual's medical history, including their sexual and mental health history, their sexual orientation, their ethnicity, age and every intimate detail [37]. People shared this information with their doctor and other health practitioners *trusting* it would remain strictly confidential.

This *information* will be stored on the centralised servers of the biosecurity state. Here it can be accessed by the private companies and corporations who are the State franchise's *critical stakeholder partners*. For example, In their document considering the <u>Phase two vaccine roll out</u> [38], SAGE (Spi-B) stated:

"CKDelta, a company that collected, cleaned, and anonymized the mobile phone location data from a large British mobile network operator, granted us access to the dataset under a research contract."

CKDelta is part of the CK Hutchinson Holdings. This global corporation invests and manages a worldwide portfolio of companies including <u>Hutchmed China</u> [39]. They are "an innovative, commercial-stage, biopharmaceutical company."

The possession of millions of biometric ID's that can be linked to medical records has enormous commercial value for a drug developer. Spi-B see no problem at all with this critical stakeholder partner *pseudonymizing* the data. They *trust* them.

Despite categorically stating that they had no plans to <u>introduce vaccine certificates</u> [40], the UK State franchise *vaccine certificate* is based upon the <u>NHS app</u> [41]. Commissioning the development of NHS apps is <u>overseen by NHSX</u> [42]. NHSX collaborated with the communications <u>intelligence agency GCHQ</u> [43] in the development of the original *NHS track and trace* app which failed ignominiously.

The eventual UK track and trace app was developed by Google and Apple. *Pseudonymisation* was achieved through the Google Apple Exposure Notification (GAEN) system. Allegedly this created a decentralised, encrypted network which only the user could unlock (on their device) using their personal encryption key. The UK Information Commissioners Office (ICO) reviewed GAEN and judged that it complied with data protection legislation [44].

The ICO approved GAEN but the UK State Franchise had already given the intelligence agencies (GCHQ) the legal authority to hack <u>any smart device</u> [45]. They can clone the entire phone if they wish and have <u>total access to it</u> [46]. However, it isn't just the intelligence agencies that can easily hack your smart phone and GAEN if they want to.

The idea that this system is "secure" is hilarious. Google and Apple have the data for a start, although they claim GAEN means they can't possibly identify individuals within those datasets. That isn't entirely true.

The track and trace system on your phone relies upon bluetooth enabled "rolling proximity identifiers" (RPIDs). The Electronic Frontier Foundation explained just some of the many ways your smart device data can be <u>compromised by anyone</u> [47], including Google and Apple:

"Bad actors could collect RPIDs en masse, connect them to identities using face recognition or other tech, and create a database.. The tracker will receive a firehose of RPIDs at different times and places.. Once a user uploads their daily diagnosis keys to the public registry, the tracker can use them to link together all of that person's RPIDs from a single day. This can create a map of the user's daily routine, including where they work, live, and spend time.. They can reveal a person's home address, place of employment, and trips to sensitive locations like a church, an abortion clinic, a gay bar, or a substance abuse support group."

The biosecurity state we are being herded into is not, in any sense, *secure*. Yet that is what the *Trusted News* cartel <u>want you to believe</u> [48]. In reality it will be a data free for all, as both official *stakeholder* partners and *"bad actors"* alike farm data on a global scale. How they choose to use it is up to them. The possibilities are endless.

For example, NHSX App development falls within the remit of <u>Project Oasis</u> [49]. The data hoovered up by private contractors (commissioned by NHSX) and app developers is first sent to the Ministry of Defence Strategic Innovation Hub <u>called jHub</u> [50] for *pseudonymisation*. The proposed vaccine passports are also in the purview of Project Oasis. NHSX work with both the intelligence agencies and the military. This makes them the ideal organisation to oversee the UK's development of <u>its vaccine passports</u> [51]

This is the public health *security infrastructure* the UKHSA are eager to develop. Our biometric Identities will enable the central coordination of the biosecurity state down to the individual level. As the State franchise has also given itself total freedom to commit any crime (the Covert Human Intelligence Sources Criminal Conduct Act), UKHSA may choose to *authorise* anything in order to protect us from *public health threats*.

UKHSA explained how the biosecurity state will operate:

"This change will.. help to make policy more responsive, agile and targeted.. Strengthening our analytics capability will help to build the evidence base for where preventative activity adds most value.. We will enhance our ability to draw on and link data across the system.. providing the data to allow us to identify challenges and evaluate interventions to have most impact."

Biosecurity will enable the individual to be *targeted*. UKHSA will *provide the data* to identify individual *challenges* to the *system*. With their "whole of government" approach UKHSA can coordinate any government agency, GCHQ for example, who have complete legal immunity to deliver *interventions* which will have the *most impact* on the *targeted* individual.

The EU Commission first announced their plans for vaccine passports in a document <u>published in May 2018</u> [52]. This led them to produce their "roadmap" to <u>vaccine passports</u> [53] in early 2019. With the goal of establishing a "common vaccination card/ passport for EU citizens" the pseudopandemic fitted perfectly into the planned timeline. The 2018 document advocated the need to:

"Strengthen partnerships and collaboration with international actors and initiatives, such as the World Health Organisation.. and financing and research initiatives like GAVI the Vaccine Alliance, the Coalition for epidemic preparedness innovations (CEPI)."

Starting in 2020 the plan was to "reinforce existing partnerships and research infrastructures." The stated aim was to increase investment for the Coalition For Epidemic Preparedness and Innovation (CEPI) founded by the Bill and Melinda Gates Foundation (BMGF). This was practically the first thing [54] that European State franchises (including the UK) did in response to the pseudopandemic.

The EU's *certificate* will *permit* people to move freely across national borders within the European Union. The plan is to homogenise all the various vaccine certificates into a global biosecurity grid as soon as possible. The UK Transport Secretary Grant Shapps said that the G7 and its *partners* were working to ensure a global vaccine certificate system [55].

The *pseudopandemic* based vaccine certificate surveillance system is perfect for controlling where the Technate's citizens are *permitted* to travel. The UK State franchise <u>travel task force</u> [56] devised a traffic light system with nations categorised as green, amber or red, depending upon whatever criteria they wish to use. Currently these are all related to vaccines and testing (cases) but they could be any claimed public health *security* threat.

They trialled their system by stranding British holidaymakers in Portugal, suddenly moving it from green to amber. With many forced to cut short or cancel holidays, the *Trusted News* cartel then reported the travel chaos [57]. At no stage did any of the *pseudopandemic* propagandists point out that restricting flights and closing borders to protect against a low mortality airborne virus was ridiculous. Instead they debated the deliberately disruptive system, promoting the importance of compliance and shaping the *choice environment*.

Following the announcement of the NHSX vaccine *passports* (not the certificates) the UK dispatched its minister Michael Gove and deputy chief medical officer Jonathan Van Tam to Israel on a <u>fact finding mission</u> [58] to investigate the benefits of the Israeli system.

The visit appears to have made an impact on the State franchise minister which he presumably discussed with his wife. Shortly after his return the *Trusted News* cartel <u>published Sarah Vine's article</u> [59] in which she called anyone who questioned the vaccine *selfish idiots*.

Instead of reporting the fact that there were no completed vaccine clinical trials or the high number of apparent vaccine related deaths, and ignoring the research that showed the people raising concerns were calling for more scientific rigour, she gave the public the impression that anyone who questioned vaccines was "weapons grade stupid." She wrote:

"A killer virus.. has paralysed the world.. you don't want to have your free immunisation.. because Wayne in Minnesota, who lives in his parents' basement, has told you it's an evil plot by lizard people so they can harvest our organs?.. the vaccine is our only chance of getting back to some form of normality."

Unfortunately, the vaccine patently is not the way back to any kind of normality and it certainly isn't free. On the same day that Vine's attack piece was published, the BBC broadcast <u>a radio interview</u> [60] with Prof. Neil Ferguson who stated that the Indian, subsequently renamed Delta, VoC may mean a delay in lifting lockdown and advocating a new system of localised or "tiered" lockdowns. The Prime Minister

backed up Ferguson by stating that the Indian VoC <u>could lead to a new system</u> [61] of "very, very draconian action."

The UK started <u>trialling its internal biosecurity grid</u> [62] by restricting access to some theatre and sports events based upon the citizen *immunity status*. People required either a proof of vaccine or a negative test result (vaccine passport) in order to be *permitted* to attend.

Despite the vaccine roll out, by May 2021, with virtually no COVID 19 hospital admissions or any related mortality, thanks to claims about VoC's, UK State franchise ministers began warning of the need for the <u>tiered lockdowns</u> [63]. Having already <u>trialled these in Leicester</u> [64] and elsewhere during the summer of 2020, they proposed a system of more localised lockdowns based upon wherever they claimed to have identified an alleged "COVID 19 hotspot."

At the time of writing (June 2021) it seems the initial plan to lift the UK nationwide lockdown has been postponed due to the newly re-branded Delta VoC. July the 19th is now the promised "Freedom Day." It makes little difference.

Among the motives for the *pseudopandemic* was *behaviour change* to accustom the public to "very, very draconian" public health orders. The broad acceptance of a requirement to produce your biometric ID upon demand, which had hitherto been fiercely opposed, was accepted by the majority. In addition the public's acclimatisation to a reliance upon state subsidies, initially through furlough and eventually to be rolled out as UBI, was planned and achieved.

The *pseudopandemic* has been largely successful so far. With the population wide acceptance of vaccines, unnecessary for the vast majority, the nascent biosecurity state has been established. The *core conspirators* and their *informed influencers* have constructed the systems they need for totalitarian technocratic control. Just as they had extensively planned and prepared to do.

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Chapter 24 - Proper Planning Prevents Poor Performance

Less than 2 months after they declared a global pandemic the WHO passed resolution 73.1 to create the *Independent Panel for Pandemic Preparedness and Response* (IPPPR). The IPPPR aren't independent of either the WHO or, by extension, the GPPP. In their subsequent report called <u>COVID 19</u>: <u>Make It The Last Pandemic</u> [1] they described what they called the *devastating reality* of COVID 19:

"COVID-19 has shown how an infectious disease can sweep the globe in weeks and... set back sustainable development by years."

Based on the figures State franchises around the world had concocted using fraudulent tests, the IPPPR falsely claimed that millions had died from COVID 19. The true, much lower number has been *memory holed*.

The IPPPR were particularly concerned that global populations couldn't get hold of enough vaccines. They said that, despite the vaccines, COVID was *endemic*. This appeared to be tantamount to an admission that the vaccines are, as Doctors For Covid Ethics described, "unnecessary" and "ineffective."

In many respects, like every *pseudopandemic story*, the vaccine narrative makes no sense. They don't elicit a full antibody response and don't stop the infection with or transmission of the virus, and yet are absolutely essential. Unless we take them we will remain in lockdowns, of some form or another while, at the same time, COVID 19 (or some future version) is here to stay.

In order to combat this ongoing global crisis the IPPPR pretended that there was some evidence that lockdowns worked and recommended that these be applied rigorously whenever or wherever COVID variants of concern (VoC) emerged. In the UK these dangerous areas are currently being referred to as *hotspots*.

They suggested this global behaviour change effort should be set into international law with a *Pandemic Treaty*. But most importantly, what really mattered to the independent IPPPR was that the United Nations General Assembly should create a Global Health Threats Council. This global governance system should have the authority to:

"Maintain political commitment.. between emergencies and.. during emergencies; ensure maximum.. collective action across the international system at all levels; progress towards the goals and targets set by WHO and guide the allocation of resources."

In another remarkable coincidence the completely *independent* IPPPR report dovetailed precisely with the demand of world leaders that a <u>global Pandemic Treaty</u> [2] be signed. In their Joint statement the leaders of 24 State franchises wrote [16]:

"Nations should work together towards a new international treaty for pandemic preparedness.. It would be rooted in the constitution of the World Health Organisation.. The main goal of this treaty would be to foster an all of government and all of society approach.. that connects the health of humans, animals and our planet... To achieve this, we will work with.. all stakeholders including civil society and the private sector.. Pandemic preparedness needs global leadership for a global health system."

As the coincidences kept piling up, it seemed the *pseudopandemic* led to the creation of the system outlined in the WHO's 2005 document <u>Connecting For Health</u> [3]. This was the document in which the WHO stated that global health governance didn't need to be led by governments but rather their role would be to create the *enabling environment* to allow a system of global health governance to rule.

This system was proposed in 2002 in the joint WHO and Centre for Global Change on Health (CGCH) research paper Global Health Governance [4]. Only two of the eight CGCH spheres of interests [5] were related to what we might traditionally consider to be matters of public health concern. These were communicable diseases and tobacco controls. The other six were climate change, economy, energy, security, communities and governance.

Perhaps without realising how their research would be exploited, the CGCH academics described how public health governance could control practically every aspect of human society. This new world order, under the banner of protecting public health, would be true global governance. They wrote:

"A range of health determinants are increasingly affected by factors outside of the health sector – trade and investment flows, collective violence and conflict, illicit and criminal activity, environmental change and communication technologies. There is an acute need to broaden the public health agenda to take account of these globalizing forces, and to ensure that the protection and promotion of human health is placed higher on other policy agendas."

UKHSA is the UK State franchise's embodiment of this principle. Protecting public health provides the means to control behaviour across all policy areas.

The CGCH recognised that *government* relies upon legal and formally prescribed processes whereas *governance* only requires an agreed set of rules and shared interests. Governance is far more malleable than government, the rules can take the form of hard regulations or they can simply be collective goals. Global governance is the "*international rules based system*."

Governance has another advantage. In a legal sense governments are restricted solely to using legislation and regulation to control activity within their national boundaries. While they often coordinate regulation and even laws, the government of one nation cannot pass laws in another. Governance on the other hand, by

establishing broad agreement on *the rules*, can not only effect change in many nations at once if can reach inside those nations to the regional, local and even individual level.

Nearly every aspect of the *pseudopandemic* was meticulously modelled and the policy and media response planned beforehand. This leads many to suspect that SARS-CoV-2 itself was purposefully designed. While this may have been the case, it was not necessary for the *pseudopandemic* to proceed. Just as in 2009, the *pseudopandemic* capitalised upon a low level threat by blowing the associated risk out of all proportion. It was more effective in 2020 because the *players* were better prepared.

With the policy and media response primed, the core conspirators merely needed to wait for the right opportunity to come along. New respiratory viruses are frequently_discovered [6] it was just a matter of picking one that suited their purpose. If SARS-CoV-2 was created to cause a genuine global pandemic it was ineffective. There was no global pandemic and those who claim that the virus was designed to be an unusually deadly pathogen need to explain why it wasn't. This is not to deny that people died from COVID 19 nor that Pandemic II (COVID 21?) won't be more lethal.

This notion of a deliberately released engineered virus also plays into the existing geopolitical narrative. The "Wuhan Flu" can largely be blamed upon China. Equally a revelation that the deadly virus was man-made increases the bio-terror threat level. Creating further claimed justification for more global control. As we have discussed, the western based global financial order have assisted China's economic, industrial and even military development. They certainly have not been treating China as the enemy.

The suspicion that the "Wuhan flu" was deliberately created is perhaps understandable given the proximity of Event 201 [7] to the outbreak. The tabletop exercise was attended by representatives of the Chinese CDC, the US CDC, the U.N., The Bill and Melinda Gates Foundation (BMGF), US National Intelligence, The World Economic Forum (WEF), CEPI and the pharmaceutical corporations among others.

Event 201 was convened by Johns Hopkins University, the WEF and the BMGF. It ran on October 18th 2019. The first case of COVID 19 was allegedly detected on 17th November 2019 [8]. COVID 19 is said to be the disease caused by a zoonotic coronavirus that jumped from bats to humans. The Event 201 training exercise was based upon the following scenario [9]:

"Event 201 simulates an outbreak of a novel zoonotic coronavirus transmitted from bats to pigs to people that eventually becomes efficiently transmissible from person to person, leading to a severe pandemic."

This was called the CAPS coronavirus in the training exercise. The only notable differences between the Event 201 simulation and the *pseudopandemic* is that the disease first emerged in Brazil, rather than China, and killed considerably more

people. While this was a striking *coincidence*, there have been some explanations offered to rationalise it.

For the official fact checker *Full Fact* a statement <u>from the organisers</u> [10] that they did not make any predictions, despite *the fact* that they clearly made many, was enough for them to establish *the fact* that Event 201 was a coincidence of the *"nothing to see here"* variety. This is because fact checkers, like Full Fact, are GPPP PR agents whose roll is to defend the approved *single version of the truth*.

That being said, Event 201 was by no means the first simulation or exercise to model a global pandemic. It was the last in a long line that preceded the *pseudopandemic*, eventually one of them would occur close to a real world event. In terms of timing, or even scenario design, simple coincidence was at least plausible, if unlikely.

However, the event organisers (including the WEF and BMGF) named their training simulation based upon the estimated 200 annual *epidemic events* globally, with each of these theoretically capable of becoming pandemics. Hence 200 *epidemic events* leading to 1 *pandemic* - Event 201. The naming convention for Event 201 was founded in the idea that the next *epidemic event* would be a global pandemic.

The next *epidemic event*, after Event 201, was the *pseudopandemic*. This was a truly incredible *coincidence*. Barely plausible *in fact*.

Equally, with that many claimed *epidemic events* allegedly occurring every year, the scope for future global responses to public health emergencies is practically boundless. Any one of them can be picked at any time to be declared as *Pandemic II* by the WHO. This is the *new normal* UKHSA, among others around the world, envisage.

The gathered participants and organisers of Event 201 were able to *predict*, in considerable detail, not only the policy response of governments but also the reports from the world's "free and independent media." Many of the phrases we became familiar with, such as "new normal," were used in Event 201. It accurately predicted the public and social media response, our behaviour, the nature of public debates and the form of the popularised *infodemic*.

They used simulations of news reports which, had you stumbled across them unknowingly, you would assume were real news broadcasts aired during the pseudopandemic. Their predictions regarding *Trusted News* cartel reports of the pseudopandemic were unerringly accurate. You could believe that this indicates the amazing power of their modelling, or you might think it suggests foreknowledge and media control.

The Event 201 *players* were presented with background information on the nature of the *real world* threat necessitating the training. Dr Mike Ryan, the Executive Director of the WHO Health Emergencies Programme, read a script which stated:

"Without question epidemic threats have become a global strategic concern. I don't think we have ever been in a situation where we have had to respond to so many health emergencies at once. This is a new normal. I don't expect the frequency of these epidemics to reduce and, in fact, vulnerabilities all over the world in developing and developed countries have increased, not decreased. Mainly through human behaviour, economic development population density and many others. The scenario you will be presented with this morning could easily become one shared reality one day. I fully expect we will be confronted with a fast moving, highly lethal pandemic of a respiratory pathogen... The nature of a pandemic is that many countries will be affected at the same time. This is particularly true of a respiratory pathogen, as they are often spread by asymptomatic persons. They spread fast. In 2009 the pandemic virus reached all continents in less than nine weeks."

This narrative, delivered by Ryan, was not based upon any evidence but it did lay out the central themes of the *pseudopandemic*. A fast moving respiratory disease spread by the *asymptomatic* was the fundamental *pseudopandemic* story which drove the global policy response. We might ask who wrote this script and why Dr Ryan agreed to read it to the gathered *thought leaders*.

As socio-economic development in India, China, Kenya and nearly every other country around the world clearly demonstrated, the world was not facing an increasing number of health emergencies. Globally, health outcomes had improved, not deteriorated, throughout the latter half of the 20th and into the first decade of the 21st century. Shared knowledge (human behaviour), economic development and population growth had helped us to achieve these improvements. Yet Ryan identified these factors as the primary cause of alleged health threats which did not exist as he described.

Clearly the 2009 pandemic did not happen, despite the assertion from the Executive Director of the WHO. It is a story and there is no objective reason to believe it. Ryan's presentation described a potential threat, but that neither transpired in 2009 nor materialised in 2020. This was the nature of the *pseudopandemic* that was named as *Event 201* one month before the first cases were discovered and five months before the WHO would formally declare it.

It seems Ryan's statement may have been based upon the report by the Global Preparedness Monitoring Board (formed by the WHO and the World Bank) called A World At Risk [11] (AWAR). Published in September 2019, a few weeks before Event 201, this identified what it classed as *disease amplifiers* of which the leading two were population growth and climate change. Given that the report was led by population control zealot Gro Harlem Brundtland, this was no surprise.

The AWAR report claimed that 1483 such *events* occurred between 2011 and 2018. This appears to be Event 201's alleged 200 annual *epidemic events*. Among these

"events" were SARS, MERS, Ebola and Marburg virus but the vast majority comprised of quite normal illnesses, such as flu, measles and adenovirus.

If every disease which commonly ails humanity is labelled as an *epidemic event*, then there is virtually no limit to how many epidemics and pandemics you can declare. This spurious claim enabled Ryan to list an ever expanding number of global *health emergencies* while completely ignoring the undoubted improvements in global public health.

The AWAR report suggested some progress indicators to assess how close we were all getting to global health governance. By September 2020 they wished to see completion of the following:

"The United Nations (including WHO) conducts at least two system-wide training and simulation exercises, including one for covering the deliberate release of a lethal respiratory pathogen... the United Nations convenes a high-level dialogue with health, security and foreign affairs officials to determine how the world can address the threat of a lethal respiratory pathogen pandemic"

Much of the *pseudopandemic* was a simulation based upon the fabricated scale of a threat. The global coordination of the policy response was a *system-wide training* opportunity covering an allegedly *lethal respiratory pathogen*. The *pseudopandemic* was an exact fit for the WHO's and the World Bank's training objectives and met their progress indicators perfectly. If the "Wuhan Flu" story sticks and the world then needs to respond to the "deliberate release of a lethal respiratory pathogen" then all of the AWAR boxes will have been ticked.

Another 2019 exercise with many parallels to the *pseudopandemic* was <u>Crimson Contagion</u> [12]. This US exercise conducted in 2019 by the US Department of Health and Human Services (HHS), the Department of Homeland Security (DHS) and the Federal Emergency Management Agency (FEMA) envisaged an influenza pandemic that began in China. Like Event 201 this exercise involved all levels of government, private industry partners, and nongovernmental organizations (the GPPP.)

In May 2018 the Johns Hopkins Center for Health Security (JHCHS), who partnered with the WEF and the BMGF to run Event 201, ran the <u>Clade-X exercise</u> [13] which simulated the release of a viral bioweapon by a terrorist group. It involved the HHS, DHS, CIA, the CDC and leading political figures. Despite the prevailing epidemiological advice that mass quarantine would be counterproductive, Clade-X envisaged the use of presidential executive orders to create a system of federal quarantines (lockdowns).

It modelled the use of the national guard and the US Marshals Service to potentially use force to maintain the quarantine (medical martial law.) Many of those infected were envisioned to have mild illness but were still contagious and needed to be contained. They were, to all intents and purposes, *asymptomatic* carriers.

One of the scenario designers for the Clade-X exercise was Thomas Inglesby, who had risen to become director of the JHCHS for Event 201. Ingelsby worked on Clade X with fellow JHCHS faculty member <u>Tara O'Toole</u> [14]. *Coincidentally* both Ingelsby and O'Toole ran another exercise that occurred just before a major global event that would mirror their scenario.

The <u>Dark Winter exercise</u> [15] held at Andrews US Air-force Base in June 2001, occurred a few months before the 9/11 attacks. An often overlooked supposed component of the 9/11 attacks, initially reported to be <u>part of the same alleged al Qaeda offensive</u> [16], were the anthrax attacks that began just one week after 9/11. Twenty two people were infected and five died.

The attacks were not conducted by al Qaeda who did not obtain the anthrax spores from the Iraqi government, as widely reported at the time. Though he protested his innocence, the man eventually accused of the crime was Bruce E. Ivins who was a top anthrax researcher at the US government's biological weapons research laboratories at Ft. Detrick. Unfortunately, he allegedly committed suicide the night before he was due to be charged.

The Dark Winter scenario closely paralleled the original media reports of the anthrax attacks. It suggested that a weaponised form of smallpox was released by bad state actors and in particular Iraq. Further, it envisaged that Osama Bin Laden was involved. The scenario read:

"Any well-funded terrorist organization that had access to these one or more of these scientists and cultures of smallpox virus would have the capability to launch this attack."

What is notable is that the scenario designed by, among others, Inglesby and O'Toole, corresponded to the initial erroneous reporting of the subsequent anthrax attacks. It did not match the reality, as subsequent FBI investigations would reveal.

Nearly two decades later, with Event 201, Inglesby would once again be a major contributor to a scenario that precisely matched the subsequent *Trusted News* cartel reporting of a major geopolitical event but not the reality. Inglesby seems to be among those able to predict how an event will be *inaccurately* reported by the *free and independent* media.

Dark Winter pictured the possible use of forced inoculation, state and national lockdowns (quarantines), travel restrictions, contact tracing, social distancing and ultimately the imposition of Martial Rule. It imagined:

"Prohibition of free assembly, national travel ban, quarantine of certain areas, suspension of the writ of habeas corpus [ie, arrest without due process], and/or military trials in the event that the court system becomes dysfunctional."

In their training simulations the JHCHS use a fictitious global media outlet called the Global News Network (GNN) to predict media reports. In style and presentation

they appear to be a facsimile of CNN. Both Dark Winter and Event 201 were concerned with *dangerous disinformation* and misinformation as defined by Inglesby and others.

In Event 201 the fictitious GNN heard from social media and communication experts, one being the fictional character Kevin McAleese. This character reported:

"To me it is clear countries need to make strong efforts to manage both dis' and misinformation. We know social media companies are working around the clock to combat these disinformation campaigns. The task of identifying every bad actor is immense and experts agree that new disinformation campaigns are being generated every day. This is a huge problem that is going to keep us from ending the pandemic and might even lead to the fall of governments... If the solution means controlling and reducing access to information I think it's the right choice."

We need to ask what the purpose of these training events are. They do not appear to be designed to give the trainees a realistic world view. They seem designed to either guide them towards a set of desired policies or justify the policies they already intend to implement.

The information presented as "fact based" fiction by Kevin was dezinformatsiya. It was deliberately misleading and was clearly intended to influence. The gathered thought leaders were being told that people who asked questions were "bad," that questions constituted a threat to government itself and in order to protect allegedly democratic governments the freedom of speech and expression they are supposedly based upon should be destroyed.

If anything typified the *pseudopandemic* it was the creation of fake narratives, justifying planned policies to achieve predetermined objectives. Another notable element has been the insistence that people should not think critically but instead should *trust* whatever the State franchise and officially approved *media* tell them. Reaffirming these pillars of the subsequent *pseudopandemic* appears to have been common to Event 201, Dark Winter, Crimson Contagion, Clade-X and the many other similar training events that the GPPP engaged in over the years.

During the *pseudopandemic* a truly independent *news media* was trying to report the scientific evidence and statistical data, often directly from official State franchise sources. People who were interested in this data, scientific and medical evidence had no option but to access it either through *news media* reports or their own independent research. There was no *alternative* because the *Trusted News* cartel consistently obfuscated, spun, distorted or simply ignored any information which questioned the official *scenario*.

Not only have these training exercises frequently been based upon literal *fake news* and questionable scientific assumptions, they have invariably concluded that the only way to combat a *pandemic* is the increased centralisation of compartmentalised, authoritarian power. Wherever we look the answer is always

the same. The stakeholder partners must have more power, governance must be centralised and dissent must be crushed.

For example, in 2007 Exercise Winter Willow [17] modelled the UK's response to an influenza pandemic. Run by the Cabinet Office and the Health Protection Agency (later subsumed by the Department of Health), it involved some 5000 participants. Winter Willow highlighted the need for uniform messaging and one of the recommendations that sprang from it was to work more closely with the mainstream media:

"The Department of Health and the Cabinet Office will continue to work with media representatives to assist in developing a better public understanding of pandemic risk and.. will develop protocols for the effective sharing of national communication messages"

Winter Willow contributed towards the eventual formation of SAGE which centralised *scientific authority* during the *pseudopandemic*. The report stated:

"A science colloquium was held in April.. endorsed by the Department of Health Scientific Advisory Group (SAG).. Work is underway to clarify the role of both the SAG and the UK National Influenza Pandemic Committee during a pandemic flu outbreak."

In 2016 the UK State franchise ran Exercise Cygnus. The *scenario* was prepared by Professor Neil Ferguson and his team at Imperial College London (ICL). It simulated a flu outbreak and was a Command Post Exercise (CPX) designed to test the UK's pandemic preparedness. Nearly a thousand key officials took part from central and local government departments, the NHS, public health bodies from across UK, as well as local emergency response planners.

Some of the <u>Cygnus Report</u> [18] recommendations were implemented during the *pseudopandemic*. For example, it recommended *legislative easements*. The *pseudopandemic* saw the easing of legislation around the death registration process. Health care providers were freed from the need to make ongoing care assessments and the rules on hospital discharge were loosened. The procedures for inquests, post-mortems and cremations were also *relaxed*.

Cygnus recommended working with *stakeholder* partners (pharmaceutical corporations) to develop vaccines and antiviral treatments. It also suggested developing the "surge" capacity which saw UKHSA surge into COVID 19 hotspots. It suggested messaging should be centrally coordinated and all "stakeholders" should be involved. It identified a *lack of trust* as a potential problem and recognised that "confused" messaging could lead some to think there was some sort of *conspiracy*.

Exercise Cygnus also highlighted a <u>number of deficiencies</u> [19]. It identified inadequate numbers of critical and acute care beds, which the State franchise then reduced further during the *pseudopandemic*; it warned that whole sections of the

NHS may have to be shut, which is exactly what the State franchise did; it highlighted that the most vulnerable could be denied care, just as they were, and that the health service would have to be set on a war footing just to be able to cope.

These were warnings not policy suggestions. Yet this all came to pass a few years later.

The consequences of not addressing these shortcomings were increased mortality not less. The State franchise adoption of some of the Cygnus recommendations and failure to address Gygnus alarms appears to have been the UK *pseudopandemic* policy.

The UK State franchise seemingly cherry picked the elements of Cygnus that would allow it maximum latitude, especially in terms of monitoring and reporting mortality. It took up the recommendation to focus upon messaging and information control and to work with *stakeholder partners* on vaccine development, but ignored everything else. At the same time, it exacerbated hospital and care shortages, further eroded equipment supply chains, crippled every aspect of the health service other than the COVID 19 response and exposed the most vulnerable to the maximum possible risk.

It is as if it used Cygnus as a template to forward its agenda by causing as much systemic chaos as it could. The policy outline of the *pseudopandemic* response seems to have been set in 2016. The scenario modelled by Ferguson and ICL differed from the *pseudopandemic* only by virtue of the 2016 model being based upon influenza while the 2020 model was based upon a coronavirus.

That both Cygnus and the *pseudopandemic* were modelled by Ferguson and ICL and were essentially identical, that both models were largely funded by the Bill and Melinda Gates Foundation (BMGF), and that the BMGF were also advising the UK state franchise on how to respond to the *pseudopandemic* while simultaneously acting as a major driver for mass vaccination, as highlighted by Cygnus, is an incalculable *coincidence*.

Perhaps this explains why Exercise Cygnus <u>was kept secret</u> [20], reportedly for reasons of *"national security."* When the report was released, after being exposed, it was heavily redacted and all the names of the senior officials involved were hidden. The official *media source* explanation for this is that it was just too terrifying for the public to withstand. We might ask, terrifying for whom? Terrorising the public was recommended by Spi-B (SAGE) after all.

It is reasonable to assume that many of those redacted names would have been people working for Ferguson's ICL team and current members of SAGE. If so, this indicates that those involved in planning the response to the *pseudopandemic* not only understood what the risks were, they provided the justification for policies which they knew would increase them.

One of the senior officials involved in Cygnus reportedly said:

"These exercises are supposed to prepare government for something like this - but it appears they were aware of the problem but didn't do much about it."

Similar pandemic preparedness exercises were held by State franchises the world over in the lead up to the *pseudopandemic*. Yet, when it arrived, they all unanimously claimed they were not prepared for it. How can they possibly have been unprepared when they had been training for it for decades? What was the point of all this *"war gaming"* if not to ready themselves for the coming war?

State franchises were ready. Not to fight a real pandemic but to wage a pseudopandemic hybrid information war.

Following the failed 2009 attempt, in 2010 the Rockefeller foundation's Research Unit published Scenarios For The Future of Technology and International Development [21]. Their Global Business Network, who train future business and management leaders the world over [22] and specialise in "future think and scenario planning," were the chief architects.

Explaining the purpose of the *future think*, in the introduction the lead scenario planner Peter Schwartz wrote:

"We are at a moment in history that is full of opportunity. Technology is poised to transform the lives of millions of people throughout the world.. This report represents an initial step in that direction. It explores four very different—yet very possible—scenarios for the future of technology and development.. It will seed a new strategic conversation among the key public, private, and philanthropic stakeholders about technology and development at the policy, program, and human levels.. for spotting and making sense of important changes as they emerge.. This is only the start of an important conversation that will continue to shape the potential of technology and international development going forward."

It is important to note that these modelled scenarios were presented as opportunities to develop technology with the aim of transforming the lives of millions. They were considered to be very possible with implications for future strategic planning among key stakeholders. The goal was to spot these opportunities as they emerged and capitalise upon them to shape international development.

In their "Lockstep Scenario" the Rockefeller tax exempt foundation envisaged "A world of tighter top-down government control and more authoritarian leadership, with limited innovation and growing citizen pushback." This fictional Lockstep world was set in 2012 and surfaced due to a zoonotic bird flu that spread around the world rapidly.

What is remarkable about the Lockstep scenario is that it not only predicted lockdowns, which was something entirely at odds with scientific understanding at

the time, but accurately predicted where they would originate, how they would be applied and what the reaction would be. The scenario outlined the following:

"The pandemic blanketed the planet.. in developed countries, containment was a challenge.. However, a few countries did fare better—China in particular. The Chinese government's quick imposition and enforcement of mandatory quarantine for all citizens.. saved millions of lives, stopping the spread of the virus far earlier.. and enabling a swifter post-pandemic recovery. National leaders around the world flexed their authority and imposed airtight rules and restrictions, from the mandatory wearing of face masks to body-temperature checks at the entries to communal spaces like train stations and supermarkets. Even after the pandemic faded, this more authoritarian control and oversight of citizens and their activities stuck and even intensified. At first, the notion of a more controlled world gained wide acceptance and approval. Citizens willingly gave up some of their sovereignty - and their privacy - in exchange for greater safety and stability.. biometric IDs for all citizens, for example, and tighter regulation of key industries whose stability was deemed vital to national interests."

The Rockefeller foundation predicted that Lockdown policies would originate in China and that they would recover quickly as a result. They apparently foresaw the imposition of other measures such as the ubiquitous use of face masks and conditional access to shared spaces. They accurately predicted the creation of essential and non essential businesses and noted that the controls put in place, including biometric identity, would initially be accepted by the citizens in exchange for safety.

Most will consider that the Lockstep scenario was just a story based upon reasonable projections. However, Lockstep reveals an astounding set of *coincidences* that only the most incurious could accept without further scrutiny.

Lockdowns do not work and prior to the *pseudopandemic* no one, other than teenagers engaged in school projects and politicians, ever seriously suggested they would. Schwartz and the Rockefeller researchers must have been aware of this scientific reality 2010. It was vaguely plausible that a future influenza pandemic may result in lockdown policies but it was not *"very possible"* as Schwartz claimed.

To then accurately predict that an *unlikely* policy would originate in China, would be adopted globally and that China would recover quickly, both in terms of the disease and economically, seems remarkably prescient. With the Rockefeller led Trilateral Commission promoting the construction of the Technate in China, their prediction that technocratic control mechanisms, such as biometric ID's, would be needed was another notable *coincidence*.

Like Inglesby and his colleagues at JHCHS, the Rockefeller foundation also seem to possess the rarest of abilities. They too can envisage scenarios which are not based upon extant knowledge yet subsequently manifest in a future reality.

Just as Inglesby was able to predict *fake news* reports about the anthrax attacks that were not based upon evidence, so Schwartz and his team could predict a policy response to a pandemic that was not based upon epidemiology or medical science. Even to the extent that they could accurately foresee where this *fake policy* would originate.

You do not need to be a "conspiracy theorist" to understand that training exercises based upon such scenarios predetermine future events. That is the whole point of training. When something occurs what follows is predesignated. The scenarios set future policy responses should similar events subsequently transpire. This may seem an obvious point, but it is worth considering what this implies.

If the institutions which design the scenarios and undertake the training are some of the most influential on Earth, then that policy response will have global implications. When this *preparedness* is itself part of a compartmentalised authoritarian system, a small group, able to exercise that authority, can indeed determine future global events. What appears to be coincidence is *in fact* planning.

It was not a *coincidence* that the policy response to SARS-CoV-2 was reflected in the training scenarios and events that preceded the *pseudopandemic*. The *pseudopandemic* was neither the disease nor the virus. It was the product of the policies, regulations and legislation hard wired into the response years before they were triggered.

The *parasite class* have a eugenicist, population control agenda. They also intend to establish global governance under their rule and seize control of the global commons. This agenda is clearly evident in numerous intergovernmental policy documents. It is stated in global development goals, has a traceable historical lineage, has been openly declared at the highest level by statesmen and women and is a recurrent theme in thousands of publications and documents freely available in the public domain.

Due to our refusal to consider what is in front of our eyes and our acceptance of and belief in the fictional construct of authority, we give the *core conspirators*, within the parasite class, the necessary authoritarian power to determine the future of humanity. They can and do manipulate events in pursuit of their ambitions and when we look at the global preparedness training for the *pseudopandemic* we can see one method by which they do so.

We have already discussed false flag campaigns, such as Operation Gladio, but to shape our future the core conspirators did not need to create SARS-CoV-2. Having already instructed *informed* and *deceived influencers* how to respond to a global pandemic, they simply needed to set the planned actions in motion when the opportunity arose.

If we understand how this system operates we can reverse engineer it. Through their policy think tank proposals, future training scenarios and exercises we can discern their intentions. We too can prepare.

Another simulation model in the Rockefeller's *Scenarios For The Future of Technology* document was called *Hack Attack*. This was set in a world riven by a series of disasters. Unable to cope with the volume of crises, international trade and national governments started to break down. A rampant criminal class emerged making use of technology to run ever more sophisticated scams including the production of *"bogus vaccines."*

Calling these sophisticated criminal networks "technology hackers" Schwartz and his team wrote:

"Sophisticated hackers attempted to take down corporations, government systems, and banks via phishing scams and database information heists... Desperate to protect themselves and their intellectual property, the few multinationals still thriving enacted strong, increasingly complex defensive measures.. Verifying the authenticity of anything was increasingly difficult.. The positive effects of the mobile and internet revolutions were tempered.. scamming and viruses proliferated, preventing these networks from achieving the reliability required to be.. a source of trustworthy information for anybody.. Trust was afforded to those who guaranteed safety and survival.. By 2030, the distinction between 'developed' and 'developing' nations no longer seemed.. relevant."

Cyber Polygon is a series of annual cyber attack preparedness training exercises run by the <u>World Economic Forum</u> [23]. In preparation for the 2020 Cyber Polygon exercise <u>Klaus Schwab said</u> [24]:

"It is important to use the COVID-19 crisis as a timely opportunity to reflect on the lessons of cybersecurity.. We all know.. the frightening scenario of a comprehensive cyber attack, which would bring a complete halt to the power supply, transportation, hospital services, our society as a whole.. The COVID-19 crisis would be seen in this respect as a small disturbance in comparison to a major cyber attack."

Schwab advised that we should:

"Use the COVID19 crisis as a timely opportunity to reflect on the lessons the cybersecurity community can draw and improve our unpreparedness for a potential cyber-pandemic."

The Managing Director of the WEF, Jeremy Jurgens, describing what the cyber pandemic will be like, said:

"I believe that there will be another crisis. It will be more significant. It will be faster than what we've seen with COVID. The impact will be greater, and as a result the economic and social implications will be even more significant."

Cyber Polygon 2020 was a global cybersecurity training exercise run by the WEF in collaboration with the Russian State franchise. Sberbank are among the founding

members of the WEF <u>Centre For Cybersecurity</u> [25]. Bi.Zone, <u>a subsidiary of Sberbank</u> [26], were responsible for designing and running the Cyber Polygon scenarios. Sberbank are a <u>majority state owned</u> [27] Russian bank.

Cyber Polygon 2020 was held on <u>8th July 2020</u> [28]. Alongside more than 120 Russian companies (primarily from the Russian financial and tech industries), the western based GPPP stakeholders training for the *cyber pandemic* were also mainly from the banking and financial sector with a sizeable contingent representing the tech and financial tech (fintech) industries.

It appears the *cyber pandemic* is planned to affect the power grid and the financial sector. The scenario for Cyber Polygon 2020 was based upon "the prevention of a digital pandemic" which would emerge in the form of a "targeted attack, aimed at hacking company data and undermining its reputation."

Coincidentally the Trusted News cartel reported an apparently never ending stream of cyber attacks <u>against companies in 2020</u> [29]. SolarWinds, Twitter, the Marriott Hotel chain, MGM Resorts, Zoom, Magellan Health and Finastra were just some of the companies who saw their reputations undermined by targeted attacks in 2020.

In February 2020 the new head of the European Central Bank and former IMF chief Christine Lagarde warned of a <u>looming financial crisis</u> [30] caused by a *hack attack*. This followed warnings from Japan's Central Bank and JP Morgan Chase (Russian Sberbank *partners* in the WEF Centre for Cybersecurity) that cyberattacks were the <u>biggest threat to the US financial system</u> [31]. In April 2020 the International Financial Stability Board (FSB) <u>stated that</u> [32] "cyber incidents pose a threat to the stability of the global financial system."

The Carnegie Endowment for International Peace (CEIP) is one of the GPPP's most influential foreign policy thinks tanks. They are also founding members of the WEF Centre for Cybersecurity alongside the Russian state owned Sberbank. In 2020, in partnership with the WEF, the CEIP released their report International Strategy To Better Protect The Financial System Against Cyber Threats [33].

To clarify: the CEIP, huge US investment firms like BlackRock, tech giants like Amazon Web Services and Microsoft, UK State franchise agencies, financial, insurance, consultancy and tech multinationals from the UK, the EU, the Middle East and Asia are partners with similar multinational corporations and state owned enterprises from Russia and China in the WEF's Centre for Cyber Security.

It is the Russian State franchise owned Sberbank subsidiary, Bi.Zone, who design the scenarios for the Cyber Polygon training exercises that these global *stakeholder* WEF partners engage in. They are working together, as one, to plan for the coming *cyber pandemic*.

In their report the CEIP stated:

"Malicious actors are taking advantage of this digital transformation and pose a growing threat to the global financial system.. Malign actors are

using cyber capabilities to steal from, disrupt, or otherwise threaten financial institutions, investors and the public. These actors include not only increasingly daring criminals, but also states and state-sponsored attackers.. It is not a question of if a major incident will happen, but when"

This is the *Hack Attack* scenario the Rockefeller Foundation modelled in 2010. Yet again they achieved that remarkable feat of predicting the global impact of a fiction. Being able to analyse trends and predict where real events may lead is one thing, but being able to predict fabricated events and the lies that will be told is something else.

In April 2020 the US Biden administration imposed sanctions on Russia for their alleged part in the <u>SolarWinds cyberattack</u> [34]. This was just a *Trusted News* cartel story we were fed to keep us playing the GPPP's game. The western GPPP State franchise aren't being threatened by the Russian or Chinese State franchises. They are *partners* and are working together to plan for the *cyber pandemic*.

This does not mean that there aren't tensions as they all vie for their place at the trough. However, the narratives we are given are designed to control our behaviour and do not reflect reality.

Sberbank subsidiary Bi.Zone are currently finalising their preparations for Cyber Polygon 2021. In the spiel for the event Klaus Schwab revealed another motive for the *pseudopandemic*. He wrote:

"Technology and cybersecurity are of crucial importance in this COVID era. One of the most striking and exciting transformations caused by the pandemic has been our transition to the digital everything."

Dmitry Samartsev [35], CEO of Bi.Zone, said:

"Cybercrime is now more than just the money stolen: human lives and the environment could potentially be at risk. The probability of a global cyber crisis is growing everyday."

The *pseudopandemic* moved us from the real world into an online virtual reality where every conversation can be recorded and monitored. It physically separated us, leaving us increasingly reliant upon the Internet. We are now being told that we can't rely on that either. Suddenly that too is susceptible to *invisible threats*. We must adopt the approved cyber behaviour to stay safe online and protect the Internet or our little virtual realm will be depied to us too.

The current global model of the financial and monetary system is spent and the GPPP must impose a new one to maintain their authoritarian control and seize the *global commons*. This transition will be at our expense and it is likely that people will resist. Consequently the UK State franchise has already proposed legislation that will end our ability to protest in the physical world.

The <u>Police</u>, <u>Crime & Sentencing Courts Bill</u> [36] intends to create legislation giving the authorities practically unlimited powers to restrict protest. Any protest which is *"disruptive"* including one that makes noise, can be shut down by the authorities. Any and all protests can be considered disruptive, that virtually defines them. The Bill introduces other restrictions and threatens up to a <u>10 year prison sentence</u> [37] for causing *"serious annoyance"* or *"serious inconvenience."*

If this becomes law the only way people will be able to speak out is by using the tightly monitored and controlled echo chamber of the Internet and social media. To further control this ability, the State franchise has proposed the <u>Online Safety Bill</u> [38] to "take down" anything which questions the single version of the truth.

The GPPP, and the *parasite class* that lead them, are preparing us for a global transformation of the international financial and monetary system (IMFS.) The IMFS is the source of their authority and, just like the *pseudopandemic*, it is built upon a deception. Nonetheless, its imminent failure compelled the *core conspirators* to launch the *pseudopandemic*.

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Chapter 25 - Money For Nothing

The core conspirators and their informed influencers possessed the means, opportunity and motive to commit the pseudopandemic fraud. Their control of a global system of compartmentalised authority and immense wealth gave them the means; their control of political, economic and public health policy, coupled with their dominance of the mainstream media enabled them to seize upon the COVID 19 opportunity. They were motivated by their desire to create a biosecurity based technocratic form of global governance. The purpose being to steal all of the Earth's resources, control global society through allocation of those resources and ultimately drive us to extinction, replacing us with a new humanoid species under their command.

Despite the evidence we have considered to this point, some may still struggle to accept that a tiny group of individuals could possibly possess sufficient resources to orchestrate a crime on the scale of the *pseudopandemic*. Yet if we understand how money is created, it not only becomes easy to see how so few can control so many, it becomes difficult to imagine how they could not.

Professor Carrol Quigley was a professor of History at Georgetown University in the US. Considered one of the most eminent political historians of the 20th Century he was also a consultant for the US Department of Defense, the United States Navy, the Smithsonian Institution and the House Select Committee on Astronautics and Space Exploration.

Quigley investigated and studied the Round Table movement which began with Cecil Rhodes and came to fruition under Lord Milner. He soon discovered that they were closely tied to international banking and finance and had been working behind the scenes throughout the early decades of the 20th Century to create what they referred to as the "the three power world." [1] This was planned to be a world dominated by three centres of authority. The British Commonwealth and the US (the Anglo American Establishment), a Europe dominated by Hitler's Germany and the Soviet Bloc.

In <u>Tragedy and Hope</u> [2] and the posthumous publication of the <u>Anglo American Establishment</u> [3], Quigley systematically catalogued the activities of this network. To say this was historical revisionism would be an understatement. It overturned our world view entirely. Everything that we thought we knew about our place in modern history was transformed by Quigley's research.

To this day it is not the history we are commonly taught but other notable historians and independent researchers, such as Anthony C. Sutton and G. Edward Griffin, have corroborated the evidence underpinning much of his work. Quigley described a single organisation who were committed to creating a system of one world governance under their control. The method they favoured was infiltration.

They or their representatives, both the *informed* and the *deceived*, took up key positions within the world's most powerful institutions and organisations. Most notably financial and political institutions, the intelligence agencies, global corporations, educational, scientific and medical institutions, workers unions, philanthropic foundations and the media.

Quigley outlined their objectives:

"The powers of financial capitalism had another far-reaching aim, nothing less than to create a world system of financial control in private hands able to dominate the political system of each country and the economy of the world as a whole. This system was to be controlled in a feudalistic fashion by the central banks of the world acting in concert, by secret agreements arrived at in frequent meetings and conferences. The apex of the systems was to be the Bank for International Settlements in Basel, Switzerland, a private bank owned and controlled by the world's central banks which were themselves private corporations. Each central bank...sought to dominate its government by its ability to control Treasury loans, to manipulate foreign exchanges, to influence the level of economic activity in the country, and to influence co-operative politicians by subsequent economic rewards in the business world."

This network has not remained static but has rather evolved. The British imperialists soon had to share their dominant position with the new money of the US industrial and other banking and corporate titans. Their various projects such as the League of Nations, the United Nations and the European Union [4] have each had their problems.

At the centre of this system of "rings within rings within rings" sits the parasite class and within them the core conspirators. By virtue of being the only people with the power to create money, they can dominate the global economy and thereby every institution they choose to infiltrate.

The *parasite class* are not "elite," they are neither wizards nor lizards. They are just people who possess a warped ideology, immense wealth and extreme authority. Mistakes and set backs happen and the *parasite class'* plans do not all run smoothly.

Through their policy think tanks, intergovernmental organisations such as the G7 and G20, their intergovernmental agencies like the WHO and the IPCC, and now with the increasing influence of corporate institutions like the WEF, immeasurably wealthy philanthropic foundations, like the BMGF, and NGO's like the WWF, the methods for wielding authoritarian power have adapted as they have centralised. This Global Public Private Partnership has matured into a global network of *stakeholder* partnerships.

The *parasite class* have the ability to create nearly all money from nothing. They can simply print or digitally assign it into existence. Only we have to work to obtain

it. They do not. The only limit on how much money they can create from nothing is the State franchise's (government's) and the public's willingness to borrow and any regulatory restrictions they wish to impose upon their money creation *stakeholder partners*. Money is debt and it is created through the *monetisation of debt*.

In 2014 The Bank of England (BoE) published Money Creation In The Modern Economy [5]. In it they stated that most money in the economy exists as bank deposits. They explained that the primary mechanism for creating these deposits are loans:

"Whenever a bank makes a loan, it simultaneously creates a matching deposit in the borrower's bank account, thereby creating new money. Rather than banks receiving deposits when households save and then lending them out, bank lending creates deposits."

To appreciate how this scam works consider the balance sheet of a commercial bank. It is made up of *assets* and *liabilities*. An *asset* is something in the bank's possession which has monetary value. Examples include cash, government bonds or loan agreements (contracts), and they sit on the left side of the balance sheet. On the right are the bank's liabilities. A *liability* is an obligation to pay an agreed sum (an IOU.)

If you borrow £1000 from a commercial bank it doesn't have that £1000 in its vault. Merely by tapping some numbers into a computer, the bank records the loan agreement you have with them as a £1000 asset and then *credits* a deposit of £1000 into your account. This deposit is the banks obligation to pay you the sum of £1000 and it records this as a *liability* on its balance sheet. Via the act of lending the banks has simultaneously created £1000 in assets and £1000 in liabilities.

No business on Earth, including multinational corporations, can function without credit unless the people who run it are wealthy enough to fund it. Therefore the ability to control credit is economic control and this translates directly to political control and thus policy and subsequent social control.

The interest repayable on credited loans is how commercial banks make a profit. The bank records the total amount repayable as an asset. If you agree to pay back the loan at 5% interest over one year the commercial bank's balance sheets would show an additional £50 asset. You then use the bank's liability (the credited deposit) in the real economy to buy goods and services up to a total value up to £1000.

The bank has created £1000 of money from nothing, purely by creating a deposit as a debt. This is called *broad money*. It is the money households and businesses hold as deposits in banks. In their article the BoE explained:

"Broad money is made up of bank deposits — which are essentially IOUs from commercial banks to households and companies — and currency — mostly IOUs from the central bank. Of the two types of broad money, bank

deposits make up the vast majority — 97% of the amount currently in circulation."

The BoE assert that 97% of all money in circulation is an IOU issued by a commercial bank and the other 3% is *cash*, which is an IOU issued by a central bank. Commercial banks buy cash at face value from central banks when they need it. They can only do this either through a central bank loan or by trading assets. There is also a cost of manufacturing (minting) cash (coins and notes) which the central bank passes on to the commercial bank. These charges and interest payments on cash are *called seigniorage* [6].

This means that all money in the productive economy (broad money), whether in the form of cash or a bank deposit, is a debt repayable to the controllers of the commercial and central banks. In theory, when you repay the loan you reduce the banks assets and liabilities in equal measure. Therefore, paying a debt removes *broad money* from the economy.

Commercial banks do not use *broad money* themselves. Every bank, building society and financial institute that can create credit (money) has an account with a <u>central bank</u> [7]. Their central bank balance sheet determines the commercial bank's *reserves*. Banks use these reserves to settle debts with each other in a process called *interbank settlement*. These reserves are accounted for using a different form of reserve money called "base money." This is entirely separate from the *broad money* used by the rest of us.

Using our example, the commercial bank's £50 profit, made from the deposit, is not broad money. The commercial bank's £50 profit is a base money asset.

Banks can also use central bank base money to lend to each other. The is called *interbank lending* and the profit made by the lending bank is determined by the *interbank rate*.

When this is done internationally the currency exchange rate also has an impact. Exchange rates fluctuate and are set when the rate *matures* (after two days trading). An average interest rate, based upon selected currency *maturities* and values, called the <u>London Interbank Offered Rate</u> [8] (LIBOR) is calculated daily. This sets the fluctuating international interbank rate when banks extend short term loans to each other.

This has an impact on credit finance the world over. The payments on credit cards, car loans, adjustable-rate mortgages and other *debt monetisation* products we commonly use, fluctuate in keeping with the interbank rate.

Economists are taught that banks operate a model called *fractional reserve banking*. The BoE's own post graduate <u>financial regulation qualification course</u> [9] educates future economists and financial regulators to believe in fractional reserve banking. The course introduction states:

"You'll learn about the theory and practice of traditional areas of monetary policy and financial regulation.. You will study the fragilities in fractional reserve banking."

The "theory" suggests that a commercial bank's ability to create money is restricted by their regulated base money reserve requirement. Economists are initially taught that the fractional reserve requirements, combined with set percentage lending increase over and above reserves, called the money multiplier, inhibit lending.

The banks can supposedly only lend (create money) in proportion to their reserves. By adjusting the ratio (*reserve requirement*) between broad and base money, the Central Bank is supposedly able to effectively regulate the amount of money commercial banks can create.

The BoE largely dispelled the money multiplier myth in their 2014 article:

"Another common misconception is that the central bank determines the quantity of loans and deposits in the economy by controlling the quantity of central bank money — the so-called 'money multiplier' approach...

There is assumed to be a constant ratio of broad money to base money. While the money multiplier theory can be a useful way of introducing money and banking in economic textbooks, it is not an accurate description of how money is created in reality. Rather than controlling the quantity of reserves, central banks today typically implement monetary policy by setting the price of reserves — that is, interest rates."

The BoE claim that a commercial bank's loan agreement with you will be registered as a £1000 asset and the corresponding deposit as their liability on their central bank balance sheet. In this way creating a £1000 of *broad money* simultaneously creates a £1000 of *base money*. In practice, commercial banks can also register other assets, such as bonds, with the central bank, so it isn't quite that simple but the theory is as alluded to by the BoE.

The commercial bank's £1000 liability to the central bank must be repaid with interest determined by the *base rate*. In our example, if the *base rate* is 1% the commercial bank must repay £1010 of base money to the central bank. Consequently, once you repay the broad money loan, the commercial bank has made a profit of £40 in *base money* and the central bank a profit of £10.

Again it isn't that simple as commercial banks also pay interest to savers, bond coupons, seigniorage etc. But the principle suggested by the BoE, accepted by economists the world over, is that the base rate (interest rates) somehow limits the profit viability of creating money for the commercial banks. This is how central banks claim they manage "monetary policy." This isn't entirely true either. Their control is negligible.

In an important peer reviewed paper, that few will acknowledge, economics professor Richard A. Werner [10] empirically proved that commercial banks create

money from absolutely nothing. In his paper <u>Can Banks Individually Create Money</u> <u>Out Of Nothing</u> [11] He gained direct access to a commercial bank's balance sheet and then took out a €200,000 loan to monitor the effects on the bank's assets and liabilities.

Prof. Werner observed:

"The bank did not transfer the money away from other internal or external accounts, resulting in a rejection of.. the fractional reserve theory."

He showed that a deposit, brought into existence by a loan credit agreement (the creation of broad money), was treated by commercial banks as "a loan to the bank." The deposit did not belong to the borrower, it belonged to the bank. It was a contracted credit agreement between the borrower and the bank for which the bank expected repayment plus interest.

The bank had no need to reference either its capital or its central bank base reserve balance. This ability to create money from nothing effectively meant that the commercial creation of broad money simultaneously created base money reserves for commercial banks. The commercial bank created the broad money (as *credit*) entirely independently. Professor Werner explained what this meant:

"Thus it can now be said with confidence for the first time – possibly in the 5000 years' history of banking - that it has been empirically demonstrated that each individual bank creates credit and money out of nothing, when it extends what is called a 'bank loan'. The bank does not loan any existing money, but instead creates new money. The money supply is created as 'fairy dust' produced by the banks out of thin air."

Yet this is the money we use to buy everything. It is the money we go to work to earn. When our salaries are paid into the commercial bank these become deposits and, as such, are *their* liabilities. It is money they claim as their own and they expect repayment for loaning it onto existence, having created all of it as credit from nothing at all.

Imagine the power you would soon gain if you could create money from nothing. The *parasite class* have had this power for centuries.

Fractional reserve banking tied the amount that could be created to reserve levels and paying the bearer of a bank note the redeemable value in gold or silver also limited the percentage increase in *new money*. But the principle was the same. Bankers create money from nothing.

This gives the banking industry, especially the controllers of central banks, command over practically everything. This authoritarian system certainly isn't new. Speaking in 1925 then Chairman of the Midlands Bank Reginald McKenna, the former First Lord of the Admiralty, Home Secretary and UK Chancellor of the Exchequer, said:

"I am afraid the ordinary citizen will not like to be told that banks can and do create money."

We pay tax using the *broad money* banks create out of thin air. It pays for hospitals, roads, wars and the *pseudopandemic*. The only other way the GPPP State franchise can raise money is through borrowing. This too is paid in *fairy dust* and is a debt the taxpayer must go to work to repay.

As long as we allow such a monetary system to exist we will remain <u>debt slaves</u> [12]. There is a reason the word mortgage derives from the french "mort," meaning death, and the old English word "gage," meaning pledge. "Mortgage" means <u>death pledge</u> [13].

Central bank's supposedly have three ways to <u>control monetary policy</u> [14]. They can increase or decrease the money supply by adjusting short term interest rates. Higher rates will allegedly dissuade commercial banks from creating money and lower rates will encourage them. Changing the reserve requirements, with higher requirements theoretically reducing the *monetisation of debt*, is another claimed control mechanism.

Prof. Werner demonstrated that the impact of these two monetary policy levers is minimal and close to non existent. Commercial banks *monetisation of debt* creates base money reserves and they have little need to borrow when they create money. Setting a minimum reserve requirement barely restrains them at all because they create their own reserves from nothing.

The Bank of International Settlements (BIS), more on them shortly, created three consecutive sets of banking guidelines call the <u>Basel Accords</u> [15] established in 1988, 2004 and 2010. The Accords were intended to act sequentially, gradually reducing the risk exposure of banks, particularly in a possible *financial crisis*.

They weren't mandatory and were not implemented immediately, but many financial regulators eventually adopted them in some form or another. The general idea was to strengthen capital requirements (the capital adequacy rule) by compelling banks to rate the risk of their assets with central banks. For example a commercial loan agreement with a small business might be considered a high risk asset while cash would be low risk. The higher the risk the more *equity* the bank was required to retain.

In broad terms *equity* is the value of a business. It is the amount a business would be worth if it sold all of its assets and paid all liabilities. In practice the only time a business would ever do this is if it went into *liquidation*. Calculating equity is crucial in mergers and acquisitions.

The Basel accords solely considered the calculated relative risk of assets, based upon their ability to be traded in the markets. This is the *liquidity risk* of an asset. The capital adequacy of a commercial bank is often referred to as its *liquidity*. However, commercial banks create capital (equity) when they *monetise debt* by

creating deposits. The Basel Accords took no account of money (capital) created as deposits. They had little effect upon the money creation melee. All they could do was slightly reduce the pace of money creation. They had no impact on its scale.

The only remaining and only marginally effective monetary policy lever is the trading of securities. State franchises borrow by selling government bonds. In the UK the primary dealers (GEMM's) are the investment banks who bid for the bonds in the primary market, thus theoretically maximising the bond price for the tax payer.

The GEMM's can then trade the bonds (securities) in the *secondary market*. Other investors such as banks, pension funds, hedge funds and other private investors are able to purchase government bonds. This money can then be used by State franchises to fund services, invest in infrastructure, wars and *pseudopandemic* propaganda campaigns. In return the private investors receive a yield.

When the bond matures the State franchise (the tax payer) has to repay the loan in full. This element of the parasite class's monetary system ensures future generations are also condemned to debt slavery.

You may have spotted the problem with this idea of UK government (State franchise) borrowing. The <u>primary dealers</u> [16], and subsequent investors in the secondary market, are *monetising debt* by making loans and storing assets, in the form of gilts (bonds).

Just as commercial banks create money from nothing when they loan money to a private individuals or businesses, the process is identical when they "purchase" gilts and lend money to the State franchise. It is the same creation of *fairy dust*.

The BoE claim [17]:

"Monetary policy affects how much prices are rising – called the rate of inflation. We set monetary policy.. Low and stable inflation is good for the UK's economy and it is our main monetary policy aim."

The BoE suggest that inflation is *good* and that inflation is the primary objective of its monetary policy. However they are somewhat disingenuous when they define inflation as "a measure of how much the prices of goods and services have gone up over time."

It is true that a basic tenet of free market economics is that prices are set by supply and demand. This also holds true for stocks and assets. Where demand outstrips supply prices will rise and when supply exceeds demand prices will fall. According to the BoE (and all other central banks) it is rising prices alone that define inflation. However, they also claim that they can control inflation via *monetary policy*. How can this be the case?

The BoE are telling us that inflation is not independent of *money creation* which is the *monetisation of debt*. They are also declaring that we do not live, and never have, in a free market economy. This is self evident from market regulation but also

from the fact that the central banks control monetary policy which, in turn, affects prices (inflation) through a mechanism entirely alien to free markets.

As noted by the <u>central bank of Sri Lanka</u> [18] "there is a general agreement among economists in relation to the long run relationship between money, output and inflation." Inflation occurs due to both monetary inflation and price inflation, the two are interdependent. History proves that an expansion of the money supply frequently produces inflation [19]. This is because an increase in the money supply decreases its unit value. Consequently, a better way to think of inflation is a reduction in the purchasing power of money.

The BoE offers a tool to see how the value of <u>money has declined</u> [20]. In 1970 £10 would have purchased goods or services which in 2020 would be valued at £158.19. Another way of saying this is that the Pound has devalued by more than 93% in 50 years.

The BoE claim: "Our mission is to maintain monetary and financial stability for the good of the people of the United Kingdom." It is difficult to see how almost completely destroying the national currency achieves that aim. All it accomplishes is the transfer of wealth from the people to the hoarders of capital.

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Chapter 26 - Private Wealth Transfer

While incomes appear to broadly keep pace with inflation we generally don't notice how it gradually drains our wealth. Inflation bleeds wealth from us into the financial system which profits those who *monetise debt*, enabling them to hoard capital. We feel it more acutely when wage increases fall short of the base rate.

For example, the heroes and heroines of the UK *pseudopandemic*, the nurses who were on the *front line*, received a derisory 1% pay rise. The base rate at the time was 1.5% and unsurprisingly this corresponded to an underlying 1.5% rate rise in the <u>consumer prices index</u> [1]. This means the nurse's ability to purchase goods in the real economy was reduced. The nurse's *"pay rise"* was actually a pay cut of 0.5%.

For most of us, incomes consistently lag behind the rise in prices caused by inflation. Economists use the term "nominal wage" to mean the amount of currency we earn and "real wage" to indicate what goods and services our nominal wage will afford us. Our real wage is a more accurate reflection of what our income is worth.

Between 2004 and 2018 statistics from the Office of National Statistics (ONS) show that while the UK *nominal wage* continued to increase, the *real wage* trend <u>showed a decline</u> [2]. This was particularly marked after the 2008 financial crash and the impact was more severe for workers reliant upon salaries.

The 18th Century economist Richard Cantillion identified what is now called the <u>Cantillion Effect</u> [3]. He recognised that money creation and inflation benefits those who access money first. When the GPPP's favoured *partners* use new money, the inflation it will cause hasn't begun. A \$1000 loan for them buys, typically, \$1000 of long-term investments.

As the money supply expands, inflation kicks in, asset and commodity prices start to rise. The next group who access \$1000 of the new money may only be able to buy the equivalent of \$900 worth of assets. By the time working people get the *new money* in their wage packets a \$1000 may only buy \$750 worth of goods and services. Meanwhile, the first recipients have seen the value of their original asset increase to \$1250 as a result of inflation.

In reality the relative gains and losses are measured in fractions of percentage points not hundreds of dollars. However, due to the scale of the global economy, this facilitates a Cantillion Effect measured in billions. The early recipients of new money are relatively few and trade in hundreds of millions and often billions of new dollars. By the time this new money *trickles down* to us, we number in the billions and are buying goods and services typically valued in tens of dollars.

To illustrate this point, as the *pseudopandemic* progressed the US Federal Reserve Bank stepped up *debt monetisation* by buying a type of security called <u>exchange traded funds</u> [4] (ETFs). Almost half of these ETFs were in the investment portfolio <u>of BlackRock</u> [5]. This isn't surprising given that the Fed outsourced its debt buying

programs to BlackRock. BlackRock received a cash injection from the tax payer with which to buy long term investments at current prices.

The market distortion caused by *debt monetisation* and an expanding monetary supply enables the *parasite class* to select who wins and who loses from their monetary system. In this way they maintain their authority as the chosen GPPP *stakeholders* stay loyal. BlackRock will profit from inflation and we will lose. In effect we are paying for BlackRock's profits. The is the most consistent wealth transfer mechanism operated by the GPPP.

New money is not distributed evenly. Those who are able to access it first have an advantage over those who have to wait for it to *trickle down* through the economy. With each *investor* taking a profitable cut along the way, by the time it has "*trickled down*" to the lower paid there isn't much left.

This is done at scale when the State franchise sells bonds to investors. The bond holders (the owners of the debt) have a practically guaranteed above inflation income stream from those bonds until they mature, at which point their original investment will be returned in full. When banks, including central banks, buy these assets they do so with money created from nothing. The holders of capital can simply generate more capital, virtually at their whim. This is a debt the rest of us must pay.

In 1912 Italian statistician Corrado Gini developed the *Gini Index* (or Gini coefficient) to illustrate societal wealth distribution by measuring disposable income. ONS statistics show that from the 1970's to 2010 income inequality <u>rose</u> <u>consistently</u> [6]. Following it's 2010 peak it has barely improved.

The effect of monetary expansion is inflation and ever rising income inequality. The rich always get richer and the <u>poor get poorer</u> [7].

In 1919 the economist <u>John Maynard Keynes</u> [8], in his strong criticism of the <u>Treaty of Versailles</u> [9] wrote his agreement with Lenin's observations on inflation. He said:

"By a continuing process of inflation, Governments can confiscate, secretly and unobserved, an important part of the wealth of their citizens. By this method they not only confiscate, but they confiscate arbitrarily; and, while the process impoverishes many, it actually enriches some . . . There is no subtler, no surer means of overturning the existing basis of society than to debauch the currency. The process engages all the hidden forces of economic law on the side of destruction, and does it in a manner which not one man in a million is able to diagnose."

Inflation is a stealth tax. Monetary inflation *enriches* those to whom the debt is owed and benefits those who first access credit. It isn't State franchises (governments - tax payers) who receive the benefit of debt monetisation but rather the banks,

especially the central banks, investment banks, private financiers and other early investors.

Within the GPPP, State franchises are stakeholder partners of the banks but it is the banks who control the credit of the nation and they determine the policy trajectory. Without their fairy dust the magic of the mythical democratic state cannot function.

Throughout the 20th and 21st centuries there have been recessions and depressions which have punctuated a general trend of economic growth. A recession is when gross domestic product contracts for at least two quarters, a depression lasts for years. This cyclical pattern is often referred to as the *boom and bust cycle*.

This is an inevitable consequence of creating money from nothing. When banks *monetise debt* they cause monetary inflation and subsequent price inflation, when debt is repaid it causes monetary contraction and deflation, which is a decline in the *debt monetisation* and the price of goods and services. This is the economic *growth* and respective *slow downs* that *leading economists* (experts) explain with evermore convoluted and complex narratives.

Contrary to what they would have you believe it is not difficult to understand. It is the consequence of *debt monetisation*.

It is important to note that banks, including central banks, are private businesses controlled by individuals. These individuals hold in the hollow of their hand the destiny of the people.

You do not elect them and they run their business to make a profit for themselves and their shareholders. Speaking in 2010, Alexander Dielius, then CEO of Goldman Sachs in Germany, who are among the UK's GEMM's, <u>said</u> [10]:

"Banks do not have an obligation to promote the public good."

It is an irony that influential GPPP representatives have openly stated that they have no interests in the public good. Yet the *pseudopandemic* itself was predicated upon the idea that we must all change our behaviour for the *public good*. It is obvious who the *pseudopandemic* served.

The BoE is run as a corporation. In the 2019 $\underline{\text{Governance of the Bank}}$ [11] report they stated:

"The Court of Directors manages the affairs of the Bank as a corporation, while specific policy responsibilities are reserved to the policy committees."

The Court of Directors has GPPP ties to Goldman Sachs, Grovepoint Capital LLP, Investec Bank plc, McKinsey, Amadeus Capital, TalkTalk Telecom Group plc, Permira, Reed Elsevier, The Clinton Foundation, The Trade Union's Congress

(TUC), Tullow Oil plc, Intergen, Powergen, Merrill Lynch, Citibank, CitiGroup and Starling Bank among others.

Around the world central banks have various management models. The BoE is supposedly publicly owned, the US Federal Reserve is an *independent entity,* the Bank of Japan is meant to be part publicly and part privately *owned*.

The question of ownership is a moot point. Often we imagine that the shareholders (those who hold company stock) own the company. This <u>is not true</u> [12].

The 1948 UK law lords ruling in the case of <u>Short v Treasury Commissioners</u> [13] clarified the situation. This was reaffirmed in the 2003 ruling in the case of the Inland Revenue v Laird Group plc. The *Short* ruling stated:

"Shareholders are not, in the eye of the law, part owners of the undertaking (company)"

The BoE is an incorporated entity registered in the UK as <u>company number RC000042</u> [14]. Legally it is defined <u>as a person</u> [15], with all the legal rights and responsibilities of any other *person* in society. The primary duty of the directors is first and foremost to maximise the profits of the company. Shareholder profits should follow, but the directors decide how much profit the BoE needs to retain and they control the corporation. The *Court of Directors* control the BoE and its policies.

Nearly every person in the UK believes that the BoE is *owned* by the government (State franchise). This is understandable because the BoE themselves state *"we are wholly-owned by the UK government."* This statement is meaningless and we only need look at the BoE's own <u>reported history</u> [16] to understand why.

Firstly, they record:

"The Bank of England, was established by Royal Charter in 1694, to raise money to fund a war with France. Over 1,200 people purchased shares (known at the time as 'Bank stock') totalling £1.2 million, which was the value of the government loan."

In 1694 1,200 people came together and credited £1.2 million (an astronomical sum in the 17th century) to the British government. In doing so the government debt they created was money owed to them personally, plus interest.

The money was credited to the government to fight the *Nine Year War* with the French. Clearly the BoE lenders had a vested interest in the outcome of the war. Whenever a State franchise borrows from a Central Bank to finance any policy, no matter what it concerns, the Central Bank is always interested in the outcome. As they control State franchise policy it is easy to see how they manipulate events and to understand why.

The BoE add:

"Over the years.. the number of shareholders grew. Some.. stock was held by institutions and firms, such as other banks, but the majority of shareholders continued to be private individuals. In many ways, we functioned like other private companies. Profits were used to pay annual dividends.. to our shareholders. Those with more than £500 of Bank of England stock were entitled to vote at annual meetings."

Government borrowing, the business of the BoE, increased. Otherwise there would have been no *additional shares* to purchase. It wasn't run as a private business *"in many ways,"* it was absolutely run as a private business. There was nothing *"public"* about the BoE.

Private companies, such as other private banks, increased their "shares" in the BoE. The wealthiest shareholders influenced BoE policy decided by the Directors. Which meant they influenced monetary policy and consequently government policy.

The BoE continue:

"Although we were still privately owned, from the mid-19th century onward we started to behave less like other private banks and more like a central bank."

This is the use of a form of propaganda called a "thought-terminating cliché." By saying they began acting "more like a central bank" the truism you are invited to accept is that central banks are not private businesses. It asserts that you should never question the corporate control of a central bank because we all know that "central bank" means the government's bank.

If we don't fall for this trick and take the BoE's words literally, they are telling us that they were a private corporation. They describe some of the things this corporation had the power to do:

"We had a control of issuing banknotes in England and Wales - and taking responsibility for protecting the financial system."

The individuals controlling the BoE corporation had the power to create money and controlled the British financial system. At the time, this meant they controlled the world's financial system.

Next, the BoE claim:

"We were nationalised by the government in 1946 due to our importance to the economy. Other central banks across Europe passed from private to public ownership around this time too."

There we have it then. The BoE is owned by the government after all, along with most other European central banks. The definition of <u>nationalisation is</u> [17]:

"The transfer of a major branch of industry or commerce from private to state ownership or control."

This is what every mainstream *influential* economist claims to be true. We are supposed to believe that the people who had the power to create all money and to control the financial system, who owned all government debt, simply gave this power away in 1946 because they realised how important their corporate business was for the *public good*.

Nationalisation occurred via the 1946 <u>Bank of England Act</u> [18]. The Act supposedly converted all "bank stock" into "government stock." The BoE shareholders who held bank stock would be reimbursed fully and paid a dividend of 12% per annum, which progressively reduced to 3%. In 2014 then Chancellor of the Exchequer <u>George Osborn said</u> [19]:

"The government can announce it will repay in full the debt incurred to finance the 1946 nationalisation of the Bank of England."

The State franchise *borrowed* the money, initially at 12% interest, to nationalise the BoE in 1946. How did they borrow this money and from whom?

As previously discussed, UK government bonds are liabilities issued as "gilt-edged securities," commonly called gilts. Until 1946 the most common form of gilt was the "undated gilt." So called because they had no fixed maturity date [20].

In 1946 then Chancellor Hugh Dalton issued *undated gilts* to the investors holding BoE stock to finance its purchase. In effect the BoE investors (stock holders) *monetised the debt* that the State franchise then used to *purchase* BoE stock. This *deposit*, in the UK Treasuries account, therefore became the BoE's liability shifting it off the balance sheets of the shareholders and on to the balance sheet of the tax payer. In exchange for this the UK tax payer became the sole shareholder of the BoE.

Shareholders do not own corporations. The Court of Directors manages the affairs of the Bank.

By their own statement we know that prior to its *nationalisation* the major shareholders were able to influence BoE policy. This has never been the case since the tax payers became the shareholders. The <u>BoE state</u> [21]:

"When the Bank was nationalised in 1946, it meant that it was now owned by the Government rather than by private stockholders. This gave the Government the power to appoint the Bank's governors and directors, and to issue directions to the Bank. To date, the Government's power to issue directions has not been used."

The BoE corporation gave none of its power away in 1946 and the State franchise has not had any influence over it since. Its original shareholders made a tidy tax payer funded profit from the stock sale but, via their GPPP stakeholder *partnerships*, embodied by the Court of Directors, relinquished none of their *authority*.

Following the 2008 financial crash the UK State Franchise passed the Financial Services Act 2012. This created the BoE's *independent* Financial Policy Committee (FPC) giving it more control over financial markets and regulatory authority over the financial services industry.

Short of relocating the BoE to an offshore tax haven it is difficult to imagine how the BoE could possibly be more *independent*. What they did was centralise and extend their already *independent* authority. Today the BoE declare:

"We're free from day-to-day political influence."

If someone studies economics at a GPPP funded university they will almost certainly be required to study '*Economics*,' edited in 2009, by <u>Krugman and Wells</u> [22] (K&W). Along with claims made in other key texts, they will *learn* that central banks are somehow institutions of government.

In reference to the US Federal Reserve bank (the Fed) K&W state:

"...the legal status of the Fed is unusual: It is not exactly part of the U.S. government, but it is not really a private institution either."

This is certainly *unusual*. Terms like "not exactly" and "not really" seem incongruous in a supposedly definitive text book. K&W clarify that the Fed's board of directors are, "from the local banking and business community." They later qualify this statement by saying:

"...the effect of this complex structure is to create an institution that is ultimately accountable to the voting public, because the Board of Governors is chosen by the president and confirmed by the Senate."

This is highly misleading and it is not a complex situation. Two thirds of the Fed's board of directors are selected by privately owned commercial banks and the other third, represented by the Board of Governors, are *chosen* by the Senate. Among the six governors, three are former investment bankers, one a former commercial banker, one a global financial asset management consultant and another a serving member of the Council on Foreign Relations.

The truth is the Fed, like the BoE and nearly all other central banks, is run as a <u>private corporation</u> [23]. It is not *ultimately accountable to the voting public*, as suggested by K&W.

The Fed explain this as follows [24]:

"The Federal Reserve System is not 'owned' by anyone.. though the Congress sets the goals for monetary policy, decisions of the Board.. do not require approval by the President or anyone else in the executive or legislative branches of government.. the Reserve Banks are organized similarly to private corporations.. Each of the 12 Reserve Banks.. is separately incorporated and has its own board of directors."

The Fed takes orders from no one and it controls monetary policy. Alan Greenspan, former Chair of the Fed, said:

"The Federal Reserve is an independent agency, and that means, basically, that there is no other agency of government which can overrule actions that we take. So long as that is in place.. then what the relationships are don't, frankly, matter."

The <u>1945 Bretton Woods Agreement</u> [25] reaffirmed the US dollar as the global reserve (base money) currency. During WWII the combatants borrowed heavily from the US State franchise who supplied most of the finance, munitions and other goods. Due to the wartime instability of foreign currencies, the US took gold as payment. This left the US controlling the vast bulk of the world's gold reserves.

Many countries consequently had low gold reserves and could no longer link their currency to the price of gold. The Gold standard effectively ended and the dollar was firmly established as the global reserve currency as it was *pegged* to the price of gold. Other nations were forced to fix their currency exchange rates to the dollar as if it were gold. The US emerged from WWII as the dominant global economic power.

Other nations saw US Treasuries as stable investments and bought more dollars. However the monetary polices of the Fed and the relative value of the dollar had implications for all other central and commercial banks. Despite being supposedly pegged to gold, the dollar was created by *debt monetisation* like any other modern currency.

During the 1950's and 1960's continued spending on wars in Korea and then Vietnam contributed towards a growing US deficit. In response the Fed increased *debt monetisation*, expanding the money supply and flooding the global market with dollars. Rather than take on US Treasuries, other nations started buying gold with their dollars through the *gold window*.

Fearing rapidly dwindling US gold reserves the value of the dollar was instead fixed to oil prices creating the *petrodollar* in 1971. Oil producing nations agreed to sell oil in dollars. This ensured that oil purchasing nations still needed dollar reserves.

Bretton Woods also created two other key GPPP *partners*: the International Monetary Fund (IMF) and the World Bank.

The IMF oversees currency exchange rates and influences fiscal policy, offering loans to nation states, in return for interest repayments and policy commitments. The World Bank controls economic development, filtering investment, through purchasing bonds from developing nations.

Wold Bank investment comes with strings attached. The capital raised by the developing nation must be spent on economic and infrastructure development projects stipulated by the World Bank. Thus ensuring the dominant economies continue to control developing nations through *debt monetisation*. As we move

towards a global net zero carbon economy, based upon carbon trading, that control will be maintained regardless of the future monetary system.

In 1930 the <u>Bank for International Settlements</u> [26] (BIS) was created to administer reparation payments following WWI. At Bretton Woods a resolution calling for the abolition of the BIS was passed. They were widely suspected and later found guilty of laundering Nazi gold and other stolen assets, but by 1948 this resolution had been forgotten.

Just as commercial banks use central banks reserves for interbank settlement and lending, so nearly all central banks use the BIS. They explain their role and who they <u>are "owned" by</u> [27]:

"Our mission is to support central banks' pursuit of monetary and financial stability through international cooperation, and to act as a bank for central banks.. the BIS is owned by 63 central banks, representing countries from around the world that together account for about 95% of world GDP."

Private commercial banks, wealthy investors and other financial *stakeholders* within the GPPP run the central banks as private corporations. In turn the private central banks, like the BoE and the Fed, are effectively managed by the BIS, which is also a private corporation. The Board of Directors of the BIS is formed by the Board Chair men and women of the Central banks [28].

This is precisely the system described by Prof. Carrol Quigley in the 1960's:

"A world system of financial control in private hands able to dominate the political system of each country and the economy.. controlled in a feudalistic fashion by the central banks.. acting in concert.. The apex of the system.. the Bank for International Settlements.. A private bank owned and controlled by the world's central bank."

The entire global monetary system is based upon debt monetisation and the creation of money from nothing. As all money is debt the debt can never be repaid using money. Debt will always be greater than the money supply. In this monetary system if all debt were ever repaid there would be no money.

This is not a sustainable model. It is destructive and ultimately only serves those who *monetise debt*. Some suggest that a return to the Gold Standard would stop the money supply problem. Yet the Gold Standard, fractional reserve banking and the money multiplier, all in operation prior to WWII, only slowed the process. A return to the Gold Standard would do little to address the fundamental problem.

In any event, it seems it is too late for that now. Debt monetisation during the *pseudopandemic* has been on a scale unlike anything we have ever seen. The money supply has expanded far beyond the ability of the global economy to ever recover. The *debt monetisers* have used Quantitative Easing to such a vast extent that it is obvious they have no expectation of maintaining the global monetary system in its current form.

Hyperinflation (rampant inflation) seems the best we can hope for. Stagflation (inflation plus high unemployment) appears likely and these alone would appear to be planned as sufficient justifications for a *Great Reset*. With the additional impending public health threat of cyberattack ready to *take down* the financial system, we are set for a very big transition indeed.

Currently (June 2021) the Fed is continuing to monetise debt through purchasing assets creating more new money, primarily for the benefit of global investment firms like BlackRock and Vanguard. The Central Bankers claim the current high rate of consumer price inflation is "transitory" and nothing to worry about [29]. They also claim that the reason they are doing this is to meet their inclusivity and new global green economy targets. Until they do, they intend to keep interest rates low.

Not everyone is so convinced that loading the financial markets with junk asset fuelled fairy dust is such a brilliant idea. Especially as global supply chains are under unprecedented pressure and prices are rising in the high street. Analysts like the chief economist at Deutsche Bank, David Folkerts-Landau, have called the impending hyperinflation a "time bomb." [30]:

"It may take a year longer until 2023 but inflation will re-emerge.. While it is admirable that.. the Fed's priorities are shifting towards social goals, neglecting inflation leaves global economies sitting on a time bomb.. The effects could be devastating, particularly for the most vulnerable in society."

Perhaps again we see the difference between the *informed* and the *deceived influencer*. Landau probably believes the *scientific consensus* on climate change, promoted by the likes of Peter Hotez and others. Yet he recognises that, in saving the planet, the people appear to be expendable. Presumably he made his warning because he thinks this matters. It seems he may be unaware that the people running the system he supports consider the *"imbecilic poor"* to be *"human weeds."*

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Chapter 27 - Pseudopandemic Trigger Event

It seems the majority have been convinced by the *pseudopandemic*. They believe that a low mortality respiratory virus presents a threat on such a scale that they are willing to allow their respective GPPP State franchises unprecedented control of their lives. They are prepared to abandon all the freedoms they imagined their democratic societies were based upon in exchange for *safety*.

Yet, for a large minority, the *pseudopandemic* was an obvious scam. Those who listened to scientific and medical opinions, both for and against the official narrative, who considered the published statistical data, who observed the conduct of the *Trusted News* cartel and experienced the impact of hybrid warfare, easily saw through the *pseudopandemic* deception.

The *pseudopandemic* was a global crime of such scope and ambition that the *core conspirators* and their *informed influencers* must have known they could not control every aspect of it. They appeared to anticipate the dissent which emerged among those who noticed the lack of evidence for their claims. As they progressed in *solidarity*, while rejecting *stigma*, the war against the *infodemic* was their primary concern. As long as most people felt compelled to obey those who didn't could be marginalised and blamed.

For those who did not believe the *pseudopandemic* story an obvious question stood out: Why now?

In many respects it seemed ill conceived. The scientific and medical evidence was extremely weak, the use of the non-diagnostic test as a claimed basis for case numbers was an obvious ruse, the hospital and mortality data was clearly manipulated and the policies designed to maximise risk for the most vulnerable were transparent. Surely better planning could have delivered a more convincing pseudopandemic?

Only a thorough independent investigation will reveal the answers, but we can speculate. Perhaps SARS-CoV-2 was too good an opportunity to miss, maybe the *core conspirators* were sufficiently confident in their hybrid warfare capability to be unconcerned about the lack of evidence. However, at this stage, it seems the most likely explanation is that they had no choice.

Exploiting *debt monetisation* as the source of authority could only last for so long. Inevitably the monetary system the *parasite class* used to enrich themselves and their favoured GPPP stakeholder partners would cause the collapse of the international monetary and financial system (IMFS). With its demise, the source of their authority would be lost. A *Great Reset* would be required to transition the global population into a new IMFS designed to maintain it.

In 2018 the Institute for Fiscal Studies (IFS) evaluated a number of economic recoveries that followed historical recessions and depressions [1]. They noted that

the recovery following the 2008 banking system collapse was the weakest in modern economic history.

In contrast to eastern economies, in particular China and notably <u>excluding Japan</u> [2], western aligned, democratic economies had stagnated since 2008. Prior to the financial crisis, historical productivity growth in the UK had been 2%, in the ten years that followed it was 0.3%. In 2018 *real incomes* were 3% lower than they were ten years earlier.

The bank *bail outs* cost the people dearly. While they faced a decade of austerity and lost services, the GPPP accelerated debt monetisation. In terms of GDP the UK State franchise borrowed 50% more than it had ever done before, adding £1 trillion to the national debt by 2018.

The UK's sick economy wasn't unique. The same disastrous economic performance was affecting all western aligned democracies. The IFS summed up what they called an astonishing decade:

"The UK economy has broken record after record, and not generally in a good way: record low earnings growth, record low interest rates, record low productivity growth, record public borrowing followed by record cuts in public spending."

However the IFS also noted that the bottom and middle percentiles had seen incomes rise while the top percentile had seen a decline:

"On the upside employment levels are remarkably high and, in spite of how it may feel, the gap between rich and poor has actually narrowed somewhat"

Given how much the money supply had expanded during that decade, the IFS findings didn't seem to evidence the expected growth in inequality. However the IFS reported that the income of the top 20% had reduced by 2% overall. They didn't report that the income of the top 1%, only dipped temporarily.

By 2017 they had returned to holding 8.5% of the nation's wealth, just as they had on the <u>eve of the financial crisis</u> [3]. Relative inequality reduced among the 99% because the financial crash affected the middle class. The gap between the 99% and the 1% increased.

The 2008 financial crisis was a <u>banking crisis</u> [4] caused by *debt monetisation*. US commercial banks were creating deposits, in the form of mortgages and unsecured loans, without making any genuine attempt to assess the risk.

These *sub-prime mortgages* were attractive to the banks and mortgage lenders because it enabled them to charge more interest to people with poor credit ratings. They subsequently extended far more credit than borrowers could ever repay.

The banks were gambling on long term, exceptionally low interest rates. They offered sub-prime borrowers short term mortgage deals betting that continued low interest rates would enable them to re-mortgage, a few years later, at a better rate. While the interest rate stayed low, suppressed by the Fed, the mortgage holders could just about cover the repayments. If they increased millions would be at risk of default.

Between 2000 to 2006 the *debt monetisation* feeding frenzy was out of control and lenders were fuelling an enormous credit and housing bubble secured against very high risk assets. Many of the mortgages were packaged together as financial assets called a Mortgage Backed Security (MBS). These *securities* were worth the cumulative value of the mortgage agreements contained within them. They were then traded on the financial markets with global investors eager to monetise more debt.

The money go round started spinning faster. As foreign investors grabbed the MBS they fuelled further speculation in the US housing market, artificially inflating house prices and encouraging more profligate lending. They also saw an opportunity to monetise more debt by using the MBS as assets underpinning financial derivatives.

As previously discussed, the derivatives market enables *debt monetisation* that far exceeds the financial capacity of the global productive economy. This can only happen because the money used is *fairy dust*. This is not money the planet could ever *earn*. It is extreme *debt monetisation*.

The MBS were parcelled in with other *securities* to form derivatives like <u>Collateralised Debt Obligations</u> [5] (CDO's). Investors, particularly the investment banks, hedge funds and pension funds, looked to protect their CDO and MBS risks by purchasing more derivatives, in the *credit derivatives* market, called <u>Credit Default Swaps</u> [6] (CDS).

The CDS is a form of insurance in which the buyer agrees to pay the seller a coupon until the CDS matures. In return the CDS seller guarantees to pay an agreed sum if an asset default (credit event) occurs. CDS sellers were then spreading these risks (liabilities) further, monetising CDS debt by trading them as derivatives.

The rapid expansion of the money supply inevitably led to inflation. As the demand for assets grew and housing prices soared the Fed attempted to stave off the inevitable disaster by using the only practical restraint they could apply to slow the commercial bank's *debt monetisation*: they increased the base rate.

They tried to do this in a series of small incremental steps. However, the base rate grew from 2.25% in 2004 to 5.25% in 2006. The *parasite class* and the GPPP are not superhuman. They make plenty of mistakes and this was possibly one of them. While eventual collapse of the debt based monetary system was inevitable, events in 2007 to 2008 hastened its end.

Many sub-prime borrowers couldn't refinance their mortgages and began to default. The housing market in the US crashed. This caused a rapid contagion which some say *threatened* to destroy the global financial system.

This wasn't a potential catastrophe, the disaster happened. From 2008 the IMFS was irrevocably broken. The *parasite class* never let a crisis go to waste.

While they prepared for their *Great Reset* they took exploitation of the monetary system to new levels. No longer so concerned about maintaining it in the long term, they raced ahead with debt monetisation, wringing as much profit and resultant authority as possible out of its death throws.

As the 2007/2008 crisis unfolded, global investors were massively exposed to MBS losses which were potentially *worthless*. CDO's, incorporating MBS' and other debt monetisation products, were equally *junk* and the CDS buyers started demanding payment from over exposed sellers.

Not all *sub-prime* borrowers would default, but due to the complex structure of the *securities* no one knew to what extent the securities were devalued. In particular, the CDS trading meant that no one could work out where the liability lay or who was most exposed.

At the central banks the *interbank lending* process started to break down. Banks wouldn't lend to each other because they were uncertain which of them were at risk and what exposure potential borrowers (other banks) faced. Giant US investment banks like Bear Sterns and Lehman Brothers were unable to access the finance they needed and collapsed. The largest insurance firms, such as American International Group (AIG), faced huge losses in the derivatives markets.

Whole nations started to fail financially. As credit from foreign capital dried up Greece, Portugal, Spain, Ireland and Cyprus were unable to finance their deficits through *debt monetisation* in the bond markets. The *debt monetisation* model had failed on a global scale. However a few, special GPPP stakeholders were *too big to fail.*

It was evident during the 2007/8 financial crisis that the bankruptcy of some banks and other investors, such as RBS in the UK and Lehman Brothers and AIG in the US, really could cause a systemic collapse. The whole system was based upon *fairy dust* and couldn't withstand any genuine free market pressures.

The undeniable solution to this problem would have been to restructure the IMFS to work for the real economy and not the mythical economy built upon <u>financial system fraud</u> [7]. The real economy is where the people physically engage in economic activity. They gather resources, manufacture goods, sell services and trade with each other to make a living. Money, in this economy, the one we all live in, is simply the medium of exchange.

The advent of cryptocurrencies and crowdfunding has made it possible for us to operate our physical, "real" economy, on a global scale, without any need for central

banks. However, this would erode the authority of the *parasite class* and their GPPP stakeholder partners. So it is no surprise that the response to the financial collapse, caused by degenerate *debt monetisation*, was to monetise more debt.

Through financial vehicles like the Bank of England's (BoE's) *Special Liquidity Scheme* [8] and the Federal Reserve's (Fed's) enormous <u>bank bail outs</u> [9] central banks started taking the commercial and investment banks toxic assets onto their balance sheets. Next they opened their money spigots to *stimulate* the economy.

So called Quantitative Easing (QE) involved the central banks *monetising debt* on, what was then, an unimaginable scale. The BoE are totally transparent about <u>the QE process</u> [10]:

"Quantitative easing is a tool that central banks, like us, can use to inject money directly into the economy.. Quantitative easing involves us creating digital money.. to buy things like government debt in the form of bonds.. By creating this 'new' money, we aim to boost spending and investment in the economy."

While this *fairy dust* costs the *parasite class* nothing it costs the rest of us practically everything. This is a debt that we and our children must work our whole lives to repay but never will. We are condemned by it.

The money supply is the stock of money circulating in the economy at any moment. It increases with debt monetisation and contracts when accounts are settled.

The M1 supply measures money with the greatest liquidity. Cash, commercial bank deposit accounts and cheques can readily be exchanged with immediate value. Their *liquidity* is high. However the M2 money supply adds savings deposit accounts, short term bond funds (money market funds) and longer term saving accounts in commercial banks. Their liquidity is lower but M2 gives a fuller picture of the money supply.

Another aspect of how money functions in the economy is <u>its velocity</u> [11]. This relates to the pace at which money is exchanged in the real economy. The faster the velocity the more economic activity there is. Velocity is calculated by dividing GDP by the money supply. Higher GDP and inflation generally correlates to greater velocity and economic slow downs in the business cycle correspond to reduced velocity.

As we have discussed, the US dollar is the global reserve currency and it impacts global trade more than any other. In 2006 the M2 money supply in the US stood at approximately \$7.5 trillion. By the beginning of 2020 it had reached approximately \$15.3 trillion [12]. An average increase in the money supply of a little over \$550 billion per year.

In 2007 the M2 velocity in the US stood at <u>just above 2.0</u> [13]. By the start of 2020 it had reduced to 1.4. Initially, this seems difficult to understand. The Central Banks had taken on the banks toxic assets and had engaged is huge QE *stimulus* and yet

velocity had declined. Increased GDP could account for this but GDP had stagnated throughout the period. It appeared that the vast bulk of the debt monetisation had not produced any economic activity in the productive economy. It had failed to produce a recovery.

This is because nearly all of the *debt monetisation* had been siphoned off into the financial markets for the benefit of the GPPP *stakeholders* who caused the crash. The austerity cuts in public services, depleted incomes and vanishing job security, endured by the public, paid for their expanding wealth.

There was little price inflation because there was no additional economic activity. The fed were artificially suppressing interest rates to allow the money go round to accelerate but only for the select few.

This period evidenced a sustained *Cantillion Effect*. For the vast majority of the population there was no apparent *stimulus*. The early recipients of new money were reinvesting it in more debt monetisation. There was next to no *trickle down* as the chosen winning stakeholders used their new capital to create more capital. This is why *real wages* fell.

Again, the BoE could not have been clearer about their intentions:

"We introduced quantitative easing.. Large-scale purchases of government bonds lower the interest rates or 'yields' on those bonds.. QE can stimulate the economy by boosting a wide range of financial asset prices.. Suppose we buy £1 million of government bonds from a pension fund. In place of the bonds, the pension fund now has £1 million in money. Rather than hold on to this money, it might invest it in financial assets, such as shares, that give it a higher return. And when demand for financial assets is high, with more people wanting to buy them, the value of these assets increases. This makes businesses and households holding shares wealthier."

They were inflating the stock market but were pumping even more fairy dust into the capital (financial) market. The only real restraint on *debt monetisation* is the capacity of the borrower to take on debt. With a reduction in real wages and a tightening of high street lending, most of us were less likely to obtain credit. Between 2010 and the start of 2020 UK household debt, <u>as a percentage of GDP</u> [14], dropped from a 2010 high of approximately 96% to a 2020 low of 84%.

As the BoE acknowledged, QE transferred wealth to those investing in financial assets, as they were willing to continue to *monetise debt*. It also reignited exactly the same housing price bubble [15], seen prior to the 2008 global crash, as wealthy investors also looked towards property.

No attempt was made to correct the errors that led to the 2007/8 financial crisis. Instead the *parasite class* had stepped up *debt monetisation* to create even more wealth for their loyal GPPP *stakeholder partners*. The State franchise debt they

were creating for the world's population had spiralled further out of control. It was as if they had no intention of even attempting to mend the broken IMFS.

All of this was as nothing compared to what has happened during the *pseudopandemic*. The US M2 money supply leaped from \$15.3 trillion to 19.4 trillion in one year. Nearly a ten fold annual increase on the already high monetary expansion rate following the 2008 crash. At the time of writing it stands at more than \$20 trillion.

US GDP tanked, dropping by nearly 34% before making an apparent remarkable recovery, increasing by an alleged 70% in a two-month period. Supposedly, US GDP then plummeted again over the next few months. The huge increase in *debt monetisation* corresponded to a US net GDP increase of merely 3.5%. M2 velocity collapsed from 1.4 to 1.06.

In 2008 US State franchise debt was approximately \$9 trillion. By 2020 it had climbed to approximately \$23 trillion. Adding around \$1.16 trillion on average per year. By the end of 2020 it had soared to \$27 trillion and now it has eclipsed \$28 trillion.

This debt creation smash and grab has been repeated in practically every developed economy. State franchises the world over have presided over the theft which began in 2009/10 and devolved into <u>criminal mania</u> [16] during the *pseudopandemic*.

Central banks and their political mouthpieces maintained the deception of a functioning economy by claiming record high employment rates and low price inflation. At the same time they were grinding essential services into the ground, neglecting infrastructure or selling off the public's physical assets to private investors. Creating more global debt as investors "borrowed" to finance the physical asset purchases.

The jobs they "created" weren't the relatively well paid, unionised blue collar trades of the former productive economy. These were overwhelmingly low paid, zero hour contracts in the service industries. Employment rights in these jobs were ostensibly non existent.

A 2021 report from the <u>Institute for Public Policy Research</u> [17] (IPPR) described the perpetual rise of *"in work"* poverty:

"Rising housing costs for those on low incomes has been the key factor driving higher rates of working poverty in recent years.. This in turn is contributing to widening inequality, as there is a growing 'locked out' group formed disproportionately of working families with children being pushed into poverty.. The national focus on higher per capita GDP growth.. delivered little for working families over the past two decades."

The economies of western aligned democracies, driven by nothing but *debt* monetisation and with a monetary system serving no one but a tiny handful of

selected stakeholders, were mortally wounded in 2008 and placed upon on QE life support. The slightest infection would finish them off. The entirely predictable financial *pandemic* came in September 2019 with the collapse of the <u>US repomarket</u> [18].

Repurchase agreements are <u>short term loans</u> [19], typically overnight, where dealers offer State franchise bonds to investors with an agreement to repurchase them at a higher price the next day. This marginal difference is the *repo rate*.

The repo market enables bond sellers to raise short term capital. Investors can quickly monetise debt and, as the market mainly consists of State franchise securities, they are considered a safe investment. In theory, those who hold a large quantity of bonds (assets) can use the repo market to raise finance at short notice. It is a vital component of the interbank lending system.

Investors use the repo market to turn a quick profit which they often then reinvest in longer term bond yields. The repo rate is generally around 2% but on September 17th 2019 the US market ground to a halt forcing those holding Treasuries to raise the rate to 10% in one day [20].

Despite this far more attractive rate investors still didn't use the repo market. Years of QE had left banks awash with excess base money reserves. Generally considered the most liquid of all monetary forms, they should have jumped at the chance to use them to make a quick killing with repurchase agreements. Yet they didn't.

Debt monetisation means that the only determinant for making money is your ability to purchase debt. The more capital you have the more you can make. The centralisation of wealth, and the authority it affords, is the inevitable consequence.

When the repo market crashed just four banking giants [JPMorgan Chase & Co., Bank of America, Wells Fargo, and Citibank (Citigroup Inc.)] held 25% of Fed reserves and 50% of US Treasuries between them. Their liquid assets were heavily skewed towards Treasuries. In their 2019 4th Quarterly Report [21] the BIS explained why this was a serious problem:

"Repo markets redistribute liquidity between financial institutions: not only banks, but also insurance companies, asset managers, money market funds and other institutional investors. In so doing, they help other financial markets to function smoothly. Thus, any sustained disruption in this market.. could quickly ripple through the financial system. The freezing-up of repo markets in late 2008 was one of the most damaging aspects of the Great Financial Crisis.. The four largest US banks specifically turned into key players: their net lending position.. increased quickly, reaching about \$300 billion at end-June 2019.. At the same time, the next largest 25 banks reduced their demand for repo funding.. swings in reserves are likely to have reduced the cash buffers of the big four banks and their willingness to lend into the repo market."

The BIS recognised that QE had provided so much liquidity to US commercial banks that they had less need to use the repo market. At the same time the biggest financial institutions were holding so many Treasuries that they were at risk of becoming their own customers. Far from being stable investments US Treasuries were looking distinctly shaky. This provided further disincentive to prospective repo market investors.

In addition, with so many reserves, fluctuation in the base rate made the biggest banks' cash flows unstable. The BIS noted that, for these too big to fail banks, "their ability to supply funding at short notice in repo markets was diminished." They added that this was "an underlying structural factor that could have amplified the repo rate reaction."

The BIS then claimed that the Fed had "calmed markets" by sprinkling fairy dust onto the collapsing system, monetising more debt through purchasing Treasuries off the banking giants clogging up the system. The *Trusted News* Cartel remained all but silent as the Fed pumped \$6 trillion [22] into Wall Street traders to keep the patient alive just a little longer. The interbank lending system was seizing up again, the last gasps first witnessed in 2007 had returned and the IMFS was very close to extinction.

People have been told by their State franchises that the job retention schemes and small business subsidies were a response to the unavoidable economic turmoil created by a global pandemic. Not only was the global pandemic fake and the State franchise response a planned fiscal policy, the economic and monetary plan was formed months before anyone had ever been told about SARS-CoV-2. It had already begun, long before the first case of COVID 19 had even been reported.

It started in response to the repo market debacle. This set the trajectory for the construction of the new international monetary and financial system built upon carbon trading. This new sustainable and inclusive IMFS would enable the GPPP to seize the global commons and establish global governance. All they needed to do was convince us to go along with it.

The time was ripe for a *Great Reset*. Having prepared for this moment for a decade the *core conspirators* and their *informed influencers* were ready to administer the *coup de grâce* to the old IMFS and usher in the new. All they needed now was the trigger event: the *pseudopandemic*.

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Chapter 28 - We Can Reset The World

Professor Mariana Mazzucato's <u>website</u> [1] describes her as "one of the world's most influential economists... on a mission to save capitalism from itself." This isn't just self promotional bluster, there is some justification for her claim.

A professor at University College London (UCL), she is the founder and director of the Institute for Innovation and Public Purpose (IIPP) policy *think tank*. She is a member of the Scottish State franchise' Council of Economic Advisers and South Africa's Economic Advisory Council. In 2019, she joined the U.N. <u>Committee for Development Policy</u> [2].

She is a frequent invitee to the WEF Davos meetings and a staunch advocate for *stakeholder capitalism* [3]. She is a <u>Bilderberger</u> [4] and the IIPP think tank she founded and leads is a *partner with* [5] the Organisation for Economic Co-operation and Development (OECD), the European Union and, via the MOIN network, the Rockefeller Foundation among others.

The IIPP are also partners with George Soros' Open Society Foundation [6] (OSF). They are collaborating to develop a global executive leadership programme which will push "systemic and sustained change to to drive new economic thinking." Their aim is to create a "fundamentally different type of economy" based upon investment in "good work," delivering an economy that is "environmentally sustainable and governed via stakeholder value."

In September 2020 Mazzucato wrote an article for the World Business Council for Sustainable Development (WBCSD) called <u>Avoiding Climate Lockdown</u> [7]. There is absolutely no reason why the world should ever face climate lockdowns but she suggested they could be unavoidable unless the world creates a new international monetary and financial system (IMFS).

Just like the *pseudopandemic* lockdowns, the future *climate lockdowns* will be deliberate policy decisions designed to further modify our behaviour and achieve GPPP objectives. Now that the spectre of unnecessary lockdown chaos and destruction exists, Mazzucato suggests that the only way to avoid more needless turmoil is to implement the wish list of those threatening to instigate it. According to "one of the world's most influential economists:"

"The climate crisis is also a public-health crisis.. Addressing this.. crisis requires reorienting corporate governance, finance, policy, and energy systems toward a green economic transformation.. Building an inclusive, sustainable economy depends on productive cooperation among the public and private sectors and civil society.. Government assistance to business must be less about subsidies, guarantees, and bailouts, and more about building partnerships."

This is stakeholder capitalism. It is the formalisation of a global system of governance where elected governments are *stakeholders* in a network of

partnerships. In this global public private partnership those with the power to create money, the *parasite class*, rule. There is no democratic oversight in this new world order. Mazzucato's *expert* advice is exactly what the GPPP and the *parasite class* want to hear. If it wasn't she wouldn't be *influential*.

The WBCSD she was writing for is an organisation of 200 CEO's from some of the world's largest global corporations. It is the hub for more than 60 national and regional business councils and partner organisations including the United Nations, the EU Commission, the World Economic Forum, the World Bank, The World Health Organisation, The World Wildlife Fund, the Bill and Melinda Gates Foundation, the Ford Foundation and BlackRock.

In 2010 the WBCSD published their <u>Vision 2050 document</u> [8]. Aiming to transform the global economy to meet Sustainable Development Goals (SDGs), they said that a pathway would be needed. It would "require fundamental changes in governance structures, economic frameworks, business and human behavior." They envisaged two distinct periods of transformation.

They called the decade between 2010 to 2020 the *Turbulent Teens*. This would be the time to construct the mechanisms that would enable the *fundamental changes* to be established. *Transformation Time* would start in 2020, once the *fundamental changes* had been able to "mature into more consistent knowledge, behavior and solutions."

In their conclusion the WBCSD suggested how the process of moving from the *Turbulent Teens* into the *Transformation Time* could occur:

"Crisis. Opportunity. It is a business cliché, but there is truth in it."

While for many of us 2020 was a disaster, the WBCSD were among the GPPP members for whom the *pseudopandemic* could not have arrived at a more opportune moment. It was a remarkable coincidence that the right *crisis opportunity* arrived precisely on schedule. In 2020 they updated their new <u>Vision 2050</u> [9]. Stating that the *time to transform* had arrived, they said:

"Despite its enormous human and financial cost, the COVID-19 pandemic has created an opportunity to drive and accelerate change at a completely different pace than we may have previously imagined to be possible."

As Klaus Schwab stated, at no point were the GPPP concerned about COVID 19 disease, the least significant pandemic in the last 2000 years. Yet they knew that a huge financial bail out package, unlike anything we have ever seen, would be needed long before anyone had even supposedly heard of SARS-CoV-2. In August 2019, one month before the repo market collapsed, the GPPP had already decided to initiate what they called "going direct."

The US economic policy response to the *pseudopandemic* came in the form of the <u>Coronavirus Aid, Relief, and Economic Security (CARES) Act</u> [10]. This created the *fairy dust* to pay people not to work (furlough) while the old IMFS was finished off

and the *biosecurity* controls put in place. Every GPPP State franchise involved deployed something similar.

The outline of the CARES Act was agreed at the <u>G7 Central Bankers symposium</u> [11] in Jackson Hole, Wyoming four months before the first *cases* of COVID 19 were reported. The largest investment management firm in the world, BlackRock, presented their report <u>Dealing With The Next Downturn</u> [12] to the gathered central bankers. BlackRock stated:

"Unprecedented policies will be needed to respond to the next economic downturn. Monetary policy is almost exhausted as global interest rates plunge towards zero or below. Fiscal policy on its own will struggle to provide major stimulus in a timely fashion given high debt levels and the typical lags with implementation."

BlackRock admitted that the existing IMFS was a busted flush:

"Conventional and unconventional monetary policy works primarily through the stimulative impact of lower short-term and long-term interest rates. This channel is almost tapped out."

Fiscal policy (State franchise spending and taxation) wouldn't be able to respond to a "downturn" because government debt was off the charts and you can't raise taxes from people who are broke. Similarly monetary policy was tapped out because interbank lending, and subsequent bond markets, were close to implosion. As the tax exempt foundations of the parasite class rendered their vast wealth untouchable, BlackRock proposed a better solution.

They recommended that an investment management firm, BlackRock for instance, should be put in charge of monetising more debt on behalf of the State franchises. This could be done by bypassing all risk analysis and monetising any junk assets they could lay their hands on to fund State franchise policy directly. In doing so they were suggesting that State franchise fiscal policy should be controlled by central bank monetary policy. This was a proposal to formalise central bank control of government policy.

BlackRock said that this "unusual condition" would only be called for in extremely "unusual circumstances". While the "unusual condition" would require a "permanent set-up" it would only be used temporarily. Once fiscal policy objectives were achieved, which under their plan would also be monetary policy objectives, the temporary permanent set-up could then move on to the "exit strategy" placed on the "policy horizon." Whatever that could conceivably be.

We now know what the *policy horizon* looks like. It is the successful transition to a net zero, carbon neutral global economy. The central bankers will decide when these *sustainable goals* have been achieved and, until then, they are "going direct" and are firmly in charge of everything.

The "unusual circumstances" arose just a few weeks later when the repo market collapsed. Things got even more unusual when the WHO declared a global pandemic a few months later. With their "going direct" plan already functioning, the Fed were among the Central Banks, including Germany's Reichsbank, who contracted BlackRock to assist them to monetise more debt. In the Fed's case this allowed BlackRock to go directly to selling its own ETF securities to the central bank, heaping more debt upon the tax payers.

BlackRock explained how this system has reponded to the pseudopandemic [13]:

"The future evolution and global spread of the coronavirus outbreak is highly uncertain.. containment and social distancing are ultimately achieved by reducing economic activity.. That requires a decisive, preemptive and coordinated policy response.. A comprehensive global response should have the following elements... Generous sick-pay support and short-time work schemes to stabilize incomes and to limit job losses.. expanding funding-for-lending facilities.. Monetary policy should focus on preventing an unwarranted tightening in financial conditions and ensure the functioning of financial markets."

The *pseudopandemic* financial response was *pre-emptive*, *coordinated* and planned in August 2019. According to BlackRock, the subsequent lockdowns and social distancing were *achieved by reducing economic activity*. Another way of putting this is that the purpose of lockdowns was to reduce *economic activity*.

BlackRock presented the G7 with *the solution* they would use in response to the *pseudopandemic* seven months before the WHO declaration. The lockdown policies caused the subsequent collapse of economies and global trade. This deepened the financial crisis that began with the repo failure. The GPPP State franchises then increased the scale of *going direct*.

Yet more fairy dust provided generous sick-pay support and short-term work schemes that were used to stabilize incomes and limit job losses. There was no scientific rationale or public health benefit for lockdowns. They were designed to create a comprehensive global response to expand funding-for-lending in order to protect and ensure the functioning of financial markets. The pseudopandemic was a global heist.

The first Central Bank to go beyond *going direct* and take the next step to *directly* fund government spending <u>was the BoE</u> [14]. Through their *Ways and Means* facility they gave the State franchise unlimited freedom to run up as much debt as they liked without even going to the gilts (bond) market.

This economic insanity is only *insane* if you assume the GPPP have some further need of the current IMFS. Once you understand that they don't, it all makes sense.

Mark Carney, then governor of the BoE, also spoke at the <u>Jackson Hole symposium</u> [15]. In August 2019 He said:

"Most fundamentally, a destabilising asymmetry at the heart of the IMFS is growing.. a multi-polar global economy requires a new IMFS to realise its full potential. That won't be easy.. History teaches that the transition to a new global reserve currency may not proceed smoothly.. Technological developments provide the potential for such a world to emerge.. The Bank of England.. have been clear.. the terms of engagement for any new systemic private payments system must be in force well in advance of any launch.. perhaps through a network of central bank digital currencies.. the deficiencies of the IMFS have become increasingly potent. Even a passing acquaintance with monetary history suggests that this centre won't hold.. I will close by adding urgency to Ben Bernanke's challenge. Let's end the malign neglect of the IMFS and build a system worthy of the diverse, multipolar global economy that is emerging."

It is clear the GPPP had accepted that the existing IMFS was finished prior to the *pseudopandemic*. As Carney alluded to, there was a sense of urgency and an agreement that the IMFS must be replaced by a new model.

The financial rescue package, allegedly rolled out in response to the *pseudopandemic*, was implemented before SARS-CoV-2 had been discovered. A key motive for the *pseudopandemic* was to prepare us for the transition to the new IMFS. It is unlikely that it will *proceed smoothly*. Hence the need for an all pervasive surveillance and behavioural control system.

Despite what many of us believe, the solution to the alleged climate crisis has been planned for more than half a century. It may well deliver a greener, less polluted world but it is based upon some central precepts: a smaller, genetically modified race of humanoid cyborgs living in AI controlled settlements in a Technate under the rule of a technocratic and financial *superclass*.

The GPPP are using the excuse of climate change to create a New World Order. There is nothing new about this ambition. It is as old as political authority itself.

Hitherto the *society of the elect* relied upon the hoarding and control of capital for their power. They no longer need to do this. In response to the *climate crisis* they have developed a new IMFS based upon them controlling access to the natural world. All resources come under their authority and they are stealing them from us using their new net zero, carbon neutral global economy.

In January 2020, just as the *pseudopandemic* was building, the World Economic Forum (WEF) published their <u>Metrics for Sustainable Value Creation</u> [16]. This established the SDG criteria by which all investment assets will be rated.

Any business that needs to raise capital will have to meet these requirements. They stipulate that the winners in this new IMFS will have the right (pivotal) people on its board, they will engage with the right *stakeholders*, their ethical behaviour will meet WEF approval and they will be able to afford all the necessary carbon offsets and other climate change adaptations.

In March 2020, as the *pseudopandemic* was declared, the WEF combined their sustainable metrics into an environmental, social and governance (ESG) score. <u>The WEF stated</u> [17]:

"In light of mounting evidence, activism and regulation, investors are including climate considerations in their investment decision-making. For example, a group of investors managing \$118 trillion in assets now expects companies to provide disclosures in accordance with the Task Force on Climate - related Financial Disclosures (TCFD)"

The *mounting evidence* is being produced by computer models, the *activists* are people like Mark Carney, who threatens to make businesses bankrupt unless they comply, and the regulation (TCFD) is determined by the <u>Financial Stability Board</u> [18] of the BIS. This means the whole system ultimately comes under the control of the <u>Bank for International Settlements</u> [19].

By January 2021 the GPPP had agreed to "convergence." ESG's were established as the <u>Stakeholder Capitalism Metrics</u> [20]. Through a process they called "dynamic materiality," the WEF constructed a mechanism to convert a commitment to SDGs into the basis for a new monetary system.

Stakeholder Capitalism Metrics define a sustainable investment as any in a company with good ESG rating. As climate change SDGs are underpinned by global State franchise agreements, high ESG rated companies are considered safe investments. Unless businesses can gain a good ESG rating they won't survive.

Investors are *monetising debt* by grabbing corporate bonds from the ESG high flyers and have already created a \$17.1 trillion <u>sustainable asset market</u> [21]. With \$120 trillion in ESG assets already under the management of financial institutions like BlackRock, this is where investors are heading in the carbon neutral gold rush.

This is the capitalisation of the carbon bond market that UK chancellors Philip Hammond, Rishi Sunak and other political mouthpieces have been so confident about. In order for this \$120 trillion bond market to become the basis for a new IMFS, investors need to be encouraged to purchase ESG rated assets. The *debt monetisation* process needs to continue at pace to complete the transformation.

Janet Yellen, former Fed chair and current US Treasury Secretary, laid out how the favoured GPPP *stakeholders* will be the financiers of the <u>net zero corporate</u> <u>hegemony</u> [22]. For example, BlackRock already holds \$200 billion in *sustainable* ETF securities. These track the performance of ESG rated investments, thus driving companies who need capital to commit to SDG's. BlackRock intend to increase their ETF holding to £1 trillion by 2030 and are committed to their policy of "carbon transition readiness."

It doesn't matter how bad inflation gets because we don't matter. Once the carbon bond market is capitalised the broken IMFS can be discarded and the new SDG based system brought in.

In his 2021 letter to CEO's, Larry Fink, the chairman of BlackRock, outlined how the *pseudopandemic* created this <u>unprecedented opportunity</u> [23]:

"The pandemic has presented such an existential crisis.. that it has driven us to confront the global threat of climate change more forcefully. Markets started to price climate risk into the value of securities.. then the pandemic took hold.. and the reallocation of capital accelerated even faster. I believe that this is the beginning of a long but rapidly accelerating transition — one that will unfold over many years and reshape asset prices of every type.. the climate transition presents a historic investment opportunity."

You can't run a system of global governance without a system of global taxation. As usual, this was also prepared before the WHO's declaration. In October 2019 the OECD published their consultation document <u>Secretariat Proposal for a 'Unified Approach' under Pillar One</u> [24]. The document outlined a global tax regime based upon allocated "taxing rights."

The justification given was to tackle corporate tax evasion in the digital economy, as big tech firms are prone to that sort of thing. National taxation, based upon the physical presence of a company, was no longer considered sufficient. Therefore a new tax with "wider scope" was needed. The OECD suggested that his may be achieved through "a new self-standing treaty provision."

It remains to be seen what model of global taxation we will get, but there are some things of which we can be certain. The GPPP stakeholders will continue to avoid paying tax and the philanthropic tax exempt foundations will remain tax exempt. The only people who won't be able to avoid the *global tax* is us.

For most people *taxation without representation* is the defining democratic deal breaker. We can only speculate if people will still believe that they live in democracies when the inevitable global tax regime is installed. However, by then, it might not make any difference

In late May 2021 the central bankers of the G7 met to discuss the new IMFS. State franchise central bank governors joined representatives from the International Monetary Fund (IMF), World Bank Group, OECD, Eurogroup and FSB (BIS). By *going direct* the attending G7 State franchise finance ministers were told what fiscal polices to implement.

Following the meeting they <u>released their communiqué</u> [25] to the world:

"We will continue to work together to ensure a strong, sustainable, balanced and inclusive global recovery that builds back better and greener from the Covid-19 pandemic.. We emphasise the need to green the global financial system so that financial decisions take climate considerations into account.. We commit to increase and improve our climate finance contributions through to 2025, including increasing adaptation finance and

finance for nature-based solutions.. We also commit to a global minimum tax of at least 15% on a country by country basis.."

In other words the G7 financial authorities were committed to *Stakeholder Capitalism Metrics*. Two weeks later the *Trusted News* cartel reported to the public that this was all <u>US President Biden's idea</u> [26]:

"Joe Biden has won support at the G7 summit for a "carry on spending" plan, as western leaders rejected austerity in a post-Covid world."

Apparently this wasn't his only success. According to the propagandists he was also instrumental in forging ahead with the <u>new global tax system</u> [27]:

"Finance ministers from Group of Seven nations meeting in London on Friday are expected to back President Biden's call for a global minimum tax on corporate profits."

Joe Biden did not devise *going direct*, he did not propose a global tax and he did not suggest unbridled *debt monetisation* to capitalise the carbon bond market. Biden was just saying what he was told to say like all the other political puppets on parade at the G7 media event.

The stories we are given about the leaders we elect are complete nonsense. We vote for people whose primary purpose is to maintain *our trust* in the party political show. None of it is real, just a drama to keep us entertained while the GPPP get on with business. Our representative democracy has always been a farce and we are rapidly approaching the point where the GPPP can dispense with the pretence entirely if they wish.

The G7 central bankers had something else to communicate:

"Innovation in digital money and payments has the potential to bring significant benefits.. Central Bank Digital Currencies (CBDCs).. could act as both a liquid, safe settlement asset and as an anchor for the payments system.. CBDCs should be resilient and energy-efficient; support innovation, competition, inclusion, and could enhance cross-border payments.. We will work towards common principles and publish conclusions later in the year."

In 2010 a remarkable article was published in the UK Telegraph. Called <u>How To End Boom and Bust: Make Cash Illegal</u> [28] it didn't garner too much interest at the time, but today it appears to be incredibly prescient. Based upon the research of Norwegian academic Trond Andresen, the article was written by the head of retail fixed interest at the global investment firm M&G Investments, Jim Leaviss. Describing what he saw as the advantages of a *cashless society*, he wrote:

"Once all money exists only in bank accounts – monitored, or even directly controlled by the government.. All payments are made by contactless card, mobile phone apps or other electronic means, while notes and coins

are abolished. Your current account will.. be held with..the central bank.. To boost spending, the bank imposes a negative interest rate.., a tax on saving. Faced with seeing their money slowly confiscated, people are more likely to spend.. What about.. when the economy is overheating? The central bank.. could.. impose a tax on transactions.. That makes people less inclined to spend.. If notes and coins were abolished and the only way to hold money was through a government-controlled bank, there would be no escape."

Jim appears to have made the mistake that most of humanity has been making for thousands of years. He assumed that "government" is broadly benign and has some sort of interest in our welfare. From this mistake he concluded that the only people who would ever want to "escape" would be criminals.

Jim was advocating a system of total economic enslavement, unwittingly perhaps. He also delivered a stunningly accurate description of the *new normal* IMFS we are being propelled towards.

In November 2018 the International Monetary Fund published Winds of Change: The Case For A New Digital Currency [29]. They proposed different models for Central Bank Digital Currencies (CBDC's). In her speech launching the document then Managing Director of the IMF Christine Lagarde gave us some more thought-terminating cliché propaganda. She said:

"Cryptocurrencies seek to anchor trust in technology.. you might trust their services.. Proper regulation of these entities will remain a pillar of trust. Various central banks around the world are seriously considering these ideas.. They are embracing change and new thinking—as indeed is the IME."

Lagarde, a convicted <u>accomplice to fraud</u> [30], asserted a *truism* that trust in financial transactions only comes via State franchise and GPPP regulation and control. We should consider this in the context of the existing IMFS which is riven with corruption, predicated upon ruthless economic exploitation and has established a financial sector which is practically defined by its <u>criminal activity</u> [31]. For the IMF to demand that we *trust* financial regulators is preposterous.

Cryptocurrencies are based upon decentralised, distributed ledger technology using the block-chain. Essentially this means that transactions are mathematically authenticated, not by one centralised authority, but by a network of computers performing extremely complex checksum calculations. In this way *trust* itself is distributed. It is block-chain technology that makes this possible but it is the distribution of *trust* that makes cryptocurrencies revolutionary.

We no longer need a third party to oversee our transactions. There's no centralised banking facility taking a cut or charging interest and, perhaps for this reason, we can potentially place more trust in a cryptocurrency than we ever could in money created out of nothing by banks.

The proposed CBDC's are not cryptocurrencies. Most are proposed to be based upon block-chain technology but that does not mean they are similar to cryptocurrencies. The only thing they share with them is that they are a form of electronic money.

CBDC's use the block-chain in a completely different way. By setting block-chain permissions, restricting access to transaction verification process, block-chain technology can be transformed from a tool for the egalitarian distribution of shared trust to an oppressive financial control grid.

The *core conspirators* and their *informed influencers* despise decentralised cryptocurrencies. The Securities and Exchange Commission in the US is just one GPPP stakeholder desperate to <u>assert its regulatory authority</u> [32] over cryptocurrencies.

In February 2021 the Wall Street Journal asked Bill Gates what technology the world would be better without. Given his passion for public health and our safety you might think he would say "bio-weapons" or "nuclear weapons," but he said [33]:

"The way cryptocurrency works today allows for certain criminal activities. It'd be good to get rid of that."

Then he remembered to add that what he should have said was "bio-weapons."

The Bank of England and the Treasury, because they are now ostensibly the same thing, announced their CBDC unit on the 19th April 2021:

"The Bank of England and HM Treasury have today announced the joint creation of a Central Bank Digital Currency (CBDC) Taskforce to coordinate the exploration of a potential UK CBDC. A CBDC would be a new form of digital money issued by the Bank of England and for use by households and businesses.. The Bank of England has also announced it will establish a CBDC Unit. This new division of the Bank of England will lead its internal exploration around CBDC."

The International Monetary Fund and central banks are "embracing change" because CBDC will give them total control over the new IMFS and our lives. In October 2020 Lagarde's successor Kristalina Georgieva referred to the pseudopandemic as a "Bretton Woods moment" [34]. Claiming that adding trillions to the global debt had somehow "prevented" destruction, she eagerly promoted the digital economy and claimed that digitalization would improve financial inclusion.

It is difficult to understand what these new words and platitudes mean. CBDC was explained more succinctly by Agustín Carstens, General Manager of the BIS. He joined a group discussion moderated by Georgieva during the *virtual* IMF and World Bank annual meeting [35]. The Manager of the BIS said:

"CBDC.. will be the third type of liability of a central bank.. we tend to establish the equivalence with cash and there is a huge difference there.

For example in cash we don't know for example who is using a \$100 bill today.. A key difference with the CBDC is that the central bank will have absolute control on the rules and regulations that will determine the use of that central bank liability, and also we will have the technology to enforce that. Those two issues are extremely important and that makes a huge difference in respect to what cash is.. If an advanced economy issues a CBDC and somebody in a third country wants to use it, they will require the consent of the central bank of the residency of that person.. The degree of control will be far bigger.. I think this is good news."

Speaking at the same virtual conference the Chairman of the Fed, Jerome Powell, said:

"For many of the world's central banks, discussion of CBDCs has shifted from 'if' they will be developed to 'when' they will be introduced and widely used."

The BIS have been dreaming of CBDCs for years. In 2017 the BIS were openly discussing what they were then calling <u>Central Bank Crypto Currencies</u> [36] (CBCCs). They were aware that cryptocurrencies afforded the user anonymity:

"The peer-to-peer element of the new technology has the potential to provide anonymity features that are similar to those of cash but in digital form. If anonymity is not seen as important, then most of the alleged benefits of retail CBCCs can be achieved by giving the public access to accounts at the central bank."

The BIS concluded that anonymity was not important especially as the CBDC model gives them *absolute control*. In January 2020, the BIS published a <u>research paper</u> [37] looking at the *impending* arrival of CBDC. They found:

"80% of central banks.. are engaging in some sort of work.., with half looking at both wholesale and general purpose CBDCs. Some 40% of central banks have progressed from conceptual research to experiments, or proofs-of-concept; and another 10% have developed pilot projects."

As we previously discussed, the Technate in China is the new sociopolitical model and it is no coincidence that they have been working upon their digital currency electronic payment (DCEP) since 2014. We live in a world of deceit and propaganda and so it should be no surprise that when the *Trusted News* cartel reported the launch of the digital yuan they wrote [38]:

"China's version of a digital currency is controlled by its central bank, which will issue the new electronic money. It is expected to give China's government vast new tools to monitor both its economy and its people. China is embracing digitization in many forms, including money, in a bid to gain more centralized control"

This is not how they reported the launch of the <u>US CBDC pilot</u> [39]:

"CBDCs are the digital equivalent of banknotes and coins, giving holders a direct digital claim on the central bank.. the United States must drive a discussion on incorporating U.S. values such as privacy and freedom of commerce and speech into the development of CBDCs.. A digital dollar could also boost financial inclusion in the United States.. It's vital that the U.S. asserts leadership as it has in previous technological innovations."

This was unadulterated propaganda. Like every aspect of the *pseudopandemic* response, the US "version" is identical to China's model. It affords the Fed exactly the same *centralised control*. The US are not leading on this technological innovation, China and Russia are among the many nations ahead of them. CBDCs are not equivalent to banknotes and coins, they eliminate all of the individual social and economic freedoms that cash facilitates.

Most importantly CBDCs do not give you a *claim on the central banks*. It gives the central banks a claim on you. It is their deposit, their liability, their money. Not yours.

The use of the term "financial inclusion" is replete in nearly every official statement and Trusted News cartel report on CBDC. Whenever we see the term we can be certain they are talking about selective financial inclusion and targeted financial exclusion.

The suggestion that CBDC is intended to assist the poor is an appalling deceit. There is absolutely nothing economically liberalising about CBDC and we only need look at how the current IMFS has created poverty to understand how much the GPPP really care about us.

The IMF have already explored the possibility of linking our browsing, search, and purchase history to form a new kind of <u>individual credit rating</u> [40]. CBDC will allow central banks to control our ability to purchase goods and services based upon our *credit score* which will be determined by their assessment of our *behaviour*. Those who obey and maintain their behavioural commitment to the public good, determined by UKHSA and other GPPP stakeholders, will be rewarded and those who don't will be punished.

This same control will extend to all businesses who need credit to function. By *going direct* with CBDC the *parasite class* won't need to exploit *debt monetisation* to control the money supply and subsequent policy. They will directly control all investment. Stakeholders with a good enough ESG rating will receive the CBDC they need. Those with a poor ESG rating won't.

Equally, If they don't approve of State franchise spending priorities, in a CBDC world, they can deny the transactions. As the parasite class seize the *global commons*, CBDC will guarantee that the only investments will be those that enable their resource grab.

The *pseudopandemic* was orchestrated to introduce us to our new technocracy. It established the biosecurity surveillance state that will maintain centralised

authoritarian control of our behaviour as we are transitioned. The economic response to the *pseudopandemic* has rendered the old IMFS redundant, allowing the GPPP to surge ahead with their carbon neutral global economy and the roll out of CBDC.

A cyberattack that brings down the global financial system would certainly create the right *choice environment* to convince us all that a new global monetary system is essential. The World Economic Forum's CyberPolygon preparedness scenarios were designed by Russia's State franchise owned bank, Sberbank.

Coincidentally, they just happen to be the first Russian bank to announce the launch of their <u>digital currency</u>, <u>Sbercoin</u> [41]. Immediately following the launch announcement, Russian President Vladimir Putin signed the Digital Financial Assets (DFA) Bill <u>into Russian law</u> [42], effectively creating the legal payment framework for Russia's digital currency.

The World Bank's rose tinted projections of 5.6% global growth in 2021 [43] did little to hide the reality:

"Global growth is set to reach 5.6 percent in 2021 - its strongest postrecession pace in 80 years - .. By 2022, global output will remain about 2
percent below prepandemic projections.. the recovery is not assured: the
possibility remains that additional COVID-19 waves, further vaccination
delays, mounting debt levels, or rising inflationary pressures deliver
setbacks.. The last decade saw the largest, fastest, and most broad-based
increase in debt levels around the world. The pandemic.. spurred an
unprecedented buildup in government debt in many economies.. The
pandemic not only reversed gains in global poverty reduction.. but also
deepened the challenges of food insecurity and rising food prices..
Expanding vaccine distribution and deployment, especially to developing
countries, is a precondition to economic recovery.."

A precarious hope, based upon drug dealing, that the global productive economy will only be 2% smaller in 2022 than forecast in 2019 isn't anything worth celebrating. Meanwhile, in their race to capitalise the carbon bond market, the GPPP are engaged in frantic *debt monetisation* causing increasing inequality. The trade barriers they have erected and the economic destruction they have wrought has also shut off global trade routes leading to food scarcity.

US inflation is at its <u>highest rate since 2008</u> [44] as the trillions of dollars, and other *fairy dust* currencies, magicked into existence during the *pseudopandemic* take effect. The "centre won't hold" and the global commitment to <u>Net-Zero Banking</u> [45] combined with CBDC will mean more centralisation of authority with fewer winners and many more losers.

If we become reliant upon UBI, paid in CBDC, the *parasite class* will have absolute control over our lives. We will not protest, we will not voice any objections or

otherwise dissent, we will take our vaccine, or whatever drugs we are told to take, and we will behave ourselves or our UBI - CBDC will be switched off.

If we understand what is happening as a result of the *pseudopandemic* then clearly we would be crazy to accept global dictatorial *authority*. That is why we are deluged with perpetual propaganda and *dezinformatsiya*. The aim is to convince us that we must adopt the solutions forced upon us to *stay safe* and that doing so is the *moral choice*.

Speaking at Berkley in 1962 the author Aldous Huxley, described the *ultimate*, *final revolution*. He said:

"In the past we can say that all revolutions have essentially aimed at changing the environment in order to change the individual.. Today we are faced, I think, with the approach of what may be called the ultimate revolution, the final revolution, where man can act directly on the mind-body of his fellows.. If you are going to control any population for any length of time, you must have some measure of consent, it's exceedingly difficult to see how pure terrorism can function indefinitely.. We are in process of developing a whole series of techniques which will enable the controlling oligarchy who have always existed and presumably will always exist to get people to love their servitude. This is, it seems to me, the ultimate in malevolent revolutions."

The WEF published their article <u>There is no returning to normal after COVID-19.</u>

<u>But there is a path forward [46]</u> because that is what they desperately need us to believe. The future is not set, all they have are coercion, deception and a monopoly on the use of force. They have no real authority because authority is a construct of the mind. If we choose not to believe in their authority it vanishes in an instant.

Their only resort then will be brute force. A few thousand oligarchs, no matter how many armies they think they command, have absolutely no chance against more than 5 billion adults who will not comply. Our unquestioning belief in their systems of authority is essential for their plan to succeed. Their institutions must have our *trust*. It is their only hope.

No one can demand that you trust them. All they can do is earn your trust and only you can decide if they have it.

We do not have to live in fear, we do not have to obey the claimed authority of liars and thieves and we do not have to believe anything we are told. We are sovereign human beings with free will. We have the ability the think critically and we can exercise our inalienable rights and freedoms.

If enough of us do, if we seize control of the technology that is being misused to imprison us, there is no authority on Earth that can stop us. We can reset the world.

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