

PERSPECTIVES: ON CONSPIRACY THEORIES, CENSORSHIP AND SEGREGATION

PERSPECTIVE A

On segregation

We all know that excluding the anti-vaxxers from society is a good thing and that, although segregation has got a bad rap, we know it's the right thing to do because **it's backed by science**. And sure, some people will point out that scientists also backed the Jim Crow laws, those introduced by Hitler and obviously 1980s South Africa too. But these people just don't understand. Those were bad segregations. **This is a good segregation**. That's an important difference.

The sooner that we accept that this is a good segregation, the better. There are some people that point out how **good science has always been based on submitting your beliefs to opposing opinions** in an attempt to enhance our understanding (also known as the peer review process), but these people just don't get it. They need to understand that, while that has obviously been key to all scientific progress throughout humanity's history so far, **this issue is totally different**. They need to understand that, **because we're right, we don't need to check the evidence**.

On conspiracy theorists

And we definitely don't need to listen to conspiracy theorists. These loonies seem to think that, just because they were eventually proved right on **the need for Nightingale hospitals, the value of PCR testing, the Wuhan lab leak theory, the role of Vitamin D status in effecting outcomes, the denial of standard of care to nursing home residents, that vaccines were indeed affecting menstrual cycles, the link between vaccines and myocarditis in the young and that the government was planning to introduce vaccine passports**, that this somehow validates their viewpoint.

And we mustn't ever do that. Because where does it end? Before you know it, we're listening to their arguments and engaging in debate. This is a recipe for disaster, as these kooks love nothing more than to establish common ground on how badly the Government goofed up badly on their half-a-million-dead model, cried wolf on the Kent variant (and others), and got it so badly wrong **when they dismissed the Swedish approach as 'national suicide'**. They also love to point to the embarrassing difference between the 'wave of death' the media warned of before celebrations outside Anfield, the maskless freedom protests or the crowded beaches. And how the figures that show [cases actually dropped in cities where protestors marched shoulder-to-shoulder](#). Just because

the Government got **every single prediction wrong**, they exploit this as some of sign that they can't be trusted.

What they don't understand is that the science told us this was right at the time and no-one could have known otherwise. And sure, they'll point to John Ionides, the godfather of medical statistics, who [pointed out in early March 2020 that this simply wasn't ever going to threaten us](#). And sure, they'll probably even highlight Sucharit Bhakti, the most cited German scientist in history, who explained in March 2020 that the proposed lockdown policies would drive death in nursing homes (in the exact way that it happened). These lunatics will shamelessly ask you to consider the early concerns registered by Dr Wolfgang Wodarg, Dr Yoram Lass, Dr Frank Ulrich Montgomery, Dr Joel Kettner, Prof Hendrick Streeck, Dr Yanis Roussel, Dr David Katz, Prof Michael T Osterholm, Dr Peter Goetzsche, Dr John Lee, Dr John Oxford, Dr Klaus Puschel, Dr Alexander Kekulé, Dr Claus Köhnlein, Dr Gerd Gigerenzer, Dr Pietro Vernazza, Dr Suneptra Gupta, Dr Karen Mölling, Dr Anders Tegnell, Dr Pablo Goldschmidt, Dr Eran Bendavid, Dr Jay Bhattacharya, Dr Tom Jefferson, Dr Michael Levitt, Dr Richard Schabas and countless others. Now, they shamelessly suggest that, just because **these skeptics told us how each major decision would play out before it did**, that they should be allowed to contribute to the conversation going forward or restore their funding for further research. Crazy.

On censorship

But what they need to get into their crazy skulls is that, just because all of these doctors called it right from the off, they're still crackpots. They need to **follow the science**. Just not the version promoted by the 58,000 scientists and doctors who risked their careers to publicly come out against the way the Government handled this by signing the Great Barrington Declaration, because that would imply that the science is not settled. And **we know that it is**. That's why **we must celebrate the complete censorship of all 58,000**. And for those of you who think that censorship is bad, you need to realise that you're wrong. Censorship can be great, it's just got a bad name. And sure, it was a bad thing when the Conquistadors destroyed libraries containing thousands of years of accumulated knowledge, and a bad thing when the Nazis burnt anti-war books in the street, or when the Communists imprisoned those with counter-revolutionary views, or when China blocks its citizens from accessing the internet. Those are all examples of bad censorship. **This is good censorship**.

That's why we should get behind the CDC's recent change in methodology that means [over 98% of vaccinated individuals that test positive will not be counted as a case](#). Counting cases from the vaxxed and unvaxxed in the same way would allow for like-for-like comparisons and risk the public being able to easily track outcomes and – perish the thought – better equips them to make their own decisions. **This must not be allowed**. That's why we have a responsibility to support the delisting of all natural health websites from Google's search results, the deletion of Youtube channels that provide counterpoints to the narrative and Facebook's removal of links to skeptical content. And we must definitely support [policies to fine people up to \\$70,000](#) if they post the wrong things on social media, like sharing their story after a family member dies. And before anyone

whines that this is against free speech, it is not; it's actually an improvement on free speech because **everyone still gets to say what they want, apart from the people who think the wrong things.**

This is good because, if we don't censor these points, **it makes it possible for the common man to hear what these scientists have to say.** And this is dangerous because, other than Witty, Valence, Ferguson, Fauci and a selected few TV doctors, **the scientists are all wrong.** You can tell that they're wrong because they insist on backing up each point they're making with evidence, a sign they're stuck in the Old Science. Anyone with the slightest grasp of the New Science knows that **competence is shown by quoting three-word slogans figures in isolation.** And, as if there was even a shred of doubt left as to who is right, the Bill and Melinda Gates Foundation wouldn't have [funded Witty to the tune of \\$46m and had him on the board of their CEPI project](#) if he wasn't an excellent scientist. Neither would the same foundation continue to fund Ferguson's team at Imperial College London if he, too, wasn't top notch. You see, it's only [all of his major work that makes him look bad](#), but **he's still a great guy.** Apart [from breaking the rules he helped enforce on others to cheat on his wife](#), of course (he wasn't the only one at the top of the Government to break the rules, they were all doing it). So yeah, apart from this totally understandable treachery of the British people and his embarrassing overcooked models for foot-and-mouth disease in 2001, BSE 2002, bird flu in 2005, swine flu in 2009 and now COVID, he's just swell.

This is why it's so important that we only listen to good guys. Not the bad guys. Certainly not bad guys like Dr Hoffe, the Canadian doctor who had the audacity to question The Science after he found that [62% of his patients developed blood clots after the mRNA jab](#). This is a doctor who is clearly so uptight that he actually runs tests on his patients to track their responses and **isn't even willing to take the risks with his patient's lives**, hiding behind absurd concepts like risk-reward ratio and the Hippocratic oath. Where's his cavalier spirit?

We need to be just as suspicious of Dr Robert Malone, who was a good guy until last week but is now definitely a bad guy. Malone thinks that **being the pioneer behind the mRNA vaccine technology somehow gives him some sort of understanding above the average man.** It's vital that we ignore him and his suggestions that [experiments of this size are unnecessary](#) when [trials show that existing medicines are safe, effective and cheap](#). If you start engaging with someone who thinks that these are desirable traits for a treatment, it won't take long before your ears are bleeding with nonsensical ideas like 'prevention being better than a cure', or that we should focus on supporting optimal immune function. Proponents of this madness are sure to use their usual tricks like **leaning on decades of science, human evolution and common sense.** Nauseating.

We must also be especially careful to ignore Dr Geert Van Der Bosch and his [warnings back in March that vaccination of this scale will drive mutations and more serious problems](#). People might think that, because he is one of the world's most imminent immunologists who has spent the last 20 years developing multiple vaccines with the major pharmaceuticals and is one of the most pro-vaccine researchers on the planet, that his warnings are worth listening to. This is especially true for those amongst us who are so flawed that, when presented with a coherent point, they feel the need to check this against real world evidence; **looking at evidence is a preposterous thing that only**

conspiracy theorists do. You can always spot a conspiracy theorist because they'll be the ones pointing out that, exactly in line with Van Den Bosch's predictions, vaccine rollout has been followed by a spike in cases (this has been nearly universal but most notable in the two most vaccinated countries on earth, [Israel](#) and [Seychelles](#)). They'll probably even quote the scientific papers (like [this](#), [this](#) and [this](#)) that show this treatment driving mutations then use this data to call for investigations into what is actually happening here. But the CDC and MHRA have been very clear on this; unless it can be 100% proven that vaccines are causing such problems or causing injuries/deaths, then **this must always be considered a coincidence.**

On the science

Speaking of coincidences, the fact we've had **more VAERS reports in the last few months than the whole of the last 21 years** is definitely a coincidence. So too the [appearance of 32,000 'unallocated' deaths](#) that coincides with the rollout of the treatment. **Nothing to see here.** The fact that these crazies can't just accept the long list of extreme coincidences is further proof of why **the public should leave the analysis to the BBC, mainstream media and influencers** (those that have [received £1.6bn of taxpayer money](#) to communicate the real message). If they don't, they'll soon go digging into the [official figures on Delta cases](#) and point out that vaccinated over-50s are over-represented in the case count, or that **the Delta variant has a CFR of only 0.1%**. Some particularly insane individuals seem to think that we should discuss the pre-censorship [Public Health England figures](#), simply because they show that **British hospitals were the emptiest they've ever been during the first wave**, or take notice of the [ONS figures](#) that show that **the majority of deaths in this time were unrelated to COVID** or consider the [BMJ analysis](#) that applied context to the mortality data. Putting data into context is a sure sign of a conspiracy theorists, and poisons people into concluding that the reason that the UK has such an explosion of cases and a below-average death count is because they are [doing more PCR testing than the rest of Europe combined](#) and using a CT threshold of 45 to do so. The truly deranged may even quote the [figures provided by Public Health Scotland](#) that show **more people dying following vaccination than from COVID**. But these sorts of facts can be especially misleading, which is why we should only listen to the trusted sources like the Guardian. Only they can be relied upon to provide a simple, truthful, entirely non-suspicious conclusion that, even though the official figures show **the majority of COVID deaths are in the double-jabbed**, that [this is good news and a sign that the jab is working](#). You can be sure that, when he comes out of self-isolation, Sajid Javid will say the same.

The conspiracy theorists make similar embarrassing errors when it comes to the evidence on lockdown, mistaking real-life data or that obtained from randomized controlled trials as superior to that estimated on spreadsheets by our heroic modellers. They point to the fact that the [WHO have now admitted that lockdowns were a total disaster](#) and how a long list of studies conclude that **the lockdown had negative effects on health**. However, what they don't realise is that the [31 studies that measured the effects of lockdown](#) were all wrong and that we should only pay attention to the one study that predicted it would be a good thing. Because this was right. **The fact it was authored by Professor Ferguson is just coincidence.** As outlined above, these screwballs don't seem to understand coincidence, and they definitely don't understand the central tenet of the New Science; that measurements of what is actually happening in the population is hugely flawed because of all

the messy real-life factors it involves. The only way we can avoid messy data is to stick to that cleanly produced by spreadsheet models, free from interference from the natural world and events that have actually happened. Anyone who doesn't understand that doesn't understand science.

This misunderstanding is also seen when it comes to asymptomatic spread and mask use. These loonies think that we should consider the results of [the only randomized controlled trial on mask use](#). However, the outcomes here were in direct contrast to what the lab models suggested and **that is why they must be ignored**. They also think that [a real-world study of 9.8 million people](#) is worthy of discussion because it showed that asymptomatic spread was not a concern (something that was also shown in a smaller, [CDC-funded follow-up](#)). However, we know that these conclusions must be wrong and that all 9.8 million immune systems acted in a rogue fashion because **the modelling says so** ([here](#)). The fact that [18% of the population had antibodies to Corona back in September 2019](#) – a full five months before the medical profession noticed – must also be discounted because **it would make the model wrong. And anyone who questions the model is wrong**. That's why we must resist the lure of the hippy philosophy that implies that people should be considered 'healthy' and allowed to go quietly about their lives, just because they show no sign of infection and are in otherwise excellent shape. It is clear that this is a dangerous way of thinking and that **there are really only two types of people; 'ill' and 'asymptomatic'**.

On protecting children

We also need to leave behind this old-fashioned idea of treating children as anything more than customers and sources of contagion. Listening to these traitors would make you think we're evacuating the Titanic. They put forward preposterous claims that, just because children are now [more likely to be admitted to hospital for mental breakdowns than for physical ailments](#) and are now [five times more likely to die of suicide/trauma than of COVID](#), that we should somehow rethink our approach to COVID. What they seem to forget is that COVID is way up there as the [24th most deadly disease out there right now](#). Of course, the nutjobs will try to spin this fact and how [flu is killing 3x more people and has been for months](#), but that's just what they do. Always trying to use the devilish tool of 'perspective'. This is why we must resist being seduced by their disarming words – **"proportionate response, bigger picture, not ruining children's lives for the sake of getting a profitable treatment to market"** – and let them know how committed we are defunding/removing treatment for the 23 more deadly diseases to fight our #24 scourge. And sure, the evil anti-vaxxers will tell you it's inhumane to traumatize a whole generation of children but that's only because they are confused about the concept of **'sacrificing a few for the good of the many'**. Of course, no-one is denying that this approach has always resulted in disaster before, but they forget that those were all bad causes. This is a good cause.

That's why we mustn't hesitate in jabbing our children or pay any attention to the Government acknowledging that [children are more likely to be struck by lightning than to die of COVID](#), or to the only available paper so far that says [21 children will die from the vaccine for every 10 saved](#). And why we should celebrate the [sacking of Professor Francis Christian of Saskatchewan University](#), and anyone else who dares sign a public letter asking for further discussion before experimenting on

children. And just because of the historical outcomes of using untested treatments on pregnant women, this is no reason not to jump in and jab them all. Because [a study of two and a half months](#) that is definitely long enough to determine that a treatment is safe in pregnancy; the fact that they failed to report the outcomes in the majority of those studies should not be seen as suspicious at all. **People that say otherwise don't understand science.** And we should definitely support [jail sentences for restaurant owners](#) that have the audacity to serve people that are not double-jabbed; this policy may have had no impact on any medical burden but it increased uptake, and isn't that the goal here?

On drug company motives

And, for the last time, can we please stop listening to these ideas that **the drug companies care more about profit than they do about the welfare of the public** and this crazy idea that, just because Johnson & Johnson have admitted liability for marketing unsafe products, doesn't mean that they should be treated with suspicion. Equally, just because Pfizer have paid out \$4.7bn in fines in recent years for repeatedly lying about their research doesn't mean that they'd ever do it again. The fact that they conducted secret safety research and then [hid the research that shows unfavourable results](#) (that the mRNA ends up in all kinds of organs) to get emergency approval should be ignored because, as the fact checkers make totally clear, [it doesn't matter that the claims are true because they are 'misleading'](#). Let that be the end of it. Ignore the [follow-up research that shows confirms this problem](#). Ignore the [reports of the problems](#) that the drug companies [said were 'impossible'](#).

And can we please stop using historical precedent for just a second. The idea that **'the best predictor of future outcomes is past outcomes' is outdated** and belongs to the Old Science. But these conspiracy theorists seem to think that, purely because every single emergency vaccine previously used ([polio in 1956](#), [swine flu in 1976](#) and [swine flu in 2009](#)) was shelved due to reports of disabilities, that we should somehow employ caution this time round. Or that, just because [all prior attempts to produce a coronavirus caused antibody-dependent enhancement](#), we should run **quick and simple tests to screen for this effect before injecting this into every arm on earth**. Totally bonkers. They also think that, just because none of the companies are confident enough to provide any guarantee of the safety of their products, that this is somehow cause for concern. What they don't understand is that, **when your product is this good, you don't need to offer guarantees**. They also don't understand that there's nothing suspicious in MPs voting to [enforce vaccination for public workers but exempting themselves](#) and we should resist their childish demands for a 'logical explanation'.

On using logic

Demanding logical explanation for every little removal of human rights is unhelpful in these unprecedented times and [should be considered domestic terrorism](#). This is important when these loonies bring up the fact that the stated aim of the Government is to provide this treatment to all in the hope it will produce protective antibodies, while denying equal rights to those who already have these antibodies and blocking any attempts to measure how many people are already protected via

natural exposure. Apparently, they see this as proof **that this isn't about protection from a virus**. They even do that annoying look-around-you thing where they ask you to look at the outcomes for every country that did not lock down (**Sweden, Belarus, Turkmenistan, Japan, South Korea, Taiwan and Singapore** plus, before their presidents unexpectedly all died and replaced with pro-COVID figures, **Tanzania, Burundi and Haiti** too). And when they fiendishly point out that **Florida, Texas and Maryland are real places** and benefitted from opening back up and moving on with their lives. In you find yourself wobbling in the face of such logic or unable to find the official rhetoric to dismiss it, please stay brave and remember this; it doesn't matter that there is no answer to this, because **their logic is terrorism and therefore should be ignored**. Plus, as long as we maintain the momentum for segregation, we'll never have to listen to their dangerous pleas for evidence and explanations.

And we're close to medical apartheid. We only need to ignore them for a little longer and we can then finally enjoy the utopia we all deserve; a world where only scientists that think the right things get to speak, where drug companies and politicians are free to go about their job of protecting us without having to ever justify or discuss their policies and we finally leave behind the living nightmare scenario of relying on our own immune systems to actually do what they've done for the last 2.7 billion years. Meanwhile:

- If someone questions the benefits of segregation, remember that **this is good segregation**
- If they point out that thousands of doctors are against these measures is a sign that the science is not 'settled', remind them that **all these doctors are wrong and the science is settled**
- If they ask why a death within 28 days of a COVID test is a 'COVID death' but a death within 28 days of a vaccine is a 'coincidence', let them know that **they don't understand how science works**
- If they call out the discrepancy between what the Government are saying and their own official figures, explain to them that **facts can be misleading**
- If they call your attention to the billions of taxpayer funds that Boris and Co have paid to newspapers and social media influencers to influence the coverage may actually do just that, **resist any temptation to do your own research or read independent journalism**
- If they propose that the Nuremburg code should not be scrapped, point out that **ethics are only necessary for people that would do bad experiments and that this is a good experiment**
- If they start harping on about historical precedents on the outcomes of prior coronavirus product, intentions of drug companies or the integrity of politicians, explain that **all the recent admissions are just one long list of isolated episodes**
- If they dwell on the fact that most people dying of COVID are double-jabbed, quickly point out that **this has already been officially explained as a good thing and a sign that the job is working**

- And, should they question why we are compromising the care offered for the top 23 deadly diseases and traumatizing our children in a bid to crush #24, mention the existence of Sweden and Florida etc, or ask any other questions for which there is no official response? Assume the emergency position **then point and shout “TERRORIST! TERRORIST!” at the top of your voice**

PERSPECTIVE B

Or we could all just stop trying to demonize ‘the other side’ for just a second?

And recognize that the majority of people who criticize the Government’s position are skeptical because of there are some clear discrepancies in the data plus obvious flaws in the narrative. And that **it’s a totally normal response** that, having been proved correct on a long list of issues, such individuals would feel frustrated with those who automatically dismiss their perspective as invalid. Perhaps also recognize that the majority of people who support the Government’s position do so for the simple reason that all the information they receive paints a very clear picture of the threat posed. And that **it’s also a totally normal response** that, having formed an opinion on what should be done to better protect their loved ones, they would feel frustrated with those who refuse to comply with recommendations.

It is a nature of law-making for large populations that, from time to time, issues will arise that place the desires or needs of one group in direct conflict with those of another. If we can learn anything from centuries of philosophy (from Rousseau’s social contracts to Locke’s concepts of natural rights, from Benthamism and ‘the greater good’ to the modern-day support for ‘my body, my choice’), it is that such issues are complex and **there can never such thing as the perfect way to resolve such tension**. Maybe the best we can do in these circumstances is to rise above score-settling and point-proving and instead engage with one another in an attempt to find the least unsavoury outcome for all?

Science as we know it is the product of 18th-century thinkers who ushered in the Age of Reason, aka the Enlightenment, and moved scientific thinking beyond dogma and superstition. Out went leeches as medical treatment, in and came systematic and verifiable methods of collecting and appraising data. Out went the prescription of heroin as a non-addictive substitute for morphine and in came the use of clinical trials to track patient responses. Throughout such development, the key has always been **subjecting new ideas to peer review, submitting results to falsification and using criticism as an opportunity to clarify and advance ideas**. Naturally, many people who resonate with the idea of evidence are dismayed by calls for censorship of researchers who offer alternative perspective. Maybe we can accept that, if some of us feel discomfort when our politicians shout out ‘follow the science’ while entirely abandoning all scientific process, that we can do better than name-calling?

Maybe we can even start by talking about what we can agree on? Starting with:

1. All research is conducted by humans and therefore subject to human errors, whether due to lack of knowledge, procedural oversights or personal bias. This is why all scientific

hypothesis are subjected to attempts to prove them right or wrong. **Anyone who claims that they have no need to prove their viewpoints because 'they already know they are right' is speaking from a position of faith, not science.**

2. 100% of all medical treatments that have reliable effects will, by definition, be capable of both positive and negative impacts in a complex biological system like the human body. Consequently, it is simply not feasible that this will be the first ever intervention with 100% bad outcomes or 100% good outcomes; like every other treatment that went before it, this is a numbers game. And no-one has the numbers yet, only inference. **Anyone who claims to know otherwise is naïve or biased.**
3. Accepting any conclusions on offer because they agree with our pre-held beliefs is a major obstacle in forming a fair opinion. It pays to applying skepticism when questioning on the views of both individuals without medical expertise and experts with a conflict of interest. Equally, that we talk to people with opposing views who, by definition, are in a better place to point out weaknesses of any particular hypothesis. **Anyone who claims otherwise is more interested in being right than improving their understanding.**
4. While we can speculate as to what should be made of self-reported data, the implications of raised d-dimer results, the relevance of the mRNA distribution trials (etc etc), we can all understand why some might be cautious about taking an experimental product from a company with a track record or lying about safety data at a time when VAERS data shows lists more reaction in recent months than the last 21 years combined. Regardless of how strong we think each case actually is, there are rational arguments that can be made for vaccination and but also rational arguments for caution. **Anyone who claims otherwise is engaging in identity politics.**
5. If both sects of the population are equally convinced that they are the only ones acting in the interests of the nation and that The Others are driving us off a societal cliff, then there has to be breakdown in communication here. 100% of conflict resolution in the workplace, relationships or elsewhere come via communication. So far state media have encouraged name-calling and called for reduced dialogue. **Anyone who claims that this is what we need to resolve the conflict has no interest in the peace.**

BOTTOM LINE

There are many perspectives out there, even if we only hear one. Will you form yours based on due scientific process, consideration of historical precedent and informed discussion? Or via state media?

The choice is yours. But none of us will get to choose the moment when our (future) grandchildren ask us, "what did you do in 2021?"