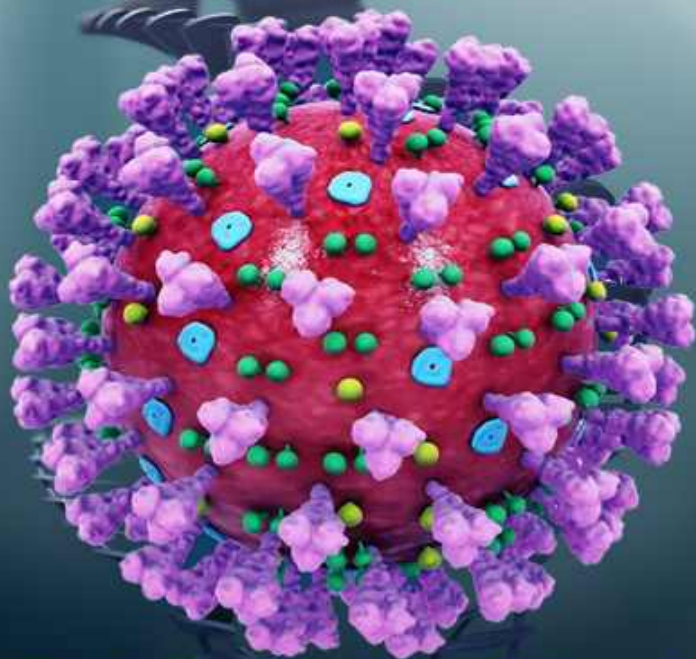


CORONA

TIPPING POINT & FUCKUP

Luc Sala



The Dutch Perspective and Situation

How the politicians, medical experts and the media created a smokescreen concerning risks, effectiveness of measures and how badly and stupidly they dealt with the crisis.

Corona, Tipping Point & Fuckup

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A perspective on the Dutch Corona/CoVID situation, how the government, the people and the parliament responded. What was done well and what went wrong, the fuckups. With some statistics, quotes, but mostly a critical view on what Corona did to the Netherlands.

Machine translated by DeepL from Dutch original so not perfect

For the print version in Dutch with all pictures;
www.lucsala.nl/coronaboek.pdf

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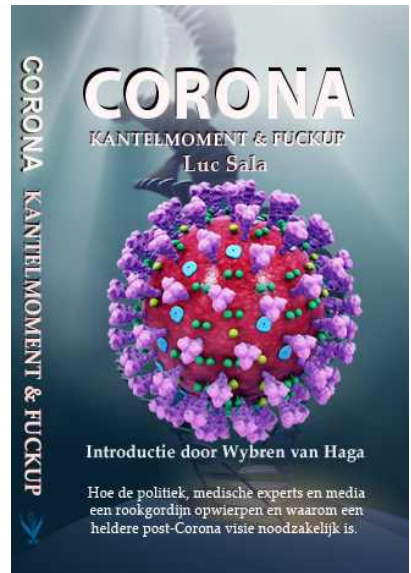
★ 1 Introduction

It has been a hell of a time and we are not out of it yet. Corona has been a beating, it was a cold shower, sobering. How could this happen, everything seemed to be well organized after all and then suddenly we had to live with profound limitations, sat isolated or quarantained at home wringing our hands, keeping our distance and wearing mouthguards/masks in the store, not allowed out at night, no restaurants, no bars.

Among baby-boomers (to which I belong) we sometimes talked about the fact that we had never known a real disaster, war or a massive setback. We were a happy and prosperous generation in that respect, we had nothing to complain about, except maybe about our health and that the environment and climate and inequality were not going both in our country and globally. But that perspective was to drastically change because of the Corona crisis, suddenly we were in a kind of war zone, with lockdown, fears and limitations and had to confront an initially uncontrollable virus.

It was not entirely unexpected. At the millennium solstice it already looked as if the twenty-first century would not be a peaceful time. There were threatening clouds. The previous century has brought us much beauty, comfort and news but it was clear that those developments in technology, economies of scale, population explosion and globalization posed a threat and had a price. Environment, climate, a growing gap between rich and poor, the scarcity of raw materials, diseases of affluence and bad lifestyle, debt and financial instability; the pain points were well known. The Internet bubble of excessive profit expectations and large-scale data and customer collection did burst in 2001 and the banking crisis struck in 2008. The big hit, so far, is the Corona virus in 2020. Although there were indications that a major pandemic was on the way, no one was really prepared for what happened.

An inherently troublesome and not innocuous flu virus outbreak in the city of Wuhan in China quickly became a pandemic. A global panic broke out in which the reactions of the medical profession and the government in particular actually made things worse. Many victims were helped or saved but the collateral



damage in human and socio-economic terms is enormous and still growing, we're not there yet!

My criticism of the handling of the Corona situation in the Netherlands is not far from what an independent report (dated May 11, 2021), commissioned by the WHO, concluded. "*The Covid pandemic was a preventable disaster that need not have cost millions of lives if the world had reacted more quickly*". The independent high-level panel, chaired by the former New Zealand prime minister Helen Clark and Ellen Johnson Sirleaf, a former president of Liberia, found "*weak links at every point in the chain*" which castigates global leaders and calls for major changes to bring it to an end and ensure it cannot happen again.

A personal view

Like everyone else, I have let it pass me by but with a lot of frustration, a lot of worry too. The whole development was for me an enlargement of my personal Corona story. Because although it wasn't obvious to me at the beginning, in 2018 I had contracted a precursor and kindred of Corona, namely the SARS virus at an international conference and it had affected my health quite badly. I then went to the doctor with it, who rightly observed that my lungs were not well and referred me. At the AMC, where I had previously been admitted because of a lung abscess, tests were carried out, photographs were taken and a scan made, but Corona was not yet in the picture at that time. When the symptoms persisted and there was edema (fluid in the legs and behind the lungs), I was examined again and pills were given as medication. It could also be my heart, maybe I had heart failure, so pills for that too.

Long Corona was not recognized at first

It didn't really get better, I remained tired, depressed from time to time, had no taste, retained a lot of fluids; I wasn't the same as I had been. I searched the internet and found out that I had the symptoms of the Post-SARS Syndrome. In Asia a lot was known about this, because SARS had raged there before. But here the family doctor and the lung specialists at the AMC knew nothing about it. They did not (yet) know about that syndrome, maybe I was just imagining things.

Even an organization like the Lung Fund (foundation) did not know about it, my posts on their public Corona Square site were quickly censored, because I would only scare people. Unjustified, because the unpleasant truth about the Post-SARS Syndrome is that in some cases it never goes away, the alveoli are irreversibly damaged. They didn't want to hear that, although there were many reactions from other patients at that Corona Square with similar complaints. I told them about my experiences and how I had been treated, but

the fact that I mentioned the name of the AMC professor was unforgivable and I was thrown out.

That was the situation until the summer of 2020, when the first stories began to emerge about what is now called Long Corona and was actually Post-SARS/ CoVid Syndrome. A good study (by Prof. Martijn Spruit of the CIRO) was done at that time. People tried to call it temporary and transitional but in the meantime it has become clear that it is not a disease of the past. By now it is clear that Long Corona makes some, including myself, semi-disabled and there is only some symptomatic relief to be achieved so far.

Why this book?

In the title I use the word fuckup, it attracts attention and indeed I think everything has gone wrong. That's what the first part of this book is about but that doesn't imply that good work and sensible decisions weren't made. A lot of people did more than their best, saved lives, and they also deserve more than a pat on the back. Time will tell if the Dutch approach has worked out well. For the time being we are not yet an international Corona approach champion (nr 10 or so) but we have to see how things go, in May 2021 things started to look better.

If we want to learn something, however, we need to take a critical look at the mistakes, take off our rose-tinted glasses and, in the second part, look ahead. What challenges lie ahead of us?

Why do I want to bring it all up again? Certainly because it helps me write off my frustration about how things went but also because too much was left unsaid, not enough was looked ahead, and it all remained fire-fighting. That's not new to me. I've always been a kind of media activist, had my own independent television station in Amsterdam (Kleurnet), was a columnist, journalist and organized a number of referendums. That was working on the front line, a lot of traveling, a lot of confrontations and demonstrations, a lot of local politics as well. Events like the death of a vagrant in Bureau Warmoesstraat in Amsterdam, the G8 demonstrations and police violence in Genoa in 2001 and the riots around the Euro summit in 1997 are still vividly in my memory. Police brutality, lying spokesmen like Klaas Wilting at the time, spinning politicians, conflicts of interest. I experienced it and reported on it on the tube or in the newspaper and publications. I have lifted many a tile, dug up many a mess in public administration and exposed it.

So when in 2020 the whole spectacle began to show the same traits of panicky reaction and deception, and certainly when in the spring of 2021 the demonstrations at Museumplein and Malieveld came into view, it was a trigger. I, like many others with me, could not ignore it, the Corona crisis was not just in hos-

pitals, it was everywhere. The newspapers, television, websites, blogs and vlogs, documentaries and the press conferences on Tuesday but also what was shared through social media, the information tsunami about this crisis could not escape anyone.

The rehashing of all this information and fake information in what I perceived as “reality” (see last chapter, certainly had to do with my personal frustration, with memories of my more active time as a journalist and cameraman. So added to that was how I ran up against the medical bastion and through listening to critical comments began to notice how they consistently fiddled with the information and the numbers.

Corona was obviously a disaster for many, it was all very limiting and serious,. That feeling was fed by doom and gloom news in the public media and announcements from on high. In my opinion, exaggerated measures were taken, but you didn't hear anyone talking about building up resistance and improving immunity. All these measures were announced by press conference, often quite suddenly and imposed from above. No discussion was possible, politics (the parliament) was sometimes allowed to put a stamp on it afterwards, but real doubt hardly had a chance. Those measures were necessary after all, it was emphasized, and we had to solve it „together“. The fact that citizens, primary health care providers and the rest of society were not consulted was not even noticed at first.

All this made me angry, also rebellious. Since I was already writing books on many subjects, such as rituals, identity and PTSD, also in connection with scientists from the USA like Prof. Stanley Krippner, I started to delve deeper into Corona. What was known and what was perhaps overlooked?

For example, I quickly found out, as early as February 2020, that in the veterinary world a prophylaxis (protection) against Corona flu in animals was being used based on a specific intestinal bacterium, the *Enterococcus faecium*. Why didn't anyone look at that as a remedy for humans? As a probiotic agent, a culture of it is easy to ingest and very cheap to make. It was already just available at the drugstore. But hardly anyone had noticed, even though many virologists have a veterinary background. I wrote articles about it on Academia.edu, a scientific platform that also features my books and other articles, but there were not many responses, despite the references to other publications. My postings about it on the Corona Square of the Lung Fund were of course immediately censored, only the „official“ approach would help, the rest was quackery and would only lead people to have strange thoughts and fears or even try alternative routes.

In the beginning there was not much censorship in social media and I could freely post, later it often had to be done with code words, otherwise the fact-checkers would become troublesome. I'll come back to it later in this book.

Gradually I ran into many more strange things. I could write another book about the misery of getting adequate support and care. The bureaucracy and the suspicious attitude pale into insignificance. And the information, the fuss about the figures, nothing was right, scientifically speaking it was and is a Swiss cheese. I was also angered by the erosion of human rights and the loss of constitutional guarantees. I spoke about this with Prof. Cees Hamelink, a professor in this field.

Quite a bit of what is in this book has been written and published before but I have updated it (up to May 10, 2021).

In order not to make things too confusing, I have refrained from citing a whole series of sources and references; for that I refer to my publications on the academia.edu website

The reason for publishing these writings together as a book now, at the beginning of May 2021, and for supplementing them into a consistent whole also has to do with political developments. Perhaps this book will make some people in The Hague think. I am therefore pleased with the support by Wybren van Haga MP, surely one of the most important Corona spokesmen in parliament.

Hope and trust

The reader may wonder why I expect a possible new beginning to emerge from such a critical stance. Because I hope that we will learn from the whole situation and come out of it better. This has to do with the idea that nothing happens by chance and that setbacks are often turning points, moments when a new path can be taken. In my life I have, with much pain and effort, finally understood that setbacks and illnesses are ultimately lessons. We can learn something from them, it is not fate or coincidence but comes to us as a challenge, an opportunity to change something. To allow that realization in dire situations is sometimes very difficult. This is my personal perspective, not rationally defensible but deeply felt and lived.

Can I now see the Corona crisis as a lesson and a warning to humanity that something needs to change? This sounds like a woolly wappie set-up but those who realize that we have been rather careless with the environment, resources and nature especially over the last century may be able to sympathize. It is time to reflect on what we have done to the earth (and ourselves), and then the Corona crisis is a powerful and uncomfortable warning but perhaps a beginning of a major change, a paradigm shift that goes far beyond a little less travel and

working from home. This book explores the contours of that shift, where we can learn from the past but above all look positively to the future.

I don't want to rehash the „official“ truth or defend it, I'm happy to leave that to others; this book is primarily a critical look at what happened. Not so much on the basis of what was said and speculated about in the media and especially on social media, but by placing one's own experiences and insights in a context. This results in a fairly personal opinion, in post-modern terms just a subjective vision but one that has been felt and held against the light of my „conscience“. That sounds very unscientific but as is becoming increasingly clear, that is how we humans come to an opinion and decisions. And decisions we had to make: do we go along with the lockdown, do we invite friends over or not, do we still touch our children and grandchildren, do we get vaccinated or do we believe in our resistance, do we force others to get vaccinated, mouth caps, hand washing, do we stop traveling unnecessarily and shopping alone? It's been quite a bit and it's not over yet.

This book is, in a way, a call: citizen, think for yourself, don't go along with whatever anyone forces on you but decide for yourself. Not just in the voting booth but every day, because we are the ones who drive the banks, the government, the medical world, the marketing experts, the social media platforms and the institutions and have or have not let them do their thing.

That is what I want to show in this book, and it may well turn out to be a little different from what you think or the experts think. It is here and there quite alternative and even a bit revolutionary. But it is only a personal opinion, perhaps not sufficiently well-founded or limited in depth, and maybe I will think



differently in a while. But no matter, it is also a call to share your own sound, your (gut) feelings and your experiences.

★ 2 The playing field; what is Corona anyway.

We are overloaded with so-called information about Corona, CoVid, Sars/CoVid or whatever it is called. In this book we stick to the name Corona, because tomorrow it will be called something else. A brief sketch of what this virus is and what it does.

It is a virus that manifests itself with symptoms reminiscent of the flu and has a specific shape, with protrusions resembling little crowns, hence the name Corona. There are also other Corona-like viruses, which have been known for much longer in animals, for example.

The virus that causes COVID-19 is spread primarily through fluid droplets released when an infected person coughs, sneezes or exhales. The droplets are too heavy to remain suspended in the air and quickly descend to the ground or other surfaces. Very small droplets (aerosols) do linger, requiring good ventilation.

The most common symptoms are fever, dry cough, fatigue. Less common symptoms are body aches, sore throat, diarrhea, conjunctivitis, headache, impaired sense of taste or smell, skin rash or discoloration of the fingers or toes.

Corona, the name keeps getting changed and went through COVID-19 to SARS/CoVid-2 but I'll just stick with Corona, reaches different people in different ways. Most people who get infected have mild to moderate symptoms and recover without needing to be hospitalized. There is a mortality rate, though, which is a bit higher than for „normal“ flu but not alarmingly higher.

The virus is highly contagious, can spread exponentially fast, the reproduction factor R indicates how fast this happens in a certain group (population). The virus spread from China to almost the entire world, travelling with infected people. The WHO (World Health Organization) quickly declared the Corona outbreak a pandemic. In many countries it went very fast, there was exponential growth of infections, millions of people became ill (in our country until May 2021 more than 1.5 million tested positive according to the RIVM) and in some countries like the U.S. or Brazil tens of millions of people and the mortality rate is considerably and much higher than in our country.

Treatment

Against a virus no medicines help, at best you can try to support the condition of a patient, administer oxygen, take care of the fluid balance, and counteract obstructions such as blockage of the lungs. If the Corona has already compro-

mised a patient's resistance to the point where other ailments become a threat, such as pneumonia, antibiotics can help. Sometimes artificial respiration of the lungs is necessary and lying on the stomach makes sense.

Steps have been made in treatment plans, though; the mortality rate has decreased significantly. For example, the emphasis is no longer so much on fighting pneumonia but on preventing blood clots (micro-clots) in the blood vessels of the lungs, which limit oxygen uptake. Blood thinners such as Aspirin and Heparin can help with this.

The whole problem of failing oxygen saturation (Oxygen Saturation) which caused people to die prematurely is in better focus. Normally it should be above 95%. If that drops below 70% things go wrong but with Corona you don't notice that quickly enough (happy hypoxia). Fortunately, that's pretty easy to measure with cheap oximeters. That oxygen problem, the hypoxia, is why many Corona patients died. Antiviral drugs like Favipiravir and Remdesivir have been used for that. The WHO advises against it, but it is worth a try. Colchicine, an anti-gout drug, is also prescribed.

Another symptom is Cytokine Storm, when the immune system overreacts. A steroid, Dexamethasone, an adrenal cortex hormone, was used for that, among other things, for Donald Trump but even that is not entirely certain, although the WHO is a bit more positive about it. The whole medical approach, how the virus works, multiplies, working with drugs or ventilation, I'll leave that further to the doctors and the medical literature.

The resistance to alternative prophylaxis and medicines

The lack of really good working medicines was of course threatening, especially in the beginning. And that did have another effect; people started looking for alternatives. All kinds of suggestions came, such as that Chloroquine and hydroxychloroquine, along with zinc and azithromycin could provide relief, provided it was administered soon after infection. But such messages were quickly addressed by the Health Care Inspectorate, the pharmacists' association KNMP and the general practitioners' association NHG, that this was not allowed and could not be done, was dangerous and forbidden. Rather exaggerated, those reactions. The anti-malarial drug and rheumatic medicine had been prescribed for a long time and side effects were minimal. Later there were reports that it would work anyway but indeed quite soon after infection.

The alternative circuit also came up with recommendations, certain supplements and vitamins would increase resilience. Not an unreasonable thought, some extra vitamin C, D3, K2, Omega 3, it can't do much harm and maybe it does help. The established order, however, was opposed to it, it was all

quackery, it was put on a par with magic potions from the jungle, life-threatening, only the advice of the WHO (World Health Organization) and the Dutch health authority RIVM mattered, and could the doctors follow.

One of the key points in the whole discussion is vaccination. Does it work, what does it cost, should it be mandatory, is it allowed or should there be indirect pressure, are we stuck with more and more vaccinations if the virus mutates, questions enough but real hard facts and certainty about the effects of the vaccines is actually not there. That may come, if broad vaccination really reduces infections but is further coercion still necessary?

I'll deal with this thorny issue first because it is so central to how the media, government and protesters think about it.

Vaccination; the holy grail

How it could have come to this is beyond me but from the beginning vaccination was the only strategy, which was propagated. Treatment, prevention, there were some protocols that were jealously adhered to but the vaccination flag was waved ever louder, that had to bring the solutions. So there was a rush, millions and billions were transferred to the developers, deals were made on numbers and there was little critical examination of the preconditions, how the test populations were composed, long-term effects, underlying disorders as a problem in vaccinations. And when there were finally vaccines at the end of 2020, people stumbled over each other to get the vaccination machinery going, forced vaccination was even introduced in a number of countries, and they just poked around. The double-blind control group of the manufacturers was also prodded, scientifically a mortal sin, but except for a few worried experts, nobody noticed, politicians were too busy showing off the vaccine feathers!

It has been suggested that this was all manipulated by the pharmaceutical industry (Big Pharma), after all, there would be large profits to be made and people like Gates would be behind this, but that sounded a bit exaggerated to me, because when more than 70 companies are trying to develop a vaccine, there is certainly competition and of course the first to have a working vaccine (which turned out to be Pfizer) would win the first prize, but that's just how the neo-liberal free market game is played. Big Pharma is trying to get away with a bit of tinkering and limited testing, no doubt manipulating the market, the medical professionals and the bodies that have to give approval (the head of the EMA was a lobbyist for the Pharmaceutical industry for this) but is that news? I often have to point out, that we as consumers are partly to blame, because it is our pension funds that put a lot of money into that pharmaceutical industry, because such huge profits can be made there. Have we protested

against this, as remote shareholders force our pension funds to exert influence?

Vaccination requirement, vaccination passport

Much has been written and said about vaccination, about its effect, its effectiveness, the arguments pro and contra. For the time being it remains an individual choice but also a divisive issue in society. You're for it and you stand in line, or you're against it and take to the streets, even in families this has become a tricky point, showing that you are against it does not always go down well.

Compulsory vaccination is a very sensitive issue here; our country is quite different from other countries in Europe and in Israel it has simply been implemented (with an exception for the Orthodox). They want a vaccination passport (certificate) in Europe.

The European Parliament agreed at the end of April to introduce an EU-wide, recognized and free EU COVID-19 certificate proving that the holder has been vaccinated against COVID-19, has recently tested negative for the coronavirus, or has recovered from COVID-19 and has sufficient antibodies. The proof should make free travel within Europe easier during coronation times,

Certainly the countries that have to live from tourism are therefore all for it. Note, this is not about a vaccination requirement, a negative test is sufficient and if the doctor says you have had Corona, then that's allowed too.

But here in the country it is difficult, the opponents of a direct or indirect vaccination requirement point to the constitution, the integrity of one's body, it is also religiously not so simple. The anti-vaxxers are against it because they don't trust it, want to wait for side effects to come, or just don't want it. A direct obligation is not politically feasible, but indirect pressure is, which quite a few parties are not averse to. All sorts of suggestions were made, employers and entrepreneurs were advised to think about such an obligation, the travel industry was also in favor of it, and in the health care and medical sector there seemed to be some support for an obligation.

Now that it appears that not 10% but perhaps 25% of the population do not want it, people are turning a blind eye. That's too big a group to ignore, as the protests and demonstrations have shown.

So the focus has shifted a bit to a test requirement. Not for everyone but if you want to participate, go to festivals, restaurants, events. That seems to be heading towards a whole test society, I'll come back to that later.

Arguments pro vaccination

For all the criticism of vaccination pressure, it might be good to realize, that macro-economically and socially, broad vaccination and thus reaching group immunity faster makes a lot of sense. You could say that with that, an advantage can be gained, which is so great, the individual risks cancel out against it. But that is the problem: we do not know exactly what the individual risks are, what side effects may occur in the short term or what may manifest itself later. There could be specific risk factors, underlying diseases or conditions, that make it more dangerous for a specific individual. The hassle of containing the groups with the Astra-Seneca vaccine did make it clear that the experts sometimes think differently. The whole testing process has been accelerated, the rush to come up with a vaccine has bypassed the normal, long term testing pathways for drugs, essentially the vaccines are still experimental.

In general there are valid reasons, why an individual does not want a vaccination, wondering if specific vaccination works on its own but what does it do to your overall immunity? Either one thinks not yet and first wants to wait and see how it all turns out, or fundamentally not, or there are religious reasons. One hesitates perhaps because one has had bad experiences with other vaccines, doubts about the long-term effects or because one just doesn't want it. This may be because one is not well informed, is a member or joins a certain group but it does not matter in principle, every person is entitled to their own opinion. The integrity of our body is, in the constitution and in treaties guaranteed, stepping over that because it is in the collective interest, requires quite a bit.

It is ultimately a trade-off, the individual interest and individual rights, or the common good. In a totalitarian state, the government can simply mandate vaccination but then has to count on perhaps very strong resistance and civil disobedience from the anti-vaxxers. Fanaticism lurks, people may lean toward resistance or outright violence.

★ 3 The initial reactions, the panic, the measures, the lockdowns

There was initial panic in February 2020, when the reports of the Corona virus arrived from China and the first victims arrived. The government woke up, the medical community was taken by surprise, and measures were proposed in haste and sometimes a bit ill-considered and quickly implemented, which were sometimes too little but sometimes too much.

Mistakes were made, holes fell in the shielding. Due to winter sports and later carnival, there were exponentially more patients. One had to do something and it didn't always go well. There was no treatment plan, no protocol, so one went

to work as usual with severe flu and pneumonia. Sometimes the wrong treatments were prescribed, they generously prescribed antibiotics and gave oxygen supplementation but real medicines were not (yet) available. Measures such as „intelligent“ and later more strict lockdowns were introduced and actually imposed without knowing exactly what the consequences would be. It is possible that unnecessary casualties and damage were caused as a result, but it was clearly a matter of trying and learning in the beginning.

The pressure on care

An Outbreak Management Team (OMT) was formed, a nice, fashionable name, but it could also have been called the Corona Disaster Consultation, and it primarily consisted of medical professionals, virologists, epidemiologists, scientific experts and hospital officials. The main point of attention for the OMT and the government has always been the pressure on healthcare. Too few beds, too few staff, not enough ventilation, the fear of code black with the terrifying „trriage“ concept. People wanted to avoid having to choose who would be treated and thus people would die because of it.

The emphasis on Corona, which in fact became a priority in hospitals and in the mental health services, naturally affected the availability of facilities for other conditions, operations and treatments. This was always brought up but rarely substantiated with rational and hard data, it sometimes felt like vote buying. Surely the medical community could decide for itself where its priorities lay, transferring all capacity to Corona seemed too much like panic. That mood not only affected hospital capacity for other treatments, the citizens themselves were less likely to go to the doctor and primary care was also less likely to deal with victims themselves, they were sent to the hospitals.

Lockdown, isolation, hand washing, 1.5-meter society

The idea came over from China, where they sometimes just locked citizens away. Isolate the infected citizens, make sure that infected persons cannot infect others, possibly isolate everyone and accept that the economy will come to a standstill. The television images from Wuhan were clear.

In our country, but also in the rest of the Western world, people did not know what to do at first and just copied what China apparently thought was sensible. At first still limited measures but gradually more and more restrictions and that for this all kinds of civil rights had to be put on hold for a while, was overlooked; the urgency was clear after all.

The doctors were the advocates of the restrictions. They mainly feared overcrowding in their facilities and saw that very unpleasant choices could be made, namely who to treat and who not to. Such choices are not new by the way, for certain treatments and drugs or organ transplants one has to make

such choices but now that fearful possibility of „black triage“ was being played up a lot. But wasn't that a bit for show, especially with the second and third waves?

The capacity in terms of beds was limited but that did not come out of the blue. Years of cuts by also the Rutte cabinets had had consequences, in numbers of beds and Intensive care facilities. And when, after the first wave, investments logically had to be made in more beds and in training ICU staff, this was apparently not done, with panic when the number of cases threatened to go wrong again. Crocodile tears, self-serving reasons brushed aside by hospital managements who saw their fully staffed locations running smoothly and therefore did not want to invest in new capacity at all. There should be a retrospective count, how much did the medical specialists, partnerships, etc. earn in 2020 and 2021, which hospital reserves were built up or destroyed, how many profits from Corona (or losses) were stashed away?

But then shouldn't the government (and OMT) have noted that after or even during the first wave and did provide capacity and flexibility? Not wait until it was too late again and then panic, dramatically pointing out how „normal“ patients“ could not be helped. Perhaps place more responsibility on primary care. Only recently were GPs allowed to start prescribing oxygen, something that is not at all invasive and can be done with relatively cheap equipment. I have had an oxygen thing next to my bed for some time now, paid for privately, costing 500 euros second-hand and it really helps me with my „Long Corona“ complaints. But my health care provider doesn't want to know about it, it's not in the protocol!

So we're left with lopsided growth, deferred investment in healthcare, skimping on the pay of the medical staff (what you might call the foot soldiers, the people who fought the pandemic with tremendous effort and love on the job).

There is some blame to be placed on the government and the medical establishment, such as that they consulted too limited a group. The Outbreak Management Team was full of medics, epidemiologists, virologists but common sense and thinking about the social consequences of isolation and lockdown was a bit lacking. Later the government consulted the planning agencies and the Dutch Bank but critical people were never even invited to the turret, they sought and found alternative media for their story. The middle class, the entrepreneurs, the economists but also psychologists and social scientists could have contributed a lot to a more balanced policy, could have provided more support for the measures but they did not get a hearing.

Occasional legislation

Our country has emergency laws, dating back to the German period, which are intended to enable measures to be taken that are truly urgent. Initially they were rightly invoked; something had to be done quickly. But gradually measures were taken which were not so urgent at all, which could best be examined first by parliament, with the consultation of those involved and, for example, the legal experts, the Council of State, etc. The legal basis was weak and was constantly being reinforced. The legal basis was weak and getting weaker, so opportunity laws had to be made, which were then called (temporary) Emergency Laws and which the parliament approved in October 2020. That's how it was with the later adaptations, the first version rattled quite a bit. Legally and in terms of basic rights it was all rather vague and there was a storm of protest but the parliament obediently voted it down with some minor adjustments. The same thing happened with the test law. Necessity breaks law and the end justifies the means; that's how dictators always exercise their power!

Lockdowns

It was a kind of roller coaster, all those measures, sometimes some easing but usually even more, even more restrictive, lock you up, work at home, no guests, mouth caps, the one and a half meter society, curfew, etc. It was all imposed by decree and without participation or made so onerous that you could not escape it. The fact that administrative means of coercion, if there is no real hurry, may not be introduced without clear justification and also with normal introduction periods and publication, no longer counted. There was another court ruling on that, which was defused with a new opportunity law, a modified version of the Emergency Law. The press conference also became the public announcement. How about Staatscourant, announcements in paper media, Rutte and de Jonge spoke and their word was suddenly law. And if it was not, a law was pushed through the House.

There were protests, sometimes violent, looting, and that may have been about incidents and troublemakers, but it also divided public opinion; there were supporters and opponents of the measures, a separation of minds that sometimes turned out very badly. The atmosphere got spoiled, anyone who shopped without a mouth mask, sometimes for very good reasons, was called names, you were a traitor, terrorist, antisocial. The government didn't do much about it, consistently labeling demonstrators as troublemakers, arresting them at random, censoring them, and creating files of opponents, secretly and illegally, but the end justifies the means.

Quarantine

Isolating yourself, if you are infected or think you are infected, or have even been in contact with infected people is good advice in itself. However, it has enormous consequences, for example for those who depend on an income that revolves around turning in hours. Then quarantine is an economic punishment. There was urgent advice though and because of the new mutations, quarantine in inbreeders is an issue but it is not easy to arrange and if you make it mandatory, who has to pay for it?

Corona detector app

Contamination risk, contact investigation, in the beginning it was thought that by detecting sources of contamination and superspreaders (people and events) the pademy could be somewhat limited. There had to be an app for that as well, using your smartphone to report who was infected and being able to stay away from infected people. The question is, of course, who is allowed and able to use that kind of data. It was a nice idea but it worked only to a limited extent and it faltered quite often, for example when privacy was at stake and the app went off the air for a few days. By April 27, 4,810,591 people had downloaded the app but it is not widely used. So nice intention, not really effective like so many measures.

Also the CoronaCheck app, with which one could prove that one has been tested or vaccinated, does not seem to be a great success, the underlying files are not complete and covert.

Support measures

The economic impact of the measures could of course not be denied. Entrepreneurs, self-employed workers and companies went under or got into difficulties. The government had to step in and provided a series of support measures, such as TOZO benefits. Of course it did not go very smoothly, as usual things went wrong, there was no proper administration, people just did something. This caused irritation, large companies sometimes received enormous support while they worked off their profits to foreign countries. There were also groups that fell just outside the support measures, such as the sex workers, who could have received a separate VOZO regulation.

BOAs (special police force)

Most people had never heard of special investigating officers. We did know that uniformed municipal enforcers often included parking attendants, gamekeepers, environmental inspectors, school attendance officers and social investigators, but BOAs were a surprise. These Special Investigating Officers (BOA) de-

tect certain criminal offences and thus complement the police in maintaining public order and safety. BOAs are allowed to search people or use certain means of violence, such as handcuffs, truncheon, pepper spray or even firearms, although that was not an issue at the Corona enforcement. They have official investigative powers related to their function but they are always limited to one particular area of operation. They were increasingly used to enforce the Corona measures and could issue fines. They did that, and they often did not act too tactically, were also not trained as law enforcement officers. They were used by stores to check the wearing of the mouth masks but after all sorts of fights it soon became practice to quickly call in the police in case of problems. Especially those who didn't like all those restrictive measures liked to paint the BOAs as little power-hungry people, and that image was hard to shake. The information provided to the public and law enforcement officers was also so confused, for example, it was not clear who had exemption from the carrying requirement, that conflicts easily arose, which then quickly appeared as videos on the Internet. There has even been talk of prohibiting the filming of law enforcement; in France a bill to that effect led to widespread protests and was withdrawn. So being a police officer was no picnic, especially if you didn't entirely agree with the approach to fines, for example.

Demonstrating and protesting

The people who disagreed with the measures, and there were quite a few of them, maybe 15 percent in the beginning, but later more, sometimes took to the streets. Peaceful protest was the goal, people gathered in squares and places that had traditionally been used for such demonstrations. But now this was no longer possible, because there was a danger of contamination and the mayor prohibited meetings altogether or demanded such restrictions that in fact the right to demonstrate lost its substance. But there was no stopping it, the local government came up with bans, the police and the Mobile Unit (ME) were deployed, and things went off the rails. The media at first dismissed it as just some wackos and troublemakers wanting to kick up a fuss, but the protests became more widespread.

The police action hardened, there was beating, water cannons and dogs were used, it became really serious. After the images about the violence also reached the general public, it really became an issue. Why were such heavy resources used against what were in themselves peaceful protesters, why were people beaten, arrested, sprayed with very cold water in what was about health?

The images of what happened on the Malieveld in the Hague at a mass-demonstration, the totalitarian aura of the police, it caused a lot of harm. The

beating, the clubbing, the flattening, the deliberate biting of dogs, the warning shots in a large crowd, all of that was a justifiable defense against threatening troublemakers, wasn't it? Complaints were to no avail, about what happened in terms of excessive violence on the Malieveld, Museumplein and elsewhere and was well recorded on photo and video; we hear nothing more about it. Logically, political complaints are dealt with internally; nothing ever comes of it. I remember this from my time as a cameraman and city journalist, the cover-up is good for it, perjured statements by officials are completely standard, I have folders full of such cases. And the top of the police are just as guilty of it, our law and order apparatus is racist, dishonest and in a way corrupt but that is, especially in Amsterdam, since the occupation.

Roadmap

The government came up with a roadmap, which would bring clarity. Risk levels were indicated with limit values and that determined the measures. As usual, which turned out not to be very well thought out, the map had to be adjusted again in no time. For each risk level, the roadmap shows the measures that apply, for example, to home visits, work, weddings, funerals and cremations. But also for the hospitality industry, education, childcare and contact professions.

The roadmap contains 4 risk levels but in practice we quickly ended up at risk level 4 (very serious), the most serious level.

Polling Behavior & Attitude

It is one thing to prescribe measures, but are they also complied with? You can send in police officers, but ultimately it's about whether people follow the instructions and suggestions of their own accord. The Municipal Health Service looked into it and the Corona Behavioral Unit of the RIVM (the Government Office for Health) set out to gauge this, using surveys that showed the same self-affirming tendency and were drawn from a voluntarily participating and internet-savvy population that was already positive about the policy. The wappies (as they are now called) don't participate in those kinds of surveys. The RIVM did obediently share the results of a behavioral test, now already in its sixth edition, One assumed different scenarios, the latest listing (April 2021) included questions about:

- Continuation (possibly in an adapted form) or dropping of the curfew
- Continuation of current package of measures, with possible options:
- Relaxing home visit advice
- Group formation more flexible
- (Partially) physical education at colleges, HB (Vocational) and WO (university)

- Opening of stores and markets
- Opening of outdoor catering establishments (terraces)
- Opening up after-school care (BSO)
- Relaxations with regard to outdoor activities, such as outdoor sports, animal parks, outdoor museums, outdoor playgrounds, etc.
- Increase the number of people at funerals (now max. 50)
- Increase the number of people at weddings (now max. 30)
- Increase max. number of people per room (for locations that are open)
- Extend negative travel advice and extend/ lift no-fly zones
- Allow theory exams for car, motorcycle, moped and recreational boating for individuals.

It sounds like a broad poll but ignores what was really alive, the anger at the police action, leaving loved ones and family to die alone, surely there is issue about support there too? A few notable things are missing, such as questions about the test society, self-testing, vaccination experiences (vaccination readiness is measured elsewhere and indicates that first 10% and now plm 25% of the Dutch do not want it, that has increased considerably). The results of the behavioral survey are not surprising, for example, confidence in policy has been declining for quite some time, as has the perception of fair policy. It is interesting that the RIVM admits that there is still little evidence available on the relationship between the phasing out of measures and the consequences for compliance and support. It admits that the data do not provide a clear-cut answer and that expert opinions and consensus (by whom) are therefore included.

Did it all work?

Gradually more insight was gained, but things like the fact that infection in the open air was less likely, because cross-transmission mainly occurred via exhaled droplets and aerosols, was still a bridge too far. Maurice de Hond had to go to a lot of trouble to make that clear, perhaps not very tactically and a bit too commercially, but he did have a point.

Behavioral poll

It also makes sense in retrospect. Meeting in confined spaces with poor ventilation is far more dangerous than meeting outside. The social-psychological consequences of the lockdown and compulsory sitting at home were also underestimated. People become unhappy, depressed and therefore more susceptible to infections. The isolation of the elderly and high-risk groups could be more humane; visiting restrictions were experienced as inhumane, espe-

cially in institutions, homes for the elderly and nursing homes, which residents and their families found very difficult. The fact that people had to die alone, without their loved ones and that these rules were also strictly enforced caused a lot of bad blood.

A public crisis and collective bewilderment

The majority of the population, of course, went along with the reporting and the advice from the RIVM (National Institute for Public Health and the Environment), the hospitals and the OMT, with Rutte as the trendsetter and great leader, who tried to reassure everyone. He came across as very sympathetic, that's his talent, he warned, threatened, pulled the reins further and further but did so in a convincing manner. It's just a pity that afterwards we did realize that much of the talk was nothing more than that, not supported by a broad orientation but the opinion of a small group of medical specialists, who could swell their ego in the talk shows, interviews and in all kinds of media events.

There was clearly a propaganda offensive, an almost hypnotic influence on public opinion. Perhaps this was also because Donald Trump was so nonsensically out of line in the USA, sending out weird tweets and being portrayed in the media here as a half-witted and narcissistic egomaniac. Then Rutte was a good chest after all, much more credible! And he was supported, the polls indicated that he was doing well, a further victory lap and future Rutte cabinets were a certainty. Even after the Omtzigt misery he managed, after the cooling off period of Tjeenk Willink, to get back into the picture. Rutte IV is more than an option!

Of course there was an underlying fear, Corona was no game, you could die from it, become seriously ill and something had to be done about it. There was a need for a strong leader, that is quite logical in such situations, and the „chief“ would take care of it.

Criticism was out of the question, you were an apostate, everyone had to stand behind the man who would save us, that we were simply „scraped“, made into yes-men, obedient followers who believe in what is being preached to them. What emerged is called, with a difficult word, collective resonance, all thinking more or less the same.

Resonance

It is called lemming behavior. It is also not new, hooligans in a soccer stadium, the cheering crowd at political manifestations, the group feeling at demonstrations, there appears to be something like a group feeling, a „group mind“. Attunement then occurs, people give up their own opinions and follow the flag, it is a kind of collective hypnosis, a resonance phenomenon. Vibrations, in

which and from which also, can be brought to the same frequency by their sources if they are very close to each other. This is called attunement, just as in a choir the singers attune themselves to the conductor's tuning fork. Precisely tuned frequencies powerfully reinforce each other and no more energy is lost through interference („false singing“). Resonance or in an extreme case oscillation does not only occur in music, it is the basis of many technological systems. On a radio, you can receive a station if you set the tuning knob exactly to the transmitter's broadcast frequency. Just like with Wifi, GSM, the waves of the sea, the engines of an airplane.

Collective resonance in itself is not negative, having fun together, cheering at a stadium, praying together at church, it often has very positive effects. But science and the government usually found it frightening, because it is difficult to control, they quickly thought of revolutions, riots.

You find it in many expressions in daily life and also in nature: the mood at a party or festival, a swarm of starlings, fish schools, an anthill, traffic on a highway and many other situations.

It can take different forms, cause emotions and evoke feelings, associations, it emerges from deeper layers of our consciousness, Carl Jung called it the collective unconscious. It does tend to manifest or become more conscious as something we already know, as archetypes or as behavior that falls into the realm of fight, flight, freeze. So the same impulse can manifest differently.

Fight, run, freeze

This can become clear when we look at the Corona crisis. It seems like people reacted very differently to a threat but apparently they do according to that division into fighting (the conspiracy stories, the anti-vaxxers), running away (I don't want to know, I'll join the majority) and those who stiffen with fear.

We dutifully look for security and safety outside ourselves, like to blame others and above all avoid looking for ourselves, whether we eat healthy, exercise enough, maintain good contacts with our network.

The fuckups

It's a bit of a nasty word and you can also call it stupid mistakes or an unfortunate coincidence but what went wrong was a lot. To begin with, we forgot about the homes for the elderly and institutions, which resulted in unnecessary victims. The computers of the RIVM and GGD broke down at the drop of a hat, files with sensitive data were out on the street, connections to DigID didn't work, appointment sites went down, services couldn't cope with the rush. When the first vaccines arrived, they could only be delivered to massive injection points, because there were too many per package for small institutions and there was no cooling capacity, so they just used refrigerated trucks

from croquette transporters. Many mistakes made it to the media, but undoubtedly many did not, and a lot of civil servants must have been very embarrassed.

Are the executive departments of the government really capable? Shouldn't they be looked at more carefully? In business you get rid of incapable civil servants, but in the civil service and in politics you can just keep on messing around. A man like Wiebes already had a history as an alderman in Amsterdam but was allowed to try a few more times in The Hague, with not much better results.

You can laugh about it, according to the Volkskrant the Ministry of Health (VWS) really blundered enormously. Somewhere, purchased against the advice of professional buyer, more than 2000 million mouth caps/masks are in store, that's 140 euro for every Dutchman who can walk. And probably no medical mouth caps but tinkery things that you can't use. They spent 2000 million and there are warehouses full of protective equipment, only 15% has been delivered. Costs 2000 million, so 300 euros per household, cash register!

All very nice and good for a parliamentary inquiry session but shouldn't there be a tribunal?

★ 4 First, second and third wave, forever Corona crisis and then?

After the first reports and stories about the major outbreak in China, things moved quickly. For a while it didn't seem too bad and people weren't too worried, winter sports and Carnival were more important, who knew that hanging out in the pub would cause such exponential growth of that strange Chinese flu. The experts did warn, but the virus actually got around quite unchallenged.

However, when estimates were made of the probability of death, which were at first considerably exaggerated, people were shocked, this was no ordinary flu, a lot of people could die from this.

Measures were taken, but what we now call the first wave continued considerably. More in certain provinces but the measures had to apply to the whole country, it was decided. Restrictions, in steps to an „intelligent“ lockdown and the numbers remained frightening, there wasn't that much testing in our country in the beginning either, it was gambling and hoping. Especially the concern, that the hospitals would not be able to handle it, played a role in the reporting and with the people who had to decide. Those hospitals were filling up, the Intensive Care unit (ICU) was the place where the heavy cases were ventilated, for weeks on end and in a coma but the capacity was limited. Solutions were sought and thought of, extra beds were arranged, emergency ICUs, intake tents

at hospitals and emergency facilities, people did their best and the capacity eventually turned out to be sufficient. Good work, then.

After the first wave, the emphasis shifted slightly, the limits were adjusted but the fear of the hospitals filling up remained in the air. The fact that in the first wave a lot more capacity was found and installed, which later in the second and third wave was no longer there, remains a strange thing. Surely investment in beds and staff would have been a logical step?

The figures on Corona are a quagmire, in our country but also worldwide. For how do you count infections, on the basis of which tests (the PCR test approach has been widely criticized) and by which authorities, how do you distinguish between someone with a heart attack who is carried into hospital and then also tests positive for Corona and someone who got heart problems because of the Corona? People counted and added, populations and definitions were juggled, results were reversed, some institutions gave different figures than others, the information officers selected the graphs and figures to be published, there was censorship if you doubted the „official“ figures, but basically it was a mess. A good analysis of the available figures was very difficult, you could look at it positively or negatively, the prevailing trend was mainly to inflate the threat, good news would only make people careless in following the measures.

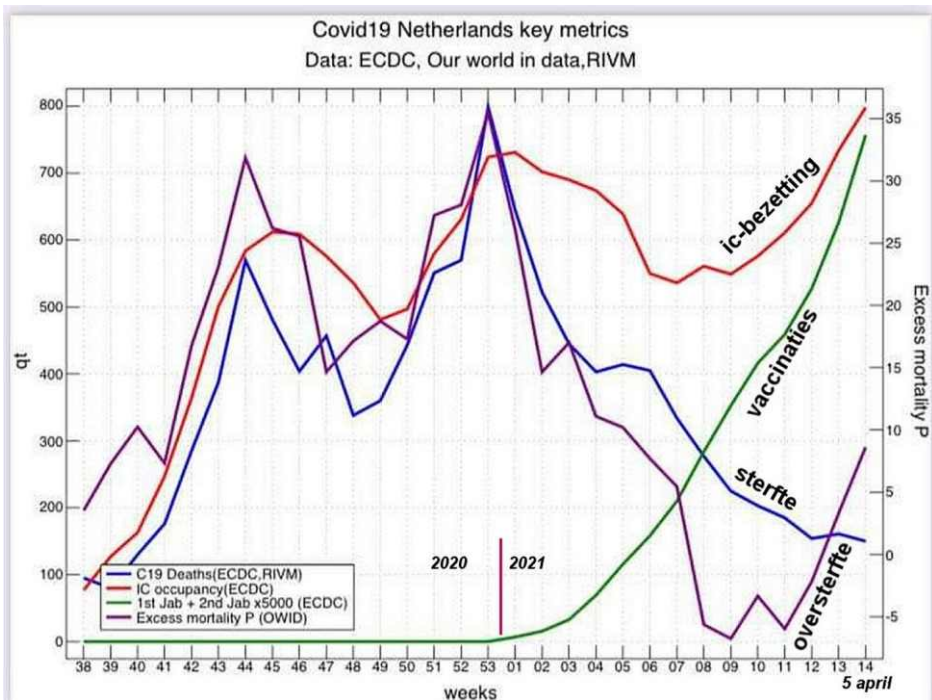
Expertise rules

There were interests at play, perverse interests even, because the independence of the experts was not always clear, people had an interest in certain outcomes but this was just as easily denied. The great story of an OMT member who had set up a nice test facility with some colleagues and scored 30 million in test revenues, but who later obediently said that he would not grant himself a higher salary than the year before, is a joke. You don't have to pay out a profit of 30 million, but you can't obscure it either and it stays on the balance sheet and will really be paid out at some point. Or Ab Osterhaus, the veterinarian who promoted himself to top media spokesperson but who had a pretty dubious past in the virus business with major failures. He cashed in a very hefty capital gain on investments in a pharma company but got away with the story that he would put that profit into his German research lab.

There was, and this did not escape the ordinary citizen, an atmosphere in which the medics and the politicians who had their ears to the ground manipulated the matter considerably. The anger over Rutte's lies was not just about Omtzigt and power-against-power, a lot of people had long since stopped believing in the „press conferences“ of the two Corona actors. The cartoons were clear, Pinokkio, the teflon man. Only it had to take until the embarrassing situation around Omtzigt before Rutte c.s. really fell off their chairs.

In the beginning, Corona seemed to be a tricky disease, with occasional fatalities but that was mainly in people who had underlying diseases (comorbidity, chronic conditions) and in general vulnerable groups like the elderly. For the rest it was not too bad, after the first worrying mortality figures the number of victims turned out to be limited, especially compared to previous flu years such as 2018. The RIVM is now continuing its count and is talking about more than

17,000 victims but that is about two years. That would me



an, until May 2021, a mortality risk of 0.1%, one per thousand, for the entire population. If you set the mortality against the number of people (1.5 million, probably more) who tested positive and thus had Corona, the mortality risk comes out to around 1%.

Mortality rates

According to CBS (National Bureau of Statistics), during the first wave of the Corona epidemic, a total of 10 067 residents of the Netherlands died with established or suspected COVID-19 as the cause of death. There was a higher but not abnormal (there is unfortunately a health gap between rich and poor) mortality risk for residents from the lower income groups not receiving care (home or in-

stitutional) and there are also clear differences in mortality risk by migration background.

The mortality rate in confirmed Corona patients worldwide varies between 0.06% and 12.2% (in the epicenter, Wuhan). That mortality rate is highly variable because it depends on the method of calculation used, the availability of medical care, and the sometimes very different guidelines for testing for the disease. That mortality is certainly not negligible and in some countries dramatic as in the U.S. and Brazil but not comparable to what Ebola and AIDS, for example, were at risk in the beginning.

One can further discuss the exact number of people who became infected and whether the figures of the RIVM or GGD were correct but it is clear that in our country we are talking about a few hundred thousand people. There was a first wave, which hit hard, but when the number of infections dropped towards the summer of 2020, the reins were loosened somewhat. It was nice that people could go out more, stores and restaurants could operate a bit but it soon became clear that the relaxation had been a bit too premature. I will come back to the statistics and the presentation of the figures.

The second wave; predictable effect of lockdown

Corona returned after the first wave with probably more infections and cases of disease in total. And with even more disruption, because the infections now became much more general and individual cases could no longer be traced, the Corona app proved obsolete in that respect. But wasn't that to be expected? If you assume a model with broad pre-corona immunity among the population then the whole lock-down thing was the prelude to this second wave and a new lock-down will also lead to a third wave and even fourth wave, if we don't start to understand how it all comes about and before that look at what mixing more immune people with less immune people brings about in terms of extinction (herd immunity) and R-factor.

It is a mixing phenomenon. It's all about immunity. Everyone is somewhat immune (natural immunity or acquired in previous flu) but only a portion of us are immune enough (already due to old antigens in our system, genetic immunity, good fitness or by going through the disease) to rise above the extinction threshold. If we start (Feb/March 2020) with a population close to but still clearly below the extinction threshold (whether it is 75% or 80% doesn't matter much) and thus the R (the RIVM figure about reproduction) is above 1, a rapid exponential contagion will occur.

Panic among the authorities, the RIVM and a crisis team get to work and there soon seems to be a solution; we go to a lockdown, restaurants and schools closed, work at home and isolate risk groups and all wash hands and

1.5 meters distance. It was called intelligent, was a bit more moderate than elsewhere but still chopped it down considerably. The economic and social consequences are clear by now, chaos, misery, loneliness, depression but the outbreak seems to have stopped. That makes sense, because the still active population (those who still work and have contact with others) already had a higher resistance than the risk groups and the R (reproduction factor, how many people infected one) drops below 1, extinction seems to continue. And those few percent who had Corona also help the resistance of the active group a bit.

Then the easing came, the active population got bigger, people from the weaker groups with low immunity came into the picture and the overall average resistance (immunity) dropped again, ergo the second wave kicked in, even exponentially. With more people potentially infected, a broader group with more vulnerable people exposed, so that second wave could also hit hard and has defined the picture until March 2021. So the segregation through the first lockdown and the segregation after the relaxation summer 2020 has been a logical breeding ground for the second wave, which could have been expected therefore, something that RIVM and OMT denied. It is process technology that provides the explanation here, mixing and stirring of virus carriers.

The second wave came, peaked, dipped for a while, swelled again and no one really knew a solution, except for another half and later increasingly strict lockdown with even more dramatic consequences for the economy and psychosocial well-being. The government also put money into the vaccination set-up of certain firms and support measures and testing facilities were established.

Third wave, British variant

The second wave eventually turned out to be very intense, as happened in 2018 with the Spanish flu, and the third wave, which gained some momentum due to the new (British) mutation, is also recognizable. But it has more to do with an almost generalized infection (almost everyone has been in contact with virus particles) and initially symptoms of illness mainly emerged in those who have too little resistance or underlying diseases (comorbidity). In the spring of 2021, it appeared that especially more young people and 30-50 year olds were infected and had to be hospitalized, who were much less likely to have underlying disease, a disturbing trend and a burden on hospitals.

A vaccine certainly makes sense for those with low immunity and risk groups, for others it is in a way unnecessary and questionable because a specific vaccine reduces general immunity and thus gives other diseases more chance and there is also a chance of still unknown long-term side effects, although the experts say that is out of the question.

The long-term solution to prevent or mitigate further waves, besides a vaccine, is to look mainly at how resilience (immunity) can be improved, who is a priori susceptible based on bio-markers and developing a strategy to keep people healthy. The alternative methods like with hydroxychloroquine, vitamins (D3 and K2), probiotics and whatever else have been tried with sometimes good and also confirmed results but it still can't be done, it doesn't work according to the authorities.

In the long run, we should instead look at how to promote immunity on a broader scale and try to find bio-markers that indicate low immunity. So not testing for Corona but for Corona susceptibility. That requires research, also among non-infected people, with a broad data analysis, also looking at gut flora, blood type, eating patterns, exercise patterns, antibiotic history, etc. etc.

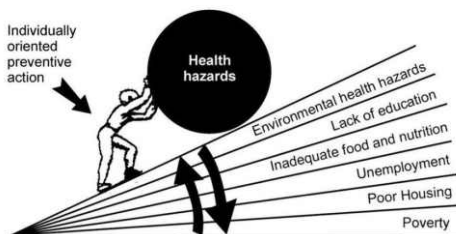
Furthermore, like our muscles and overall health status, our immune system requires maintenance. That is, the system must be activated regularly, so that it remains in a state of readiness, so to speak. It is now well known that children who you keep completely out of any infection or contamination do not build up a healthy immunity. By washing our hands excessively and avoiding any infection whatsoever, our immunity falls asleep, becomes less alert. This in turn means that e.g. Corona but also other diseases have more chance. That is also the problem with vaccination, you partially shut down your immunity system and thus become more susceptible to diseases that have nothing to do with the vaccine.

So self-isolation and hand washing, quarantine etc. are choices you can make to reduce the chance of infection but there is also criticism. Being careful, especially for high-risk groups, is of course quite sensible but the individual micro-interest and the macro-interest (i.e. the immunity on a national scale, which is therefore helped by broad vaccination) do not always run parallel. In this respect, the slogan that you get vaccinated for the benefit of others is correct.

Health gap between rich and poor

It has become much clearer that people with lower incomes and lower education are much more at risk and have twice the chance of contracting Corona. That there was such a thing as a health gap (and an income/wealth gap like Piketty showed) was well known but now it has

The Health Gradient



Source: adapted from Making Partners: intersectoral action for health.

become painfully real. Politicians are shocked, the differences in society have very nasty consequences, if you are poor you get sick faster and your life is much shorter.

There is probably also a whole range of factors, but things like happiness, vitality, knowing where you stand and not feeling inferior also depend on your income and position. It's not easy to do something about it; to pay everyone the same wages tomorrow and offer the same care doesn't completely solve the differences between people.

But it is clear that the divide in society, between rich and poor, must be addressed. That the Corona crisis has exacerbated the differences is worrying.

The lesson is clear. Society needs to change in many ways, and the entire health care system (and social care) is certainly a starting point.

So in the long run, also in view of new pandemics, we need to look much more closely at what health and immunity is, not symptomatically but structurally and (re-)educate people to live, eat, etc. in a healthy and resilient way. Work to do but look beyond the fear reaction of today!

★ **5 The political snake pit: digging in, kingdoms, keeping criticism out**

In the Corona crisis, the government always held the reins, ruling more or less by decree, and parliament was sometimes allowed to rubber stamp it. The coalition was well behaved and there was always some support in the Senate. Criticism was brushed aside, the OMT (crisis-team) and the experts were allowed to have their say, but the cabinet decided. Sometimes right against the advice, as was the case with the relaxations at the end of April. The small office had become a palace, a fortress where protests resounded but were not heard.

Information, even when legally requested by members of parliament and the media, was kept out or suppressed and civil servants could not be asked for anything. The cabinet, and certainly the Torentje (office of PM), was a fortress, where people hid behind thick walls of censorship to avoid difficult questioners. Government went by edict, from doctrines that a priori dismissed citizens as fraudulent, inconvenient and incompetent. What Rutte did keep in honor were his jesters, with de Jonge and earlier Dijkhoff as pompous pawns in fancy suits and with ever-changing shoes.

Not very clear in the whole story was also the coordination with the European partners. There was no uniform approach in Europe but, as a small neighbor of Germany in particular, we had to take account of what was happening there.

Very often the measures that were taken seemed to be primarily aimed at preventing border traffic with Germany, for example. Being able to store here, while not being allowed to shop there, or vice versa: I'm sure Merkel made that clear, it was not possible.

Europe

The whole issue of a vaccination passport also had such an international component. The rest of Europe was largely in favor, the Netherlands could not stop it. But admitting that work was indeed being done on a vaccination passport or, as it is now called, Corona Vaccination Certificate, was of course impossible. Rutte had said too often that he wasn't in favor of it, and the House of Representatives was initially broadly of the same opinion. But the pressure was there, and in tourism and travel such a document is of course not uncommon, so completely obstructing could not. Rutte handled it as usual, smiling and looking confident but not really addressing the issue directly.

But times seem to be changing now, the balance of power is starting to shift. Not directly because of Corona but because Rutte c.s. appear to be cheating again and again and are quick to „forget“ that too. The „Omtzigt“ debate on April 1, 2021 in the House of Representatives seemed to be a tipping point for the democratic system but especially for the confidence in it among the population. At first people saw mainly how the executive power under Rutte had gone wrong and the confidence in the „government“ decreased significantly. But after a few days that feeling turned and the tone of the media also changed. It was recognized that the House of Representatives, and this was certainly also due to the performance of the newcomers and smaller parties, was also a real counter-power. Trust in democracy had increased. The question now is whether the period of calm and the so-called restoration of confidence in Rutte, especially among the parties that want to join the government, will go down well with the people.

To start with a practical consequence, Rutte went easing after all, and the anxiety among the population has become much less and that means that Corona has less chance, because fear is the great threat of immunity. In the course of the spring this will become clear. Does group immunity increase after the easing and does the epidemic extinguish here and also does the vaccine plague dry up a bit? In a number of countries with high vaccination coverage, the fear has subsided and things are moving in the right direction, while where that fear is being fed even more, the disease is still making victims in full force.

Elections as a test of trust

And then in March 2021 we also got to vote. It seemed to be a moment of truth, because there was a choice. Did we go along with the supposed savior of the fatherland, or with an opponent, a whistleblower, an anti-vaxxer? The benefits affair had already caused the cabinet to resign and become caretaker, how would citizens weigh all that in the voting booth?

It turned out that people continued to support Mark Rutte fairly broadly, but Sigrid Kaag also won and Forum for Democracy gained the most seats. Small parties were added but there was no question of a broad protest.

Shortly after the elections it became clear that none of this was relevant. The great savior turned out not to have quite remembered the truth but sending him away was not what the „sheeple“ of parliament wanted, the coalition continued to support the fallen hero on 1 April. The formation had to start all over again, but then it ran into other conflicts, in particular the minutes of the Council of Ministers.

Yet those debates in The Hague were hopeful, a different wind was blowing, countervailing power was possible again, Omtzig and the benefits affair was the beginning of a new spring, a new beginning with something of a balance of power again. This is not only important in politics, the whole of society is faced with choices, with decisions that we cannot leave to the „experts“ and scholars, the lobbyists, the talk show hosts and the commercialized influencers.

Political recalibration

So another consequence of the Corona crisis is hopefully that democracy will once again function as intended, not just as a dual system but in the true spirit of the Trias Politica. Here it is up to the House of Representatives to hold the course set, to strive for more voter influence, to provide more feedback and also in terms of legislation (constitutional court, referendums, complaints procedures, protection of whistleblowers, reinstating civil rights) to give room for feedback (feedback).

It is important to strive for the Lower and Upper Houses to see their members as representatives of the people again, their task as a mandate from the voter, not symptomatically but integrally. Given the relations of the moment and the position of Rutte, it seemed for a moment that a business cabinet, with experienced and knowledgeable ministers could be a useful option. Possibly with a politically experienced leader and foreign minister but it could have been an option to keep the isolated VVD out of the equation, if that party sticks to Rutte and thus Rutte IV.

In such a set-up for a business cabinet, parties can then all contribute a limited number of points to a coalition agreement that is to be negotiated, which will actually be an agenda for the new cabinet. Many hobbyhorses will not make it, but broadly supported points will be tackled by the new cabinet. This also means that there will again be more substantive debates, not the rubber-stamp theater of a tightly-knit coalition.

However, the period of calm under Tjeenk Willink as informateur (to form a cabinet) has brought the old coalition back into the picture, with new partners such as Groen Links and PvdA and without CU and even though such a five-party coalition is fragile, it does have a majority in both chambers. That means more stable support for the cabinet but whether that will go down so well with opposition and the people remains to be seen.

★ **6 Democracy, participation or lack thereof, experts versus the wappies, alternativos and antivaxxers.**

Democracy at stake

The way the Corona threat is used here and elsewhere to actually pursue political goals is telling. We see this everywhere, health as an argument for limiting democratic and fundamental rights, freedom of movement and working with administrative directions (edicts) by those in power in the executive government. Dictatorial administration instead of based on laws and democratic decision-making and control by parliament and democratic bodies. The latter are allowed to grumble afterwards and sanction the matter with laws afterwards, the measures have then already been introduced.

The dual system is thus undermined, parliament gets less and less say. Decisions are taken outside the democratic framework, the trend that was already clear with the climate tables continues, only Rutte with his crisis table the OMT (Outbreak Management Team) is even more one-sided, with mainly the medical experts and RIVM bobos who also appeared not to know. It all tends towards an autocracy or even a dictatorship of the executive government and politicians who happen to be in power. The whole situation was even legalized through an Emergency Law, which almost everyone is supposedly against but it was pushed through. Lately resistance has been growing, there are protests in the House of Representatives against the power of the cabinet and the prime minister, and there are demonstrations against it outside in the streets but that is then resisted. Power and counter-power are the key words now.

The problem is not new; it has been looked at for some time and there have been calls for a critical evaluation of the parliamentary and democratic sys-

tem as we have it now. However, the Remkes Commission's proposals on possible improvements to democracy are being trampled on. The report has not led to any drastic changes; it has more or less disappeared into a drawer. This, while in fact the influence and power of the citizen is being increasingly eroded. The inequality in the relationship between citizens and government is increasing, and with it the resistance to it.

It is actually quite clear, we need to recalibrate democracy. The distance between the citizen and the system has become too great. People no longer believe in it. The way the powers are supposed to balance each other is rattling.

★ **7 Infections, contamination, spreading, fear as a factor**

Now that the Corona virus has been around for more than a year, it is not too bold a thought to suspect that almost everyone has been in contact with some virus particles (virions). This could be seen as an infection, but for most people it is an infection that is neatly kept in check by their own immune system. The virions are then attacked by T-cells and other defense systems in the anterior cavity and do not progress. There is a slight increase in temperature in that frontal sinus but you are not affected by that. If that does happen and the virions get through the first line of defense, the throat and later the lungs become the battleground, then there are symptoms and there is a disease.

One of the factors, which has not been looked at very much, if at all, is fear as a factor in resistance. You could investigate that, by surveys or by looking at statistics. Of course, piles of graphs have been made and there is a lot to be said for that but that there was a dip in the second wave in November 2020 and why that would be has never been properly analyzed. One does know that to the arrival of winter, people then went back to living inside more, with less ventilation but maybe there is another explanation.

For that we have to go back to how resistance reacts to stress and anxiety. Research has been done on this for a long time and the connection is obvious. Anxiety impairs your immunity, you get sick faster. but that was almost never mentioned in the whole Corona discussion, only the American epigeneticist¹ Bruce Lipton recognized that it was an important, perhaps the most important factor in the occurrence and spread of the virus.

And what then created the swaggering and doom-laden communication policies of RIVM, the cabinet and the so-called experts at the talk show tables?

Mainly fear, anxiety, uncertainty, social unrest, people isolated themselves (also not a good way to build up immunity) or went to demonstrate (without extra infections but with a problem of violence by police and government). Every time it was a hit, people piled threats on doom and gloom, pulled crassly modeled and even apertly misleading graphs to dizzying heights and then came up with new restrictions.

And it worked, after all, didn't the measures have an effect? How so, there is hardly any evidence that the curfew did anything. Even Ernst Kuipers, the chairman of the National Acute Care Network, recognized in retrospect, after studying the figures, that the introduction of the curfew had no effect. If it was intended to keep the youth in their pens then it may even have back-fired, it was precisely there that infections went up.

Seeing fear as a factor in immunity and therefore the chance of infection for Corona has rarely been mentioned so far but is in fact very important in my opinion. Fear, by the way, is an emotion, which we can also study in animals and there fear and stress appears to have very clear effects on health and behavior.

Now emotions are strange things, psychologists have done all kinds of research on them in the last century but much of it recently went into the trash. In Rutger Bregman's book „Alle mensen deugen“ (All people are good) he discusses this in detail. What is clear is that humans have a good self-healing capacity and can normally process severe traumatic incidents, after a few weeks the trauma symptoms disappear (if that does not happen we speak of PTSD or post-traumatic stress syndrome). We may assume that after the dark and frightening press conferences most people will recover after a few weeks.

The fear decreases and that also means that the immunity improves. Ergo, fewer people get sick. Is that what happened in November 2020? There was some easing, we had recovered for a while, the infections declined and then the RIVM and Rutte came up with further restrictions anyway, there could be a third wave, mutations, and the fear struck again, and so did the infections.

The relationship between fear and immunity is worthy of proper investigation. I just plotted the press conferences of the past year for positive tests but leave it to the statisticians to work that out in detail and draw conclusions.

Now this is all just a gut feeling of mine but I have been studying trauma, trauma immunity, PTSD and identity conflict for some time now so maybe my intuition is not completely on the wrong track.

Fear is contagious and compromises immunity

Fear can „get around“, become a collective feeling, we easily take it over, not only through direct contact but also well through something as intangible as a „group mind“.

This is often an indefinable vague fear but it can also be very specific. Like the fear of being infected by an unknown other at any time and unnoticed with a virus that has already killed many people. That fear, like the virus, is also contagious and has gone around the world in an improbably short period of time.

Of course, the Internet and the world's news coverage has also been a driver: the images from China, the daily numbers on the news, the press conferences, the mouthpieces all around you. Oh well, people are used to daily misery, you might say. But until now, that misery had always affected others. Now that contagion was spreading - from ever new „hotspots“ - to the Netherlands! Right down to our street!

Those who sought safety demanded firm intervention by the government, which went along with it. Not because of some secret agenda but because the collective resonance was very strong. Very hard, with measures of which it was not clear whether they would help, copied from the Chinese, sometimes counterproductive but at least action was taken.

It soon became clear that the deaths were mainly among old people with poor health. Those and other high-risk groups were isolated by the lockdown and hurray, it worked, the rapid exponential growth weakened and the number of cases fell. People breathed again and as the ICUs in the hospitals became emptier and emptier, the hospitality industry reopened and people could once again cautiously soak up culture and go on vacations. As a result, the weaker people also came out and they were extra vulnerable, with a low resistance. The virus was given free rein again, also because nothing was done to increase resistance and alternative prevention and treatment was suppressed; that did not fit in with RIVM thinking. There and in Rutte's crisis team were the generals, who jealously clung to their idea of enforced safety; the public, the doctors, the dissenting expert opinions, none of it!

Then came the second wave. Far fewer deaths but much more fear and more rigorous measures. Right into the home: the posters with „I'll keep 1.5m distance from you at home too“ can be seen as a new, much more far-reaching invasion of people's private lives. Constitutional rights and general human rights were undermined, the police state rigged.

The government's grip on society has been strengthened even further. Among other things, there is now the gathering of information by the secret state po-

lice (would they really have disbanded it after the criticism?) and military departments of dissenting expressions on social media and they censor the dangerous skeptics there and in the other media. There are even police officers coming to your door if you somehow defend views in public that morph into official positions.

You become a dissenter (yes really, that's a police term). You might be an alien or maybe a terrorist. Or you sink into depression, or worse.

The street and internet protests mark the severity of the collective fear resonance.

The government and even the National Coordinator for Counterterrorism and Security (NCTV) are warning about it, resistance and opposition are growing, people are even afraid of terrorist attacks and that people with such thoughts will join the political parties,

I can imagine. There is - judging by scraps of information - an underground resistance developing, just like during the German occupation. The treatment by the authorities of dissidents drives much passive resistance into an active mode and underground. This is what those governments are grimly afraid of and react to harshly. No one has been shot for his opinion yet, but that can happen any time. And if you want to film that, that's a crime, laws against that are in the making, like in France. Is that backlash by those in power also a sign of fear? No, *L'histoire se répète*, that's all it is. Any historically aware and well-read person can confirm that.

Meanwhile, the financial stock markets have returned to an all-time high. The virtual money presses are running, people are creating money to pay for things, and inflation is on the lookout. People are busy buying stocks, putting money into houses and bitcoins, hoarding gold, looking for security, doubting the stability of the system.

But what happens to the little man and woman? All those people who have been without income for almost a year because the tourist industry(first) went flat? For example, there is a great famine in Bali among the unemployed population and in India the closing of the temples (for free food, Prasad for the poor) leads to mass starvation (first hand info). Do we see that in the news? Well no, we have enough on our own sores.

It is difficult to get a picture of the global situation because the news coverage is deficient and only reports on the threat of outbreaks and new mutations. However, it is clear that the fear resonance has the world in its grip. This is such a powerful force, all conspiracy theories are defeated by it. Everyone is in the grip of fear: citizens and government alike. There are few who

understand what is going on and who do not allow themselves to be disturbed by a collective emotion.

Is there anything you can do about fear? Yes, see a psychologist or take a pill.

Traditionally, there have also been techniques for controlling anxiety: prayer, meditation and chanting. And if you do it together, it works even better. Go to church, meditate, do yoga, go and sing together on the Museumplein in Amsterdam, the main demo-place, maybe it will make you feel better!

★ 8 Communication, what went right, what went wrong

No one can have failed to notice, we are in a Corona crisis. That did get through to people, we all know about 1.5 meters, mouthguards/masks, lockdowns, curfews, quarantine, hand washing and vaccination as the great redemption. However, I don't believe that the entire communication surrounding the Corona crisis will be spoken of other than disparagingly in the future. It will surely become an example of how not to do it in the textbooks on PR. No one learns from the blunders, and vast sums of money are invested in information campaigns but these then prove hardly effective.

Of course there was a moment of panic, advancing insight and uncertainty, and those involved, such as the specially appointed cabinet-member, Minister De Jonge, Van Dis of the Dutch National Health Buro RIVM and most of the experts were not top communicators. But couldn't PM Mark Rutte, who is well versed in playing on public opinion and so hastily took on the leadership role (he said Chefsache, what a rotten word), have steered and guided it a bit more? He let his seconds muddle along, showing off their nice shoes and flapping graphs, and then they continued to speak for far too long, incoherently and amateurishly. The fact that his cabinet fell but he remained in office (as caretakers) and after the elections he himself went down „briskly“ and lost his credibility had nothing to do with the Corona crisis, but it did make it clear how he had been manipulating things from the top down in a Macchiavellian way for ten years.

PM Mark Rutte, when not cornered (then he makes nasty mistakes) has an exceptional talent to appear reliable, to defuse crises and to let allegations slide, he is also called the Teflon man. He never showed much vision but he fitted the store reasonably well and was therefore appreciated as prime minister, he was a fixed factor in the political game.

A dip for the PM because of the Omtzigt, MP affair

During the Corona crisis he was able to hold on to that image. Despite all the slips, slips, half and whole lies, to many he remained the man in charge, steer-

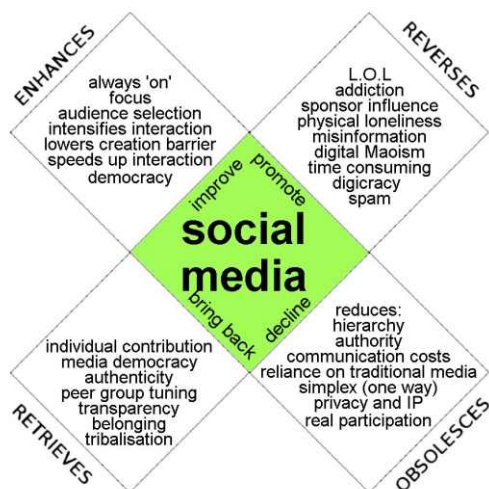
ing the ship of state through the waves and putting the interests of the people first. There was criticism but he continued to score strongly in the polls. A very substantial victory in the polls was expected and did happen. He was top dog and Corona hero almost up to the elections, but the surcharges affair, the backstabbing attack on Pieter Omtzigt MP and the swelling Corona criticism, the misery with the vaccines, the demonstrations and the action taken against them all started to pinch. The VVD still managed a small plus in the elections but it was not a landslide victory and people like Omtzigt and Van Haga turned out to be the real winners once the votes were counted and D66's big win turned out to be somewhat disappointing.

Sweet talk, fairy tales and lies

Whereas Rutte himself stood his ground reasonably well and got away with erroneous assessments, wrong reminders, promises and recalls, things went seriously wrong in the media field, communication was poor and he is definitely to blame for that. A little more guidance, a little more structure in what was reported by the authorities, the experts and the media, that would have removed a lot of uncertainty, distrust and rebellion from part of the population. It will all have been on the sites but who was going to watch all that was not digital and had to rely only on television.

It was all too one-sided, there was no room for alternatives, for dissent, the opposition inside and outside parliament had to find other ways, went part underground via the social media and the internet and this aggravated the anger, fear and confusion.

You can't stop that with censorship and denial, that only makes it bigger. When it became clear that not only the major platforms were obediently following the guidelines of WHO and the international „cabal“ of virologists and epidemiologists, this should not have been condoned or supported. Trying to silence opposition does not work but almost everyone in the media and politics participated in it. Concerned citizens were called anti-vaxxers or wappies, protesters and stubborn doctors were branded as terrorists, and public opinion was manipulated into not taking the scum seriously.



McLuhan Tetrad
adapted L. Smit 2016

But how far can you go? When it turned out that even secret military units had been set up to map out the threat, disregarding civil rights and privacy considerations, it made even very reasonable people hesitate. People want no controls, no Big Brother, no sneaky invasion of privacy, no censorship. Meanwhile, it is clear that censorship was also introduced at other levels. Nobody did anything about it, even politicians ignored it. When it recently emerged that Rutte, as Prime Minister, was already tackling fraud in the area of Social Security via unverifiable files and search methods, there was even more insight into the harmful Rutte doctrine, which views citizens as stupid, fraudulent and potentially guilty of fraud. and shields the official and the government from critical and democratic control. The argument, that a certain secrecy and privacy should also apply to civil servants and politicians, certainly has merit but there are limits. With the disclosure of the cabinet reports (on the surcharges), those limits came into clear view once again.

The Corona Theatre

Rutte was chiefly responsible but what arose was a complete theater-show culture around Corona. There were campaigns that went too far, such as that children should protect their parents by keeping their distance. Statements were made that with hindsight were not at all appropriate, such as that restricting fake news, anti-vaccine stories and conspiracy was acceptable, but that had to be dealt with severely. All kinds of people, some with very reprehensible pasts and reputations, went into the media to play the hero or the expert. This happened on both sides of the discussion, because people with a past like Ab Osterhaus or Willem Engel sought and were given space for sometimes rather polarizing opinions.

Mistakes were forgiven or forgotten, people were allowed to play the expert, appear on talk show after talk show, make accusations that were completely unfounded, it was theater, the Corona Egotrip Show. The media participated fully, the news was like a propaganda outlet, the press conferences became national events and difficult questions were no longer asked. Not only the current coalition, but also the leftist parties that hoped for a place in a new Rutte cabinet went along with the general call for more measures, more control, more vaccination and dismantling of civil rights because that would benefit security. Critical sounds came from the back rooms of the media world, channels like Weltschmerz, Blkbx-tv, the shows of Maurice de Hond and Vincent Everts gained followers and support. Facebook, Whatsapp and other social media also turned out to be a backdoor in the communication field, where a lot of dissatisfaction was voiced and information, useful or not, was disseminated,

The rest went along with the symptomatic approach and mainly wanted more and drastic measures. The House of Representatives, in deference to the fearful majority itself, called for more and paved the way for nonsensical and actually unlawful (in the context of human rights and the Nuremberg rules for medical experiments) measures such as the curfew, vaccination passports, test compulsion and inhuman and forced isolation of people in homes. In the elections, incidentally, this appeared to be somewhat rewarded electorally, although there was also clear support via preference votes for Van Haga's actions in particular.

Doubts from within

Even the insiders knew that communication was problematic. The RIVM1 articulated very clearly what was lacking, they mentioned a number of points for attention for policy and communication:

- Outlining a clear, accessible picture of the epidemiological building blocks of the coming period is important. What are they and how do they influence each other over time? What uncertainties are there and how do we monitor them/ deal with them? Visual aids can help with this. Use this as a communication capstone over the next few months/years.?
- Clarifying which criteria are used for relaxation (transmission risk versus social impact?) is relevant for citizens to better understand the choices made; and, of course, in the case of changes/relaxations, explain transparently how these criteria were applied and what consideration was given to them. In doing so, sail on data (infections, hospital figures and/or vaccination coverage) rather than dates to avoid disappointment.?
- Involving different levels of government, industries and experts with various relevant disciplinary backgrounds in the formulation of a plan for flexibilization can be helpful in formulating an unequivocal, feasible and as fair a strategy for flexibilization as possible. And then to be able to explain this from these different backgrounds as well.
- Consistent communication: A central and planned strategy for government communication from different levels of government around the pandemic and measures towards citizens can ensure a more uniform image and expectations. It is important to explain that implementing this strategy requires flexible intermediate steps that depend, among other things, on the epidemiological figures and the situation in the hospitals (no dates but meaningful data).

- and shields the official and the government from critical and democratic control. The argument, that a certain secrecy and privacy should also apply to civil servants and politicians, certainly has merit but there are limits. With the disclosure of the cabinet reports (on the surcharges), those limits came into clear view once again.

This is clearly stated and should apply to all government communications. The fact that Mark Rutte then did not do much with it and first mentioned the 21st of April, then the 28th, then May and finally came back to 28 April for the relaxation, is illustrative, Pieter Omtzigt PM also points in his recent book to such unclear communication to the citizen and wants a clear contact person to be mentioned in every letter from the government and adjoining institutions and implementing bodies.

Did it happen? Alas, no.

★ **9 Human rights, emergency law duties, edicts, demonstrations**

For right reason is the true law, corresponding to nature, diffused over all, unchanging, eternal, which urges to duty by commanding, which by prohibiting deters from deceit, which yet does not appeal in vain to the worthy or deter them, though it moves in vain the unworthy by its commandments and prohibitions.

Cicero

Some legal principles, which are relevant in the crisis or which have been ignored are mentioned here. Some of these are fundamental human rights, which because of the haste and „necessity“ were eliminated, curtailed, and the citizens could not even complain or protest about this..

Experimental vaccines, Nurnberg Code

The vaccines now used were really developed in a hurry and did not go through the normal testing procedures. On the one hand understandable, there was a rush, people were dying, so it was accepted by the authorities. They are therefore called „experimental“ and that has consequences. In fact, everyone who is vaccinated is therefore participating in that experiment.

The oldest international code for ethical clinical research on humans was established in the Nurnberg (Nuremberg) Code of 1947 in response to the horrific medical experiments in concentration camps. This was followed in 1964 by the

Declaration of Helsinki. These guidelines were supposed to ensure the safety of subjects in medical experiments.

For example, Article 1 of the Nuremberg Code says, „The voluntary consent of the subject is absolutely necessary“ and also „without the intervention of any element of force, fraud, deceit, pressure, deception or any other hidden form of restraint or coercion.“ So that rules out mandatory vaccination! Even though there are countries that ignore this, in the end this is an international and binding code. The Dutch constitution also guarantees physical integrity but is not as explicit.

European core principles; subsidiarity

Another fundamental point that played a role in the background throughout the crisis is the denial of some basic principles of the European Union. These principles for legislation and implementation, namely that something must be proportional, effective and subsidiary, were no longer observed, in the rules, measures and implementation.

Those principles are perfectly clear but there is no denying it; that sensible laws and widely supported standards were gradually (even before the crisis) increasingly exchanged for dictates, imposed rules, disproportionate measures, fines and power-hungry behavior of the incumbent executive without much defense from counterpowers. During the crisis, this became very clear in almost every area, everything was centrally regulated. The term that best encapsulates this whole phenomenon is lack of „subsidiarity“ and that is a difficult but essential concept. It means doing things at the most appropriate scale and level, putting the responsibility and the means of power that go with it at the right level. Subsidiarity also means using the least intrusive means to achieve a particular goal.

Measures and lockdowns were not following the subsidiary principle, they came by edict, in a dictatorial style. To fix this, because the parliament protested a temporary emergency law was proposed. It was not a very good piece of legislation. The whole legal approach rattled, it was a Swiss cheese of regulations that were not right and had to be amended, in an attempt to bring everything under this one umbrella, the temporary emergency law. This gave the government the legal basis for the measures and was also ratified by both chambers of parliament, though with amendments, Kathalijne Buitenweg (GreenLeft) deserves credit for this.

Corona Emergency Law Considerations:

The Corona policy, such as the rules on mouth masks, 1.5 meters, evening cook, etc. was more or less imposed and the government gave it legal

force by an Emergency Act, which has also been amended several times but always approved by a chamber majority.

There are three main issues at stake in the discussion of emergency measures such as those in the case of the coronavirus to give a legal basis to imposed edicts:

A: freedom and security:

Both play a role but are not on the same axis, surrendering freedom in exchange for security is an illuise, both are needed. They are two dimensions, with culture/religion (beyond reason and utility questions) and context also playing a role.

B; the task of government.

The choices between freedom and security are individual but the government (the law) is there to set limits and standards and to safeguard them. Laws must then match the sense of justice, which is the foundation on which the legal order rests, otherwise compliance is problematic. There must also be a balance between duties and rights. One of the pain points is privacy. Anonymity and intimacy, necessary for learning and connecting with others, require privacy. Sharing sensitive information in an emergency may be necessary but quickly becomes a habit. Digital technology makes abuse easy and far-reaching.

C: The task of parliament.

One of the duties of parliament, after advice from the Council of State, is to verify that a law is not in conflict with the Constitution, the Kingdom Statute and international treaties such as those on universal human rights. There is doubt about this among many, both citizens and lawyers. The laws must also be tested against the principles of proportionality, subsidiarity and effectiveness (which are also laid down at European level). Further requirements are reasonableness, robustness, enforceability, response and validity time, legal certainty and equality before the law for all. Especially the latter, the danger of discrimination and profiling, is not imaginary. Digitalization opens up new avenues and possibilities for use and abuse here, including in the context of IoT, 5G, robots, image recognition.

Legality, the law

Roman law had a right that was not 'given' by the government; the *ius*. This can be compared to the Anglo-American legal concept of „the law“. An important difference between the *lex* (a formulated law) and an edict was that an edict was only valid during the term of office of the person in authority and a *lex* was eternal. The step from edict to *lex*, from administrative measure to proper legal embedding, requires democratic participation and parliamentary approval

beyond a normal majority, because fundamental rights are at stake. Omtzigt also noted this, but he did not indicate that while this is being regulated in parliament, temporary solutions could also be found, such as transferring this task to the Council of State.

Do we still have subjective rights?

Can citizens still defend themselves against a state that is becoming increasingly powerful and limiting their influence? Where is the security, the protection through the democratic system but also through laws and legal institutions, such as the judiciary and the public prosecutor, based on laws that guarantee the position of the citizen and take into account his interests?

The provision of legal protection, regardless of status to the injured person, is at the root of both the modern idea of human rights and the concept of subjective rights, which also has a theological background, the idea of divine justice and conscience. The development of the human rights idea and the concept of subjective rights are also historically intimately connected.

The Constitution and international treaties on human rights as well as the Nuremberg and Helsinki Codes were more or less put on hold during the Corona crisis, people had to deal with the pandemic, principles were momentarily less important.

Privacy

One of the pain points in what was regulated during the crisis was privacy. The need was so great and the government wanted to know so much about everyone that all sorts of data files, sometimes not even properly secured, were set up. It is a pity that precisely essential files, such as who was vaccinated where and when, are incomplete, one of the fuckups. In setting up the files, all kinds of agencies and sometimes somewhat secretly by security services tried to respect privacy but it was not all very clear and not very safe, occasionally mountains of data were out on the street.

Anonymity and intimacy, necessary to learn and connect with others, require privacy. Sharing sensitive information in an emergency may be necessary but quickly becomes a habit and thus has not always proven safe. I will return to privacy several times as well.

★ 10 Censorship; imposed, voluntary, the platforms

The truth came from above, we were spoon-fed it by Rutte at his Tuesday night sermons. The entire OMT, the cabinet, the RIVM spoke with one voice. Anyone who doubted this was stupid, a wimp, antisocial and had to be reprimanded. Informing others of your doubts or pointing out opinions and research that deviated from the „official truth“ was not allowed. Stop it, be-

cause of social pressure from your environment, or because the government had you in its sights. If you didn't get it right, the police came to your door, you were registered as a kind of terrorist and if you dared to say something about alternatives, or even reported good results, you were punished.

Keep quiet, be good, don't think or stand up for yourself; the dystopian stories about Big Brother, 1984 and Animal Farm turned out to be true.

Deception, fake news, conspiracy

Soon after the outbreak the stories started trickling in, it was the fault of big business, this virus had been deliberately developed and released, the Chinese were eating weird wild animals, it had something to do with G5 mobile telephony, that was an attack by aliens, moon men, the internet was vibrating with the stories. What was true or nonsense, who was sincere and who was cheating or trying to sell something, who benefited from certain messages, it was unclear.

But it was difficult, especially for those who had to make difficult decisions, impose unpleasant and far-reaching measures and also keep the people calm. So they stepped over basic rights to free speech, demonstrations and privacy rather easily. The argument was that it was all so serious, a state of emergency and necessity knows no law.

Censorship crept in, the media joined in nicely and gave no room to alternative opinions, people closed ranks. At first this was not so obvious, there was an information tsunami anyway, that here and there something was filtered out was not noticed. But then the filtering and trimming began, and this was rather fueled by the whole situation around Donald Trump and the US elections. The big platforms, essentially not bound by any regulation in terms of censorship, started censoring and monitoring. They wanted to stay or come into favor with those in power or coming into power and the censorship button was turned on. At first it wasn't so noticeable, your Facebook posts just didn't get through but then they started working with fact-checkers. If you claimed something deviant, you received such a message, later you were silenced for 24 hours or your entire account was blocked. Always with a reference to how wrong information could harm others, about the ethical position of Google, Instagram, Twitter; they did this for your own good! Later they started adding a reference to a government site.

The censorship was even defended by politicians, fake news and conspiracy stories had to be kept out and suppressed, that was allowed and had to be done, what about the right to free speech, association, integrity of personal communication, given the pandemic these rights could be suspended for a while.

It got totally out of hand, in our country KPN and its underlying provider brands even used their spam filters to filter out private and essentially secret e-mail correspondence with words like Corona, a blatant violation of the secrecy of letters and the right to personal communication. It wasn't even noticed, because you don't miss an e-mail that isn't received. That the whole situation was of course to be expected is not news. After all, cyberspace has no generally applicable laws, here and there governments put up some fences and hand out fines but the Internet is essentially outlawed. The realization that cyberspace is not independent but ultimately leads to total dependence and interdependency has become so clear through the Corona crisis that an international cyber-legal order has become very urgent indeed.

★ 11 Numbers and Statistics, Juggling Facts and Graphs

We are bombarded with figures but almost everyone has realized by now that sometimes not all of them are correct, there is fake news a lot. Not only websites and social media spread all kinds of figures whose reliability cannot be checked, but the government also scatters misleading, vague and gradually structurally unreliable data. This applies to RIVM, OMT and Minister De Jonge and with them the series of medi-bobos who populate the tube.

There are no clear definitions, the tests are not very reliable, the populations used are constantly changing, key figures are published that are not and often not really up to date, they are a few days behind or a computer has broken down again. This happens very often, then people adjust or correct it later, but it does not make a very reliable impression. Also internationally it is a mess, clubs such as the WHO (World Health Organization), the EMA and the John Hopkins Hospital that collects worldwide figures, swirl around, change definitions and standards and lump incomparable quantities together. The result is that everyone is interpreting at random. The statistical expertise of, for example, the OMT members is questionable; sometimes they come up with graphs that really don't make sense.

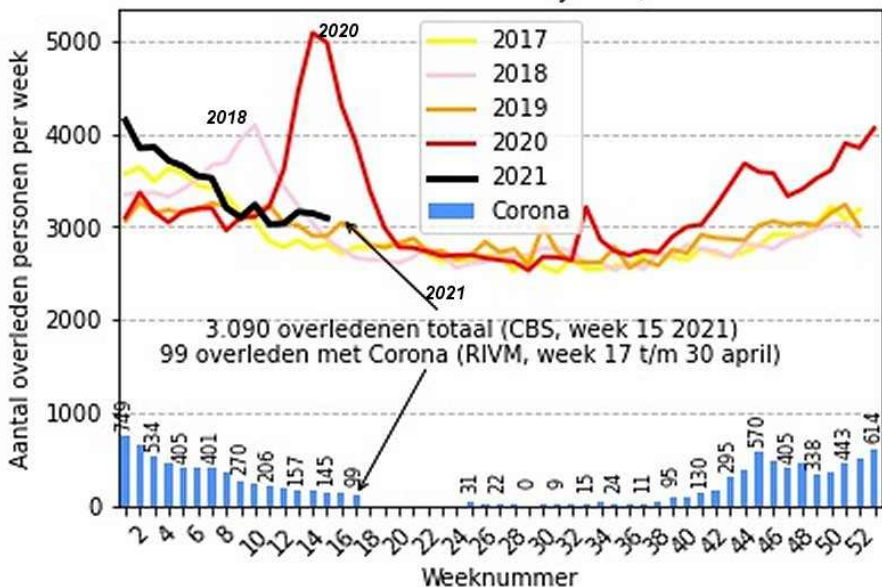
The Information Dashboard site

A kind of summary and access portal to the figures was created, the government's Corona Dashboard (similar to the WHO dashboard), with figures from RIVM (the national authority) and GGD (the local health buro). Now that sounds hip, a nice slogan and in principle you can see all the important things together on the dashboard of your car. It's just a pity that it was so clumsily put together here and they did try to improve it but they didn't really succeed. Abroad, the dashboards are much clearer.

And what do you get to see? Nonsense figures such as the number of vaccines administered. What does that interest anyone except the people who supply and distribute the stuff and the actual vaccinators. What the public wants to know is how many people are protected, not how many jobs.

And what do we learn, for example, from the number of infections tested positive each day? Every day not only different numbers but also different groups go to the testing lines, because the frenzy of the day focuses then on children, then on certain age groups, people from institutions, caregivers, etc. People

Sterfgevallen: combinatie van CBS overlijdenscijfers t/m week 15 2021 & RIVM Coronacijfers t/m week 17 2021



Bron: RIVM & CBS, bewerking: AlleCijfers.nl

The mortality in the Netherlands for several years

vious Corona infections, vaccinated, from which social strata, all in the big pile and up one day and down the next, lower after the weekend, what good is it?

What proportion of those people end up in hospital or are they people who have not been tested at all by the GGD? The percentage of infections is somewhat clearer, but figures such as the reproduction rate are weeks behind and therefore cannot be used for actual adjustment. Even the number of deaths is not reliable, because who is considered a Corona death and who dies of an un-

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derlying disease? The comparison with the CBS mortality figures reinforces the feeling that there is little consistency in what exactly is considered a Corona death.

Also the hospital admission figures on the dashboard are vague, what one wants to know is if the capacity is filling up, also of the ICU. And knowing how many vaccine refusers there are is not reported at all.

Why no clear figures?

I look at the figures, search deeper on the RIVM, GGD, CBS and government sites would like to know a few things. For example, now that there has been considerable vaccination, which part of the group tested was vaccinated and with what. This seems like a trivial question but touches on one of the most important issues, which is how effective is the vaccination? You would think that no one with a vaccination would get tested but is that so, aren't there people who got symptoms anyway or just want to know, if the vaccine worked? Because if, for example, 10 or 20% of those who tested positive have already been vaccinated, then you can find out how effective that whole vaccination actually was. And then it might turn out, that it is much lower than was reported and assumed. And then the whole idea of vaccination passports (or the European Corona certificates) goes down as well. Unfortunately, the RIVM and the GGD no longer know exactly who has been vaccinated and whether someone has been tested before and whether there is a case of reinfection, so we can't check that either. Sloppy registration but then how can you come to meaningful decisions about measures or relaxation? Or are they just tossing some I-Ching coins up there in that well known small turret, were te prime minister has his office in the Hague?

I would also like to know to what extent the people who are now considered positively infected differ from the total population in terms of behavior and attitude. You could ask, even if it's on a random basis, whether they adhered to the measures, whether they are vaccine doubters, maybe who they voted for, in short try to determine to what extent fear is a factor. And just taking the difference between forehead and body temperature of each person tested, that's not asking that much either, is it?

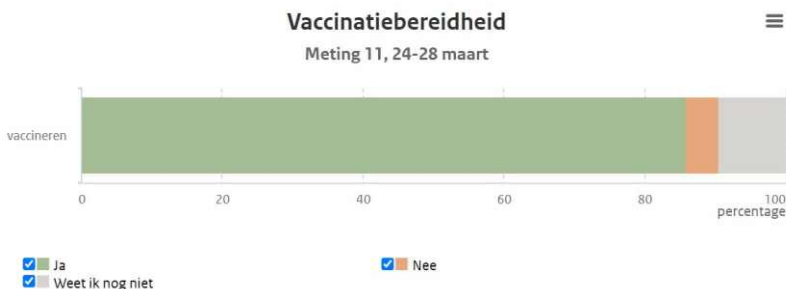
Selective disclosure

Of course we get some figures spoon-fed to us, well, but isn't there selective disclosure of what supports the position of OMT, RIVM and the government, the rest an industrious investigator can find out but won't get into the newspaper or on the tube. Especially vaccination doubts should not be fed, the public interest demands it. True in itself but at the expense of individual freedom and health.

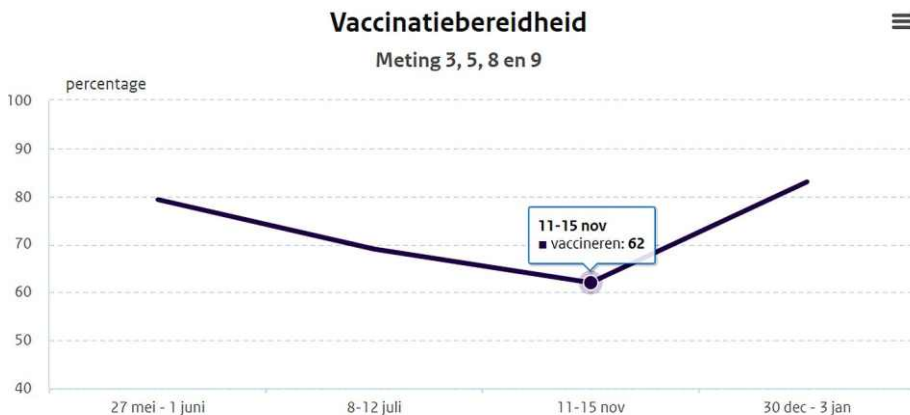
A typical example of information selection and confusion of figures is this quote from a RIVM publication (April 9).

What do people think about vaccination against the coronavirus?

Participants were asked seven different statements about vaccination. Breaking down the responses by willingness to vaccinate shows the following picture. Of those who are not willing to be vaccinated, only 14% believe that the vaccine protects them from the virus. 10% of this group thinks it is safe when approved for the Dutch market. 12% see vaccination as a way out of the corona crisis for the Netherlands. Only 10% believe they will protect others from the coronavirus if they are vaccinated. On top of that, 72% of this group is afraid of side effects of the vaccine and 84% are afraid of any unknown long-term consequences. Of this group, 26% indicated that most of their friends and family have been vaccinated, or plan to be.



Willingness to vaccinate, here at over 90%, but look at the next graph from RIVM



Similarly, of the participants who are still unsure

about vaccination, a significant proportion indicate that they are afraid of side effects (70%) or unknown long-term consequences (79%). 29% believe that vaccination protects them from the virus and 17% believe that a vaccine is safe if it is approved for the Dutch market. Of this group, 45% believe vaccination contributes to a way out of the crisis and 32% think they are protecting others by getting vaccinated. In addition, 51% indicate that most of their friends and family have been vaccinated, or plan to do so.

Participants who are willing to vaccinate are much more likely to agree that the vaccine will protect them, that it will be safe once approved, that it will help them get out of the crisis, and that it will protect others (73%, 81%, 96%, and 75%, respectively). Of this group, 17% are afraid of possible side effects and 18% are afraid of unknown long-term consequences. 89% report that most of their friends and family have been, or plan to be, vaccinated.

Can anyone make sense of this, does it say anywhere very clearly how many people are against vaccination? No and the graph is completely vague, especially if we compare it with earlier graphs from the RIVM. These show that at one point the willingness to be vaccinated was only 62% and as recently as March figures came in for 76% but apparently there has been a huge increase, despite the woes of Astra-Seneca and Jansen. Hard to assume consistency and honesty in this.

The media is also reporting on this. RTL Nieuws, for example, found that one in ten people surveyed think that vaccines do not help at all in bringing the crisis under control. The proportion of people who have a great deal of confidence in how vaccines work dropped from 60 percent to about 50 percent. RTL News, on March 25:

The major information campaign launched by the Ministry of Health this year to get people excited about a corona vaccine is not yet bearing fruit. None of the main goals are being met. In fact, confidence in the safety of vaccines is actually declining. The willingness to vaccinate is not increasing either.

It appears that other parts of the government also recognize this, as in the main conclusion of a study on the effect of the information campaign (cost 6 million) that the Ministry of Health itself commissioned.

„Confidence in the safety of the vaccine and the approach to the vaccination program, are both falling from levels seen in December 2020.“

In the meantime, much more is known about what the virus does and how it is transmitted, but there are also reasonable doubts about the official figures. These doubts have been widely aired and picked up in the Netherlands through alternative channels and people like Willem Engel and Maurice de Hond. Maurice in particular does not have a good word to say about statistics

and regularly makes this very clear. Yet the government and the RIVM stick to their policy and manipulate the reporting on a large scale, through censorship and media power. For example, the existence of Post Corona Syndrome (better Post SARS syndrome) was first denied because they did not want to scare the masses, but eventually it will turn out that the permanent damage to the alveoli in severe Corona patients will lead to disability for thousands of people. With horrendous costs and a lot of human suffering but they don't dare to admit that.

The figures are, also worldwide, no more than an indication, people measure different things, they do not define them clearly, there is influence, there are interests at play, perverse feedback and politicians are especially afraid of making mistakes. Independent assessment is lacking, the medical figures are leading and only at the end of April 2021 does it seem that the government is showing a little more courage and is taking into account what Corona is causing further.

Differences per country

While in some countries the SARS/CoV-2 situation is slowly improving and there is talk of no epidemic or even extinction in many places, in other parts of the world the virus still strikes almost fresh. They almost seem like new outbreaks, new waves of mutated Corona variants, sometimes with dramatic numbers as in Brazil or India. Sometimes these are catching up, actually still in the first wave and with exponential growth, sometimes the policies on the ground have also clearly failed and so much fear has been instilled that general immunity has declined, resulting in growth rates.

There has been a lot of speculation about the differences within Europe, why are certain countries so much more severely affected, why are we actually relatively well endangered, why are there countries where the numbers have clearly gone down. For the time being, this is blamed on the vaccination level, but is this the only factor? Does, for example, decreased resistance due to a too generous antibiotics policy play a role, does diet, the psychological effects of the various lockdown variants, the docility and obedience of the population?

Research into the causes and effects too primitive

The numbers coming out about Corona are limited. That is part of the manipulation techniques of the government and the agencies and companies involved but it also illustrates the compartmentalization and limitations of science and the medical community.

Because when months after the vaccines are approved it turns out that the pharmaceutical companies did use tens of thousands of people as guinea pigs

but hardly any relevant figures other than the mortality rate of the entire population were recorded and looked at there. No breakdown by age, by medical background, diseases, antibiotic history, none of that and they conveniently prodded the control group (the double-blind people who first received a placebo) anyway. Scientifically irresponsible, because in this way long-term research into side effects is made impossible.

It is inconceivable but a fact that the people who signed up for the millions and billions for the vaccines did not ask about the test populations. The international bodies such as the EMA were not very critical either, because there were in a hurry, first a vaccine, then we'll see.

Why not take a broader look

But couldn't the developers and those who later had to assist the infected and the victims, the medical world, have collected more data? Look more at the medical history, antibiotic history, psychological profiles and complaints, PTSD, heavy metals, air quality, environmental and radiation exposure. Why does it stick to generalities, overweight people are vulnerable, rich people less, migrants again more but what is the influence of diet, religious tradition, blood type, sex, exercise, a healthy gut flora? Then later when it turns out that certain subgroups do not respond well to a vaccine, there is panic, but essentially that is a gaffe by the developers and the approval authorities. The group sizes in the vaccine test were large enough, tens of thousands of people, but looking a little further was probably too expensive, and people were in a hurry, the big money was luring and the governments were begging for vaccines.

Using modern technology or what?

It's almost frightening how the computer system failed during the whole approach, how the databases turned out to be leaky, how people were not prepared for the numbers, how essential computers such as those of the Municipal Health Services and the National Institute for Public Health and the Environment (RIVM) repeatedly went wrong. Incomprehensibly, we knew from the beginning that there would be vaccination, that people would be registered and that this had to be kept up to date, but when the vaccines arrived, the data management and registration were not yet in order.

Apparently the institutes, the implementing agencies, the government itself were not up to the pressure, used outdated and non-scalable systems but has anyone been called to account?

On television every day we see what is possible, what advanced technology can achieve, Netflix is an impressive source in this regard. But in the practice of ministries and agencies, then, things are mostly going wrong, the software

is failing, the computers are breaking down, and we're not using the most modern stuff at all.

We could have collected so much more useful information, useful for this pandemic, perhaps essential for what lies ahead. How many ex-Corona patients were given a smart band, how many had their blood pressure, acidity, sugar levels and temperature monitored? Nowadays there are so many ways to measure and analyze effects, also in the medical field, just think of brain scans, smart bands and biosensors, that we can much better determine the effect of all kinds of drugs and techniques, diets, therapies and also placebo effects. For this you really don't need to do DNA analyses but that is apparently in vogue and there are now some studies on the subject.

The 'quantified self' idea provides all sorts of data; many people are already walking around with equipment that tracks and stores all sorts of things. That certainly opens up new perspectives but was hardly considered or even considered in the Corona pandemic. With AI, 'Big data' techniques with new sensors you can collect and analyze all kinds of data. There are really plenty of ways to at least investigate this and perhaps correct certain misconceptions about immunity and susceptibility for example? But do we really want to know, numbers of deaths are the measure, not what they really died of. The WHO advised against an autopsy anyway and so the cause of death Corona was stuck on every deceased person. This prevented research into the real causes and avoided difficult questions.

Not that this kind of behavior by the „establishment“ is exceptional, it is almost a standard approach, there are too many layers of mud, kingdoms, perverse interests, experts who do not live up to it at all. And the consequences? Expensive misses, grandiose plans, wasted money, ruins. Not really thinking things through but running after the lobby, letting partial interests prevail. For example, we are filling land and sea with windmills but the minister does not want to do any research into the consequences for nature and the environment.

Crowd Wisdom

It is not the real truth that counts but what you believe to be true, especially in public opinion. You could also say that all figures and research yield no more than a partial truth, from a certain perspective and usually interests.

As far as the value of numbers is concerned, there has also been recent interest in what the public thinks about something. It has been studied that when larger groups of people have to estimate a certain value, they arrive at an average that is quite accurate. That's called „Crowd Wisdom.“

There is a lot of talk about „Big Data“, about methods for making sense of very large data files using advanced mathematics and „Artificial Intelligence“. It sounds nice, but if you realize that Google, for example, is not much further with all the profiling and mountains of data than sending mainly irritating and unwanted ads, you may realize that it is all still in a fairly primitive stage.

Science cannot actually handle complexity well (yet), at least not in a rational way, intuitively it often goes better.

★ 12 Conspiracy, Davos, NWO, Gates, Q-anon

There are all kinds of stories circulating, one conspiracy theory more complex and frightening than the next. It runs from accusations to the elite and the „Cabal“ (from the English, a secret and conspiratorial group) of rulers and wealthy to influences from aliens, devils, ultra-right fascists, ultra-left terrorists and that Corona is a punishment from God because we have sinned or a reaction of the Gaja world soul, which are still a fairly harmless versions.

I don't really believe in these conspiracies. There are undoubtedly people who make arrangements with each other to gain an advantage, my friend John Perry Barlow (founder of the Electronic Frontier Foundation) called this auto-conspiracies, more or less useful collaborations, which can turn out to be bad but can also be well-intentioned. People simply form groups, identify with convictions, that is inevitable.

Global Conspiracy

That there would be a worldwide conspiracy with the aim of killing billions of people, to make the rich and powerful even stronger, is going too far for me. If the Bilderberg group were so powerful and our William Alexander had something to say there, they must be a bunch of dumbasses, because our king blunders quite a bit.

People point to people like Bill Gates and George Soros but now I have also met these people personally and I really don't get the feeling that these are depraved spirits who want to manipulate the world. I have had quite a lot of contact with Bill Gates (I was active in the ICT world), in his younger years and around MSX and CDI. Bill is an insecure, almost naive man, who still wants to impress and prove that he is not a drop-out but a successful entrepreneur and philanthropist. But when I knew him and he was not yet twenty and we met at all kinds of conferences with some insiders, he always had to call his mother. He certainly has a talent for doing the right things at the right time and that's what made him rock solid and he's pretty smart but missed the boat with Microsoft too many times to call him a genius. And would this

somewhat pathetic streamer really intend to thin out the world's population via vaccinations, that just doesn't cut it with me?

The Davos Theatre

Then there is the Davos clique, where the wannabees of this world are allowed to attend. However, when I see that it is mainly some dubious billionaires, second-rate scientists, pathetic crown princes or kings who attend, and even Rutte is allowed to attend, then I think that Davos top man Schwab is mainly producing a media theater. A rearguard action, where the members of ego-tripping elites meet and try to maintain their position and the rickety edifice of capitalist, neoliberal Western neocolonialism.

The whole Davos coterie of the World Economic Forum, flying in by private jet,



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ms to me to be a club of people who feel threatened. If you are allowed to participate, then you count and important issues are discussed, you see and read that in the media. In my view, it is not the real world leaders who meet there, take part in the circus and pretend to be the saviors of civilization.

What comes out of Davos are mainly signals that the system is about to collapse. The fine plans, the new world order, they are rearguard actions of an elite that knows that this division into have's and have not's cannot be maintained. So they bow, go along with ill-conceived plans such as a basic income for all (that really needs to be rethought, it especially sharpens the divide in society), environmental measures and especially optimistic noises about how rational technology and neoliberal thinking can overcome the problems.

The question is whether the Davos elite's rhetoric such as „Building Back Better“ does not primarily imply a license for even more technology, even more dehumanized result-thinking. Because for that rebuilding, big business is needed, artificial intelligence, robots, big data, microminiaturization, privatiza-

tion and monopolization, artificial smart cities, invasion of privacy and a large scale that excludes the „small“ entrepreneur in advance.

Because the neoliberal free-market thinking they stand for has already caused a split in society that could lead to chaos, revolution and civil war. The 1% meritocratic elite is getting richer and more powerful, those left behind are getting more and more frustrated, have no opportunities, no meaning, and historically that means people will eventually revolt. This is due to the power distance reduction tendency, an insight and term of the Dutchman Mauk Mulder but Karl Marx also wrote plenty about this.

Positive manipulation

There are probably people, who do try at a very high level to steer the course of things a bit but they don't step into the open, use many strategic means to exert influence more or less magically. I don't know them but sometimes something strikes me. It is not Q-anon, the supposedly ultra-secret American Cabal, that manipulates public opinion but just look at NetFlix. If you look a little further, you will see that this film and documentary platform really attacks the American war thinking, the secret services, AI, robotics, and futurological SciFi. Most productions are systematically tarnished. very clever, unremarkable. It just so happens that technology always goes wrong, the secret services all turn out to be corrupt, and American interference by CIA and the like is almost always portrayed as wrong and evil. People do say „Netflix is weaponized“, it is being cleverly used to make some adjustments to world opinion and I do believe that.

There may be a different kind of conspiracy behind this but I happen to agree with this observation quite a bit.

G5 mobile phone radiation

It in itself has little to do with Corona but from the beginning G5 mobile telephony has been linked to Corona. The conspiracy believers love it. In Wuhan there was already G5, on some cruise ships too, and the opposition to the ultra-fast mobile network seized on this to see a whole conspiracy in it. I don't really believe that; when digital mobile telephony was introduced earlier, there were also these stories, we would all die of brain tumors, etc. So that wasn't so bad.

I do know something about the technology. I once sold the first digital ISDN telephone exchange, to Barranquilla, Columbia, when I worked for Philips.

Leverancier	prijs/dosis
AZ Astra-Zeneca	1,78€
J&J Johnson&J	\$8,50
Sanofi/GSK	7,56€
BioNTech/Pfizer	12,00€
Curevac	10,00€
Moderna	\$18,00

Her lijstje dat de Belgische staatssecretaris deelde op Twitter.

That involved a lot of promotional talk, actually lies, because Philips couldn't supply the thing at all and made a swap with Ericsson. Later I ran into the Chief Technology Officer of G5 frontrunner Huawei, an American who was particularly proud of the fact that mobile telephony with G5 was so much faster, more reliable and more widely deployable. I spent a whole afternoon talking to him and didn't get the idea at all, that the Chinese government was blowing on his neck. It's not unusual for some sneaky things to be built in, all the big and small tech firms do it, back doors, redundant code, Microsoft and Apple do it too. Sometimes it comes out, hackers and criminal organizations start working with such an opening in the system, but the government itself also likes to use so-called zero-day vulnerabilities to do its own investigations.

In itself, I don't think 5G is an extra bad technology, it is radiation and some people are extra sensitive to it but you can also protect yourself, in extreme cases by sleeping in a Faraday cage for example, which shuts out radiation. I think there is also a distinction to be made between the carrier (frequencies) and the content. Just measuring the energy (heat) load is insufficient, one should also look at what other effects radiation can have. And in terms of content, what is sent over the Internet is in itself already unhealthy. The news, porn, swearing, hatred and crime may not be traceable for normal physical measuring instruments but can certainly have an influence. Our minds pick up more than what we can measure, thinking for example is really a bit more than what electrical and chemical effects in our brain., no thought has ever been identified or reproduced by mechanical means.

★ **13 Big Pharma; the hunt for vaccine dollars**

It was clear from the beginning, the pharmaceutical industry had to come up with a solution. That's where the expertise was and if they found a drug or vaccine, those companies had to make it, in numbers. Preferably a vaccine, treatment methods or prophylaxis (non-susceptibility) were not really considered. Experiments in that area were discouraged or even forbidden. The vaccine, or vaccines if more were to be created, would be the solution and it was also allowed to earn money. Hundreds of millions were already being released by governments to make reservations, give support to research groups. The big money soon began to roll in.

There were few who calculated that a vaccine costing 30 euros per shot (and two shots are often needed) plus the costs of the injection, the administration and aftercare for some 17 million Dutch people would soon amount to a few billion euros, and that this would potentially be a recurring expense. In practical terms, perhaps two hundred euros or more extra every year for health insurance.

Hundreds of billions in profits worldwide

Considerable investments were made, not only by the companies themselves but also by governments who wanted to support the development, make sure that they were in the front line when something was found and thus provide substantial funding. There was also the idea that if you reserved in time and paid in advance you could get a better price, because everyone understood that this was not a question of doubling one's budget.

The research cost a lot of money, probably hundreds of millions or more. But that was not a bad thing. For the pharmaceutical industry, the total amount of potential sales was of course enormous, tens, possibly hundreds of billions, a source of income for which they were prepared to do their best. (Pfizer now expects an annual turnover of 21 billion euros and reported a quarterly profit of 5 billion). So they started working all over the place and eventually they came up with working vaccines fairly quickly. Unfortunately, the development was somewhat hasty and the testing incomplete, but of course there was enormous pressure, the mortality figures were rising.

It became quite a race, there were organizations that had already been working on vaccines for similar diseases like the people behind Oxford-Astra Seneca. Traditional methods were looked at, the less sophisticated laboratories also came up with products, like the Russian Sputnik vaccine but the Western world commercial race was actually won by Pfizer, which used a much more modern approach (actually that came from BioNTech), and started working with mRNA at the deep genetic level. This stimulated at a fairly fundamental level the production of protective proteins, which in turn attach to the Corona virions. The American Pfizer vaccine was the first; it had to be transported in deep refrigeration and required two punctures, but the company did well with it. In large populations such as in the United States and England, but also in our country, they became the main supplier. Moderna also quickly came up with a similar mRNA vaccine and later single jab vaccines followed as from Astra Seneca and Jansen Pharmaceuticals (Johnsen & Johnsen) which was marketed as a kind of in-house Dutch product but also, like Astra Seneca, ran into side effects.

In the original tests conducted by the supplier, part of the group was double-blinded and received a placebo, but the real long-term importance of such a control group was nullified when they were also injected with the real vaccine, supposedly for humanitarian reasons. The fact that it is now much more difficult to observe long-term effects makes this a scientific mortal sin.

The race to vaccinate as quickly as possible didn't really get off to a good start in the Netherlands; the organization wasn't quite right and that was quite a

minus point for Minister De Jonge; surely you could have seen that there would have to be widespread vaccination?

This meant that the real jabbing could only take place in January 2021, while England was already fully engaged in 2020, but then also not inhibited by the local and European approving bodies. There was some catching up to do, and a fight to buy and jab as many vaccines as possible, but with spring in the air there is a delay. Now that there is talk of a third shot in the fall as is being considered in England because of the threat of new mutations and the coming winter as the new flu season, this is putting pressure on the system again.

Effectiveness

The suppliers claimed, based on their tests, in which tens of thousands of people served as guinea pigs, rather high efficacy. Pfizer spoke of 97% or 95%. This means that of the people injected, that percentage would be well protected. Other suppliers were more modest. In the meantime it is clear that a 90% effectiveness rate is considered to be quite good but there are no very precise figures. This also applies to the risk of reinfection, and how much less the severity of the disease is if you have only had the first injection. The RIVM, for example, does not investigate or communicate whether and how many people test positive after being vaccinated.

Mutations

The great fear was and is that unpleasant mutations will occur, that is, that viruses will change slightly and that the vaccines will then no longer help or will work less well. For now, that does not appear to be the case for the British and other early mutations but the danger is lurking. This would mean that new versions would have to be developed by the manufacturers that would either work more broadly or target only the new variant. A third jab has already been announced in England. The consequence could be that, just as with flu, we would regularly (every year, every month?) need another shot.

Patents

Vaccines are so highly earned, while poorer countries lag behind and cannot afford them, that there is talk of compulsory licensing (patent waiving). This goes against the patent rights (IP) of the suppliers. They see their profits at risk, and oppose the plans of Joe Biden and the US, among others, and the „occasional legislation“ that could slow down future research. German PM Merkel also opposes such waiving.

★ 14 Economic disruption, crisis

SMEs and hospitality broken, the role of the banks, support measures, real costs

The post-Corona perspective for the economy is not very hopeful for the time being, there is enormous damage in SMEs, in self-employed people, in stores and the hospitality sector. The large companies have become even more powerful, the small entrepreneur has been clearly affected in many sectors (not all), such as the cultural sector, the event industry (festivals), travel and tourism. It remains to be seen whether recovery there is possible and, in some cases, desirable.

The economic impact of the ever-increasing and extensive lockdowns is an important factor. In the Netherlands, the damage is already enormous, amounting to hundreds of billions (officially now 60 billion) and getting even more so. This is going to be another dip of sorts. It is raining redundancies and bankruptcies despite the support measures and the recovery may take a long time.

Return, investment, security

One of the big problems in international finance is the declining return on investment. Where should you put your money? That is difficult, even if, because of low interest rates, borrowing money is cheap, you still have to do something with it, invest it in something that yields more than the interest you have to pay. Earning from trade or production is increasingly difficult in the increasingly transparent global economy. Institutional investors, pension funds and individuals and even hedge funds are diligently looking for opportunities to make a return. In the process, many of the traditional and stable options, such as government bonds and shares of dividend-paying companies, have come under pressure. Only in certain sectors, such as pharmaceuticals and weapons, is it still possible to earn a lot. There the returns can be higher but the risks also increase.

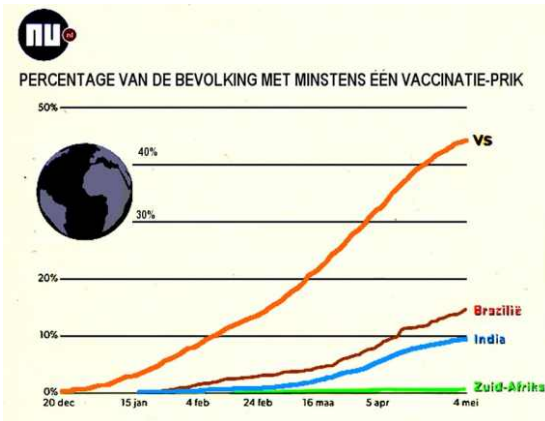
The low or even negative interest rates do not only have to do with the stimulation of the economy by money creation by the government and the Central Banks and the buying up of bad loans, money is also cheap because it is less easy to earn new money with profitable investments, there is less demand for money. There is still economic growth but it is often in sectors with a finite horizon, such as climate measures, energy generation, infrastructure, savings from automation and better logistics.

We are doing better in many sectors with ever greater productivity, such as in ever cheaper production of mass goods but margins and absolute profits are decreasing, also due to the transparency of the Internet. And demand is also

finite, you can eventually use only one car, drill, barbecue or smartphone at a time. You can make these nicer, better and more expensive, individually tailored (customizing), but that only works for a limited audience and the middle groups that are tapping into that are not growing worldwide, income inequality polarizes demand. And if we really thoroughly address energy generation and use, for example, alternative energy could become so cheap that the traditional energy sector would struggle.

'Knowledge based economy' becomes 'Emotion based economy'.

As society changes, so does the economy. Physical goods are becoming cheaper, the money and profits are increasingly in virtual and digital goods and services. We are still growing, but in terms of population, for example, this is already quite limited in many countries. The demographic developments (shrinkage, dejuvenation and aging) eventually threaten the real estate market, for example. There are fewer houses needed!



In the longer term, the opportunities to make large profits through innovation dry up, we have already done it so cleverly.

Digital services, for example, like automation, often come down to saving or replacing rather more physical tasks and services. So the Internet is the great profit solver, competition is increasing and openness makes cheating increasingly difficult. And profit is after all the oil of the economy. The flattening caused by globalization makes the realization of extreme trade profits through knowledge differences increasingly difficult. Transparency is also a problem for those who still want to earn from the reckless exploitation of soil and nature. Even usurious profits from monopolies are under attack. We are getting wise, enough is enough, the sharing economy (not ownership but access) clearly benefits from the wide accessibility of the Internet but reduces the demand for products.

Traditionally, it was technological progress, which kept the economic engine revving, with unbalanced (post-)colonial exploitation as the basis of the „Western“ advantage. But emerging markets are now making their own capital goods and competing in the world market with their low wages. The profitability problem is not yet acute but it is palpable. In the medium term, there is still much to

improve; the energy transition still requires huge investments. In 10 or 20 years' time, energy will be cheaper, easier to generate locally, and problems such as water supply and mobility will be tackled, but there will also be more opportunities for local production, micro-agriculture and less urbanization and less demand for commodities/staple goods. This is only true, by the way, if income inequality, diversity and lack of meaning and respect do not cause social unrest or worse, identity politics does not exactly bring people together.

Growth is the problem. Do we want it, can it be done without nasty side effects, and how do we achieve sustainable growth. Maybe we should get rid of that growth! Economists have often related long-term economic growth to technology, as in the Solow-Swan model that assumed ever higher productivity per worker. But the question is then where do the improvements come from, is it a matter of more money and opportunities or are there other factors at play?

There is the neoclassical assumption, that it is becoming increasingly difficult to achieve substantial returns, only in sectors where monopolies and shortages and manipulated needs (such as armaments and the media and to some extent the Internet) play a role can excessive earnings still be achieved.

Economists such as Nobel Prize winner Paul Romer think that you can steer growth and built economic (mathematical) models that are based on targeted 'intentional' research & development, i.e. on growth caused by 'internal' factors (endogenous growth theory). This endogenous growth theory states that growth is not so much dependent on external factors but on factors within the economy such as technological development and investments in knowledge and human capital in particular. It is hoped that the threat of stagnation can be overcome by continuing to invest in 'human capital', in other words in people and knowledge, even beyond technology.

Growth model

The so-called AK model illustrates this view. In the formula $Y=AK$, Y stands for total output of the economy, K for capital (physical and human) and A for the level of technology and technological progress. As long as A remains positive and capital grows, then there is growth.

In doing so, then, this endogenous growth theory assumes that long-term growth depends on policy (policy), (incentives, subsidies, support for science, regulation). Growth then results from openness, competition, change and innovation. It is thus assumed that the economy is socially engineerable and manageable in this sense.

Focusing on change and thus on individuality above the collective interest is for many still the basis of growth and prosperity. We all benefit from growth; that is the neo-liberal starting point. And that growth does not have to be directly material; more knowledge and thus more knowledge economy is also growth. The 'knowledge based economy' has been made the goal, is seen as the safe and logical path to the future but ignores the 'emotion based economy', what do we all do with it?

The assumptions in endogenous growth theory are difficult to quantify and also growth is not simple to grasp, for example increased educational attainment has not led to more work. Also the catch-up effect ('conditional convergence'), where 'poor' countries grow faster than rich ones, because there are more earning opportunities there and one replicates the technology and structures without the R&D costs, is not explained by the theory. The idea, that growth is not blissful and so-called progress has brought us to the limit of ecological stability, does not appear in the endogenous growth models. Essentially, this model says that growth is scalable (more inputs, more outputs) and that turns out not to be true in practice, we run into limits. For example, investing in infrastructure and industrial capacity, which worked out so well in the post-war buildup and in some developing countries (according to the neo-Marxist Feldman-Mahalanobis model) no longer works, more highways brings more traffic, not less congestion.

Real growth spurts are often the result of wars or disasters. Looking a little further, investment and resulting innovation are often the result of threats, of fear and uncertainty, which is real or manipulated. NASA and the trip to the moon was the result of Cold War thinking, R&D in climate and energy has to do with the fearful vision of warming. Emotions play a more important role in innovation than the money we spend on it, great inventions are often made under pressure. More education, more R&D, more „venture capital“; it certainly plays a role but the emotions, the need to find solutions and the challenge to be better certainly play a role.

Paul Romer rightly pointed out the use of crises as an impetus for innovation „A crisis is a terrible thing to waste“. The development of countries like China and India in recent decades is not only a matter of money but also of the feeling of being behind the „West“, the need to be respected as a nation and culture. Francis Fukuyama relates this to the socratic 'Thymos', the human need for recognition. As in micro-economics, where Nobel laureate Daniel Kahneman highlighted the role of emotion over rational decision making, the growth models of macro economists lack emotion. One still assumes individuals and households who want to maximize their budgets and firms that want to make as much profit as possible. But isn't that outdated? Certainly where material needs are

more or less covered, issues such as the search for respect, meaning and social connectedness play an increasingly important role.

As a result, the traditional political and economic dividing lines are no longer clear, and we see the emergence of identifications with smaller groups emphasizing differences as a new dimension, somewhat carelessly referred to as 'identity politics'. In the liberal democracy that has grown in the West this can mean that group interests lead to a fragmentation of public opinion and to what Fukuyama then called vetocracy, irrational obstructionism.

Diversity and managing diversity is the great challenge. Without differences there is no trade, no incentive, no stimulus to seek 'flux' and sinking into rigidity and 'permanence' as Zoroaster saw it, is the result. If we go too far then there is the danger that too much diversity leads to chaos, to revolution but sometimes also to catharsis.

The problem is that we again look too little at the emotional side of diversity. Econometricians like Thomas Piketty started to rationalize and „mathematize“ (a cry from Romer) the differences between rich and poor too much and their historical graphs and „hard“ ratios got too much ideological and political weight, ignoring the emotional reality. As a result, the 1% discussion became inflated, a sense of disadvantage arose among certain groups because the differences, partly due to the Internet and social media, became too manifest and led to polarization, including in voting behavior. All these developments contributed to a feeling of insecurity, both among those in power and the citizens. The emotional consequences of this are not well recognized but determine the socio-psychological climate and thus the economy. We look for security, in material things, in pensions, real estate, gold or bitcoins, artificial intelligence but fail to see that this is often herd behavior; like lemmings we run after the delusion of the day, drive up house prices, while autonomous population growth declines.

There are counter-movements, we are going to share more, live more economically, produce and cultivate in a circular way, balance possession against use but also that in a polarizing setting, where standing out because you are vegan, drink gin-tonic or drive electric is often more important than the actual contribution.

In conclusion, economic growth can no longer be the holy grail, not only because of ecological constraints but because the potential for profit and thus the expected return is diminishing due to increased transparency, ecological awareness, growing identity and nationality consciousness, and segregation, limiting even traditional international trade and „utility/nut maximization.

Recognition of the psychological and especially emotional mechanisms in the micro- and macro-economy is needed. We will need to better understand what drives people and what they are looking for, such as respect, dignity, meaning and an understandable balance between collective and individual, also in political terms. Welfare over prosperity, in short.

★ 15 Immunity; resistance and protection

Humans and all living things strive for a stable situation, homeostasis. That means a balance and that is a very complex matter. An organism does not stand alone but has guests outside and sometimes inside itself. Billions of bacteria, viruses, fungi, phages and other small stuff populate our bodies, our skin and especially our intestines. As humans, with our 46 chromosomes (apes have 48) we actually have only a limited set of DNA information in our 30,000 genes, the biodiversity of what lives in our guts is enormous, billions of times greater. So we carry all kinds of viruses in us and they are there for a reason, there is often a symbiotic relationship. Our intestines are a treasure trove of genetic material and biodiversity, which we may also need in the future to resist threats.

The enormous amount of genetic information we carry has sometimes led to the suggestion that humans are nothing more than the most evolved carriers and pack animals of DNA, the basis of life.

That the bacteria and viruses in our bodies have a place and function there is sometimes overlooked in the practice of symptomatic medicine; antibiotics are often used routinely to attack the intestinal flora. Deficiencies there are then only the cause of many diseases but the biodiversity in our gut also protects us from mutating threats and plays an important role in our immunity.

Our gut flora (note, not fauna) is increasingly proving to be the foundation of our health, it is our genetic back room. It is an evolutionary development because animals and humans, in order to move around, took a piece of earth and the bacteria and microbes that regulate things there. Our guts and digestive system are the inside of our embryonic torus, a three-dimensional ring-shaped surface, resembling an inflated pneumatic tire. All sorts of things happen there but, as in the plant world, the environment selects what is expressed and so we must honor that gut environment. Pre- and probiotics can be used to supplement shortages of certain strains of bacteria, also as a prophylaxis.

It is true for all life forms that rest will rust, or that you have to keep things going, stimulate and challenge. So cutting yourself off from the confrontation with germs is not very healthy at all, and we know that, children build up their immune system through exposure, by picking up a disease now and then, let them play in the mud. But that principle also applies to adults, isolating yourself,

keeping all possible germs away, washing them off, putting on mouth masks, somewhere that is counterproductive in maintaining and strengthening our immune system. At Corona we know that people who have had it remain protected later on and sometimes it even gets better if their immunity is stimulated along the way.

Stimulation of our immune system requires exposure, not isolation

We are healthy until we get sick, it sounds simple and means we have to pay close attention to balance, in our food, in how we live but also means that symptoms of disease do not suddenly manifest. An infection starts with defenses by fairly simple reactions, for example we start coughing, throwing the virions (virus particles) out again. The next stage is for the immune system to attack the invaders where they enter, i.e. in the nasal cavity. If that doesn't work, the virus gets the chance to penetrate further, in the case of Corona to the lungs, and real symptoms of illness begin to appear. Now that is difficult with viruses, because they are not sensitive to drugs, at most you can stimulate the resistance a bit and overcome the impairment of the oxygen circulation with oxygen, in very serious cases obstacles physically, such as artificial respiration.

So against viruses there is actually no herb, although we must hope that somewhere some plant or other will be found that does. You have to prevent resistance deficiencies, improve the immunity of those not yet infected and support those who still carry a limited infection.

With Corona, the focus has been on vaccination; immunity had to be achieved only artificially. The arsenal of aid to help those with severe symptoms is limited, hence the high mortality rates in those with reduced immunity. Much more could be done in prevention, in healthy living, exercise, dietary supplements, vitamins and the like.

Vaccination of everyone means for those who are naturally immune an impairment of their broader immune system, with sometimes nasty consequences. One no longer gets measles or polio, or now Corona, but other diseases might get their chance as one's general immunity suffers a little from vaccination.

The fact that vaccines in general are not always safe and have never been tested for it by the authorities is conveniently forgotten. The scandals with harmful vaccinations, among others in India, and the blunders of the Dutch RIVM and the corruption of the Dutch Health Council (affair Prof. C. Meijer) were brushed aside. Let's hope that afterwards the Corona vaccines don't hold any really nasty surprises.

Disease is a lack of resistance

Building resistance to Corona (or to any infectious disease), it has not become a priority in the whole campaign, despite the warnings and appeals of also many medical experts and that is not only a pity, it is a dangerous miss. Especially now that there are more and more variants and vaccination might not help anymore (a virus can also become immune and not care about the vaccine) a priori protection and prophylaxis (prevention of infection) is becoming increasingly important. The alternative, constantly producing and injecting new vaccines, is expensive and possibly ineffective. Viruses may not be living things but they do want to continue to exist, grow and, if unsuccessful or due to normal mutations (all life forms mutate) take on more dangerous forms.

Immunity is not just a biological phenomenon, something you can only describe in material terms and mechanisms. It is also psychological, I will come back to that but first something about group immunity.

Herd immunity and group immunity

In the beginning the concept of group immunity was in the picture for a while, Rutte was talking about it but soon it disappeared from the picture, was denied, it wouldn't work, vaccination was the solution. But of course it also plays a role there, it's not possible to vaccinate everyone but if only the majority of people are vaccinated, the virus will die out.

The English Herd Immunity is the word for group immunity in virologist circles but people have rather misused that term (which originated with Dr. A.W. Hedrich in 1933) to promote vaccination. Initially it included natural (innate) immunity. But recently the concept was strongly limited to the effects of vaccination and people no longer spoke about natural immunity, which was conveniently forgotten or denied, also by the WHO.

Natural immunity because you are in good health, genetically immune or have faced similar infections before and have developed immunity to them is a given. There are always people the are resistant to a disease, otherwise the Plague or some other pandemic would have wiped out humanity already. The virologists didn't want to hear about that, talked mostly about vaccination and antibody building.

Passive immunity, without a vaccine, was thus denied, or would, if it existed at all in people who went through the disease, work for a few weeks at most and never have any long term effect on herd immunity. Later it was recognized that that 'protected' period is actually longer and you would have antibodies even years after a Corona infection or would have developed a mechanism (training

immunity) that would then produce those antibodies more quickly when infected.

This ignoring of the broader view on immunity has rather marked the whole discussion, even on the WHO site and on Wikipedia and in all kinds of government information it was only about vaccinating, as much as possible, if necessary compulsory. Anyone who doesn't want that is a free rider, someone who benefits, someone you can ban from school, public transport, work.

And that is still the approach to vaccination: the aim is to achieve 90% vaccination coverage among the population with artificially generated antibodies for everyone in order to achieve adequate group immunity. They point to the success of diseases such as measles and polio, where this approach has worked well, but forget to mention that broad-based vaccination has also sometimes had very negative results.

There are also factors, which affect natural immunity but have not been studied or taken into account when evaluating Corona cases and victims but also those who were already found to be immune. I've also mentioned it before but consider overall fitness but also blood type, trauma history (PTSD), antibiotic use, gut flora (biome), depression, autism, susceptibility to suggestion (placebo), vitamin deficiency, HPA axis problems (cortisol, adrenal glands), eating habits (meat, vegetarian, vegan, certain herbs like turmeric), telomere degradation, but also environmental temperature, humidity (Maurice de Hond's point), radiation exposure, in short there can be all kinds of factors, which make people more or less susceptible to the virus.

Biodiversity

Man lives in an environment with many viruses, bacterial strains, phages, fungi, in a biome where everything is essentially present but the 'environment' selects what manifests itself.

It has to do with resistance, susceptibility, and biodiversity. Not only in our body, but in nature in general biodiversity is the basis of the natural state and offers protection against proliferation (new mutations and diseases). Biodiversity and hence the ability to use a very wide spectrum of genetic information determines our long term health, which has its place, among other things, in our intestines.

All those different viruses in our gut are not only our enemies, they can help us, are actually our friends, especially in time of need when our own DNA is deficient. There is genetically encoded susceptibility but beyond that, the immunity obtained and the environment determines the epigenetic expression of a disease and therefore whether the virus really has a chance.

Man lives in an environment with a lot of viruses, bacterial strains, phages, fungi, in a biome where everything is essentially present but the 'environment' selects what manifests itself.

Our modern lifestyle and medical practice is not very healthy in this respect. It is said that the modern American has only 10% of the biodiversity that lives in the intestines of 'primitive' (more naturally living) Africans. This would be the cause of all those outbreaks and diseases of affluence, which we then tackle with vaccines, but in so doing further break down the natural resistance.

Underestimated

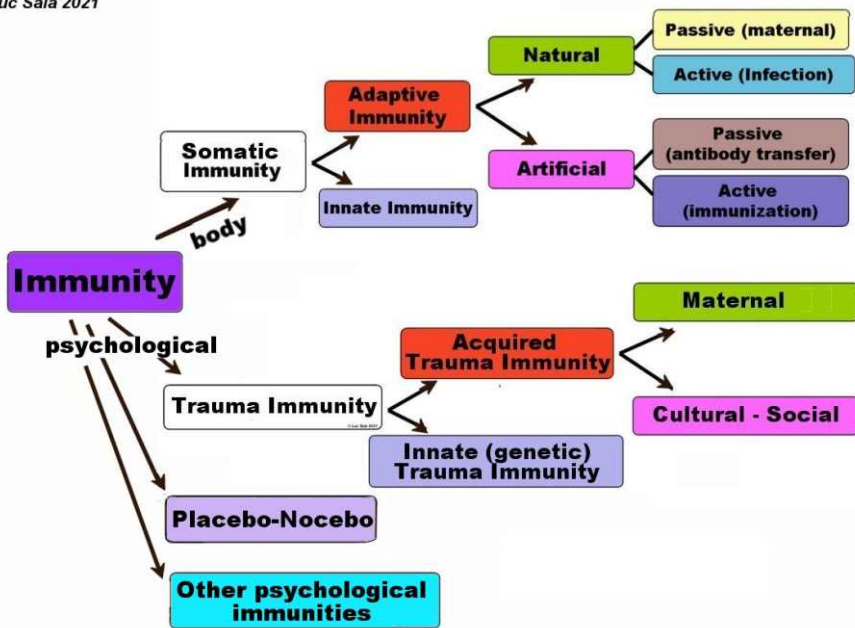
But first we have to look at the extinction level, where the group or herd immunity is enough to limit further spreading. About this a lot of nonsense has been said but it is nevertheless essential for the extinction of the pandemic, which is still raging and claiming victims, eventually many more millions worldwide I fear.

The idea that initially perhaps 60% or more of the general population were not at all susceptible to Corona was not acceptable. Because this would imply that a 20 or 30% immunity increase because of people having had the disease would mean extinction. If this is achieved by vaccination (in May 2021 approx. 35% and fast growing in the Netherlands) this could also lead to extinction, which occurs at something like 75 to 80% (some say 90%). This is where we are heading as spring 2021 shows a marked downturn of new cases.

At the start of the eruption here in the Netherlands, this natural (innate) group or herd immunity could well have been at a much higher level than that taken into account by the authorities like the RIVM, for example at 60 or 70%. This would bring the group immunity threshold (75-80%) into view when a relatively limited number of people have become infected and developed antibodies and the overall immunity reaches that extinction level. This would possibly be the case in Wuhan, China but other virus outbreaks also suggest that natural extinction (as in our country after the first wave) is achievable. Vaccines help, but are an additional means to increase general immunity.

It has never been included in the discussion, the so-called experts have just ignored natural resistance as a factor and mainly hope for a vaccine and look at the PCR tests and the test results for antibodies (serological tests for IgM, IgG and IgA antibodies, no good antigen test yet for already present older antibodies).

It does appear, that for certain groups the natural immunity is higher, such as in young children or lower, such as for the elderly and people with obesity, although that can also be a symptom of deficient intestinal flora and that then is

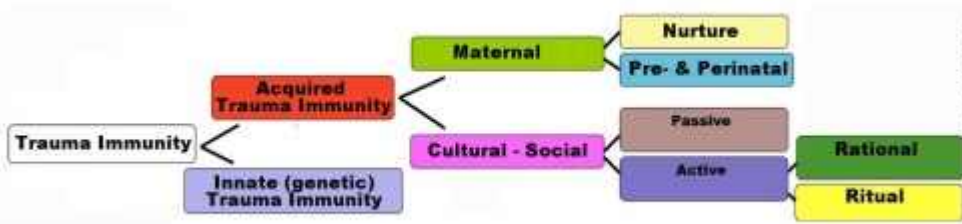


**Biological and Psychological Immunity
(with trauma immunity as part of the psychological)**

he real culprit. In children, resistance is better because their immune systems are still relatively vital, fresh and intact, unaffected by traumatic experiences. They already received a starter from their mother at birth (with cesarean sections this is a problem). In older people, immunity is more often compromised, trauma has left traces such as telomere degradation. In less technical terms, their resistance is just less.

Alternative remedies

Probably a lot of the remedies that are mentioned here and there and apparently have some success, like high doses of vitamin C, K2, D3 etc. etc. or what Ayurveda and Chinese traditional medicine offers (Rhodiola, Ashwagandha,



Astragalus), have to do with that. They increase resistance. The distinction between immune stimulation and treatment is not sufficiently understood. Hydroxychloroquine (HCQ with zinc etc.) for example may help, there is issue about that, if you have just been infected some say, not as prophylaxis, I fear. The studies contradict each other but I miss the time factor, when exactly after infection and at what time of the (circadian) day rhythm does one give HCQ, because your immune system also has a day rhythm. Furthermore, there are also homeopathic remedies like *Justica adhatoda*.

Placebo, nocebo

By now it is clear that the mind plays a major role in immunity. In double-blind experiments the placebo effect is clearly a factor and we know that the doctor or someone in authority can also talk you into things or make a wrong diagnosis, which then causes real complaints, the nocebo effect. This is a negative expectation effect and the counterpart of the positive placebo expectation effect and is further proof that fear influences immunity and resistance: 'Fear makes you sick'.

Psychological immunity

There is biological immunity but also psychological immunity. You can build up resistance by thinking positively and that then often has

to think and then that often affects your lifestyle but it starts in the mind. That psychological immunity is not yet widely known or accepted in the medical community but it cannot be denied. The question is how well it can work. There is a „school“ of people who think that all disease is related to psychological imbalance and that psychological immunity is important r than physiological. I place some weight on that, also from my own experience.

Trauma immunity

Psychological immunity can relate to all sorts of illnesses, but trauma immunity is also of interest to Corona. a stay and treatment, certainly in the ICU, in a hospital can cause a trauma that can affect people later. This can be compared to PTSD (Post-traumatic stress syndrome) or actually just a form of it.

Working on trauma immunity beforehand is a matter of education but also of the whole culture associated with illness and susceptibility.

Gut flora, biome

As I mentioned earlier, in the study of Corona and the education of the public, prophylaxis or preventive protection was hardly discussed. The manufacturers' vaccine trials did not look at specific target groups or underlying complaints; it had to be done quickly and, for the sake of convenience, the control groups

were also vaccinated afterwards, so it is now virtually impossible to investigate in this group what might be a dangerous side effect.

For example, no research has been done into differences in gut flora between sick and non-sick (immune) people, although it is becoming increasingly clear that immunity (biological) and trauma immunity (psychological) in particular are connected with how the flora in the gut works and interacts with neurotransmitters and the brain via the so-called HPA axis¹ .

An alternative vision

A totally different approach from the current medical focus on lung function and pulmonary symptoms (such as ACE-2 receptors) is one I raised in a post at www.academia.edu back in March. Is it possible that the symptoms of corona virus have their origin in the intestines and specifically in an absence or inadequate presence of enterococcus faecium? This is a sensitive strain of bacteria that also plays a role in becoming immune to antibiotics and apparently influences the immune system, which had long been known in veterinary circles and the relationship to corona viruses had also been established. People who have taken a lot of antibiotics often lack that strain and now the thought is that they are also missing or lacking in natural immunity as a result. Repairing the intestinal flora is possible and also quite simple by taking so-called pre- and probiotics.

The bacteria in question, Enterococcus faecium, is available at the chemist's and fairly cheaply and could restore the natural immunity. That doesn't work for everyone, there are other factors that can affect the 'catching' of the bacteria, so it's not a 100% protection or cure. I am sure there are other remedies and methods to restore natural immunity, also home remedies, herbal mixtures, high doses of vitamin C and hydroxy-chloroquine with zinc but this probiotic as a prophylaxis (precautionary) route is quite simple but unfortunately not noticed by the medical community.

Enterococcus faecium is well known in the veterinary community as prophylaxis (protection) for stable populations against coronas influenza outbreaks. Enterococcus faecium is just available at the drugstore, it is in some probiotic mixtures. Oddly enough, it disappeared from Luconvital 6, an inexpensive probiotic, after I pointed out that company's effects.

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★ 16 Prevention, Public Health

Vaccination quickly became the magic word, first as the solution we had to wait for, then as the wonder oil that would protect everyone. Of course Corona is a nasty infection, sometimes with serious consequences, but why wasn't more attention paid to prevention, building up resistance, healthy eating and living, supplementing deficiencies with supplements? Who stopped that, why didn't the government (and politics and the medical world) do more about that? Ultimately it all has to be paid for and prevention is much cheaper than cure. Why didn't the insurers intervene, or did they think that the bill for the entire crisis would be paid by the government?

What was particularly striking in the first period is that all research went to Corona patients in hospitals, who were examined, analyzed the syndromes and everywhere went in search of vaccines, the golden fleece that would solve everything (and make the pharmaceutical industry and those who rubbed shoulders with it rich). The census takers and statisticians did not visit those who were ill at home and those who remained healthy were not in the picture at all. But it was precisely those over-80s who did not get sick that could not have

learned anything from their condition, medical history, blood values, gut biome, etc.?

Symptomatic, not holistic, multidisciplinary or integrated

But the whole approach, including monitoring, was mainly symptomatic, complaint-oriented, short-term solutions with some pills or quick treatment, as unfortunately common in health care. Much more fundamental and important is to find out, who did not contract Corona, try to understand or find out what makes people immune to the disease or less susceptible. If we understand that better, prophylaxis (precaution) can be better organized. That failure to look at who is immune or less susceptible applies to most conditions by the way, PTSD, cancer, malaria etc. Science has too much of a focus on pathology (disease) and doesn't want to look at the mechanisms that do keep us healthy.

Of course, the excuses are understandable and valid, we didn't know better. There was initial panic, the government was taken by surprise, the medical community was taken by surprise, and measures were proposed and implemented in haste and a bit of panic, sometimes to little but sometimes to much effect. Mistakes were made, sometimes wrong treatments like ventilation were prescribed. This works well in serious cases, but was often an intervention at the outset because there were no other means.

Hopefully with new waves people will be more sensible, for example ventilate more and monitor aerosol dispersion. In particular, outdoor encounters have less risk of contamination. Meeting in confined spaces with poor ventilation or plugged-in air conditioning is much more dangerous. Isolating the elderly and at-risk groups can also be a bit more humane, especially if one starts to take natural immunity into account. But there is cause for concern, Corona can have a very nasty aftermath and the economy still remains very fragile.

What is striking and can therefore be called culpable is that all the research into Corona patients went on in hospitals, where patients are examined. There one analyzes the pathologies and looks for medications. Of course, the search for vaccines can also be seen as part of the prevention research. But much more important is to find out, what makes people immune to the disease or less susceptible.

Testing and information manipulation

Initially, there was far too little testing in the Netherlands because there were supposedly not enough tests available. That turned out not to be true; the RIVM restricted all testing, did not want to do business with commercial parties other than the Municipal Health Centres (GGD), and this undoubtedly resulted in many additional infections and casualties. Now that there is suffi-

cient capacity, anyone can be tested, but they pretend the tests are reliable. In practice they are not, including the PCR test with many „false positives/negatives“ and never intended as a diagnostic tool, and the antibody/antigen tests are not 100%. The rapid tests are even less reliable unfortunately.

What also comes into play here but I may see this especially since identity and multiple personality is the subject of my other books¹, is the lack of understanding in medical science about how a disease can be confined to a single personality and not manifest in other, substitute identities in a multiple personality matrix.

Moreover, what is being tested? Actual infection or also the existing antibody build-up and how do you distinguish natural immunity and antigens (e.g. from older Corona outbreaks) from recently acquired artificial immunity through vaccination. Isn't it nonsensical to test people who had Corona months ago, after the initial symptom-free period of 5-10 days the virus may still be present for 2 weeks (longer if treated in the ICU because the disease is actually stimulated) but then it is gone, no longer detectable in the blood or sputum. So it makes no sense at all, as the RIVM suggests, to do another test after weeks if there are no symptoms of reinfection.

If there are long-term symptoms after the initial phase, it is called Post Corona Syndrome (Long Corona) and that has to do with damage incurred to lungs and organs. Not with the presence of the virus. Unless the tests also hit on the antibodies that such a person has but then people with natural immunity or antibodies from previous flu viruses also test positive! And maybe the tests at this stage are largely nonsense at all because everyone already has some virions in the frontal cavity and only when that leads to real symptoms of illness do we call it Corona. Meanwhile, the test results do get used to underpin RIVM policy and restrictions.

This is the trend, people are manipulating the information, interviewing hundreds of thousands of people but often with surveys that are so one-sided and colored that they seem to be just to keep the RIVM out of the wind. Real questions, such as whether people would want alternative treatments, are left out and only after the CRO survey does Post or Long Corona take them seriously. But not so again in RIVM's surveys, which question people mainly to find confirmation for their approach.

Long Corona, the aftermath in healthcare, medical costs and social pressure

But then, sometime in the summer of 2020, the realization began to grow that there might be people who had long-term symptoms from Corona infections. This was not news to me, I wrote about it before. The medical world gradually

woke up and „Long Corona“ was put on the map. At first, it was seen as a long term recovery and there was no desire for permanent damage, especially to the alveoli. This was partly because such a thing could mean a huge cost, tens of thousands of people who remained semi-invalid, costing billions in the long run. And maybe the embarrassment, people like me had been ripped off and sent home with an inadequate diagnosis, which of course doesn't feel good.

Now that we are a bit further on, „Long Corona“, or long term damage due to the infection, has been accepted and research is in full swing. The hope is that one will find medicines or forms of therapy that will reduce or completely cure the problem but for now there are really only alternative remedies, some relief can be achieved with physiotherapy and you can be on oxygen and also the insurers have now accepted this form of disease.

From a cost perspective, with Long Corona the question of true healing is important, that is not a matter of being sick for a week or a few weeks, that can take months and years or never pass. And is more needed than physio and relax pills, Pammet's etc. when someone shows Long Corona symptoms. Move and keep moving, that's good advice but beyond that? I went looking for a remedy myself of course, I bought an oxygen system, tried all kinds of alternative remedies and even tried cath (cath) leaves from Ethiopia and that helped quite a bit. but I can't get it anymore, is banned now. I think cath (cathein) that is typically something of the altoplano people at high altitude to improve oxygen uptake, as also coca leaves in Peru and Rhodiola by Tibetans, so maybe for Corona and Long Corona would be something. Something like that should be seriously investigated.

Self-test, self-diagnosis

What is striking is the little attention there was, initially, for self-diagnosis, based on symptoms and for self-testing, which came eventually but only when institutional and commercial testing was already commonplace and lots of money were made there.

In the beginning, to help people see the symptoms, it was limited to pointing out vague symptoms. Fever, some coughing, that's all there was to it, you just had to get tested. Things like loss of taste and smell or the corona toes only came later. At first it remained a vague recommendation: if in doubt, quarantine yourself or go to the doctor for a real test, but in the beginning there was a shortage of those. But in the meantime much more is known, from coronates to loss of taste and smell, decline in oxygen uptake, the blood group (A is more susceptible) but that has not been translated into specific information, leaflets or a self-test protocol. Self-diagnosis is not good but you

can form an impression and thus prevent people from wrongly burdening the system with a cold.

There are also tools. Many people nowadays have a pulse oximeter (25 euros) that also shows cardiac arrhythmia and can indicate oxygen problems in time, blood pressure monitors, pH strips are available everywhere, changes in bowel movements are a matter of observation, change in libido is also quickly noticed, hair loss is quickly noticed, fluid behind the lungs can be felt with some knocking, take loss of taste or smell, with Alzheimer's you no longer smell peanut butter, Corona would not have such a biomarker. It is never asked in all those studies but for example tap water quickly turns out to taste very nasty, you taste the alkali (bases) stronger.

In short, why is there no better self-testing protocol, now people with a simple cold are sometimes seen as Corona infected and then sometimes isolated, with drastic consequences. Meanwhile, the rapid tests are now on the market and a kind of rapid test economy is growing, where you can only travel and join and go to restaurants, festivals, etc. if you have a self-test done or have a recent test or vaccination receipt. But because vaccination at less than 100% effectiveness means that there are vaccinated people walking around who would still potentially be infected and contagious, then often another current rapid test is needed as a precaution.

Adverse factors

Susceptibility to the Corona infection was thus not widely studied, quarantine or if necessary hospitalization were recommended for anyone who became ill. Obesity (being fat) and underlying conditions have been mentioned but not much else has been looked at such as blood type, diet, antibiotic use, gut biome, etc. A history of trauma or PTSD may be an unfavorable factor, and not just for Corona. It is known (among other things from research among veterans in the US and among children who went through a bad childhood) that the more trauma we go through in our lives our life expectancy decreases, sometimes by decades. We become more susceptible to disease. This can also be deduced from, among other things, telomere degradation (a kind of reserve mechanism in the DNA/RNA code) in PTSD/PTSD patients.

So why young children are less susceptible to infection is understandable, they haven't done much damage yet. The experts now admit it, children are less likely to contract Corona, they infect each other less and if they pick it up they are also less vulnerable. So that means their immunity is greater but also decreases as they get older. With contact between children, the virus quickly extinguishes, you could say, the group immunity is high enough. But 1% of the children have antibodies according to RIVM but do we know which children, did

they have a hidden disease, are e.g. C-section births unfavorable in this regard? Is this decreasing immunity perhaps also due to all those vaccines we give them (for specific diseases, they do help against that), to the use of antibiotics, to unhealthy food and living, is there somewhere the key to our entire immune system?

Who died of what?

For a while, every dead person was apparently registered as a victim of the virus, without an autopsy or proper diagnosis (the ordinary doctor indicates the course of events but cannot determine the exact cause of death). The CoVid virus itself does not kill you, it is the effects and side effects that are fatal. Pneumonia is often the actual cause of death. Corona apparently makes dormant conditions active in addition to affecting lung function and they play up, this is what kills you. The lungs are the most common place where problems arise.

Van de Veerdonk (Nijmegen Radboud):

„Covid-19 enters the lungs via the ACE2 receptor. The virus binds to the receptor, which then pulls it into the lung cell where the virus can multiply. In case of a massive infection, this process makes the ACE2 receptors disappear from the outside of the cell. With that, their function also disappears. ACE2 (angiotensin-converting enzyme 2) is known to play a role in maintaining blood pressure throughout the body, which is regulated by the RAAS, the renin-angiotensin-aldosterone system. The RAAS system, and thus ACE2, controls blood pressure by regulating vasodilation and vasoconstriction.“

Why is there flu?

The underlying question is whether the viruses behind flu and other seasonal illness have an evolutionary role. This is not unlikely; a thinning of the population that affects mostly weak individuals just before the mating season is functional. That way, the strongest DNA gets better chances. The endangered species have also developed protection for this, natural immunity. This would mean, however, that there must be some kind of trigger mechanism in the DNA of viruses, probably in relation to external, so-called epigenetic² signals, that activate the virus. This could be related to the weather (humidity/temperature as Maurice de Hond indicated) but also to pollen in the air, certain odors, certain foods, anything. Once those triggers disappear again, the virus goes out. Is isolation still necessary? The whole idea of lockdown, now that we know more, has been taken up and deployed far too heavily, may have stretched the corona wave a bit and prevented overloading of care but also delayed the extinction. Total lockdown would theoretically push that away for a very long time.

Isolation may sometimes be good for the individual, not good for the collective

Personal lockdown or isolation does make some sense. For certain groups, such as the elderly and people with lung or heart disease, there is and will continue to be a risk, even after and with extinction. In a (small) proportion of all people, the vaccine does not catch, such a person can contract the virus and infect others, only the chances of that are much lower. So the high-risk groups must remain very careful and society must take them into account, e.g. through special opening hours and 1.5 meter regime when e.g. elderly people are involved.

Of course if everybody is vaccinated the (assumed) extinction percentage of 75-80% would be reached faster, so it's kind of "social" to take a jab. The USA population is generally more susceptible to the virus, because of life style, fast food, antibiotics and poverty. Also the fear factor, the lack of family and neighbourhood support plays a role.

★ 17 A divided society; the test society

The whole „together“ story is beginning to rattle more and more. The government did not want a two-stream country, no separate policies and measures for risk groups, that would divide society too much. The fact that such a differentiated approach, i.e. special measures and recommendations for certain groups, would cause much less damage to the economy and general social cohesion was not accepted. Everything had to apply to everyone.

But in practice more and more of these divisions are appearing. In addition to practical and ethical objections, the problem of this dichotomy also arises again. Those who have such a passport can do anything, while those who refuse are not. These are not just a few people, about 25% do not want to or are unable to. What do you do with people who should not be vaccinated because of allergies or other reasons? This passport plan amounts to discrimination, to excluding people from participation in „normal“ society. The fact that the 75% approve of this is not an argument from a constitutional point of view.

The registration of vaccinated people is also not in order, the national registration does not know exactly (but for 70%) who was vaccinated when and with what. There is a group where it doesn't catch on and whether that group is 5%, as the suppliers claimed, 10% as the experts now assume for Pfizer or even 30 to 50%, it means that people with a vaccination certificate can still get sick and infect others. Just imagine being on an airplane, if there is someone among them who didn't get the vaccination and is a carrier, then everyone can get infected (again).

So who should get such a vaccination passport, or will there also be a test to prove effective vaccination? It is also clear that vaccination does not bring automatic immunity,.

Easing up with testing

There is broad societal pressure to relax but the danger is not over, there may be new outbreaks, new and more dangerous variants, so how do you loosen the reins without generating too many infections. The solution would be testing, test certificates and quick tests if you want to participate in an event with groups of people, go to a restaurant, theater, concert or festival. This has already been experimented with, in so-called field labs and is being cautiously expanded. But then, just as with vaccination, objections arise. Because even testing can be seen as a violation of physical integrity, it is uncomfortable, costs money, and there are people who absolutely do not want it. And how often should you test, every two or three days, every time you go to a restaurant or want to fly, how do we do that with people in institutions, in schools, on public transport? And what do we do with people who have a positive test result, but are not sick or have symptoms? Maybe they are not dangerous at all and just have an excess of antibodies and antigens,

The test everywhere society

In the beginning there were not enough tests here, other countries did better and therefore could have acted more effectively but that effect has sunk into the numerical sea. Meanwhile, we have become accustomed to testing, there are cheap self-tests, but they are less reliable and not registered or validated. The official testing lines are supposed to register but whether that has been done consistently is questionable. With all that testing, absolute certainty is not guaranteed either, there are always false positives and negatives. The antigen tests are not 100% complete, there is also the question of the entire PCR methodology and whether you should also test children and babies.

That broad introduction of a testing requirement may become very invasive, expensive and burdensome. People are already talking about a test society, where you are constantly dealing with testing, test certificates, rapid tests and restrictions for when you are not tested. Testing once is exciting but such a stick deep in your nose is not exactly fun and it also requires planning and 15 minutes of your time if it has to be done on the spot.

Testing all the time gets irritating and your nostrils get damaged, what do we do about that? Actually we need other testing methods, like breathalyzer tests, blood tests with a very small jab in the finger, and why not train dogs to identify Corona patients.

In many ways, the test society is also fast becoming a Big Brother society; you have to carry a test receipt with you at all times, or charge your smartphone with something like that, so that admission can be more or less automatic.

The government would like to allow larger events to take place as soon as possible, and so it is once again amending the Emergency Law, this time with regard to testing as an entry requirement. Parliament is going along with this, so slowly we are moving towards a society where there will be testing facilities everywhere (or at least at large events), or checks on test certificates and vaccination passports. But those who don't like testing, don't want it on principle, they will fall by the wayside. The two streams are coming into view again. The well-behaved vaccinated and tested are allowed in, the anti-vaxxers and wackos and those who can't afford it or also reject testing are effectively shut out. Those who go along with the „together“ approach and those who still believe in individual freedom will be pitted against each other, just as with the mouth guard requirement.

The cost of testing

And testing costs money too, there are many tens of millions of euros per month being tested by the GGD (70,000 per day), in total the entire testing industry could be costing society a hundred million or more per month right now. For the time being the public does not notice anything of this, you can have it done for free via the GGD but if you are in a hurry you will have to have a commercial test done and that can cost a lot. Companies who want to protect their staff and customers can have their people tested regularly but they have to pay for it themselves. At the German border, where the test requirements are rather strict and a test is only valid for a short period of time, border workers and entrepreneurs already face high costs.

The cheap self-tests (3 to 6 euro) are very convenient and can certainly regulate the influx to hospitals and GGD test sites a bit, but the consumer has to pay for them. This is only a few euros per test but it is inconvenient and doesn't work immediately either, you easily spend 20 minutes to take a sample and get it to give a result in the testing unit.

The government sees the costs rising, especially if, for example, schoolchildren have to be tested every few days. At the moment this still has to be done at the government's expense, but it is now being said that in time the consumer will have to (co)finance the testing costs for large events. It is also clear that this will increase the cost of admission and it is possible that the organizing companies will take this into account and actually bear the costs.

The government incurs enormous costs: a PCR test, including personnel, administration, the laboratory and the supervision and inspection by the authorities, certainly costs more than a few tenners. It is estimated that more than 100 million per month is already being spent on testing and this will only increase if test certificates have to be presented for travel, visiting events and the like.

For testing as access control according to the latest Emergency Expansion Act, the House of Representatives spoke out on May 7 in favor of a free test, as 7.50 € was considered too expensive, but a limited co-payment is more likely.

★ **My personal memories**

To make all this a bit more real, I will add this chapter about how I personally experienced the crisis, so far.

The Corona crisis will not soon be forgotten. We all have our own memories of the crisis, of the lockdowns, of the people we lost, of the misery and perhaps also the fun things from that period. No doubt there will be whole series of books, photo books and videos about how it was, or how we experienced it. It will not be forgotten, it was and is too intense, too unexpected, too much of an experience to be forgotten. Many people will be traumatized by it, perhaps plagued for years to come by what has become lodged in our memories and in our bodies and will continue to have sleepless nights, depressive feelings and other complaints.

In our memories we will also make things better, or worse, add to things and embellish them, this is just how the human mind works. We have gone through phases, after panic, disbelief and denial, we became angry or fearful, looking for scapegoats but gradually started to accept the situation, just bear it out, accept that this is how it was and nothing else.

It is a process of coping, we will try to deny that this really was a big bump in our society and personal life but also let go of those feelings, maybe take action and do something with it, find meaning and eventually give it all a place.

I don't want to project my own experiences and frustrations into generalities but reflect here what I remember personally.

When the first reports reached me, I still saw that as Farawayistan, such things don't happen here, the videos about the situation in China didn't touch me so much. That was the news, every day terrible things happen all over the world, why worry about an outbreak in Wuhan? But the stream of messages continued and through Facebook more and more photos, videos and alarming signals came through, this was no normal disaster there in China, a restless feeling began to develop in me. Around me

there was still a lot of denial, people were still going to winter sports, why bother, there was also bird flu, SARS and Ebola.

Our superior Western health infrastructure could handle it. When even the government began to see that it could be much bigger than a nasty strain of flu, I began to worry more; I felt the panic growing. After all, I was left with the residual symptoms of a previous flu and was annoyed by the happy revelers and carnival goers.

However, the fearful attitude of the government with its medical experts and what I was receiving through social media and emails fell flat and converged into a feeling of helplessness, even more than fear. What was happening, outbreaks in Brabant, more and more warnings and that this really would be a pandemic, then measures, this could not be true, why was no one coming up with solutions? The experts started tumbling over each other? Had they not predicted this, it was coming. I found that irritating, the wisecracking, I did say it! I did care, I knew from my own experience that the Chinese flu could do a lot more damage than a week in bed. Hospitals were filling up, people were dying.

But it was not for me! I was in the risk group but was, I felt, protected because I had already had SARS. I was firmly convinced that this would not happen to me! I was not alone in this; around me were many people who almost religiously believed that Corona was something for others, not for us. In the beginning there were no victims that I knew either. That only came in the second wave, then it got much closer, people around me were getting Corona, there were death friends in my network.

When the measures became really restrictive, the streets emptier and the distractions of going somewhere to eat or store were gone, I began to feel distressed. Not so much fear of the disease and its consequences, more a deep kind of unease. I spend a lot of time with a friend in Zutphen, who took good care of me and with whom I was more or less in quarantine but when I was in Amsterdam for the mail and such I felt the anxious atmosphere there. Not just unsociable, strangely quiet and empty but threatening. I was glad to get away from the city again. And the isolation there in a less hectic environment wasn't too bad, not unsociable either, the Netflix addiction kicked in and as a writer and journalist there was plenty to investigate and find out. You could talk about that, with each other or the few people who came over, but also via social media.

I have many contacts in the U.S., including medical professionals, and I communicated with them a lot, entire Skype nights. The whole election

craze there and Trump's outbursts kept me busy of course, but I noticed that Corona was not yet seen as a threat as it is here. Meanwhile, I developed my own vision about how fear and your gut biome play a role and I saw that it would hit America much harder than us.

An unhealthy lifestyle, more antibiotics in the food, less social security, large groups below the poverty line, the tensions over who would become president, it didn't look good. I knew that the gut flora of the average American was quite depleted and there would probably be many more victims there. My conversations with friends there were therefore frustrating; it would work out, they thought. By now we know the outcome.

In the Netherlands, meanwhile, the whole situation began to lead to slavish and obedient sheep-like behavior on the one hand, and to resistance, opposition and rebellion on the other. Many people were touched by the way in which the government, the police and health care workers, as well as the authorities, observed and enforced the much too strict and exaggerated rules in a inhuman way. I also empathized with family and friends who were only allowed to have contact with those in a hospital or at home behind glass or not at all. Measures such as the curfew seemed to me to be grossly exaggerated and of no use. Not being allowed to walk outside with a few people, it seemed nonsensical. I watched the alternative TV shows on the internet, programs like Weltschmerz or people like Maurice the Dog I found a bit egotistical but also informative and in a way desperately needed. Not because they were right but because there had to be balance in the supply of information. And you had something to talk about after a broadcast like that.

It all came through, on the one hand the press conferences and the medical nitpickers and bag pushers, because that's how I saw those people from the RIVM and the OMT to some extent. On the other hand, there was a growing resistance and a real tsunami of blogs, vlogs, videos and documentaries by experts and non-experts, fake or otherwise. These went against what the establishment wanted me to believe. With facts, graphs, one virologist with fancy titles and impressive positions after another, how many real experts are there really?

The elections began to cast their shadow, I was indirectly involved and theses were entered. A nice initiative like the party 'Vrij en Sociaal Nederland' (Free and Social Holland) went down because of that. It became a protest party and broke down due to internal quarrels and ego-tripping.

Frustrating, because I did believe that something had to be done, the whole political system had come to a standstill. Sometimes I sat in front of the TV cursing what Rutte and De Jonge were debating. Now I didn't

participate in the demonstrations and riots myself but followed it via WhatsApp as if I were there. I got angry at Halsema and the ME, was in direct contact with the coffee drinkers and yellow umbrellas on the Museumplein but that only fueled the frustration. I tried to organize something through the local Amsterdam Salto station but the lockdown made that very difficult. Then you start doing something. I started posting a lot on social media (some of it ended up in this book) and, for example, started a collection of cartoons and photos of police brutality, the veterans on the square, the demonstrations. Unfortunately, I dare not share those in this book, there may be all kinds of copyright claims on them.

In general, however, I became angrier. I really didn't stick to the rules anymore and invited more people than allowed to come over for dinner (and to make music, live music in your living room is a special and often moving experience). My anger about the whole situation and that could well be a way to hide my fear behind it I turned into action, into expression, at least I did something. I still hadn't gotten sick and after more than a year that seemed further unlikely. I had been exposed enough to the virus particles, apparently I was reasonably immune. Anger for me is a signal to take action and when the idea for this book came up, after contacts with Wybren van Haga and others, that was also a way to do something. I don't want to have to tell my grandchildren that Grandpa had only crawled away and quarantined.

All the experiences, the fears, the anger, the mourning for who is no longer here, it's not all in place yet but I do feel that the processing is a long way along.

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