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Subject: Lockdowns, human rights and the future of pandemic preparedness

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For the attention of:

Sir Charles Walker

Conservative MP for Broxbourne

Joint Vice-Chair 1922 Committee

Dear Sir Charles

According to Allister Heath in the Daily Telegraph this week,^[1] two incontrovertible points stand out from Mr Cummings' evidence to the select committee – that 'there was no plan' to deal with a pandemic like COVID-19 and that this precipitated 'a total systems failure'. In his article, Mr Heath goes on to lament about the lack of pandemic preparedness across the western world.

This is yet another curious example of the public being misled by the media during the COVID-19 crisis.

As I am sure you are aware, the UK has a pandemic plan.^[2] This plan reflects the democratic traditions of the nation, recognising that an informed and empowered public will *voluntarily* take action to protect themselves, their families and communities during a pandemic. It accepts the reality that the government *cannot* prevent all deaths, suggesting it is important to identify those most at risk to enable resources to be directed towards protecting these vulnerable groups.

Given what has occurred over the past eighteen months, it seems rather ironic that a key objective of pandemic planning is to *maintain the functioning of society!*

Faced with SARS-CoV-2, the UK, along with most other countries and the WHO, discarded years of pandemic planning – Sweden being the most notable exception. The British Government chose a paternalistic, authoritarian approach, and followed Italy into a Chinese Communist Party style 'lockdown' – a 2020 invention that was not part of WHO pandemic guidelines.^{[3] [4]}

The question that needs asking is WHY were these plans completely discarded?

- Is it because the British Government was terrified by the woefully inadequate Imperial College modelling?
- Is it because decades of mismanagement of the NHS have turned it into a bureaucratic swamp, at the expense of frontline services? Consequently, was it ill-equipped to cope with a surge from a pandemic, and the government was afraid of political fallout?
- Is it because governments (and the WHO) are beholden to corporate interests in the vaccine industry, who stand to make substantial long-term profits through repeated vaccination of the global population with mRNA vaccines?

I, for one, would like some serious and detailed answers to these questions. I am also interested to know why everyone is acting as if these plans do not exist? In addition, why is Mr Cummings (along with many others) perpetuating the myth that a key failure was *not locking down earlier or harder?*

It was clear from February 2020 who was vulnerable to COVID-19 – the elderly and people with significant underlying health issues.^[5] The British Government itself stated on 19 March 2020 that COVID-19 was not a high consequence infectious disease.^[6] In keeping with these facts, initial advice from the Government cautioned the over 70s to shield,^[7] before it did an about turn and shut down the country.

A recent estimate of the global infection fatality rate for COVID-19 is 0.15%,^[8] which is not dissimilar to influenza. Yet, the British Government, along with the rest of the world, continues to respond to this respiratory virus as if it is Ebola, taking away fundamental human rights in the process.

Although pre-existing pandemic plans may not be perfect, the collateral damage from lockdowns,^[9] ^[10] along with the fact that Sweden has performed no worse (and in many cases better) than many countries with strict lockdowns,^[11] would suggest that discarding them was a *fundamental mistake*.

Sweden, like the UK and many other countries, did not adequately protect its elderly in care homes. This was the major flaw in its response. Sweden has had the humility to acknowledge this fact. Perhaps it is not possible to fully protect people with such a high level of vulnerability. However, the British Government could have chosen to direct valuable resources to aged care to reduce the impact of nosocomial infections, instead of wasting billions supporting the fit and healthy to sit at home. Turning the elderly into prisoners is another cruel example of a 'lockdown' mentality policy failure. History will rightly judge the perpetrators harshly for such actions.

Where is the empirical evidence to show that locking down the UK 'harder' or 'earlier' would have saved lives? In reality, the evidence indicates that lockdowns do more harm than good.^[12] ^[13] I would go so far as to suggest this was obvious *before* the Government locked down the country. Even Imperial College noted the risks of their suggested suppression strategy in their infamous 'Report 9', stating: *'Suppression, while successful to date in China and South Korea, carries with it enormous social and economic costs which may themselves have significant impact on health and well-being in the short and longer-term.'*^[14]

In his article, Mr Heath suggests the Government adopt a permanent 'war footing' in its pandemic preparedness; a vaccine should be designed 'within days', and the modern tool of tyranny, the test and trace system, must be 'on standby' at all times. (Perhaps the government can throw in a bell for the dirty social outcasts while they are at it!)

In my opinion, this global fusion of health with national security is the biggest threat to the well-being of humanity; far greater than the risk of COVID-19. Emergency powers are being abused in the name of 'public health' – the result is the destruction of human rights, and possible long-term damage to democracies across the Western world. Personally, I do not want to be subjected to an endless cycle of experimental vaccine products every time someone sneezes! Nor do I wish to live under the threat of ongoing surveillance and testing.

I find it interesting that the concept of being 'ever prepared' for a pandemic has been pushed for years by the WHO and its powerful sponsors.^[15] Many of these sponsors stand to benefit from a world full of fearful and compliant citizens, who believe they are at imminent risk of death from a never-ending stream of dangerous pathogens.

There are two clear winners in the response to COVID-19 – governments, who now have unprecedented control over our lives, and those with financial ties to the vaccine industry. Big tech also has much to gain from increased surveillance and digital 'health passports.' In addition, it seems pertinent to ask how much the mainstream media has gained from government advertising during the pandemic, at the cost of providing critical analysis of the unfolding situation for the people?

Events in the United Kingdom have had a profound effect on the rest of the world, including Australia, where I now live. The influence of the flawed modelling by Imperial College is obvious in the Australian response.^[16] It is *high time* the lockdown myth was debunked once and for all. The deceitful 'we should have locked down earlier' narrative must not be allowed to become part of accepted history in the United Kingdom. If it does, it may have significant long-term implications for democracies across the globe.

Sir Charles, I urge you and your colleagues to fight back against the lies and fictitious narratives that are being perpetuated by governments, public servants, the WHO, and the mainstream media. Tyranny and deception must not be allowed to triumph.

True democracy must be restored, and human rights upheld.

Yours sincerely

Emma McArthur

^[1] <https://www.telegraph.co.uk/news/2021/05/26/covid-could-yet-destroy-johnson-not-way-cummings-expects/>

^[2] <https://www.gov.uk/guidance/pandemic-flu#uk-influenza-pandemic-preparedness-strategy-2011>

^[3] <https://www.nuffieldbioethics.org/publications/ethical-considerations-in-responding-to-the-covid-19-pandemic/read-the-briefing>

^[4] https://www.who.int/influenza/publications/public_health_measures/publication/en/

^[5] <https://www.eurosurveillance.org/content/10.2807/1560-7917.ES.2020.25.12.2000256>

^[6] <https://www.gov.uk/guidance/high-consequence-infectious-diseases-hcid>

^[7] <https://www.bbc.com/news/uk-51895873>

^[8] <https://onlinelibrary.wiley.com/doi/10.1111/eci.13554>

^[9] <https://collateralglobal.org/>

^[10] [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(21\)00193-8/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(21)00193-8/fulltext)

^[11] <https://www.reuters.com/article/us-health-coronavirus-europe-mortality-idUSKBN2BG1R9>

^[12] <https://onlinelibrary.wiley.com/doi/10.1111/eci.13484>

^[13] <https://www.youtube.com/watch?v=8KzZXvT1g-k>

^[14] <https://www.imperial.ac.uk/mrc-global-infectious-disease-analysis/covid-19/report-9-impact-of-npis-on-covid-19/>

^[15] <https://www.who.int/influenza/preparedness/pandemic/en/>

^[16] <https://www.doherty.edu.au/news-events/news/covid-19-modelling-papers>