

NATO's Trojan Horse Behind Europe's COVID-19 Response

Part 1: Vaccinating Europe With a Military Experimental Biodefense Countermeasure

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Did the US Department of Defense, NATO, and the EU coordinate a military response, employing tactics like 5th Generation Warfare and military-grade tools to hide the truth behind the release of a US DoD synthetic bioweapon into the European member states under the banner of "COVID-19 vaccines"?

Operation Warp Speed was a centralized military-controlled response to the COVID-19 pandemic, so why think for one moment that the EU response to this very questionable public health emergency wasn't treated as a trans-border CBRN defense/security threat to the EU?

By looking into the regulatory processes that have applied for the **Conditional Marketing Approval (CMA)** which was necessary for the deployment of the so-called COVID-19 'vaccines' on European soil, we hope to detect anomalies and perhaps even wilful misconduct carried out by the European Medicines Agency (EMA) and the European Commission (EC).

The aim of this two parts series is to identify patterns within the EU COVID-19 pandemic response that match those observed during Operation Warp Speed in the US.

We will establish if the European Commission (EC) and European Medicines Agency (EMA), the European regulator had pre-knowledge of the US DOD plan to unleash an experimental biodefense countermeasure, with the help of NATO, into the European population with perhaps as researcher Sasha Latypova would have said, "an <u>intent to harm</u>".

Was the EU and NATO's answer to the COVID-19 pandemic a military response, and if so, what does it look like? We need to ask:

- What was France's military response to COVID-19?
- What was Germany's military response to COVID-19?
- What was Italy's military response to COVID-19?
- What was Spain's military response to COVID-19?
- What was NATO military response to the COVID-19
- What was The EU Military response to the COVID-19

The technology known as **Synthetic Biology** has been at the forefront of the US Department of Defense R&D's investment with agencies such as DARPA's Biological Technologies Office and **InQTel** at the helm amongst many other actors from the academic world.

We have already identified Moderna and Pfizer as the US government's (USG) biodefense (biowarfare) top partners, so the question is: what were they working on since 2013, and is it possible these so-called mRNA COVID-19 vaccines came out of the same program?

Following our <u>investigation and the disturbing information</u> we were able to gather regarding the development of unsafe medical countermeasures by the US Department of Defense (thanks to Sasha Latypova's <u>work</u>), we decided in 2022 to launch an investigation in Europe to see how much the European Commission and the European Medicines Agency (EMA) actually knew about the history behind the development and manufacturing of the COVID-19 vaccines.

With the help of Big Pharma, military biodefense countermeasures were developed, marketed, and deployed around the world under the pretext of a highly debatable 'public health emergency of international concern' declared by the WHO at the end of Jan 2020.

After more than two and half years of tracking this operation, we began to see a much clearer picture emerge from behind the fog of 5th Generation Warfare (5GW) and the domination of the global information space and public perception (previously falling under the heading of propaganda operations). What has emerged is a joint government-mediamilitary effort that has relentlessly censured scientists and true journalists around the world, whilst shielding the public from the truth. The recent revelations from the Twitter Files by journalist Matt Taibbi and others, clearly show the US government-led component of controlling speech and information across major social media platforms. But there is more.

What do we know so far in a nutshell?

US COVID-19 RESPONSE – THE COUNTERMEASURES

- The US DoD is the Executive branch of Operation Warp Speed (OWS) and they own the "mRNA COVID-19 vaccines" until they are injected in arms.
- The National Security Council (NSC) is in charge of the COVID Policy and not HHS as they will have everyone to believe.
- The Federal Emergency Management Agency (FEMA) is in charge of Operations for the public health emergency COVID-19 response.
- HHS and their Public Health Emergency Medical Countermeasures Enterprise (PHEMCE) only
 act as scientific advisory group to Operation Warp Speed (OWS), they are not executive but US
 DoD is. Their role was only to issue recommendations and rubber stamp approvals whilst financing
 the R&D effort.
- COVID-19 Vaccine are in fact Security Covered Countermeasures not regulated by the FDA under Emergency Use Authorisation (EUA). The US Heath Secretary and the United States Secretary of Homeland Security must secure presidential approval to develop and manufacture security covered countermeasures (not available in the stockpile) to respond to a biological (CBRN) national security threat on the strength of a Public Health Emergency and when an Emergency Use Authorisation (EUA) has been authorised by the FDA Commissioner.
- The Biomedical Advanced Research and Development Authority (BARDA) under the dome of HHS, is in charge of financing the development and manufacturing of these countermeasures. They also seems to have taken on the role of a regulator which they are not.
- Advanced Technology International (ATI) micro-manages Big Pharma OTA contracts for the US DoD and for BARDA. They also have an oversight over the contracts allocated to pharma companies members of the Medical Technology Enterprise Consortium (MTEC) and the Medical CBRN Defence Consortium (MCDC).
- FDA mandate does not provide them with the legal authority to regulate Security Covered
 Countermeasures under EUA. The law is clear... Development & Manufacturing of
 countermeasures under EUA cannot be considered to constitute a clinical investigation, meaning
 none of the clinical trials including subjects, investigators and trials outcomes exist within the
 context of the US code (as Pfizer demonstrated during the Jackson Brook law suit).
- FDA reviewed the Pfizer clinical trials data for the Pfizer BNT162b2 mRNA shot before trying to bury it for 70+ years as the "Cumulative Analysis of Post-authorization Adverse Event Reports" were confirming an inconvenient 1,223 fatal cases and 42,000 adverse reactions as part of Pfizer clinical trial outcome" (source section 5.3.6)
- Pfizer and big pharma were contracted by US DoD and the Biomedical Advanced Research and Development Authority (BARDA) using Other Transaction Authorities (OTA) a form of contract which by nature drastically reduces vital oversight opportunities and protect IP meaning the US taxpayers never get to know what's actually in the jab and same goes for US Government agencies which too will find it very hard if not impossible to get clarity or access.

Read the document here.

What has been reported so far about the Covid-19 injections?

- mRNA 'vaccine' material does not stay at the injection site, but instead can travel throughout the body and accumulate in various organs,
- If the Pharma industry's claims about the mRNA technology are correct, then the COVID vaccines may induce long-lasting expression of the "SARS-CoV-2 spike protein" in many organs,
- mRNA vaccine-induced expression of the toxic 'spike protein' could induce autoimmune-like inflammation,
- and vaccine-induced inflammation triggered by injection contents, including Lipid Nanoparticles (LNP), cause grave organ damage, especially in vessels,

sometimes with deadly outcomes.

Vascular and organ damage are clearly induced by mRNA vaccines, and here is additional scientific proof of causality.

Why were studies such as immuno-histochemistry never conducted nor requested by government regulators to detect either the widespread expression of 'spike protein' or reactions to LNPs in animal trials during preclinical development?

This question burdens the minds of people like **Prof. Arne Burkhardt**, a very experienced pathologist from Reutlingen, Germany, who heavily contributed to this August 2022 <u>article</u> published on the **Doctors for COVID Ethics** website. With the help of his colleague Prof. Walter Lang, Prof. Burkhardt has studied numerous cases of death which occurred within days to several months after vaccination. In each of these cases, the cause of death had been certified as "natural" or "unknown." Burkhardt became involved only because the bereaved families doubted these verdicts and sought a second opinion.

It is remarkable, therefore, that Burkhardt found not just *a few*, but the **majority of these deaths** to be due to vaccination. Clearly, something has gone terribly wrong here, and so it forces us to reflect on the central question:

"If these mRNA Covid-19 vaccines were not safe, not efficacious, not prophylactic, and were harming people (which is what a Bioweapon does) why would regulators such as FDA, MHRA, EMA, Health Canada, etc....would grant vaccine companies marketing approval?"

Burkhardt Group Conclusions can be found **here**.

With this basic knowledge in hand, it has become clear that the people of Europe need to start questioning the true nature of the COVID-19 pandemic and also investigate the biodefense programs that have flourished over the years in countries like <u>US</u>, <u>Georgia</u>, <u>Germany</u>, Ukraine, and <u>China</u> just to name a few.

The need to increase the debate regarding the safety and efficacy of these Biodefense COVID-19 'countermeasures' (pandemic policy measures and 'vaccines') is being felt more than ever, and so part of our recent discussions with various parties was to establish the level of awareness regarding the European Commission and its regulator, the European Medicines Agency (EMA) and the control they actually had over these US military biodefense countermeasures which were granted "Conditional Marketing Approval" (CMA) characterised as "mRNA COVID-19 vaccines" by these two institutions.

Research in Genome Editing

While the Soviet Union stumbled and lesser nations mixed radical ideology with a commitment to counterbalance the West's conventional advantage, the revolution in biotechnology accelerated.

The human genome project, genetic engineering, synthetic biology, and recombinant technologies were carrying the promise of a better life, but at the same time reminded us all that, historically, beneficial technological advancements are sometimes exploited by unscrupulous people, often driven by profits (like big pharma). Non-biological terrorist

incidents close to home have raised our awareness and concern that a new generation of corporate biological terrorists might use bacteria, viruses, toxins, or even designer agents against populations to justify the deployment of expensive covered countermeasures known to us as vaccines.

Throughout the cold war, proliferators had independently selected nearly the same list of weapons agents for tactical use on the battlefield or strategic use to be delivered by intercontinental ballistic missiles. It was a relatively small group (10-20) of agents drawn from hundreds available in nature that had physical and biological characteristics such as pathogenicity, toxicity, ease of production and stability qualifying them for aerosol dissemination.

The following quote comes from a book written by <u>Dr. David R. Franz</u> titled <u>Medical Countermeasures to Biological Warfare Agents.</u> This book is part of NATO Sciences Book series (ASDT, volume 34). Dr. Franz is a Doctor of Veterinary Medicine and a former Commander United States Army Medical Research Institute for Infectious Diseases (USAMRIID) and this is what he wrote:

"To produce a true mass casualty attack the terrorist will likely have to use agents from that threat list developed and tested for biological warfare application. However, because a small non-lethal attack, or even a biological hoax, is adequate to cause panic and lead to coveted national television coverage, the modern bioterrorist probably has a much wider spectrum of agents from which to choose. However, the terrorist spectrum, while much broader, is not necessarily more lethal."

Although the concept and stories surrounding the use of biological weapons are <u>as old as King Herod</u>, modern technology brings many new possibilities, especially with the field of synthetic biology, recent advances in gene editing technology, and so much more – it seems that the sky is no longer the limit. A <u>US Intelligence Community report</u> published in 2016 provided a *Worldwide Threat Assessment*. It was written by James Clapper, former director of National Intelligence, and technologies such as "Genome Editing" were listed in the "weapons of mass destruction" and proliferation section:

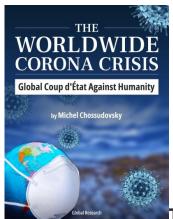
"Research in genome editing conducted by countries with different regulatory or ethical standards than those of Western countries probably increases the risk of the creation of potentially harmful biological agents or products. Given the broad distribution, low cost, and accelerated pace of development of this dual-use technology, its deliberate or unintentional misuse might lead to far-reaching economic and national security implications".

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by Michel Chossudovsky

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"My objective as an author is to inform people worldwide and refute the official narrative which has been used as a justification to destabilize the economic and social fabric of entire countries, followed by the imposition of the "deadly" COVID-19 "vaccine". This crisis affects humanity in its entirety: almost 8 billion people. We stand in solidarity with our fellow human beings and our children worldwide. Truth is a powerful instrument."

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