

Transcript
The End of COVID
Session 7 - Setting the Stage, Part 1

SPEAKERS

Dr. Mark Bailey, Steve Falconer, Patrick Henningsen

Notice to Viewers ([00:00:00](#)):

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The purpose of this presentation is to educate the public on everything there is to know about “the pandemic”, and all the pandemics before it. That way, we can finally end this fictional show that’s been on air since screens looked like this.

Patrick Henningsen ([00:00:29](#)):

Alright, welcome everybody to the end of Covid. This is the opening session. Uh, the title of this session is Setting the Stage, setting the Stage for the Global Pandemic of 2020. Uh, I'm Patrick Henningsen. I'll be presenting this session with, uh, Dr. Mark Bailey and Steve Falconer. Uh, welcome gentlemen.

Steve Falconer ([00:00:50](#)):

Thanks, Patrick. It's great to be here. It's gonna be a good time. Uh, let's show people what's going on today.

Mark Bailey ([00:00:57](#)):

Thank you, Patrick. Uh, absolute pleasure to be here with both you and Steve, probably the first time the three of us have all appeared together, even though we've all known each other for some time. So, let's, uh, get the show on the road, as they say <laugh>.

Patrick Henningsen ([00:01:11](#)):

Okay. Before we start, uh, I want to give you guys an opportunity to, uh, uh, introduce yourselves, uh, and your, your background and your interest, uh, in this area. Uh, myself. Um, I'll be, uh, hosting and presenting this session. I'm an independent journalist. Uh, I'm a founder of a website and meet a platform called 21st century wire.com. I'm also a co-anchor of the UK Column News, uh, is an independent media outlet in Britain. Uh, and also I'm a host of T n T Radio, which is an independent radio network, uh, based in Australia, which broadcast globally. Uh, my interest, uh, in this subject, of course, is, uh, is a journalistic one, uh, but also deep research that we've done over the last three years, uh, in order to kind of inform people of what was really going on, uh, as best we could as this crisis, if you will, uh, advanced along the timeline from 2020 till the present. But in our investigations, of course, we've looked back in time and realized that, uh, in fact, uh, the stage was set indeed for this many, many years ago. So we're gonna try to summarize that as best we can, uh, with our presenters here. But first, I wanna give, uh, you both our, a chance, our panelists to introduce yourself, Dr. Mark Bailey, uh, from New Zealand.

Mark Bailey ([00:02:34](#)):

Yeah. Well, these days, Patrick, uh, I usually just say that I'm the other half of Dr. Sam Bailey <laugh>. 'cause obviously she's got a, a huge following since 2020. Uh, but my story is, uh, like Sam, uh, medically trained doctor, I was in the system for two decades up until 2016. In 2016, I decided that allopathic medicine had major problems. It did not sit well with me, so I exited, uh, medical practice. At that time, I had no intention of having anything to do with medicine ever again. But then late 2019, early 2020, this bizarre situation happened, which we now know is c o 19. And that spurred me to help Sam expose exactly what was going on. So since 2020, I became a critic of virology, a critic of allopathic medicine in general, and have been the chief researcher for the Doctors Bay, uh, platforms that we run. So, probably my most important piece against the virus model has been a farewell to virology, which is a 29,000 word formal refutation of the virus model. As far as I know, nobody's attempted to refute that, um, refutation of the virus model. And, uh, yeah, that pretty much takes us through to today.

Patrick Henningsen ([00:04:02](#)):

And, uh, thank you, mark, uh, and Steve Falconer.

Steve Falconer ([00:04:06](#)):

Yeah, thanks, Pat. Uh, I was actually, uh, my, my professional background in this as I worked in the sham known as the medical health insurance industry, <laugh> back in the, uh, entire 1990s. Um, I'm best known, I'm a filmmaker. I have a channel called Space Busters, and I've got, uh, many, many films, 20 films at least on the subject of virology. In this pandemic, uh, the, the best known one, I think is called The End of Germ Theory, which if anyone wants to watch that, that's pretty much a great place to start. If this is all brand new to you, um, I'm an author of children's books, and I'm also a writer. I used to write for a Truth serum news, um, and like Mark, my, I wasn't doing films about medical industry or anything like this. Um, I had been researching vaccines and virology since 2007 when I needed to find out should I vaccinate my child or not. Um, and I found out back then some very startling things that you don't hear in, uh, in school. Um, and so when the pandemic happened, or pandemic, as we should probably start calling it, I just decided, well, I have a platform. I have a video channel popular, and I started to make films about it. And that's why I'm sitting here today with you two.

Patrick Henningsen ([00:05:22](#)):

Thank you, uh, Dr. Mark Bailey and Steve Falconer. And I want to give both of you a chance just to give an opening statement. Um, and then we'll begin a presentation, uh, of setting the stage. And I'll kick this off by an APTT quote, by, uh, none other than William Shakespeare and the famous quote of all the world's stage, and all the men and women, or merely players, they have their exits and their entrances, and one man in his time plays many parts. His acts being seven ages. So I think this is aptt because really we are looking at, uh, uh, theater, uh, here. So the Pandemic Theater that was rolled out in 2020, uh, this stage was set for this, uh, many years before. And we will touch on a number of things along this timeline. Uh, and I'll hopefully, uh, we'll be able to complete this story to give people, uh, a good background and the ability to kind of look at this in its totality in a holistic way, and also to realize that, um, uh, this didn't happen by a coincidence or happenstance, uh, but indeed, uh, a system was put into place, and that system was snapped into action, uh, in 2020.

([00:06:41](#)):

And we'll be revealing a lot of the details of this step by step. Uh, so we hope this will be a really instructive, uh, session for everybody. But, uh, we'll begin with, um, uh, opening statement by, uh, Dr. Mark Bailey.

Mark Bailey ([00:06:54](#)):

Yeah. Well, Patrick, with this issue of Covid 19, it's a case of how far back do we go? And in some ways, this one starts in the Garden of Eden, but I'm, I'm not going to get into the details about that. But, uh, we know that, uh, humanity can be led astray as it always has been. And this is another example, because as you've just suggested, that this is not about, uh, phenomena in the natural world that we might observe. This is not about biology or virology. The fictional field sprung out of medical science. This is really about how did we get to a situation where the majority of people on this earth brought this story? And, uh, you know, or, or brought this story, I should say, it was brought to them and they bought it, basically. So that's what we need to examine.

([00:07:53](#)):

We need to examine what were the important things that led up to this where people would actually believe that there was a deadly virus that would threaten to wipe out the entire planet unless we locked down the entire world. And to me, I realized I, I had to do something in March, 2020 because New Zealand, outta nowhere just went into one of the most severe lockdowns in the world. And Sam and I asked people around us, are, are you going to go along with this? Because to us, it was just preposterous. Even for those who believe that in contagion and, and virus and all this kinda stuff, you know, we said to them, is this, what, what's the, what's the precedent here? I mean, how is it that we've been just going along so nicely? And suddenly today you are told that, uh, doomsday is coming unless you stay inside, don't shake hands with people. Don't go to work, ruin your business. Uh, put everyone into social isolation. So that's what, um, that's my overview, is we, we have to discuss the, the various factors that led to this point where humanity was so easily convinced to go this absolutely bizarre show known as Covid 19.

Patrick Henningsen ([00:09:18](#)):

Thank you. Thank you, mark. Uh, Steve Falconer.

Steve Falconer ([00:09:22](#)):

Well, well said, mark. And I think anyone, if you're here watching this right now, it's because you smell a rat. Something stinks to high heaven about this. We have never had this kind of hard handed response in the history over some kind of bug or virus or germ or alleged anything, not since 1918 with this, the alleged Spanish flu. Um, so the reason you're here is because you know, something's wrong. We know something's wrong, and you might not know exactly what it is. And the way you do find out is you ask who, what, when, where, how, and why. That's all you do is ask those questions, seek the answers, and then you know what's going on. We all know that every government in the world acted in what's called lockstep together. They did it, then they did it, then they did it. Now, governments are notoriously slow at getting anything done, <laugh> with legislation.

([00:10:18](#)):

They don't move like this, but they sure did this time. So you have to ask why, how, and most importantly, what is the real agenda here? Why did they do this? If this is a big hoax and a planned demic and a scam, demic, what is the end goal for this? And I think to understand this, we need to know there's nothing new under the sun that wasn't Shakespeare. But someone fun said that, <laugh>. Um, and I think, uh, we could go back even to the 1910s, like the Flexner report, Rockefeller Medicine, when holistic medicine and naturopathy gets replaced by what we're in now, this allopathic model of petroleum-based pharmaceutical products. And you start to see it looks like a coincidence. But when you start to see how pol the politics and virology start to go hand in hand every single time with every

single event, it can no longer be coincidence once fine, twice fine, 400 times, no <laugh>, you know? Um, so you, you know, quite a bit about the Flexner report, right, pat?

Patrick Henningsen ([00:11:27](#)):

Yeah. I think that's a good place to start, Steve. Um, I think that's an excellent place to start, because that's the beginning of the, uh, the, the modern medical industrial complex, uh, the modern pharmaceutical, industrial complex. And this, uh, is also a very nice segue, uh, to, uh, mark Bailey's work as well in, uh, just kind of deconstructing virology, um, as a science. But, and also to that virology and the pharmaceutical industry are, are two complimentary parts of, of a whole, uh, one cannot really, uh, thrive, uh, or exist without the other. Uh, and the timing of, uh, how they came to the fore, how they, uh, became the sort of emergent institutions, uh, in the United States under that flexner, um, initiated medical industrial umbrella, I think is really important. Because without that, without those, those phenomenons coming into, uh, confluence, uh, really there would be no way, uh, for, uh, a, a system to be constructed, uh, that brings together the pharmaceutical industry, the government, uh, in the military, in this case, with the C Ovid 19 response as well.

([00:12:37](#)):

But, and, and the academic institutions, the media, everything came together. And I think this is a long process. You could say that, uh, it took over a hundred years, uh, for modern society to get to the point, uh, where we have this climactic, uh, uh, event, um, that's really is down to the ability of the system to execute, uh, a global pandemic, uh, a virtual pandemic, if you will. Um, and, and it couldn't happen without all of these pieces coming into place. And it's really decades, uh, a century in the making, uh, historically. Um, I'll, I'll, uh, pass the, uh, the baton to mark on this, uh, on this timeline. Mark, uh, gi give us your sort of thoughts on the origins, uh, of how the stage was set, uh, for the modern global pandemic.

Mark Bailey ([00:13:30](#)):

Yeah. Well, as I alluded to earlier, it is so difficult to pick an exact starting point, and we're not claiming to, to pinpoint anything here, but we are just giving the general overview of, of how this built up. And I think, um, yeah, it was good selecting something like the Flexner report, because importantly too, it's, these reports come out, it's not just about what they say, but it's about who picks up on them and, and how they run with them, and who actually funded it in the first place, obviously. And we know that, uh, there were conflicts of interest with funding of the report and what it was designed to do, as you say, to get the pharmaceutical industry basically roped in with, uh, medicine and, and virology, uh, into the self-sustaining beast that it's become, so importantly, one of the biggest take home things from that era.

([00:14:21](#)):

The Flexner era was saying to people, well, you can't really take care of yourself. You need to go to allopathic medicine because they've got the pharmaceuticals, they've got the vaccines, they've got the surgery, they've got the knives, they've got the agents of, uh, you know, curation basically, or treatment, uh, when they were anything. But, so I think that was really important. It was taking that power away from people, and that became fully, uh, magnified during the Covid 19 era where people were told, Hey, you, you've got no say in the matter here whatsoever, to the point where they took away people's basic rights, uh, probably for the first time ever during an alleged pandemic. Although maybe, as we say, a little bit of that happened in 1918 with the Spanish flu as well. But, yeah. So to me, that's, that's really where the Flexner report, um, some of the impacts, um, which, which came through a hundred years later.

([00:15:17](#)):

And in terms of these time horizons, we know that these groups that, um, you know, we can call them whatever we want, the call or, uh, whatever, but who organize these things. I mean, they, they do, they operate with very long timelines. And you can read Rockefeller reports from last century. You know, you can read white papers of these various organizations, which have been around, uh, for many, many generations now. And their plans are very long term. And they talk about things like ideal numbers of humans on the planet, et cetera. And hey, they, they project a hundred years ahead and they make plans a hundred years ahead. So I think that's what people often underestimate as well. Uh, the, the importance of things like the Flexner era.

Steve Falconer ([00:16:07](#)):

I think it's also important, mark, the other thing about that time is it's when we start to see the beginning of what people now call globalism, the globalist, they wanna top down world governance. Um, and it's these same players who are involved in the medical, like the Rockefellers. He's one of the big G globalists, you know, and he's into the depopulation and Club of Rome and Council of Foreign Relations. And you start to see these same players go hand in hand. They were also involved in the eugenics movement, which was the belief that some people, you know, shouldn't be allowed to breed because they were genetically inferior <laugh>, you know, genetics start coming into this. Um, so it's kind of strange, and it's not really an accident that the medicine start going hand in hand, like you were saying, off camera Mark. These used to be a joke, the cold, the flu, mumps, measles, chickenpox. Right? You were saying about chickenpox parties, right? Like, you take your kid to the party and try to get 'em to chickenpox, <laugh>, it was no big deal.

Mark Bailey ([00:17:10](#)):

Yeah. Well, and I, and I think that's what we can certainly talk about next, was what actually happened last century compared to what they're actually telling us, because we know that these alleged infectious diseases were disappearing last century. I mean, things like, uh, you know, smallpox and these deadly conditions in most countries, they completely disappeared. Rates of things like measles went right down. But not only that, the severity of the illnesses were, were going right down. Now we know there are problems with the way allopathic medicine classifies these individual, uh, alleged entities, and they're probably just, uh, uh, expressions, uh, of different severity of the way the body can react to, to illness. But aside from that, we know that the population in, uh, developed countries was getting much, much healthier. So we get right through to the 1970s, uh, when a lot of us were, were kids.

([00:18:09](#)):

And vaccinations at the stage are kind of optional. There's not that many available. Nobody really gets too upset if people don't take them. Uh, nobody virtually in the world is taking influenza vaccines. That's, that's not a thing. Even, uh, for the elderly, it's not very common, uh, et cetera. So at this stage, you know, we're, we're into the, the late seventies, early eighties, and institutions like the c d C are scratching their heads going, well, we don't really, uh, have anything to do anymore. 'cause there are none of these, uh, alleged, uh, pandemics going on. Uh, the population's not buying it. Uh, people have got pretty casual about whether their kids get vaccinations, et cetera. And, uh, we're living in a pretty good time. And I think, um, for, for people who are new to this, uh, a great book to start with is dissolving illusions, uh, by Humphreys and Vitri.

([00:19:04](#)):

And they've just documented it on government's own records. So there's no, there's nothing going on. They're not making up new theories about what happened. They're just saying, like, look at their own figures about how people were not getting these diseases anymore. Certainly weren't dying from them,

had nothing to do with vaccinations, can not possibly be to do with any pharmaceuticals, et cetera. It was simply because living conditions were improving, nutrition was improving, sanitation's improving, et cetera. And these diseases are all but disappearing. So I would say that if you tried to pull a pandemic, uh, in the 1980s, uh, you were up for a pretty hard job. But, um, they, they managed to do this. <laugh>, we can talk about that. But, uh, they did it. Good one, <laugh>. Well, they, well, they did it, I should say they did it in 1976 as well, with the so-called swine flu.

[\(00:20:01\)](#):

And here's, we should talk about that a little bit, because here's an example of the same illness suddenly being given a new name. So previously, it's just the flu, and everyone knows about this, and you take a day off work, et cetera, and have some, uh, hot soup and, and recover. So suddenly it's the swine flu. Now what, and where did this come from? Uh, it came from pigs, you know, and it jumped species. So, so now we're creating stories, uh, to the public, and, and I mean, if people are thinking, oh, but isn't there science behind this? No, no. People like myself and others have exposed this. There's no science behind it. It's just somebody saying, we think that this thing came from pigs, and we did a few molecular detection techniques, and we did a bit of genomics. Um, at no stage did they find a virus or show that it came from a pig or anything like that. So really, the swine flu is one of our first examples, I would say, of a marketing campaign where they, they take it to, to the road. They take it to the mainstream TV networks and say, Hey, swine flu. So Steve or Pat, I, I don't know if you want to jump in there before we get into the 1980s.

Steve Falconer [\(00:21:10\)](#):

Yeah, because it's such a good point. You make, and I think us three we're the same age. We had like three vaccines when we were little children. Like, we didn't have, how many did they get now? Th I don't think it's like 30 or something in America.

Patrick Henningsen [\(00:21:23\)](#):

No, the, the schedules of between 50 and 60, uh, average 50 in the United States. Yes.

Steve Falconer [\(00:21:29\)](#):

Wow. Yeah, we had three. And also, really, when you look back, it was always the four major culprits, chickenpox, mumps, measles, maybe diphtheria, and, you know, scarlet fever, maybe rubella. But, um, suddenly, like Mark's saying, all these new ones just come flying outta nowhere, you know? And we know, as you were saying, uh, you know, when they stopped using lead arsenic and d d T to spray crops, suddenly the polio went away. And sure enough, you know, <laugh>, those things cause polio like symptoms. But what's important, I'm gonna share this real quick. Um, a book came out in 1972 by a group called The Club of Rome. And these are the globalists. Um, they were into population control. These are the eugenics. And, um, they argued on page 180 9, they said that if they didn't get world governance and start looking at controlling and curbing populations, that war pestilence, which is plagues, you know, a covid bubonic plague, a raw material starvation of, uh, eco, uh, industrial econ economies or general generalized economic decay would lead to social disintegration.

[\(00:22:43\)](#):

So what they basically did, this is called the Hegelian dialectic, um, David Ike calls it problem reaction solution, or you can call it thesis synthesis, esis, you, basically, what they're saying is, in order to justify world governance and population control, there needs to be constant war plagues. Like we're seeing covid and all these diseases start popping up and material starvation, <laugh>. And so they can say, see, it's, it's you guys' fault. You know, we need to control this, or society's gonna collapse, and it's all your

fault. And by no coincidence, this is 1972 by the same people, the Rockefellers, and all these globalists, like Mark's saying, all of a sudden 1976 swine flu, and then 1980s, all of a sudden aids, you know, people are somehow catching monkeys in Africa and having sex with them and spreading a deadly disease. I mean, you know, I was in India and Pushkar, the monkeys would jump down and grab your, your phone and your wallet and your food.

[\(00:23:47\)](#):

You can't catch a monkey <laugh>. So, you know, that whole story is ridiculous. But it brings us up to Yeah, like what we've seen recently, all of a sudden. What do you mean, Zika, Ebola, swine flu, bird flu. What, where were these the last 200 years? Right? Did anyone, have you ever read literature about any of this 200 years ago that wasn't around? Right. And that brings us, maybe, mark, you wanna get to the HIV 'cause this is really where the testing comes. This is really where the, the complex gets their, their act together.

Patrick Henningsen [\(00:24:20\)](#):

Yep. Uh, before we go to Mark, uh, that's a great point, Steve. So I think what we're looking for is, um, how do you operationalize, um, a pandemic? So in the 20th century, you have the big, uh, you know, pestilence events, uh, the Spanish flu, uh, in the early 19 hundreds, and you have the Hong Kong flu. So, uh, again, these are branded with locations, and the narrative is that they spread around the globe. And this was a global issue. So that's the globalization of the, uh, the epidemic, if you will, uh, making it a pandemic. And then the other thing that's really required is that you have essential government program within each nation. Uh, so this kind of opera, opera operationalized public health, uh, uh, protocols, uh, in a national setting, and then that can then be extrapolated and up to a international setting via the W H O as a global organization to help administer this.

[\(00:25:21\)](#):

And so that, that's on the administration side and the protocol side. And I think the other thing is, which we'll talk about is technology. The, uh, the advancement of technology in, in the, in areas like genomics. Uh, and, and also P C R testing is a good example. Biostatistics, computer modeling of epidemiological models. All of these, uh, technological developments that are, um, we're led to believe, um, are, you know, giving us a true picture of what's there in the world, in nature. Um, it may or may not be, and I'm sure you, you both of, you'll be able to explain that side better. But for public health officials, for government, that's acceptable. What, what these technologies have produced gives them the mandate to move forward, uh, in, in, in an aggressive way in implementing, uh, countermeasures, uh, for a pandemic, uh, and then subsequently a, a, a vaccine rollout.

[\(00:26:18\)](#):

So I think we saw it as Mark said in 76, the swine flu vaccine, which was halted after, uh, cases of, uh, guion Beres syndrome. You can comment on that as well. The symptoms being very similar, in fact, to polio. Um, uh, and, and also the zoonosis theory, that that also I think, sprouted out of the 76 swine flu, um, scare, if you will. And, and so technology and just the building of this bureaucracy, the public health system, nationally centralized, uh, control, policy control and action nationally and then internationally, taking their cues from the W H O, the, the, these things took decades to build and to equip. And the technology has just accelerated it, um, at a speed that's, uh, blinding, uh,

Steve Falconer [\(00:27:09\)](#):

Right now, I think internationally is the most important word there. It's, it is now, it's the World Health Organization, not the national health, you know, and all of a sudden it's the W H O and the World Bank

and the Bank of International Settlements, all of these globalist institutions now have their nose in every local little business. You know, if Ebola breaks out in Africa, what does that have to do with them? That should be their problem, right? You see, so you're right, right. At this time, these globalist operations have their nose and everything. Same with the H I V. Oh, we've got the, we've got the H I V A Z T cocktail for you, but, uh, you know, it's expensive. We're not just gonna give it to you. So, you know, we'll give it to you at 30% interest and take all your minerals, <laugh> for the next 40 years to pay us back for the drugs, you know? And yeah, you start to see the world cartels starting to take over, not just the governments. And yeah, mark, I don't know if you want to, I mean, HIV is, maybe we should go there. It needs to be discussed. What really happened, because when I was a kid, I bought that story. I totally bought h i v, we were scared to death. We didn't want to have sexual relations with anyone, you know, in high school like this, frightened everybody. And it's not really what was going on. Was it Mark?

Mark Bailey ([00:28:30](#)):

No, not at all. And, uh, before I get to H I v I'll just, uh, respond to, um, Patrick's, uh, question just about the, um, swine flu, uh, vaccine problems and, and absolutely right, Patrick, back then it was, uh, just a small number. I think, uh, well, when I say small, there, there were something like, uh, 17 deaths, I think, in total. Um, but compared to what we would see later on, obviously back then, I think the difference was it was reported by the mainstream media. So the mainstream media would say, whoa, hey, uh, we've got a couple of people that seem to have had really bad reactions to this vaccine. You might want to just be careful, talk to your doctor. Uh, and I think the importance of that was, that was, um, I mean, obviously the, the mainstream media did the right thing back then.

([00:29:17](#)):

But what happened leading up to this whole setup was that the people conducting this campaign learned that you could not have the media saying anything negative about vaccines, because the smallest thing would basically get everybody saying, whoa, I'm not, I'm not gonna be the one getting the next, uh, adverse. And so, yeah, a really important, um, and, and I think a lot of these pandemics and what, we'll, we'll call them that maybe, uh, and we'll talk about other factors, but I think that they learned from them. They observed and said, what, why get canceled? Or, you know, why, why did those people have so much influence? And those ones didn't? Or, you know, I, I think they, they watch what happened with things like the swine flu, uh, et cetera, and, and learn from it. But yeah, onto HIV and here we go, because this is another classic example, and this just went into overdrive in the Covid era.

([00:30:12](#)):

We simply take pre-existing conditions and alleged that there's a new virus causing, uh, these pre-existing conditions that, um, uh, things with H I V or the syndrome of aids, we should say. So lymphoma, kaposi, sarcoma, tuberculosis, et cetera. These are not new illnesses <laugh>. But all of a sudden they say, if you've got one of those illnesses and one of these antibody tests turns out positive, then hey, presto, you've, you've got HIV infection, you've got aids, you're gonna die. And I think, as Patrick was saying, this is the technological era creeping in. This is, we've gone from, you need to see your family physician who will carefully check you, talk about your history, examine you carefully. Oh, we don't need that anymore because the blood test will tell us all we need to know. And it's, uh, it's definitive. So it was really, um, sold to the public that now that we're in the 1980s, uh, we don't really need to bother with, uh, listening to what the person has to say, what their story is.

([00:31:22](#)):

We just, uh, run these tests and, uh, if they're positive, we've got another case and we, we know what we can do. But, and also the coordination, because yeah, they start, um, creating these criteria where essentially, like these days, for instance, uh, virtually every pregnant woman in, um, developed countries

and some developing countries would get one of these HIV antibody tests. So <laugh>, you know, we've gone from just a few people are getting this test to, hey, now everybody who's who, who has to get it as a screening test. And I would say that most people in the developed world have had an H I V antibody test at some stage of their life. And, and this is absolutely obscene because, you know, as groups like the Perth group have shown, the antibody test has nothing to do with a virus, the virus never existed.

[\(00:32:16\)](#):

Um, the antibody tests were simply showing that a person may be unwell, but there are around 70 conditions we know of that could cause you to have one of these positive antibody tests. So here we're getting into this non-specific stuff where they're saying, Nope, this is the case, even though the criteria are very loose. And, and the other thing was with that era, what was, it went from basically, you know, saying that, oh, yeah, sexually transmitted diseases. Yeah, we had syphilis and things like that in the past, but they're not that important anymore to the H I V era AIDS era, which is, oh my goodness, you could, uh, initially they said, you know, you could get it from kissing, potentially. They're saying, well, we're not sure, we'll just have to watch out here. And then eventually they said, oh, no, you have to have sexual intercourse, da da, da, da.

[\(00:33:04\)](#):

And, uh, but I think what happened with the way that quote pandemic burnt out was that the world caught onto it and said, I mean, I don't know about you, but I grew up with guys who said, well, that's funny. I've slept with over a hundred women, and I've never got this thing before <laugh>. And they, and, and the epidemiology made no sense because we had Oprah Winfrey, I think in the 1980s saying that a third of Americans will be affected by the end of the century, and that, you know, all of the heterosexuals, et cetera, will be. And, and for a while at work, people were really, really scared, and they, they worried about these things. And they, I think that was probably the first time we saw mass behavioral change, you know, in the population where people did change their behaviors. Um, people started using condoms more often, not relying on these other forms of, um, contraceptive, et cetera. And, uh, so, so to me, that was, uh, an important part of the timeline as well. But, um, yeah, your thoughts, Steve?

Steve Falconer [\(00:34:08\)](#):

Well, I, yeah, I think it's also the, the first time we saw where they offered a long-term treatment for a virus, right? Oh, you, you, you've got this HIV it doesn't just hurt you now, and it goes away like the flu or the cold. Like you've gotta be on this cocktail for the rest of your life. So you start seeing the cash cow coming in too, you know, and oh, and you've got population control in here too, because everybody was afraid to have unprotected sex during that whole time because you thought you were gonna catch, you know, the death disease. And, you know, you'd, oh, I'm not gonna do that. So again, yeah, it's a good point. You've got population coming in, you've now got long-term medicine, which we'll probably be talked about later in this conference. But a z t was taken off the market as a cancer drug back in the sixties because it was destroying bone marrow and murdering people, you know, and all of a sudden they're like, oh, well, we can repackage this as a experimental drug. And as Patrick said earlier, he, it's important the military gets involved during HIV, right, pat now we've got Anthony Fauci and what's her name? Uh, Debra

Patrick Henningsen [\(00:35:16\)](#):

Berks.

Steve Falconer [\(00:35:17\)](#):

Yes. She was involved in the HIV as well. So back then you had Fauci and Debra Berks, and now here we have these same two names show up now. Right. Uh, again, and I don't think this is coincidence. Do you have anything else to add about HIV or,

Patrick Henningsen (00:35:32):

Well, I, I will say, you know, in talking about how this, the, the, you know, to roll out this operation, uh, a military style operation with government, public health, pharma, and media, uh, a great book is by, uh, Dr. Nancy Turner Banks, which published in 2010 called AIDS Opium, diamonds and Empire. The Deadly Virus of International Greed really breaks down this kind of, all of this whole system, whole of society approach with, uh, HIV and aids and, um, and how effective and how, you know, powerful it was. And it really just steamrolled the public. And like you said, uh, Steve, that social engineering component of changing people's behavior. Um, this is one of the first times we've seen this in really rapidly taking effect on the whole population, not just, uh, a tar, a targeted area like, um, uh, gay men, for instance. So that, that, that was, and, and the pharmaceutical, uh, solution, the countermeasure on, on the backend.

(00:36:31):

Um, so, uh, and also redefining the, the virus, uh, is a amorphous, uh, lingering forever HIV so developing new powers and abilities, uh, that no other virus had before. Um, so yeah, this is really important. This was, this was a globalized, it was a globalized pandemic. And, and I think that was really important. Um, it, so, you know, on the timeline, I'll go back to Mark in a second. Um, so on the timeline, I've identified an, uh, a couple of, uh, key points. And one of them is, and another book of course, is Virus Mania, uh, third edition, uh, who Dr. Sam Billy's a co-author. Um, and, and, and that's really just a kind of, uh, if you will, uh, uh, encyclopedia of pandemics and, and what's really behind them. Sars one was establishing the brand that's really setting the stage. If we're talking about actors, and we're talking about brands, recognizable global brands.

(00:37:29):

SARS one was a rockstar of respiratory viruses. This had great, uh, traction globally. Um, so much so that, you know, the increased, uh, wearing masks in Asia, uh, massively increased after SARS one, a lot of people were scared. Uh, it, it was said to have a high infection fatality rate. All of these various claims helped to create the, the, the image, the brand of sars as, as a really deadly virus. So in 2020, when they named the novel Coronavirus, sars COV to two is seen as a sql. And I don't think it would've been successful without that previous brand awareness. Having built that baseline brand awareness and the brand power of sars, uh, I, I don't think it would've worked. It wouldn't have had that immediate traction. You've, you've had that educate the population, uh, on something, a new name or something. So it was really important that it had that kind of, um, that sort of follow up from the, from the previous pandemic.

(00:38:34):

And then the other thing which is worth looking at is 2009, the H one N one swine flu, uh, pandemic. This was the real operat, um, operationalized, uh, uh, pandemic. It's when the policy met the actual manufacturing, the distribution of, uh, the drugs, the antivirals, um, vaccinations were then recommended as standard for the flu. And you started to see the levels really creep up there. You also had, uh, pregnant women became, uh, uh, an issue of concern, uh, school dismissals. They had a new system. The C D C implemented the, the, uh, the emergency school dismissal system that was put into place in 2009. You had, uh, the pandemic, uh, be becoming a worldwide phase six, uh, uh, uh, by the W H W H O. They would lower, they lowered the bar, uh, for declaring a global pandemic in 2009. You also had the concept of waves, the second wave they had that year that led to the, the, the fast tracking of a vaccine, uh, with f d a approval.

[\(00:39:44\)](#):

Again, this idea of waves. This came in in 2009. And then we also had, uh, cases were reported not just, uh, confirmed cases by diagnosis, but suspected cases became part of the dataset that was an important, uh, uh, precedent in 2009. And, and the other one would've been also the stockpiling of retrovirals, the stockpiling of vaccines. So the ramping up the manufacturing, the global distribution, all of these, uh, these systems that were, um, and this was kind of a test run, if you will. It may have been, uh, uh, it could have been the run or maybe it was a test run. But I, I look at this more in a holistic way that these systems take many years, decades to build and to the capabilities become when you can say, mass produce a P C R test, and, and, uh, and, and also be able to design vaccines with a global gene bank of genomic sequencing.

[\(00:40:49\)](#):

And so the now vaccine development can be done in hours as they boasted, uh, for the covid vaccine. So all of these different things, uh, are, are creating the conditions for a rapid phenomenon to take place globally, which couldn't have taken place the same way in previous years. So each year comes, uh, you have the, the capabilities just increase and increase and increase. Um, so those are some of the things that I noticed that case demic became a thing in 2009. So although it wasn't as the H one, N one wasn't as deadly, uh, according to their numbers, all of these things that we saw as big features in 2020 were, were, were kind of introduced, uh, many of them in in 2 0 0 9. But I'll, uh, I'll hand it over to Mark, uh, to talk about this and possibly, and also to talk about your, your timeline mark of, of really important, uh, watershed moments that set the stage for the 2020 SARS COV to two global pandemic.

Mark Bailey [\(00:41:52\)](#):

Yeah. Well, Patrick, I think SARS one is a, is an absolute essential, uh, point to discuss here and, and quite correct, 2002. Now, interestingly, I was a hospital doctor at this time, and I hear these vague stories going on, and when I looked into it, I was sort of a little bit perplexed as to how they had a new illness, because they were saying that you had a fever, you know, severe shortness of breath, respiratory symptoms, maybe some changes on CT or chest x-ray, uh, which to me sounded like, uh, severe pneumonia, which, uh, already was an entity, you know, <laugh>, so and so, I was a little bit perplexed as to how they were doing this, but because it wasn't really affecting where I was working, I didn't look into it anymore. And, uh, but certainly we know, looking back that once again, we are simply, they were simply rebranding, uh, people who had lower respiratory tract illnesses.

[\(00:42:52\)](#):

Now, in this case, too, people will often say, well, you know, the difference between SARS one, SARS two, SARS one was much more deadly, da da, da da. Well, no, actually, the case definitions are just really different. So with SARS one, you had to have a fever, for instance. And I think in retrospect, they worked out that, well, that reduces your case numbers, big time <laugh>, suddenly most people don't have fevers of, of 38 or above. So that, uh, rules that out. And then including things like, uh, having severe respiratory, uh, symptoms, that's very uncommon for children or younger people, you know, that's real minority stuff, so you're not going to get cases doing that either. So the, that's, that's where people get confused though, with case definitions. And they don't understand, like you say, what a case stomach is, where an epidemiologist or the W H O can simply make the definition whatever they want.

[\(00:43:49\)](#):

And we know in COVID 19, this went into insanity overdrive where there were no symptoms or signs or confirmatory investigations, simply a molecular detection test, whether it's P C R or rapid antigen test. And this is so preposterous, it was just, uh, right into circular reasoning. But I think SARS one was where

they learnt this, they learnt that if you make a strict case definition, you, you don't get many, uh, cases <laugh> and, uh, obviously back then too, you, you touched on that important point. They didn't have the mass testing set up. So during that era, P C R was not that commonly available. It was used in some areas like, uh, for alleged detection of quote, viral load and, and HIV. But in terms of day-to-day diagnostics for most doctors around the world, they had no access to, to P C R kits.

[\(00:44:47\):](#)

So that, that wasn't a thing. And it was only later on during that, uh, alleged, uh, epidemic that they came up with a A P C R kit. I think that was, you know, could be used, but, uh, not widely available. And as you say, the systems had not been set up. They didn't have factories producing these things by the millions, uh, ready to go the, but it was, I mean, like you say, it caused shock waves in Asia and caused some changes in behavior with people wearing face masks and being reluctant to travel, et cetera. Um, but really for most of the world, uh, just, just caused not much more than a ripple. But then of course, yeah, like you mentioned, we get into these, uh, fraudulent, uh, well, first we had the avian flu, the alleged avian flu in 2005. And you know, this is the kind of scam they run where they find some dead ducks in hepatic, and, uh, they say, wow, must be the flu.

[\(00:45:44\):](#)

They don't run any other tests on them and then do a molecular detection technique and say that, wow, we think, uh, it must've been a virus that got them, looks like, uh, deadly avian flus coming our way once again. And again, it was, you know, the questions were put to authorities at that time saying, well, how's this different from ordinary flu? And they didn't really have any answers, of course, on a scientific front, they had their PR campaigns in full swing, which is to tell people that, you know, birds are dangerous. Um, just be careful because with this zoonotic problem, we've, we've got, and, and I think we should point that out, like even on their own terms, doesn't this seem weird that people have been living with animals for thousands of years, and it's just in the last generation that this has become a problem?

[\(00:46:31\):](#)

<laugh>, like, like as Steve was saying, now we've got like a, a virus a month coming out, you know, and, and most of them, they're etching must have jumped out, um, of the animal kingdom somehow. But I mean, this is preposterous on its own terms that, um, you know, in general, we, we'd got to the end of, like, we talked about, we'd got to the end of these so-called infectious disease problems, and, and now we're apparently facing one, you know, at least one a decade and maybe more so, yeah. And then, um, swine flu 2009, complete joke, because they were initially making out that it was going to be terrible. And then most people that year were saying, well, you know, I've had the flu before and this was pretty mild <laugh>, so that kind of sunk that campaign. But like you say, it was, um, it was engineered at the highest levels because that very year, the W H O changed the definition of pandemic.

[\(00:47:27\):](#)

Now this is obscene, these are supposed to be scientific terms. You don't change them. You can invent something new and say it's something different we're now dealing with. But previously pandemic meant like a severe illness that, uh, had a lot of cases, uh, causing severe morbidity and mortality around the world. And quietly, the W h O just update the website and say that, well, basically it's just cases, you know, if there's lots of cases that that that'll do. And as we talked about, um, already if you create these loose case definitions, you, you get as many cases as you want. So, yeah, once again, um, I, I think they were using these as, as like test pandemics. Um, certainly in 2009, the production of vaccines by this stage is, is insane. I mean, they can make millions and millions of doses in a matter of weeks.

[\(00:48:19\):](#)

We've got new technology coming through, uh, which, which allows them to, to up production. We've also got, as you mentioned, now, antivirals are creeping into the picture. And, and I'm practicing medicine at this stage, keep in mind, and I'm not prescribing any of these things to anybody, I'll tell you that because, um, yeah, I used to be involved in clinical trials and I actually had a family member who was involved in the Tamiflu trials. So I had some inside information and knew that these things didn't work and could make you pretty crook, give you hallucinations and all sorts of problems. So yeah, obviously, uh, these antivirals, which previously, you know, influenza as we've talked about, joke, illness, we, you know, we take a day off work, we take some chicken soup, uh, you know, sweat it out, get better, et cetera. Suddenly now we have to take pharmaceuticals, uh, for a week. And, uh, these pharmaceuticals come with, uh, side effects, you know, that are listed over about four pages. But, uh, don't worry about that because instead,

Steve Falconer ([00:49:25](#)):

And, and they're flu-like symptoms, the side effects are flu symptoms, <laugh>

Mark Bailey ([00:49:30](#)):

Well, Steve, sometimes, sometimes the side effects of death as well, which, uh, is not, not that common with the, for most young people with the flu. So,

Steve Falconer ([00:49:39](#)):

Yeah, you know what else comes in though? Like, if we could just back up to SARS one again, what came there was the mask, the, the mass use of masks in Asia. Remember the, all of a sudden the Asians are wearing masks and that carried on even up to 2019, you'd still see Asian people coming from the airport wearing masks on the train. It's like they never took 'em off. And I think that was where we got trained. Um, swine flu was, like you said, Patrick, it seems like they tried to tie on the old one again with the new name. Like they took the 76 1 and like, Ooh, could we pimp the swine flu a little more, just like they did with SARS CO two? Like, like you said, it doesn't have the same mental effect unless you can relate it to something scary, you know, that you had before.

([00:50:26](#)):

So I think that's also important from this time. As Mark's saying too, SARS one, they didn't have P C R tests readily available for everyone yet, but it starts coming the manufacturing. The other important thing is SARS one, the guy who invented the P C R test for that was Christian Roston, and he's very prominent in the SARS COV two, and he holds the chair that a guy called Rudolph OW did back in Germany in the 17 hundreds, which we cover later in the history of virology. But Veau was the first time, 'cause the people didn't trust me, the government, and definitely g government medicine. And he was the one who came up with the idea that we need to nationalize medicine in case of pandemics and things like that. Well, sure enough, that chair was held by Christian Roston, and it's his P C R test that told all those agents. They had SARS one and told all the rest of us we had SARS two. Sorry, I didn't want, I just wanna interject that and you can continue.

Patrick Henningsen ([00:51:27](#)):

Yeah. The other thing in 2009, uh, uh, mark and Steve is that that was when the C D C got directly involved in the domestic and global shipments of the assay test for H one N one. At that time, it is pro, i, I guess it was a molecular test, a type of, I, I would guess an antigen type test. But before that, there wasn't that whole of government approach and, and also exporting it to other countries. So again, now creating the cases globally, 1 million cases in the US and then many cases in various clusters, uh, around

the world. So they, they also, uh, identified pregnant women as being, uh, a, a risk group, uh, obesity in the ICUs. You see how these exact same themes were repeated, uh, for SARS two. And all of these ideas were introduced, uh, during that time. But on the, on the sars one issue, and this is I think an area that, um, both Mark and Steve, um, have a really, really good grasp on is literally the templating of SARS one.

(00:52:32):

Uh, we're we're talking about a literal template of the genomic sequence, uh, which was used as the model to create the idea of SARS COV to two as being almost the same as SARS one on the International Gene Bank. Um, and that was used to, uh, create the, the, the sort of fake standardized P C R test and roston, uh, which Kristen Roston, um, uh, was peer reviewed in 24 hours. By the way, normally it takes six to eight months to peer review. Uh, but his P C R paper was overnight. And, uh, so, so I, I think if you can speak to that again, this is how you set the stage for 2020. It literally required, uh, we'll go to, to Steve and then Mark Steve. It literally required having that map that, that template of SARS one, that was the basis of SARS cov to two, wasn't it?

Steve Falconer (00:53:28):

Absolutely. And we also start getting the idea here, which is how the asymptomatic carrier, now the tests come out and, you know, it used to be go to your doctor like Mark said, and your doctor says, what's wrong with you? Oh, I got a fever, cough, sore throat, runny nose. Now you're totally fine. And they go take this test and you have no symptoms, but the test says you're now sick. So you're an asymptomatic carrier and you can spread it. Well, I'm sorry if the point of a virus is it gets in your lungs, makes a trillion copies, explodes all over and makes you sick, does it do that or not? Is it the cause of illness or not? <laugh>, because,

Patrick Henningsen (00:54:04):

And, and Steve,

Steve Falconer (00:54:05):

You can't have it, not get sick

Patrick Henningsen (00:54:07):

On to that point, Steve, in 2009 with the rollout of the test for H one N one, those were separated from actual cases with diagnosis and doctor, uh, opinion, uh, uh, as well as the test and then suspected cases. So they had bifurcated those data sets that was, that wall between those two were, was erased in 2020 where everything was a case. So, so that was an interesting development. But go ahead, Steve.

Steve Falconer (00:54:33):

Yeah, and uh, I I, I won't go too much into genomics 'cause they're gonna do that later in this conference. But I will say this, um, there's a guy called Dr. David Martin, and he, he did a lot of research. The, the genomic patenting for what is called the SARS COV two NOL Coronavirus. Novell means brand new, never before seen. Well, he found there were already 120 patents predating 2020 that are nearly almost identical to this SARS COV two. Now that's not Novell, and I won't get into how genomics work here, but let's call it a recipe. Let's say I invent a brand new food recipe that no one else has ever thought of before. Problem is one of the ingredients in that recipe doesn't exist yet, but if we ever find that ingredient, we're gonna put it in. And I own the patent on the recipe, right?

[\(00:55:29\)](#):

I've, it's my recipe. So if you make this in the future, that's what genomic patenting is. So just because they had patented the, the computer genome for SARS COV two before it was nove five years earlier, doesn't mean they made a virus called SARS COV two. It just means they own the genetic sequence because it's a illegal to patent nature. You cannot patent a strawberry. You can genetically modify a strawberry and patent that 'cause nature can't grow that. So they need this for P C R tests and things. If you want own the rights of the the P C R test sequence, it has to be a Nobel sequence. So that was the smoking gun, the International Committee of Taxonomy on viruses. Um, they showed that there were companies like Alyx in 2016 US patent 9 1 9 3 7 8 oh Sanofi in 2017 Crucell in 2019 Rubius Therapeutics.

[\(00:56:28\)](#):

These people all had patents on sars Cov two, a Nobel virus. Now how can you have a patent on something brand new, never before, allegedly seen in nature, five years before <laugh> before. And it's because they don't have a patent on a virus. They have a patent on a genomic sequence claiming to be a virus so that they can claim they own that right, to make the test later. So right there, we have a setup that David Martin's information does not prove that it was made in a lab, and they did use this recipe <laugh>, it just proves they knew they were gonna blame this recipe five years ahead of time, and therefore it is not nol. And therefore that's one of the smoking guns to me that they had set this up several years in advance.

Patrick Henningsen [\(00:57:17\)](#):

A digital, a digital model, uh, a computerized model of a se a sequence of an alleged virus to be specific, right?

Steve Falconer [\(00:57:25\)](#):

Yeah. They set up a recipe that doesn't exist and then later they claim they baked the cake <laugh>. Mark, you wanna add to that?

Mark Bailey [\(00:57:36\)](#):

Yeah, well, I think, uh, just as Patrick said, what was important was this marketing of, of sars and, and moving from SARS one to SARS two, because it's really the bait and switch, isn't it? We, we have SARS one, which is a, you know, and we are not, look, I'm not saying that people don't get very sick with respiratory syndromes. They certainly do, but it, it's not caused by imaginary viruses that they're making up. But the thing is, is that when you use this moniker sars, suddenly it's gonna scare people. And, uh, and I think, like Patrick says, that was deliberately chosen in 2020 when they came forth and said, oh my goodness, this is, um, this is like SARS one, but now we've got SARS two, because people thought, oh, wow, that's, that's such a serious illness. It's got a 10% fatality rate, et cetera.

[\(00:58:30\)](#):

Uh, knowing very well that the W H O we're going to create this vague case description, well meaningless case subscription, which had nothing to do with sars. Um, now the other point too is that, uh, we've gone from last century where we've got the common cold unit alleging that coronaviruses, uh, causing common colds, et cetera. And these guys, even these virologists who believe that they're seeing these viruses tell us that they're kind of joke viruses. These are like really ones that you'll, you'll find all over the place. And this is another important part of the puzzle when we're talking about genetic sequences, because, uh, why do they find coronaviruses everywhere in the world at the moment? Uh, because you find these sequences in humans, that's why not belonging to novel viruses, et cetera. Um,

we know that I've been through in the bowels of virology looking at all of their publications on this area, and these sequences appear in mammalian cell lines. They, you know, they appear with, um, uh, experiments with monkey kidney cells, et cetera. They can be found in all sorts of human tissue. They can be found in bat poo. Uh, this is the thing. So of course, we've just got them doing this confirmational bias type process, whether some of these virologists are aware of this or not, where they go around and find these sequences and claim that, uh, they're finding viruses when they're not finding anything of the sort. So, yeah, I think really important stuff that we can't,

Steve Falconer ([01:00:09](#)):

In fact, the common cold unit, right, mark, uh, how long did that go for? And didn't they shut down because they couldn't even transmit the cold to anybody? <laugh>? What was the story with the Common Cold Unit?

Mark Bailey ([01:00:20](#)):

Yeah, correct. Um, it ran, I think from about 1946 through to 1990. So <laugh>, it certainly ran for a long time. And we know that like with the Spanish flu, they had all these problems trying to transmit colds, it just wouldn't work. And, uh, they had people volunteering to go there because it was just a joke, basically. A holiday camp, essentially. And yeah, they said that they were going to try and develop medications and vaccines, et cetera. And after 40 odd years of trying this, they concluded that, uh, it's hopeless, even on their own terms. They said, these coronaviruses, you can't do anything with them, but don't worry about it, because they don't really do much. They just cause common colds, et cetera. So, so yeah, we've, we've got a bait and switch on so many levels that it's really difficult for people to understand because they think that what they've been told about coronaviruses and the history of common colds, and then the thing mutated somehow, they don't see that this is all just a fictional story that is not backed up in the scientific literature, which is the stuff that, that we study and look at.

Steve Falconer ([01:01:27](#)):

Yeah. And then I think we, we should really back up to May 20th, 2010 with what's called Rockefeller lockstep. This is a document that everyone needs to read, because now we also get into big organizations doing fake drills and pandemic, uh, scenario case, you know, they're running scenarios and doing all this advanced stuff. Uh, what would happen if one of these breaks out? And what should we do? So now they're actually planning out what they're gonna do after they, after they have one of these pandemics. And in lockstep, um, Judith Rodin, she was the president for the Rockefeller. And again, it's the Rockefellers are in on this. The same people who in, on the Flexner report and the, the medicine, we get these same globalists and eugenics. Um, she said, it, it, it expands opportunity and strengthens resilience to social economic health and environmental challenges, uh, for government.

([01:02:28](#)):

So on page 17, they ran one called lockstep, A world of tighter, top-down government control and more authoritarian leadership with limited innovation and growing citizen pushback, meaning how can we be more authoritarian and the people don't fight back against us? Part two was clever together, we're all in it together, stay home. Are these, are these sounding familiar? They were using these same phrases with new wording during covid, a world in which highly coordinated and successful strategies emerge for addressing both urgent and entrenched worldwide issues. So on page 18, they go to those issues. A 2012 bird flu from wild geese emerges infects, 20% of the world population killing 8 million. Those stats sound familiar, people locked down air flight restricted masks are worn, temperature checks in stores, biometric IDs, mandatory quarantine. And then later goes on to talk about how the governments grab

top-down control after the pandemic is over and bring in biometric IDs. This is written in this document in 2010. There's a second part that goes on about how they would do this with a climate catastrophe, which again, going back to the Club of Rome, it's either pestilence or material shortages in climate <laugh>. You know what I mean? Um, so people should really read that because what they've basically done is told you exactly what they were gonna do if one of these things broke out. And sure enough, they just did every single thing like a checklist after, after covid, right?

Patrick Henningsen ([01:04:14](#)):

Yeah. The timing of that is really important. Uh, Steve, 2010, this document comes out. So if you would think some of these institutions and, uh, the, these individuals would be looking at the success or the failure of the swine flu, uh, pandemic, just the, the, the year or two previous and thinking, well, what was missing? Well, there's some missing pieces there. We have some pieces are in place, but to, to make our response, uh, more, uh, rapid and more, uh, you know, global, if you will. Uh, we need certain things. Narratives are also a big part of that. And right after the, uh, lockstep report in, uh, 2010, there was a film released, a Hollywood film, I would guess went into production probably around 2009. Um, it was called Contagion, uh, starring, uh, Matt Damon and Jude Law. It had all these sort of big actors in it.

([01:05:04](#)):

And again, this was based on Zoonosis theory, that a bird was flying, and the bird pooped into a pigsty in China, uh, again, China being the center of this. And then a, a pig got sick from bird flu, and then it passed the zoonotic jump to the human in, in China. So China and kind of demonizing Chinese food production in, in, in the same swoop as well. And then the, the double zoonosis transfer to humans. And the, the, the basic narrative of this, uh, is what you've just described there, Steve, but also for SARS cov to two, the main narrative, or the official conspiracy, if you will, was that it jumped from a bat in a cave. And there's various iterations of this theory that have been constructed, but it, the general public would believe that it somehow came from maybe bat in China and then jumped via wet market or a lab leak, uh, to somebody in Wuhan. And the rest is, uh, pandemic history, or pandemonium as it were. Um, so that, but that, that narrative is really important. That, and, uh, the World Economic Forum talks about the importance of grand narratives. That's actually the title of, uh, one of Klaus Schwab's great tomes grand narratives. So this is, so, yeah, crucial, the technical

Steve Falconer ([01:06:22](#)):

Narrative and the films. That's not the only movie. If you go look at pandemic movies on Wikipedia, just Google pandemic movies, there's like 500 of 'em. There's movie TV series that always, there's a pandemic or a bio weapon's gonna get released. This is nothing new. They used to blame 'em on, on people. It was the Spanish flu, the Hong Kong flu <laugh>, then they start blaming 'em on animals. It's the monkey aids and the bat, r a g, you know, it's, it's only from the bat, because they had made up a bat genome for a bat, coronavirus, r a g t 13. And when they made this new covid sequence in silicone in the computer, it had a 96.1% match to a bat when they had, that's where this bat story really comes from. It's just because their cake recipe was pretty close to that cake recipe, even though neither cakes had actually been made <laugh>.

([01:07:13](#)):

But, so that comes, but yeah, you're right. So now we get to blame the Chinese, and I think that could be, because again, SARS one they said was there, and they always walk around in masks. They already have the visual, you know, part of the fear porn was put everyone in masks because it looks scary when no one's really dying on the streets around you. How do you know there's a pandemic? Well, everyone's walking around with a blue diaper on their face. So of course, there's a pandemic, right? And the

Chinese have been doing it forever. So that could be one of the reasons. Now they're blaming animals and people. Now it's the bats in China, <laugh>.

Patrick Henningsen ([01:07:50](#)):

Sure. Yeah. And the hazmat suits also, you know, became kind of a big feature of the visual, um, aspect of it. And all these films and TV programs as well. And the, and the Chinese, there's also a cultural differentiation to, you know, uh, fear of germs, for instance. Um, one might argue that in certain cultures there might be a little bit more of a visceral reaction to the threat of a germ, therefore they might take extra precautions. And certainly there, there is a lot of, uh, sociological studies and, uh, ethnography and geographical, uh, studies on this, uh, various academic works and so forth. There's differences in superstitions and differences in beliefs. Some of this is religious as well, the pig being also for, uh, a large percentage of the global population do not eat pork. So, uh, again, that would further divide and create fear, um, as well. So all the elements are there. Uh, all the elements are there for this kind of global conflagration of this bio threat. Um, and so the tabletop exercise, the lockstep document, 2010, very important benchmark, uh, Steve there. And there's other tabletop exercises. 2017, the Spars Pandemic. Does anybody want to comment on that? Uh, either of you.

Steve Falconer ([01:09:06](#)):

Well, I did a film actually called Spars Wars about that. Yeah. So that I, I've got a list here. I'm actually just gonna pull this up on screen. Um, I think it's good people are watching, um, don't listen to what we're saying. Like, go check these out yourself. Of course. So there's a, a website called stop world control.com at the bottom. And what they've got here is a list of stuff from after 2010 that starts happening. Yeah. So Spars was the Johns Hopkins Institute who was involved in c Ovid 19. They ran a pandemic where in 2025, a, a new virus breaks out in a church in St. Paul, Minneapolis, killing three people, and they call it the Vampire Cough. And Black Friday gets canceled and everyone has to stay at home, an online shop, <laugh>, right? And the thing goes out and kills all these people. Again, like you said, they called it Spars Cove one. So they're taking this SARS thing, calling it spars, because it's already got that scary name. You know, if they called it the Vampire Bat three, it's, nobody cares, <laugh>, they start using this trick you're talking about. Um, do you want to add anything Mark on spars? Otherwise, I can hit this list and we can talk about some pretty crazy stuff on here.

Mark Bailey ([01:10:21](#)):

So yeah, what I think, um, we should point out is this is in the middle of Bill Gates's decade of vaccines now. So we're in full on this. This is where things have really changed. As I say, we've moved from the eighties where vaccines are not that big a deal for a lot of people, and a lot of people don't even get them to this point. The decade of vaccines starting, uh, around 2009, I think, where if you read their documents that are coming out from Gabby and W H O and the Gates Foundation and all these associated organizations, supposedly independent, but, you know, suspiciously coordinated, of course, and funding each other. The, the bottom line is a shot in every arm, is what they're talking about. They don't want anyone on the planet not having shot. And they say, not only in the developed world should everyone be jabbed to the hilt, but they want to start getting into the developing world as well to make sure everyone's got shots.

([01:11:25](#)):

So, so now we're seeing this, this idea of, you know, the entire planet needs to, and we saw that later on with, uh, COVID, of course, where they started making, uh, uh, you know, the public campaigns were along the lines of the pandemic's not ending until everyone's had a shot in the arm. And I mean, it's

absolutely preposterous, and we should point out too, just in the background, in case we don't mention it elsewhere, is that now we are also seeing very nasty publications against people who don't use vaccinations. Uh, the so-called anti-vaxxers, uh, demonized incredibly strongly in this point. And we can see that, uh, all of these exercises, the work of the Gates Foundation and Cohen, the background is all to get people used to the idea that, hey, nothing we can do. There are going to be these pandemics. They'll, they'll come from animals. Often best thing we can do is just to get a shot in every arm. And, uh, yeah, I think that's, that's all I'd like to add. But, uh, nothing more to spas in particular. 'cause we can talk about a couple of more of these, uh, planning exercises in 2019, in a minute.

Steve Falconer ([01:12:37](#)):

That's right. Yeah, we'll get to that. So we'll just blow through these real quick to get through. So 2013, this is a weird one. There was a rap song called Pandemic by a guy called Dr. Creep <laugh>. And the chorus was 2020, combined with coronavirus body stacking. This guy released that song in 2013, you know, 2013. You have to ask what he knows. So then we had the lockstep in 2010, um, 2015, there was a patented covid test. That's what Dr. Martin was talking about, that the genome was already preset. The patents were there. 2017, do people remember this? Anthony Fauci got up at a podium and made a speech that there would be a pandemic during the first term of the Trump administration. <laugh>

Video Clip of Dr. Anthony Fauci ([01:13:19](#)):

Is that there is no question that there will be a challenge. The coming administration in the arena of infectious diseases, both chronic infectious diseases in the sense of already ongoing disease. And we have certainly a large burden of that. But also there will be a surprise outbreak. And I hope by the end of my relatively short presentation, you'll understand why history, the history of the last 32 years that I've been the director of N I A I D will tell the next administration that there's no doubt in anyone's mind that they will be faced with the challenges that their predecessors were faced with.

Mark Bailey ([01:13:57](#)):

Not only does Fauci guarantee there's going to be a pandemic, a surprise pandemic in 2017, but in 2019, he is telling the world that, uh, for the next pandemic, there will be mRNA technology, there'll be nanotechnology. And if people don't believe this, they can, um, look up some of my writings where I, I provide the references for this. But, uh, in 2019, Fauci ISS openly talking about it, saying that this is, this is coming. And, uh, it seemed incredible because nobody had been really talking about mRNA vaccines up to this point, <laugh>, and certainly no one was talking about, uh, injectable nanotechnology on a widespread scale. But Fauci actually openly said it. He said it publicly. And, uh, incredible product placement. Once again,

Steve Falconer ([01:14:48](#)):

It's like he's psychic as well, <laugh> like, how do you know there's one coming? So then in 2018, they've already started setting up this Wuhan Lab League story. So there was a video going around. Uh, here you can see, uh, Chinese media shows Wuhan Labs studying Coronavirus in 2018. So you can see this narrative starts getting set up, and even a political ran with it. Yeah, that looks like a, uh,

Mark Bailey ([01:15:14](#)):

Can we also just say, um, Steve, that, uh, importantly there, that's Chinese media releasing that footage, <laugh>.

Steve Falconer ([01:15:22](#)):

Yeah.

Mark Bailey ([01:15:23](#)):

This is not, um, this is not some insider whistleblower or something like that. This is a communist government, uh, posting this stuff. And it was similar to the pictures that were appearing on Twitter in 2020 saying the Wuhan Institute of, uh, virology is playing around with all these coronaviruses. Well, in fact, those pictures were published in 2018 by the Communist Chinese government openly on Twitter. They, and then all suspiciously, they, they took them down, you know, but, uh, <laugh>, yeah, I mean, I think for the, for those people who are still going on about lab leaks and stuff, if they really think that the Chinese government would openly show them the pictures, uh, if, if that was true, I think is absolutely ridiculous.

Steve Falconer ([01:16:10](#)):

Yeah, completely. And, you know, people like Politico here ran with it, you see? So they're already setting it up in the counter narrative, but this isn't for the mainstream people. This is because they always know there's some counterculture people who are gonna catch on. So they've got the side story for the smart people, you know, <laugh>, and then the main story. Um, but I, the point was just to show that this is nothing new, you know, they were, they were setting this up. The last two, I'll just read 'em. So five months before the pandemic, the W h o told the governments that a coronavirus pandemic was around the corner. That was five months before, six months before, uh, the Australian government published a guide to navigate a coronavirus in 2019, right? So we've got this kind of weird stuff like, what's that all about? And then Bill Gates does this TV show the next pandemic for Netflix, talking about a coronavirus? And then that brings us to 2019. This is event oh one, which has, I'm not gonna get into the tria, but it has a very specific meaning, the number 2 0 1, uh, which is too esoteric to cover in this talk. So maybe you guys want to take over and tell people what was event 2 0 1, because a lot of people haven't heard of it.

Patrick Henningsen ([01:17:26](#)):

Go ahead, mark.

Mark Bailey ([01:17:28](#)):

Yeah. Well, quickly too, I should point out, there was an event in 2019 before event 2 0 1, and that was in August, and that was Crimson Contagion. And in that one, we had a so-called Avian Flu. Um, I think, uh, once again, coming outta China <laugh>, China's copping it on all of the simulations now. And that was, uh, run by the Department of Health and Human Services. And you know, this so-called a B m flu originates in China, and then spreads around the world, including to the us. And they make this fictional scenario that the vaccines weren't really ready, and they're partially effective. Um, but antivirals seem to do the tricks sometimes. So we, we need to use those. So that, that was, we exercise, they ran as well. But I think, and you know, we're speculating a wee bit here, that they, people, they realize that people are not really buying influenza.

([01:18:24](#)):

'cause to most people, they've, they've think, well, I've already had that. And, uh, it wasn't that bad. I felt sick for three days, felt really crook, but then I came, right? And I've never had a problem. So, th this is a problem. And, uh, like Patrick was saying earlier, this is the importance of the branding of Corona and sars, et cetera. 'cause for most people, it's unfamiliar. They, they think, what is this SARS thing? This

sounds pretty bad, must be way worse than the flu. They don't realize it's just repackaging of the same conditions and, and given a different label. So anyway, I think that was, um, that's why <laugh> Crimson Contagion, I'm sure behind the scenes, they said, well, that simulation went pretty well. But I think on the marketing side of things, people are not gonna buy this flu thing. We've, we've tried it with swine flu several times.

[\(01:19:13\):](#)

We've tried it with the AVM flu several times. Uh, we're just not getting a, a full on, uh, pandemic uptake, if you like. So yeah, of course, now we get to October, 2019, the big one, event 201, Johns Hopkins, uh, notorious, uh, for various operations that go on there, but, uh, peers up with the W E F and the Gates Foundation and several other big names and run this simulation now from memory, uh, yeah, this is one of these super zoonotic things which involve pigs and bats and coming outta South America this time, I think. But again, running these fictional crazy stories about suddenly these animals that we've been around forever, uh, going to attack us with the deadly contagion. And what, there's some really, really disturbing stuff in this, uh, event 201, because now, now we're, we are, we're fully into world production, basically, that this sort of stuff is not regional.

[\(01:20:17\):](#)

It's not really up to governments to decide what to do. This is full on events which encompass the entire population of the entire world. And one thing that really disturbed me about that, uh, event, was the conclusion that, that covid, well, at that stage, of course, <laugh>, they're not calling it Covid 19, Steve suggests that maybe they did already have the name. They possibly did. But you know, that they're saying this new viral contagion becomes, becomes endemic. You know, because so many people have now died, and some people have got immune. So many people have been vaccinated. You know, this is what they're predicting, that we have the point now where it just has to go into the childhood vaccination schedule. And this is unbelievable, isn't it? This, this fantasy situation ends up with a vaccine that gets given to every single person on the planet.

[\(01:21:12\):](#)

Once again, we're back to a shot in every arm. And I should also, I, I'd just like to point out, because I mean, the three of us, I mean, we've, we've gone deep into this stuff, and some of the stuff we haven't even talked about publicly, because it's speculation. But when we get into the agendas that are going on in the background, and some of them are extremely disturbing, but some of them are actually more straightforward for the public to understand, and they simply involve transfers of money and marketing funnels. And that's, that's also as old as humanity. People work out ways to make money. And the pharmaceutical industry have worked out a way to make money, and that's through running pandemic. So, as Patrick was saying, the first go was perhaps on mass scale was 2009, uh, with the alleged, uh, swine flu pandemic, where they, they really tried to get countries to purchase millions and millions and millions of these vaccines.

[\(01:22:08\):](#)

And we see, again, a shift from people taking care of their own health to hapless taxpayers, having all of their money stolen off them. And then the government's giving it to pharmaceutical companies for the useless products. And this kind of stemmed in, to me, an important document is 2007 a, a price, uh, Waterhouse Coopers document that came out basically saying to the pharmaceutical companies, guys, your revenues are in trouble because you're not inventing any new drugs. All of the best drugs have already been taken. It's costing so much now to develop new drugs that there's no future doing this for you guys. The future is vaccines. But they, they were talking about vaccines, again, for everything. Vaccines for alleged infectious diseases, vaccines for diabetes, vaccines for addiction problems. I mean,

it's insane if you read this sort of stuff that they're promoting. But I think the pharmaceutical companies realized that that was definitely an excellent revenue stream, was vaccinations.

[\(01:23:12\)](#):

Because the problem with your regular pharmaceuticals, you need to get someone who's actually got this alleged disease, and now they take this product for the rest of their life. Vaccines are different, shot in every arm, doesn't matter. Kid comes onto the planet, you get the shot. That's another dollar, another \$2 for the pharmaceutical industry. And so the reason I'm bringing this up is because although there are plenty of nefarious agendas going on, one of the ones out in the open is just this absolute ripping off of the public. Um, and particularly for those of us that don't want these products, we are still forced to buy them, because I mean, we are never going to take them. But pretty much all of our governments have already purchased these products, assuming that, or, uh, not assuming that we're, we're going to take them. So if, if people don't think that these kind of campaigns are effective, look at Pfizer pre Covid era.

[\(01:24:08\)](#):

It's a giant, it's turning over 40 billion in revenue in the Covid era. It goes to a hundred billion in in 2022, I believe. I mean, this is phenomenal. This is when small businesses, everyone around the world's struggling apparently, because there's a pandemic on, you know, and, uh, businesses are being shut and everyone's facing difficulties. Pfizer is making profits that are so insane. We've never seen this kind of stuff going on. And it's all out in the open, these vast, vast transfers of wealth, uh, coming back into the, the Illuminati and, and the connected. So while the world was being impoverished over the Covid era, plenty of corporations were, were making a heck of a lot of money and,

Patrick Henningsen [\(01:24:54\)](#):

And mandatory purchase orders from governments. Um, and that kind of, again, that, uh, started with Tamiflu, that was one of the big government mandated purchase orders. So stockpiling, having reserves, stocks, all those, those things, those are guaranteed profits for all of these companies.

Mark Bailey [\(01:25:11\)](#):

Yeah, yeah, exactly. And that's how it all ties together, is that these exercises, these, uh, like event 201 and stuff, they, they're all about everybody getting, you know, nobody missing out. That's how they're putting it and, and equity and all this kind of stuff. So they're basically telling governments, uh, you, you better be good. You better, you know, buy as many vaccines as you can. And we saw preposterous numbers of vaccines being purchased over the Covid era. Like I think, um, in Canada, they had seven shots for, for every person or something in New Zealand, I believe the purchase orders were in the order of five or six shots for every person. I mean, insane, these orders and, uh, the amount of money being transferred was huge. So it all ties in together. We've got, um, the simulations, Gavi, W E F W H O, et cetera, all making these recommendations, which end up with, um, everybody being jabbed

Steve Falconer [\(01:26:10\)](#):

Two months before to event 201. A good point you made, mark was what was bankrupting, or not bankrupting, but the document you mentioned earlier, the research and development is what was costing so much so that they needed the, they weren't making enough money, you know, at the tail end. Well, look what they did with these vaccines. They start working with government and it's emergency authorization act, so you don't have to have any research and development overhead because you get to rush it out without any, because they're like, oh, it's an emergency. So we don't have to spend 2 billion on research and development for a safe and effective vaccine. We just have to have the media

tell you over and over. It's a safe and effective <laugh>, you know, without it actually having to be. So that's a good point. That's part of the scam, I think.

[\(01:27:00\)](#):

And this is where the Department of Defense comes in, you know, because as you've talked about, Patrick, one of the other things before we move on that bothered me about event 2 0 1, is they had a section in there. So they event 2 0 1, they're playing it like war games. They're, they're acting out these scenarios. One of them was showing the media how to gaslight people and how showing public health officials how to gaslight. Now, Patrick published, uh, mark Van Rant. He's the, the Belgium Virologist, right? Uh, you pa you published this on UK column. He's talking to everyone about how he ran the pandemic, and he's saying it's important that I'm the one and only contact person. So the media comes to me and I am the one who answers back. And then he says, I took the numbers for Germany, or one of the countries, I figured out the average number of deaths per year for a flu, and I just divided that by the population of Belgium or whatever. And it came out to six deaths. Oh my God, six deaths. That's scary, right? Well, everybody dies. That many of you, he just admitted he just took normal flu death numbers and just scared people with it. And he admitted it right on camera. You guys published this. And that's what event 2 0 1 was doing, is it was teaching them how to gaslight us. And sure enough, they did they not gaslight the hell out of us during covid, you know, everything they did in this event, 2 0 1, they did it to us. That's what really bothered me.

Patrick Henningsen [\(01:28:31\)](#):

And the, the part of that mar um, Steve was the, the dashboards. So setting up that idea of collating data globally by, by country, and then cases and deaths. Cases and deaths. So that was a major feature of the, uh, C O V I d uh, 19, uh, pandemic as it were in 2020, was the world was glued to the dashboards. So we had this kind of, you know, militarization of the data, the, the sort of weaponization of data. Um, and, and that helped, you know, that did the job actually, from a PR point of view, uh, to, to scare people, uh, to drive policy. It was really those dashboards. So that those tabletop exercise were the sort of the beginnings of those dashboards. And they were just unleashed on the global public in 2020 in a way that in, in 2009 also, uh, they, they also started doing this internally, although it wasn't something that public would follow, but the C d c, uh, declared H one n one for the first time as a, as a public health emergency of international concern.

[\(01:29:37\)](#):

And so, and these governments ha have used these, uh, dashboards and these big data sets to drive policy or, uh, countermeasures or whatnot. Um, but it wasn't made public. And I think the internet, again, emerging emerging technologies, just the, uh, the internet, uh, social media, but just the, the speed in which you could, uh, uh, uh, develop and proliferate, uh, dashboards and the, and the data, pulling the data quickly from spreadsheets with all of these new, uh, applications of the last 10 years that maybe didn't exist and weren't so easy, um, to, to, to get up and running so quickly, 10 years before in, in 2009, 10, they're there now. They're there in 2020. So it was really perfect setting the stage.

Steve Falconer [\(01:30:25\)](#):

Also, you have to look at the manufacturing logistics. How many, how much does it take to manufacture 2 billion P c r tests, 6 billion vaccines and boosters, just anyone in manufacturing or even transport for that matter, logistics event planning, <laugh>, you know? Yeah. It's very impossible to believe that this thing comes on the scene. And really, February, we should say, 'cause patient zero comes in in January 19th. Um, so really, let's say February is when we think we have a pandemic. Well, they've got the tests all rolled out six feet apart. How much did it take to manufacture all those surgeon masks everyone

we're wearing? Because outside of Asia, and you, you can't, there were not like piles of masks laying around <laugh>. They had to be made by somebody shipped, distributed, who made the stickers for all the floors in every country saying six feet apart, walked this. Think about all the logistics that went into this, and how quickly it came on. Now, I, I find it impossible to believe they were not being manufactured ahead of time. It, it just is a, as you would call it, Patrick, it requires mental gymnastics <laugh> to believe that that wasn't set up

Patrick Henningsen ([01:31:43](#)):

Well. Um, there's that too. But, you know, we, we, we have just in time supply chains now. Um, I know the industrial work catalogs for the workplace, remember when we were in our office, in our studio, and literally the new catalog arrived, uh, it probably took them about four weeks, but by the end of April, the signage and all of that stuff was, you know, or middle, middle of April, it was already available. There were already people doing bespoke solutions, um, in March for businesses, uh, in the uk. So because of digital technology again, and, um, uh, digital printing, online, digital printing solutions and distribution, you could literally, you could literally have this stuff within 72. I could do it right now, if a new pandemic started, I could have a signage business up and running in 48 hours, 100%. We also spoke to businesses that provided the plastic plexiglass solutions for retail and pubs and bars and things like that. Ridiculous, you know, barriers of plexiglass with silly signs on it. But they were, they were up and running very quickly. And, and so, yeah, I mean, to, to some degree I can see that the, the, the pre-planning, um, idea

Steve Falconer ([01:32:56](#)):

To, but, but the P C r though, and the masks and the vaccines, like that's not printing fiberglass. That's something else completely.

Patrick Henningsen ([01:33:03](#)):

Well, yeah, I mean, the, the other thing is the full mobilization of the economies, um, with the backing of government money in, in the billions, if not trillions. Um, it, it, that, that, that does move mountains very quickly. But the point I, I, I take your point, um, on that is, but I, I would say, I would put this under the banner of mobilization,

Steve Falconer ([01:33:27](#)):

Right? Yeah. And they did do it in lockstep together too. One government did this, the next followed. Now, I don't know if you guys wanna move on. The one thing I have some information. So we had talked about maybe making a hypothetical, how would we pull this off, right? So you say, okay, well, they did lockstep in October of 2019. How did they do it two months later, right? Um, well, we've got some information. What you would need to do, first of all, is you'd need to know what the world mortality rates are. You'd need to find five or 10 cities that are, have experiencing above average mortality already from something related to respiratory conditions. So that if you, in fact, I have the numbers here. Um, and again, always check our sources. You can go to macro trends.net, and when you go on there, they've got how many people die worldwide, out of every thousand people, all the way, going back from 2023 to 19.

([01:34:33](#)):

Uh, my glasses 1958. So from 20 23, 20 22, 20, 21, all the way back to 2014, it's 7.6 people out of every thousand died. They don't say of what? That's just all cause mortality. Um, and then it's higher than that every year back. So first of all, if there's a pandemic, shouldn't it be eight people per thousand or 10 people like it used to be. Why are the numbers the exact same? Now, there's a guy called Jim West, um,

and John Rappaport shared this, I'm gonna share this on my screen. He did a, um, he did a report about the industries had lifted, they had been banning, uh, fracking restrictions and also how much pollutants were allowed, um, to, to be set into the groundwater, the air, and, um, and the, and the land. Now, keep in mind, every year the average death is 7.6 people per thousand just outta, we don't know what, just from something.

[\(01:35:36\)](#):

Well, that's that green line down here. So all these places below Germany are in, this is from March 20, 20, 20 20, this chart here. So all these people just had the same, or even much less than the average world mortality. These ones in the middle, they've got way higher going up to France, uk, Netherlands. But at the top we've got Wuhan China, number 1, 635 or a hundred thousand. See, these numbers start cranking up massively. And this is where they told us the pandemics happened, right, Italy. Exactly. Wuhan, New York City, tri-state area, right? New York. Yep. New Jersey, Belgium, Spain, yep. See it. Belgium, Spain, Italy, and then France. So what, what what this is showing is if you wanted to have a pandemic, you find a place that's already having way higher than normal, average, all cause mortality, and you make sure that it's because of some kind of respiratory condition.

[\(01:36:40\)](#):

And what Jim West published is very interesting, um, here, because we know covid, they said it was pretty much the same as the flu symptoms or most any other respiratory condition. Well, fracking causes hydrogen cyanide poisoning, and they have the exact same symptoms, cough, shortness of breath, hypoxia, fever, chills, muscle effects, sore throat, change in taste and smell, loss of smell, rapid pulse, <laugh>, blue lips, weakness. So all the side effects they were trying to say is this novel c ovid 19 virus that just happens to break out in these places that are having hydrogen cyanide poisoning from fracking restrictions. Lo and behold, <laugh>, there's a pandemic, and that's all you need to create one.

Mark Bailey [\(01:37:31\)](#):

Steve, could I just, um, I'll just jump in here just to point out too, that we should be careful because yeah, we're talking about two different things, uh, people getting sick, and the definition of Covid 19, because if we go to the W h o, the definition of Covid 19 is ridiculous. It's simply one of these molecular detection techniques. So yeah, I think just to point that out to the audience, when we say symptoms of Covid 19, uh, we're not talking about the W Ho's official definition, uh, but here we're talking about people getting sick in polluted cities and using epidemiology to try and explain something else. And we know epidemiology, look, it can give you hypotheses about what might be happening, but what they did, like you say, is that they just found cities where there were quite a few deaths going on and said, wow, that's a virus, you know, which is ridiculous.

[\(01:38:28\)](#):

And, uh, you know, for someone like myself who goes into the scientific publications and examines every single sentence of these papers, there is absolutely no evidence that there was a virus at all. SARS Cov two is, is a fictional creation. So, yeah, I know. And it's, it's, it's tough. 'cause people will say that to you. They'll say, okay, well, you're, you are saying that there is no pandemic, there's no virus, et cetera. There's no new illness. But what was causing all those deaths, you know, in that particular place? And, and we are saying, Hey, <laugh>, plenty of reasons, uh, why these terribly polluted cities, uh, have high mortality and, uh, cities like Wuhan. Unfortunately, the air quality is so bad that, um, you know, for most of us, we, we couldn't even imagine what it, what it's like to live there and breathe in that disgusting air.

Steve Falconer [\(01:39:21\)](#):

Yeah, that's a good point. And again, my point of this is people say what we're causing all those deaths, right? Well, there weren't all those deaths because the numbers are out. The, the worldwide, the mortality rate is the exact same in 2020 as it was in 2019, 18, 17, 16, 20, 21, there weren't all those deaths. But in those 10 or 12 places, there were excess deaths. But it's because they have been there the last few years. They were there in 2019, 18, 17, uh, Italy, they, you know, they're called the sick man of Europe as Michael Bryan. I think he's covering that later, so we don't have to get into that. Yes, they were already experiencing all these deaths and high mortality deaths because of pollution, different pollution and different things. Um, so what we're saying is, yeah, there were some people getting sick in some places. There weren't all those deaths.

[\(01:40:21\)](#):

That wasn't happening in every single place worldwide. And because these tests cannot detect anything other than normal stuff, you can have all the cases you want. In other words, if we decided in 2018 that we were gonna rename the flu to the, to the monkey, you know, the Monkey Cove three, and we told everyone to go out and get tested, you, you can't come into a bar unless you get tested. You can't go to work. Well, if everyone went out and took this same molecular test, there would be a, you know, a monkey cove three pandemic with the same case numbers that we saw in 2020, and the same deaths, because as we also remember, the who just published it again, the flu mysteriously went away 98% worldwide in 2020 and 2021. It just vanished. Right? And, and the, and the same normal flu deaths every year are, are the exact same numbers as they've been running on their covid clock there. The, the flu cannot disappear worldwide. At the same time, a new thing with the exact same symptoms allegedly comes when the test you use to find the new thing is the same test you would've used to find the flu <laugh>. Do you know what I'm saying? Right

Patrick Henningsen [\(01:41:34\)](#):

There? And I, I think that'll be cool I think I believe that's gonna be covered more in depth. Yes. Um, in, in some of the subsequent sessions. But the main point you're making there, Steve, is that the venues for the so-called deadly epicenters of the pandemic were more or less, uh, prepped. You know, they were already there. So the venues would, were, were naturally, um, set up based on the statistics preceding the so-called pandemic, which you've just shown there. So, uh, like Bergamo, Italy, New York City, uh, and so forth. So that's really important. So, uh, the theme setting the stage that, that was really important. Those are the venues for the epicenter, the media would coalesce around those narratives. The images of people, you know, uh, queuing up and sleeping on the floor in the ICU, uh, so forth, and doctors out exasperated and so forth. Um, yeah, that's, I can see this

Steve Falconer [\(01:42:28\)](#):

And the videos of the same three people falling down in Wuhan on their face, right? We,

Patrick Henningsen [\(01:42:33\)](#):

Well, this is, this is another thing. So setting the stage, those viral videos allegedly from China in, in, uh, late 2019 or early 2020, a lot of them are, uh, were unconfirmed. Those, those were spread, uh, on Western social media. They, they were very effective, uh, in prepping the public psychologically, the Daily Mail, the tabloids are running them. And in the west, a lot of the right wing commentators were pushing those on Twitter, getting millions and millions of views. I know, because I've, uh, interacted with them and challenged them on this at the time. And, uh, the, their motivation for doing this was to make China look bad that say, China's not in control of the virus and to prepare to blame the Chinese. So,

uh, this is what they've told me. I can say this, um, I, I won't mention the name. Some of them are quite high profile, you know, right.

[\(01:43:29\)](#):

Winging commentators. But they were intentionally pushing these, they didn't care where they came from. They didn't care if they were really people dying on the street of, of C O V D. They didn't care what year the videos or the locations of the videos. The narrative was dropping dead on the street from Covid in China, period. So, so, and so, this was a phenomenon, and I, I believe personally that this prepped psychologically people in Italy, uh, people in Spain, people in Europe, in the uk, in the United States, Canada, and around the world for this coming wave, this bill coming from China was gonna attack at any moment. This might sound like a really completely base narrative, but that's exactly how it played out. And I think it's,

Steve Falconer [\(01:44:15\)](#):

Yeah. And do people fall over any, I mean, I remember as a kid, you know, going to the zoo and, you know, some woman, like had a heat stroke or whatever and just passed out and like two people in a filthy city of 11 million, is it possible three people did just fall over

Patrick Henningsen [\(01:44:30\)](#):

Or someone's drunk or on fentanyl, whatever.

Steve Falconer [\(01:44:32\)](#):

Yeah, yeah. You know, whatever. I think really what's important too, that we shouldn't miss for the set, since this is the setup, um, mark, you probably want to talk about, we, we need to talk about what, what happened in this hospital in Wuhan that made Christian Roston do this, right? Why are these sick few sick people with the flu in a Wuhan hospital? And, and was that November or October of 2019? What happened? And then we also should talk about the US patient Zero, because this story is so ridiculous. Nobody would buy this <laugh> in a million years, and yet we all bought it. So I'll turn it. Mark, do you want to talk about

Patrick Henningsen [\(01:45:15\)](#):

Wuh? What happened? I think, I think this is a good place to, uh, um, you know, wrap to, to begin to wrap up this conversation Yeah. Is, is to circle back to the patient, zero in Wuhan, patient Zero in the United States. And that will really set the, set the stages at work for the future presentations that are coming. So, uh, we'll go to Mark first on this.

Mark Bailey [\(01:45:38\)](#):

Yeah. Well, I won't get into too much detail because we're doing that in a later session. I'm, um, joining Andy Kaufman and Stefano Lio to talk about Patient Zero and exactly how they, uh, created a fictional pandemic from from that guy. But yeah, essentially we are getting into, you know, a 41 year old a a single patient here, basically. And they're telling us that they can find a new virus inside the sky without running any controls, uh, without,

Patrick Henningsen [\(01:46:09\)](#):

What's the timeline on this mark? Uh, what's the date? More or less?

Mark Bailey ([01:46:12](#)):

So we're in, yeah, we're in December, uh, 2019. So this is fan Ws patient, the 41 year old. Uh, I think he was a wet market, uh, worker and, uh, a male. And, uh, yeah, it was, um, you know, how do you, how do you create a fictional pandemic, uh, with a, with a fictional virus? Is, is to do what the virologists do, and that's do sequencing. You, you don't bother to try and come up with new clinical criteria, signs and symptoms, et cetera. You simply take his lung fluid and see what sequences you can find <laugh>, and based on fraudulent, uh, SARS one and other back coronaviruses, which are all in silico inventions, you say that this one looks slightly different. It's 89% similar to a previous back, uh, coronavirus that we found a few years ago, uh, must be causing the sky's pneumonia. Absolutely preposterous. But that's how they created, uh, their, their patient zero in Wuhan. So, yeah.

Patrick Henningsen ([01:47:20](#)):

And that was the Chinese, uh, c D c more or less made that official. And, uh, then that was uploaded to the international, uh, database, right? Of, uh, genomic sequences.

Mark Bailey ([01:47:34](#)):

Correct. And this was one of the roston, uh, who, uh, Steve has talked about earlier with his involvement in creating the P C R test, um, for, in the genomic sequences for SARS one, uh, here he is again, <laugh> appears in January, 2020, and he's, uh, using six of these, uh, sequences coming outta China to create the P C R tests, which, uh, is, uh, so hot to, to Trott. It appears on the W Ho's website, uh, before the paper's even been published. Uh, and as mentioned earlier, somehow it got peer reviewed and the space of a day. So yeah, things were happening at light speed, and I think there was, people were jumping the gun, maybe getting a little bit too excited about, uh, what was going on and, and making a couple of errors here and there. So yeah. But as I say, we'll, we'll get into more detail about Patient Zero and Wuhan and the genomic stuff, uh, in a later session.

Patrick Henningsen ([01:48:37](#)):

Yeah. And just, just a quick addendum, uh, we'll go to Steve. So Mark, uh, the, you know, the counter, one of the counter arguments to, uh, bol, one of the counter theories to bolster, uh, the lab leak, for instance, and I know lab leak will also be, uh, covered in detail in, in other sessions on the end of Covid, but is the, the world military games that, uh, all these soldiers came together in Wuhan, China of all places back in, I think it was September, October, 2019. And then, you know, theoretically this is how the United States planted the virus in a soldier or released it to the world's military, and then they went back to their countries. And that's how it's spread. As crazy as that might sound, that is the working conspiracy theory. One of them, the main ones that underpins the whole, you know, lab leak or, uh, weaponized virus gain of function narrative.

([01:49:31](#)):

There's multiple, uh, bridge conspiracies. I like to call them the join up different, uh, realities. Um, and again, it features Wuhan China, uh, once again. So, um, I thought I'd put that in there because, uh, we're talking also about narratives. And although there's official narratives that, uh, the governments and the media will run with, there's also these kind of, uh, slightly, uh, second tier narratives that still are given airtime by the establishment and certain people of, of standing, but they run kind of in parallel with the, uh, official story. And I think lab leak, wet market, these are all in the same, uh, sort of family. But, uh, your brief comment on that mark, and then we'll go to Steve.

Mark Bailey ([01:50:20](#)):

Yeah, well, the good news for the audience is, um, Sam will join me for a special video about to gain of function or, or gain of fiction as we tend to call it. So yeah, we'll, we'll talk all about that. We'll talk about the bio weapons mythology, we'll talk about the lab leak, uh, stories, we'll, we'll talk about what actually happens in these so-called gain of function experiments. But the important point is, and what, what can be really frustrating, Patrick is, and I'm not, I don't get involved in that world of Twitter and, and all this kind of stuff, but is when people look at, uh, indirect, uh, phenomena and <laugh>, here I am focused on the virology. I'm looking at fan W's paper coming out of Wuhan, uh, published, you know, in, in February, 2020. I'm looking at, uh, Rosten's, uh, P C R protocol, which was published uh, in mid-January 2020.

[\(01:51:18\)](#):

I'm studying all the details here. There's no pandemic, there's no virus <laugh> because there's nothing. And yet here we go, uh, with these wild stories about gain of function and, uh, exercises with soldiers and smuggling things, uh, across borders and stuff. Well, that, that's all, that's all fun and games. But games, there's absolutely, you have to go back to the basic science. And we know that they've shown us the best that they've got. And when I say the best that they've got, it's no good because it's not scientific and it's not evidence <laugh>. So yeah, I can only, I, I dunno. But what we're encountering is, I think particularly in the last couple of years, is that people who have been promoting a lot of this scan and function nonsense and lab leaks, they're starting to realize that there's a problem with virology. But they still, I don't think they have the depth of knowledge to be able to read all of these papers or, or like the three of us.

[\(01:52:17\)](#):

They just haven't dedicated that time to just look at the stuff. And it takes a while. You don't just pick up a scientific, uh, paper, particularly in virology and, and read it. Even with my full background as a, as a doctor, when I started doing this in early 2020, I found it hard initially and wasn't stuff that was covered at medical school, even in postgraduate stuff. It's, uh, you've really gotta get into nitty gritty. So that, that's my, uh, take on it. Um, I'm not distracted by movies like Outbreak and Contagion and, uh, Twitter postings and, uh, you know, various articles on websites, uh, when I, I need the scientific material. That's, that's, that's where I start and that's where I finish.

Patrick Henningsen [\(01:53:03\)](#):

Yeah, go. Um, Steve,

Steve Falconer [\(01:53:05\)](#):

Yeah, I, I mean, absolutely at the end of the day, that's the point. And, uh, uh, yeah, I'll just, for me, what woke me up to this or what made me take notice was the US patient zero <laugh>. This is the first time I was like, what? Um, and maybe then we, I think they're gonna talk about it later. What we should wrap up with, unless they're gonna do that, is what is the end goal of this? And the, you know, the digital surveillance and the infrastructure and the, there's, there's a point why they're doing this. It's not just to yank our chain for laughs. They had wanted to put in an infrastructure, and I think that's gonna get covered later. But here, if you wanna see a setup, tell me if you believe this story, because this is the story they gave us and this made me take notice.

[\(01:53:52\)](#):

So at the time, this is January 19th, it's a Sunday, allegedly six people have died in Wuhan China, a city of 11 million people, filthy of this unknown new weird Asian virus. They didn't even know it was C Ovid 19 or anything. And a hundred were sick. Max. This guy had been to China, not in the hospital where they

were sick. He had just been to Wuhan, comes into his doctor on a Sunday with flu symptoms, mild flu symptoms, uh, in Washington state where Bill Gates, 11 miles from the PBR Institute, where Bill Gates owns a patent on the 2015. He has a 2015 coronavirus patent. And his doctor, for some reason, outta all the thousands of things that could cause mild flu symptoms, thinks this guy might have this weird unknown China virus. So he takes a sputum sample on a Sunday, FedExes it overnight must rush when he closes his clinic to the C D C in Atlanta, Georgia, all halfway across the country.

[\(01:54:57\)](#):

The C D C, they got nothing better to do. They open this up in the mail, oh, what's this? And they test this for the new coronavirus. Well, first of all, how'd you get the test? Roston just published the things online. That don't mean you have a P C R test yet, it just means you have a sequence. You know what I mean? So they run a full sequence on the sputum sample that day. Nothing better to do. They're so worried. 'cause six people are dead in a filthy city then. And then instead of calling the Washington, like the, the newspaper out west where this guy's sick, they call the Washington Post and DC on the other side of the country the next day, and they run the article, patient zero confirmed, right <laugh>. And you're like, what? Why didn't you tell the people over there where he's allegedly sick?

[\(01:55:46\)](#):

Wouldn't they be the ones more concerned about not catching it? So two days later they do that. Um, then the next, that's on the 21st, then all of a sudden it's on Fox News on Tuesday the 22nd. It's a national story. Oh my God. US patient zero. He's brought it over from China. So in Novio, all of a sudden on the Tuesday, they sit down with the board of directors from the Coalition for Epidemic Preparedness and get a \$9 million grant to make a vaccine for an unknown virus that allegedly six people have only died from in China, a hundred or maybe lightly ill. And this guy has mild flu symptoms, and this board decides to give him \$9 million to make a vaccine. And they have the vaccine ready in six days, <laugh>. And they said they came up with it overnight. Yeah. Do you buy that story? What was the rush?

Patrick Henningsen [\(01:56:42\)](#):

One of many vaccines, a similar project. So yeah, the, the floodgates for the money wide open. Um, and yes, that was Patient Zero, Washington State and America braced itself for impact. Uh, and then talks of border closures at that point and stopping the Chinese from entering the United States. And, and, and that's when really the whole circus kind of well and truly ramped up, uh, globally at that point. And then the dashboards at that point, everyone's glued to the, uh, the famous, uh, covid counter dashboards globally, which co which also ran from season to season and, and didn't reset. So the numbers just kept compounding. And I call that leaving the taxi meter running <laugh> after the taxi is driven into the ditch. Um, and then looking at it a week later and seeing the bill is in the thousands. So that's what we did. We changed the rules for pretty much everything, um, on calculating and gathering data and to make the numbers more scary and to, to get the public more, uh, indoctrinated into the state of emergency. Um, so is

Steve Falconer [\(01:57:50\)](#):

That thing still going? I haven't looked at

Patrick Henningsen [\(01:57:52\)](#):

It. It's probably still, yeah,

Steve Falconer [\(01:57:53\)](#):

That's the thing. Yeah. Every

Patrick Henningsen (01:57:55):

Year the world ter Yeah. Yeah.

Steve Falconer (01:57:56):

Every year the flu stats restart. You've got 20 17, 20 18. 2019. That's right. 20 20, 20 21. And probably 22. It's probably still going. Yeah. They didn't reset it. They just said, oh, the covid deaths. You know, and when you divide that number by three years, it's the exact same as every year in a flu death, which went away 98%.

Patrick Henningsen (01:58:17):

Yeah. But, but see, that would deprive the, uh, the media of having those solemn watershed moments. We've reached the 1 million mark of deaths and 1 million souls have been taken by this horrific virus. But yeah, that's part of the, uh, as part of the program, uh, on this.

Steve Falconer (01:58:32):

Yeah, I would, I, I'll end myself by saying, if you buy this story, I've got swamp land to sell you in Florida. <laugh>. It's just not believable because it is unbelievable.

Patrick Henningsen (01:58:46):

It is. Yeah. Um, okay. So I think this is probably a good, uh, point to begin to segue, uh, to, to build our off-ramp, uh, from this session setting the stage, the end of Covid I, and, uh, we'll go for, uh, I think a final, um, sort of summation and conclusive statements from, uh, both Steve Falconer, uh, and Dr. Mark Bailey. Uh, we'll go to, uh, Dr. Mark Bailey first.

Mark Bailey (01:59:15):

Yeah, thank you, Patrick. And in some ways, you know, it's really simple to explain what happened here, and like we've talked about just some of the, the factors. But if, if we break it down to the basics about how you create cases and appear to have a pandemic, I mean, 2009 w h o changes the definition of pandemic. Now, it doesn't really mean anything, it just means cases. Basically, you create a case definition with Covid 19 that's so absurd that you don't even need specific, uh, symptoms and signs. You simply have these molecular detection techniques, which do not tell people if they're sick or if they have a particular illness. They simply, uh, uh, chemical reactions and test tubes, basically. And then you, uh, you know, put it together and, uh, create a, a test, which is just, uh, spread across the world. And you've got your pandemic, uh, splattered across the Johns Hopkins, uh, <laugh> website, uh, with the taxi counter taking over at, uh, a record pace.

(02:00:21):

So, I mean, that's, that's not really, uh, that's, that's quite easy to explain it that way. And unfortunately, people can't see that because they think that there must be some basis to it. And, you know, I can tell people that after studying this for three years after reading all of these virology papers, uh, it's a complete fraud. It's a complete fiction. So, really, but unfortunately, you know, most people did buy the story. The three of us didn't. And a lot of the people watching this didn't buy the story. But we have to ask why did people buy the story? Like Steve says, it's so preposterous <laugh> that, um, you, you can't even, uh, begin to think that it might be true. But I think all the things we talked about, you know, the

product placement over the years, the, the buildup, uh, to this belief that contagion was coming for people, Hollywood movies, public health announcements, this demonization of people questioning vaccines, saying that, uh, not only are some vaccines, uh, not useful, that potentially all of them are not useful, and taking, you know, solid scientific arguments and turning it into <inaudible>, um, political, uh, you know, smear campaigns, et cetera.

[\(02:01:39\)](#):

So yeah, we have this, I would say, unfortunately in late 2019, uh, early 2020, we had, for want of a better term, just the consciousness of humanity was too low to see that this was a complete swindle right in front of their faces. And I think it speaks to the wider picture of what's going on, that we know that this is not about covid 19. This is about a broader picture. This is about bringing people under control, achieving other agendas, uh, carrying out political goals. Uh, it's also, obviously, we haven't talked about it too much, but it's about the implosion of the financial system. And often people forget that, that at the end of 2019, the financial system was about to completely derail <laugh>. And people were starting to say that, and, uh, we needed a distraction. And that came in the form of the, the Covid 19 show. So, yeah, in some ways it's complex, and in some ways it's simple. But if we go back to the basic science, it's simple. There's no pandemic and there's plenty of reasons why, uh, people, uh, who, who run these agendas wanted this to happen. So that, that's the way I see it.

Patrick Henningsen [\(02:02:59\)](#):

Thank you, Dr. Mark Bailey. And, uh, Steve Falconer, your final, uh, comments.

Steve Falconer [\(02:03:05\)](#):

Yeah, I, I totally agree with Mark. And rather than getting into it, let's just say there are other agendas that these help service and those agendas are going to push forward. So what I would say is, what's the point? Why are we having this talk right now about the setup? What, what does this matter? What matters is, because Bill Gates Foundation has just done another one called Seas, just like event 201, we're another respiratory on This is gonna break out, and we still have Spars Cove two on the cards. They're gonna try this again. So what's important is that we all have this discussion right here so that we can see the signs when it starts to happen again, and go, ah, there it is, here it comes. Where's Patient Zero? Which filthy town are they blaming this on? What's really going on? You know, this allows us the tools to go, I know what you're up to, and we can double check them. So maybe this time we have a chance to put the brakes on before the con job happens instead of after, you know, just 'cause they set us up like bowling pins doesn't mean we have to get knocked down. And I'll leave it at that.

Patrick Henningsen [\(02:04:11\)](#):

No, very, very good point to, to conclude on there, Steve. Yeah, the, the lessons are all there. The lessons are all there. The, the data points are there. Uh, the signs, the telltale signs of a pseudo pandemic, um, are definitely there. I think we've covered quite a few of them. And, uh, important ones to, to highlight, just looking back is the, uh, promoting the idea of zoonosis. Um, this has really come into its own in the last, uh, two big pandemics in 2009, 2020, um, but also the advancement of, uh, technology and the manufacturing of mass testing and just ramping up production and distribution and, uh, this whole mobilization of, of industry and society. And also the centralization of policy, uh, at the WHO level. Uh, so this is a globe now a global effort, a global emergency. And governments themselves have, have developed centralized systems from previous pandemics that set the stage, that set the stage for 2020 being the optimum, uh, the optimum event.

[\(02:05:17\)](#):

And it wasn't a test, it wasn't a beta run. It was the real thing. It was the real thing, sadly, for many people, uh, especially when we, uh, discussed later in the subsequent sessions about the vaccine rollout operation, warp speed, um, and certainly there's a, a, a time to sit and pause to, to try to digest the gravity of just what happened over the last couple of years. Uh, from a humanity point of view, it is, uh, nothing short of biblical. Uh, I don't think that's an exaggeration. Uh, we're not being hyperbolic at all. And, and, uh, let's just also underline the seriousness of that, um, side of this discussion, which will also be covered, um, by other presenters. And there's a lot to cover, uh, in that area as well. But, uh, and the tabletop exercises and operationalizing the media coverage, the censorship, which we will also talk about, uh, in another session, which I'll be participating in, and social media and that whole weaponization of, of, uh, deplatforming and deleting tweets and censorship is also part of that, uh, alongside with the propaganda and the, uh, the, the gaslighting, the social engineering.

[\(02:06:29\)](#):

So there's so many important aspects of this, and I know that, uh, you, you both will be, uh, covering other, uh, parts of this as well in your other, uh, respective presentations with your colleagues. So there's a lot to look forward to there. But, uh, from that point of view, I think, uh, there's a, is a big task. Uh, we have a big effort here, but there's a lot of great hands on deck, uh, with the end of C O I D. So today we set the stage, uh, and all these things will be, um, delved into, in a much deeper and more granular detail, uh, in the other presentation. So, uh, if you are watching this presentation, uh, we hope that it was informative. We hope that it was enlightening and educational, and, uh, there's more to come. So we want to thank you very much. I'm your host, Patrick Henningsin for this session, setting the stage, the end of Covid, and thank you again to Dr. Mark Bailey from New Zealand and Steve Falconer, who is, uh, decamped in Europe, I believe presently <laugh>.

Steve Falconer [\(02:07:31\)](#):

Yeah. And thank you. It was an honor to and a privilege, and I've been excited to do this here. We we're good friends off camera, and, uh, I, I couldn't think of two better people to do this with.

Patrick Henningsen [\(02:07:41\)](#):

No, thank you very

Mark Bailey [\(02:07:41\)](#):

Much. Definitely. Um, thank you to both of you. And as Patrick says, there's some great sessions ahead. So, and Steve and I will be appearing together again as we, uh, dissect the history of virology, uh, in a different way than you've ever seen.

Patrick Henningsen [\(02:07:57\)](#):

No, I look forward to that. And, uh, there'll also be, uh, uh, obviously a lot of resources that people can, uh, go to as well as part of this, uh, package as part of this virtual event. So, um, there's gonna be a lot for everybody in, in almost every sort of area, uh, of this whole subject, uh, in the wider, the wider issues that are surrounding it. So, but thank you very much everybody for joining us for this session, setting the stage, the end of Covid. This is the beginning of your journey. Take care.

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