Are COVID-19 Vaccines Designed for Depopulation?

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Abstract: Based on the evidence presented here, the end-result of the United States Department of Defense (DoD) ordering and funding the COVID-19 vaccines is the harming of the citizens of the USA and worldwide populations. The long term aim of the US government’s response to the pandemic appears to be depopulation through the selective targeting of different demographic groups for death and disability.

Keywords: COVID, COVID-19, DoD, CDC, vaccine, Pfizer, VAERS, V-safe

1. INTRODUCTION

This paper begins with an overview of the work of Brook Jackson whose lawsuit revealed the role of the United States Department of Defense (DoD) in the US government’s response to the COVID-19 pandemic. The evidence that the COVID-19 vaccines are designed for depopulation is presented in ten (10) main points. These points of evidence are fully supported by references.

2. THE CENTRAL ROLE OF THE US DOOD REVEALED – BROOK JACKSON’S LAWSUIT

The central role of the US DoD was revealed through a lawsuit by Brook Jackson. Brook Jackson is a Clinical Research Auditor and Certified Clinical Research Professional; how she became a whistleblower and most of the pertinent legal documents, can be found on Brook Jackson’s website. [1]

In January 2021, Brook Jackson, after a two-decade career dedicated to helping get safe and effective therapeutics, vaccines, and devices to consumers, filed a False Claims lawsuit (amended in February, 2021) against Ventavia Research Group, LLC, Pfizer Inc., and Icon PLC, for producing a fraudulently-tested pharmaceutical drug, namely a COVID-19 vaccine. The legal response from Pfizer was hidden for over a year, but, when made public, revealed that the United States Department of Defense (DoD) was the prime mover in the COVID vaccine response to the pandemic. [2]

3. EVIDENCE SUMMARY

The evidence that the COVID-19 vaccines are designed for depopulation is presented in the following points.

Point 1

The COVID vaccine response to the pandemic is a project of the US Department of Defense (DoD) which ordered and paid for the Pfizer vaccines. [2] Given the DoD’s worldwide influence and connections, this can explain why so many countries and government agencies adopted the DoD’s approach requiring vaccinations and lockdowns. During the past several years, millions of illegal immigrants have entered the USA without any vetting for COVID-19. This negates the claim that the DoD’s “large scale vaccine manufacturing demonstration” is primarily to safeguard public health. [3] [4]

The basis for Brook Jackson’s complaint is found in two instruments: (1) a Base Agreement executed on July 20, 2020; and (2) a Statement of Work (“SOW”) executed on July 21, 2020 [Page 6 of Reference [2] at bottom]. The Base Agreement is an agreement between Pfizer and the Medical CBRN Defense Consortium, a consortium formed by industry in response to the Government’s expressed interest to quickly provide the warfighter with safe and effective chemical, biological, radiological, and nuclear countermeasures.
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The SOW stipulates that the DoD pay $1.95 billion, or $19.50/dose, for Pfizer’s vaccine, provided the company first secures FDA approval or Emergency Use Authorization (EUA) for the product. The SOW describes a “large scale vaccine manufacturing demonstration” that imposes no requirements relating to Good Clinical Practices (GCP) or related FDA regulations. It states explicitly that Pfizer’s “clinical trials” are “out-of-scope,” “not related” to the agreement, and that the relevant studies were undertaken at Pfizer’s expense “without the use of Government funding.” The goal is to “establish the effectiveness of a technology capable of potentially providing immediate and long-term solutions to coronavirus infections.”

Point 2

The COVID vaccines and boosters are experimental, and their long-term effects are unknown. As explained in an article published in The Center Square, Anthony Fauci, while pushing for the use of vaccines on behalf of the federal government, questioned the usefulness of vaccines for respiratory conditions like COVID-19. [5]

Fauci, former director of the National Institute of Allergy and Infectious Diseases, collaborated on a paper that makes it clear that ‘developing long-term vaccines for respiratory conditions like COVID-19 is very difficult and a problem that still needs to be overcome, something researchers have known for years.” [6]

Point 3

After World War II, the Nuremberg hearings in 1945 established a code to prevent any future violations of human rights with regard to medical experiments. The COVID-19 vaccines are experimental and their long-term effects are unknown. COVID vaccine mandates are therefore a direct violation of the Nuremberg Code. Nuremberg Code Point 1 states: “The voluntary consent of the human subject is absolutely essential.” [7]

The fact that the US government, its agencies, scores of commercial enterprises and similar institutions in other countries have mandated that their employees be vaccinated against COVID-19 in order to keep their jobs shows an alarming disregard for human rights and common sense. This denial of the Nuremberg code, coupled with the lax treatment of illegal immigrants, is indicative of coercion for an undisclosed purpose. However, those who do not know history may well be insensitive to this fact. [8]

Point 4


At the end of February, 2023, the US Department of Energy assessed, with low confidence, that the Covid-19 pandemic most likely came from a laboratory leak in Wuhan, China.[11]

There is “evidence that the Wuhan Institute of Virology and the nearby Wuhan University Center for Animal Experiment, along with their collaborator, the U.S.-based nonprofit EcoHealth Alliance, have engaged in what the U.S. government defines as “gain-of-function research of concern,” intentionally making viruses more pathogenic or transmissible in order to study them, despite stipulations from a U.S. funding agency that the money not be used for that purpose.” [12]

Point 5

The US government has undertaken a massive advertising campaign to get people to take the COVID vaccines, while suppressing alternative approaches and the use of Ivermectin in early treatment, and while silencing doctors and individuals who speak out against mass vaccination.

Through an August 2021 Freedom of Information Act (FOIA)lawsuit, Judicial Watch of Washington, D.C. obtained records from the Department of Health and Human Services (HHS) detailing the US administration’s massive media plans for a propaganda campaign to push the COVID-19 vaccine. [13]

As detailed in his meticulously-researched book, “The Real Anthony Fauci,” Robert F Kennedy Jr., shows that thousands of lives might have been saved if use of the highly-effective drug, Ivermectin, had not been vigorously suppressed by the Center for Disease Control (CDC). [14]
August 26, 2021 warned doctors and pharmacists not to prescribe Ivermectin. The goal of this warning appears to have been to force patients into taking the COVID-19 vaccines. Kennedy’s book has sold over a million copies, despite being widely censored and suppressed. [15]

Early on in the pandemic (October 2 – 5, 2020), The Great Barrington Declaration was written to counter the harm caused by COVID-19 strategies, such as lockdowns and isolation, strategies that placed unfair burdens on the poor, that were likely to impose “enormous unnecessary health costs on people,” and in the long run likely to “lead to higher COVID and non-COVID mortality.” If the Great Barrington Declaration approach had been adopted, the need for widespread vaccination would have been unnecessary. The declaration now has almost a million signers, including scores of very prominent physicians and researchers. [16]

Consequently, on 10/08/20, Francis Collins, former National Institutes of Health Director, wrote to Anthony Fauci that “There needs to be a quick and devastating published take down of its [The Great Barrington Declaration] premises.” In this way, Collins and Fauci “aggressively silenced doctors who don’t toe the government line on matters including vaccine mandates, natural immunity, and the safety and efficacy of inoculations.” [17]

Point 6

There is now wide-spread evidence of death and injury attributable to the COVID vaccines. In the 3rd and 4th quarters of 2021, after COVID vaccinations began, the CEO of One America Insurance Company disclosed that deaths in people of working age (18 to 64) were 40% higher than it was before the pandemic. [18][19]

Since the COVID-19 vaccinations began, international excess deaths have been well above average. This ongoing disaster has been ignored by elected officials and the mainstream media. [20]

The COVID vaccines are neither safe nor effective. The Vaccine Adverse Event Reporting System (VAERS) for reporting adverse reactions is an early warning system used by the FDA and CDC. VAERS is known to undercount events by a large factor of 41 or more. As of February 10, 2023, VAERS reported 34,385 deaths, 192,146 hospitalizations, and 1,521,347 adverse events. [21] [22] [23]

Multiplying the numbers above by 41, the deaths and injuries are astronomical: 1,409,785 deaths, 7,877,986 hospitalizations, and 62,375,227 adverse events.

“… there have been more adverse reactions and deaths reported to VAERS for the COVID vaccines than all other vaccines combined, over 32 years” [18, page 53]

There are severe penalties for making a false report to VAERS, making it highly unlikely that the VAERS data contains false reports.[24]

In addition, V-safe is one of many complementary vaccine safety monitoring systems, including VAERS that CDC and the U.S. Food and Drug Administration (FDA) use to closely monitor the safety of vaccines in the United States. [25]

The CDC’s V-safe data shows that 7.7% of its approximate 10 million users reported having to receive medical care after receipt of a Covid-19 vaccine, and over 70% of those users sought outpatient/urgent clinical care, emergency room care, and/or were hospitalized. [26]

Point 7

Despite the deaths and injuries, the DoD and US government agencies continue to recommend vaccination of all persons, from babies through senior citizens, and for members of the Armed Forces. The CDC has now added the COVID vaccines to the regular childhood schedule. Vaccine manufacturers have no liability for deaths and injuries attributable to the vaccines. [27][28]

There is no good evidence or basis for vaccinating babies, young children and young adults against COVID.[29]
Point 8

The research work of Craig Paardekooper and his associates has revealed that only some of the Pfizer COVID vaccine batches are lethal, and that these have been deployed primarily in the USA in “red states.” [30] [31]

Craig Paardekooper is a researcher, computer programmer, and author. Pardekooper’s associates include Dr. Mike Yeadon - Ex Head of Respiratory Research at Pfizer UK, Alexandra Latypova - researcher - analyst - Biotech CEO, Walter Wagner – Lawyer - consultant on pharma compliance and legal affairs, and Jessica Rose – researcher - statistician - analyst - government consultant. Paardekooper’s website contains a large amount of detailed information.

Those skeptical of Paardekooper’s research give arguments that have little or no merit. These arguments consist mainly of unsubstantiated attacks on the reliability of the VAERS database. See, for example, the article by Mark Hay, January 22, 2022, “The Shady Site That Shows Anti-Vaxxers Will Believe Anything.” [32]

Point 9

Researchers worldwide are now reaching the same conclusion as the author of this paper, often using different evidence and modes of analysis. Here are some of the more prominent individuals and groups investigating the COVID-19 vaccines.

Dr. Michael Yeadon formerly served as Pfizer’s vice president and chief scientist for allergy and respiratory. Yeadon spent 32 years in “rational drug design.” In an interview, Yeadon stated: “I know, and I knew, and wrote it, before any of the [injections] had Emergency Use Authorization [EUA], that they were dangerous.” Yeadon concludes that the COVID virus, with its subsequent “vaccine” campaign, was a “supranational operation” designed “to injure people, to maim and kill deliberately.” [33]

Dr. Robert Malone, Dr. David Martin and many others spoke at the Third International COVID Summit held on May 3rd at the European Parliament in Brussels. Dr. David Martin stated that in 2005, the use of coronavirus was already referred to as a “bioweapon platform technology” and as a “biowarfare enabling agent.” [34]

Dr. Naomi Wolf, in a speech at Hillsdale College synthesizing several “headline” discoveries from analyses of thousands of Pfizer documents, explained how the COVID “vaccine” enterprise intentionally sought to not only “disrupt and impair human reproduction” but “attack” and “kill” large numbers of people, particularly in the West. [35]

Dr. Kat Lindley has founded the Global Health Project, a “community of doctors and patients affected by medical tyranny.” Its goal is to “rebuild the sacred trust between the medical community and those they serve.” [36] [37]

Point 10

There is a growing chorus for an immediate halt to the use of COVID vaccines.[38] [39] [40] [41] [42] [43] [44] [45]

4. CONCLUSION

The issues presented in this paper, and the questions arising from them, are not trivial, and cannot be answered by ad hominem attacks on those who bring them to light. Most of the evidence presented here was sent by USPS mail and email at the end of March, 2023 to all 425+ members of the New Hampshire State Legislature. The author strongly recommends that citizens in each state and country bring this evidence to the attention of their own legislatures.

The approach of the DoD with lockdowns, mass vaccinations, and suppression of all alternative responses to the pandemic is not consistent with a humanitarian purpose. The development and testing of a safe and effective vaccine takes many years. The willingness of the US government and the DoD to continue a program of mass vaccination with experimental COVID-19 vaccines, despite the overwhelming evidence of harm, is in itself proof of malicious intent. This paper began with a title embodied in its title, “Are COVID-19 Vaccines Designed for Depopulation?”. Based on the evidence presented, the author asserts that the answer to this question is YES.
5. ACKNOWLEDGMENTS

My thanks are due to Brook Jackson for reviewing the article for New Hampshire legislators upon which this paper is based. My thanks also go to the other professionals, including scientists, legislators, and researchers who gave positive comments when shown the evidence presented in this paper.

REFERENCES

Some links may not work until you copy and paste them into your browser

[1] Brook Jackson’s Website https://www.iambrookjackson.com
[2] Pfizer’s Motion to Dismiss Brook Jackson’s Lawsuit https://www.iambrookjackson.com/_files/ugd/9df0bc_b7e94cf398e74b35a9182f27e685348b.pdf
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[26] CDC V-Safe : 7.7% of People Need Medical Care After Covid-19 Vaccine
https://aaronsiri.substack.com/p/v-safe-part-1-after-464-days-cdc

[27] DoD Rescinds COVID-19 Vaccination Mandate but Still Recommends Shot

[28] CDC adds Covid-19 shots to list of routine vaccines for kids and adults


[31] Craig Paardekooper Interview with Rachel L. McIntosh (January 3, 2022)
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[35] Naomi Wolf at Hillsdale College


[37] Interview of Dr. Kat Lindley by Jimmy Dore
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[38] Cardiologist says COVID-19 vaccinations ‘must stop’ …


[40] COVID-19 Vaccines Can Cause Sudden Cardiac Deaths:

[41] Idaho lawmaker wants to criminalize the most-used COVID-19 vaccines

[42] Stop the shots: Covid expert calls for ‘unsafe’ vaccines to be taken off the market, links vaccines to excess deaths - Dr Peter McCullough

[43] Leicestershire MP calls on government to halt the use of mRNA Covid vaccines - Andrew Bridgen (you must copy and paste this link into your browser)
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AUTHOR’S BIOGRAPHY

John D. Wyndham, received his degrees (BA, MA, PhD) in Physics from Cambridge University, U.K. He did postgraduate work in the Cavendish Laboratory under Antony Hewish and Martin Ryle, two scientists who shared the Nobel Prize for Physics in 1974. After obtaining his PhD in Physics, he was a Research Fellow in Radio Astronomy at the California Institute of Technology and was Assistant Professor of Mathematics, Physics, and Astronomy at Pepperdine University. He spent most of his working career as a Principal Educational Specialist at Digital Equipment Corporation and Compaq Computer Corporation, retiring in 2000. He was formerly Coordinator of Scientists for 9/11 Truth. His research papers on 9/11 can be found at https://www.scientistsfor911truth.com. His most recent paper is “Peer Review in Controversial Topics—A Case Study of 9/11,” MDPI Publications 2017, 5(2), 16; https://www.mdpi.com/2304-6775/5/2/16.

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