

# Plandemic Phase II: Admit Wrongdoing

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by [Rosanne Lindsay](#), Traditional Naturopath, [Nature of Healing](#)  
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For those who have been following the Plandemic Playbook, we have now reached Phase II. That is, officials admit to wrongdoing, after the fact. They are coming clean, by design, as part of the [Script](#).

The open disclosures are designed to preempt the planned negative consequences. As evidence is *leaked* and *admitted* by officials, the response by those who feel abused and persecuted is *predictable*, but only as much as they can be led and misled. Just how are people expected to react?

Rage? Retaliation? Retribution? Rebellion?

All of the above?

## **Evidence of Wrongdoing**

Phase II opens with an Op Ed, titled, [It's Time for the Scientific Community to Admit We Were Wrong About COVID and It Cost Lives](#) by Kevin Bass, an MD/PhD student at a medical school in Texas. It reads:

*I was wrong. We in the scientific community were wrong. And it cost lives.*

*I can see now that the scientific community from the CDC to the WHO to the FDA and their representatives, repeatedly overstated the evidence and misled the public about its own*

views and policies, including on natural vs. artificial immunity, school closures and disease transmission, aerosol spread, mask mandates, and vaccine effectiveness and safety, especially among the young. All of these were scientific mistakes at the time, not in hindsight. Amazingly, some of these obfuscations continue to the present day.

But perhaps more important than any individual error was how inherently flawed the overall approach of the scientific community was, and continues to be. It was flawed in a way that undermined its efficacy and resulted in thousands if not millions of preventable deaths.

What we did not properly appreciate is that preferences determine how scientific expertise is used, and that our preferences might be—indeed, our preferences were—very different from many of the people that we serve. We created policy based on our preferences, then justified it using data. And then we portrayed those opposing our efforts as misguided, ignorant, selfish, and evil.

We made science a team sport, and in so doing, we made it no longer science. It became us versus them, and “they” responded the only way anyone might expect them to: by resisting.

We excluded important parts of the population from policy development and castigated critics, which meant that we deployed a monolithic response across an exceptionally diverse nation, forged a society more fractured than ever, and exacerbated longstanding health and economic disparities.

Our emotional response and ingrained partisanship prevented us from seeing the full impact of our actions on the people we are supposed to serve. We systematically minimized the downsides of the interventions we imposed—imposed without the input, consent, and recognition of those forced to live with them. In so doing, we violated the autonomy of those who

would be most negatively impacted by our policies: the poor, the working class, small business owners, Blacks and Latinos, and children. These populations were overlooked because they were made invisible to us by their systematic exclusion from the dominant, corporatized media machine that presumed omniscience....

It's OK to be wrong and admit where one was wrong and what one learned. That's a central part of the way science works. Yet I fear that many are too entrenched in groupthink—and too afraid to publicly take responsibility—to do this.

To keep reading, [go here](#).

## **Phase I: The Plandemic Script**

Before this Phase II medical community disclosure, there was Phase I of the Script. For that we go back to 2015.

1. In July 2015, a U.S. [patent for “an attenuated coronavirus” \(SARS-CoV\)](#) was filed, and subsequently granted in November 2018 to the CDC. .
2. By September 19, 2019: the U.S. President signed an Executive Order on [Modernizing Influenza Vaccines in the United States to Promote National Security and Public Health](#). Under the [Commerce Clause and by Executive Order](#), the President could quarantine Americans if the CDC declared a flu pandemic.
3. On October 18, 2019: [Event 201](#), took place in NYC, a high level “pandemic exercise” with a script about a runaway virus. In March 21, 2020, Secretary of State Mark Pompeo declared that Americans [are in a “live exercise.”](#)
4. In [March, 2020](#), the World Health Organization declared a pandemic.
5. In [July 2021, page 40 of a CDC document admitted](#) that

Coronavirus has not been isolated.

*Since no quantified virus isolates of the 2019-nCoV were available for CDC use at the time the test was developed and this study conducted, assays designed for detection of the 2019-nCoV RNA were tested with characterized stocks of in vitro transcribed full length RNA (N gene; GenBank accession: MN908947.2) of known titer (RNA copies/ $\mu$ L) spiked into a diluent consisting of a suspension of human A549 cells and viral transport medium (VTM) to mimic clinical specimen.*

In other words, the spiked suspension “isolates” were created in a lab. See #1. [No virus has ever been proven to exist.](#)

6. The CDC Admitted the COVID Pandemic was the product of an inappropriate test. On December 31, 2021, The [CDC admitted the PCR test cannot differentiate between SARS-CoV-2 and influenza viruses.](#)

*“After December 31, 2021, CDC will withdraw the request to the U.S. Food and Drug Administration (FDA) for Emergency Use Authorization (EUA) of the CDC 2019-Novel Coronavirus (2019-nCoV) Real-Time RT-PCR Diagnostic Panel, the assay first introduced in February 2020 for detection of SARS-CoV-2 only.”*

7. On December 28, 2021, the [mainstream media says that cloth masks are useless.](#) The published science [shows the evidence.](#)

8. On Jan 1, 2022, the [CDC recognized PCR as an invalid test](#) for detecting COVID19.

9. January 13, 2022, a French court ruled that death after [COVID vaccine is suicide, No death benefit.](#) Read the fine print. This applies over the life of the policy. This is an expected reaction from insurance companies. Read more at [Jabbed and Denied Life Insurance.](#) Alternatively, the [Singapore government has paid out nearly \\$1.9 million](#) in

financial assistance to people who suffered serious adverse reactions or died after getting a COVID-19 shot under the country's Vaccine Injury Financial Assistance Program ([VIFAP](#)).

10. September 2022, the [CDC admits myocarditis and pericarditis after COVID shots](#).

11. January 2023, Social Media, under Elon Musk's [Twitter](#) allowed "antivax" information to be shared, along with [claims Musk suffered "side effects"](#) from the injection.

12. January 28, 2023, [The American Heart Association's Journal Circulation](#) reports COVID injections [cause myocarditis, injury, and sudden death](#), with claims of 50% youth deaths in the next five years. Most with one shot plus booster will die by 2027.

## **When It Is OK to be Wrong**

In his [Newsweek approved Op Ed](#), Kevin Bass, 7th year medical resident, appears to speak on behalf of all of medical research, medical officials, medical organizations, and medical practices, everywhere. But where are the echoes from his colleagues? Is it OK to admit wrongdoing *after the fact*? Is that a natural consequence of *trusting the science*?

*Is it OK to be wrong, as Kevin wrote:* "when strong scientific voices like world-renowned Stanford professors John Ioannidis, Jay Bhattacharya, and Scott Atlas, or University of California San Francisco professors Vinay Prasad and Monica Gandhi, sounded the alarm on behalf of vulnerable communities?"

*Is it OK to be wrong, as Kevin wrote:* "despite the fact that pandemic policy was created by a razor-thin sliver of American society who anointed themselves to preside over the working class—members of academia, government, medicine, journalism, tech, and public health, who are highly educated and privileged?"

*Is it OK to be wrong, [as Kevin wrote](#), when: “We crafted policy for the people without consulting them?.”*

Is Kevin really stating that it is OK to be wrong when all of the above is true?

If no one responds to Kevin or the officials who led the Plandemic, is that considered informed consent?

Well, consider this article a response, on behalf of humans who prefer the truth. We do not consent. It is not OK, not before or after the fact.

### **Phase III: The Planned Consequences of Wrongdoing**

After Phase II is fulfilled, and wrongdoings are revealed, the Planners expect everyone to become enraged.

As increased deaths are documented and reported from the effects of experimental inoculations, people are expected to fight back. Perhaps we will see groups incite violence, such as ANTIFA, who, throughout history, have been used as instigators of violence for preplanned insurrections. Unlike Australia and Canada, the US government did not take away people’s guns. According to [one source](#):

*THE PLAN is essentially to turn every citizen of every country, violently against their own government.*

In an article by [Ben Zimmer in the Atlantic](#): “according to Mark Bray’s 2017 book, *Antifa: The Anti-Fascist Handbook*. Bray gives the pronunciation as an-tee-fa, reflecting the word’s origins in a number of European languages, including German, where it abbreviated the noun Antifaschismus or the adjective antifaschistisch. As Bray explains,”

*...antifa was first used in Germany in the 1930s for a militant movement opposing the Nazi regime, and “Antifa committees” emerged toward the end of World War II with a revolutionary*

*socialist bent. The modern antifa movement grew out of the punk scene in Germany after the fall of the Berlin Wall, when young leftists clashed with neo-Nazi skinheads.*

The full plan is for governments to collapse, at which times a new global government will emerge as a great savior, and an easy sell. [The Great Reset](#) is such a thing. But only if the people play along.

Perhaps with foresight of these first two Phases, the people of the world will not be fooled again. Perhaps they will ignore the Plandemic Script played out through the headlines. Perhaps they will choose to rebuild society to accommodate freedom with cooperation. Perhaps people will organize without corrupt governments under old top-down structures, digital currencies, social credit scores, vaccine passports, and the Megaverse.

The current model of governing brings pandemics into play every 100 years. This script is [part of a pattern](#), like clockwork. In 1347-51, reports of the [Bubonic plague](#) killed two-thirds of the population. In 1520 and 1620 and 1720 'plague' pandemics were noted. Cholera shook the world in 1820. In 1920 it was The Spanish flu. And here today, we are in the throws of The Covidian Age.

A century after the Spanish Flu, the results are the same. The Pandemics are markers in time when thousands of people lose their lives, not to an invisible virus, but to the planned Script of misdeeds. [Public health measures](#) are always implemented with the same deadly results: plague doctors, or medical inspections, isolation of people in plague hospitals, experimental injections, and the control of movement of people and goods. Interestingly during the 1918 Spanish Flu, the survivors chose a different path [using Homeopathy](#).

A new model, as yet undefined, is possible. However, in order to officially [close The Plandemic Playbook](#), we must not be

duped again.

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