

Stand Your Ground Against Forced Medicine

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During the nineteenth century, medical treatments, such as the smallpox vaccination, were made compulsory under state laws in the US., and in Europe. In the twentieth century, vaccines for diphtheria, measles, mumps, and rubella were managed by governmental entities and were eventually required for public school attendance. Later, [school-located vaccination programs](#) became a vehicle for increasing vaccination rates. Once the World Health Organization (WHO) was developed in 1948, compulsory [vaccine campaigns went global](#).

What is never disclosed?

That nothing is *compulsory*. Nothing is forced. Everything is an offer for your consent, a contract. Do you consent or not? Do you concede or stand your ground? Do you give up your rights or do you reserve your rights?

If you do not reserve your rights, you become a statistic of history instead of forging new ground. History recycles itself with new terms replacing old ones. History lives in the past. History does not evolve.

The History Playbook

When you open the History Playbook, you see a pattern. When you see a pattern repeat, then it is time to begin to question the rhetoric and think for yourself. The Pandemic Playbook, or

Plandemic, played the world population during the 1918 Spanish Flu pandemic. The same mask mandates were offered. The same vaccine mandates were offered. How many consented? For the results, see [Recycling the Spanish Flu Pandemic](#).

For two generations afterwards, things returned to “normal.” The flu resumed its rightful place in history as a mild infection that required rest and fluids. The flu was again recognized as a *right of passage* for the body to create longterm, natural immunity.

In 2013, the Playbook opened again, to morph the flu bug into a deadly boogeyman that required new responsibilities of every citizen. In England, [published reports in the Independent](#) declared that getting vaccinated was a civic duty. A campaign was launched to increase adult vaccination rates against seasonal influenza, pneumococcal diseases, whooping cough, shingles, diphtheria and tetanus. Since 2013, intimidation by world health officials has only grown bolder to offer mandates that are accepted by trusting people everywhere.

In March of 2020, a newly discovered flu, dubbed Coronavirus (one word), was the talk of the town. Soon reports of excess deaths, [later retracted](#), from the rogue virus filled the news cycles. Mask mandates were offered. Vaccines were offered.

With little reflection of how history works, hospital workers in the U.S., who have accepted medical mandates over the last decade, have created a pattern that is fast becoming a prescription for all. Want to keep your job? Get the jab. Want to attend a sports event? A yoga class? You know the drill.

Before 2020, vaccine mandates had been [beta-tested from California to New York](#), in [hospitals](#), and in [nursing homes under state statutes](#) and regulations. These test markets were a prelude to The [Healthy People 2020 Act](#), where all adults, everywhere, would be urged to “catch up” on vaccines. However,

research always showed that [“there is no evidence that they \(flu vaccines\) affect complications, such as pneumonia, or transmission.”](#)

It is ironic that government agencies that promote medical treatments fail to acknowledge published medical journal studies showing that these treatments are not only ineffective, but harmful. [Based on injury compensation data](#), the flu vaccine is dubbed as the most dangerous vaccine. In a world where science is king, those who claim to be in charge seem to ignore their own data.

Review of the Data

- Published data in the 2011 [Journal of Autoimmunity](#) and the 2012 [J Trace Elem Med Biol](#). shows aluminum adjuvants in vaccines, including the flu vaccine, can induce [autoimmune/inflammatory syndrome](#), (ASIA), which include [encephalitis](#), [chronic fatigue syndrome](#), [macrophagic myofasciitis](#), [subcutaneous pseudolymphoma](#), and siliconosis.
- Adjuvants in the flu vaccine have been associated with an increase in antibodies leading to antiphospholipid syndrome (APS), also known as Hughes Syndrome. The alum-antigen in many vaccines is identical to phospholipids, which form the cell membrane in every cell, it can attack any part of the body – the eye, cardiovascular system, brain, nerves, skin, reproductive system – but is becoming known for causing heart attacks and fetal death. ([Journal Lupus. June 2012.](#))
- Children who get flu vaccine are at three times the risk for hospitalization for flu! ([American Thoracic Society](#)).
- The [2010 Cochrane Database Systems Review](#) – a systems review of primary research in human health care and health policy – found “no evidence that flu vaccines affect complications, such as pneumonia, hospitalization transmission of flu between people or death.” Further,

claims that the flu vaccine cuts elderly deaths in half were negated: “Due to poor quality data of the available evidence any conclusions regarding the effects of influenza vaccines for people aged 65 years or older cannot be drawn.”

- In the aftermath of the 2009/2010 swine flu scare, a 2010 study in the [British Medical Journal](#) showed that children in England and throughout the world given the Pandemrix flu vaccine had a 1,400 percent increased risk of developing narcolepsy compared to those not vaccinated.
- A 2011 study in the [Journal Vaccine](#), showed inflammatory adverse events, such as preeclampsia and preterm birth, among pregnant women taking the trivalent influenza vaccine.
- A 2011 study in the [Journal of Internal Medicine](#) revealed flu shots result in inflammatory cardiovascular changes indicative of increased risk for serious heart-related events such as heart attack.
- According to a 2012 double-blind, randomized, controlled trial in [Clin Infect Dis. March 15, 2012](#), (the first of its kind) conducted in healthy children 6 to 15 years of age, getting a flu shot was found to increase the risk of other respiratory viral infections over four-fold.
- According to a 2005 study published in the [Archives of Internal Medicine](#), “There are not enough influenza-related deaths to support the conclusion that vaccination can reduce total winter mortality among the U.S. elderly population by as much as half.”

In response to mandatory flu vaccines for medical staff, a group of medical professionals published [an open 2013 letter](#) in the *Journal of American Physicians and Surgeons*, questioning whether such mandates are medically warranted and ethically correct. They cited that the flu vaccine: 1) is a “statistical gamble” in targeting actual circulating viruses; 2) shows seventy percent of people are already immune at the

time of vaccination, according to FDA studies; and 3) shows no evidence that it affects complications of pneumonia or transmission from person to person, as advertised. No answer ever followed.

Do Not Volunteer for “Mandatory” Treatments

Today, an experimental mRNA COVID injectable treatment is lumped into the category of vaccines, but is not entirely a vaccine. The COVID injectable is not FDA-approved as a vaccine. Moderna refers to its injectable as “[an operating system](#).” Unlike FDA-approved flu vaccine package inserts that disclose trial data and adverse reactions, the [COVID injectable package insert is blank](#).

Today, official mandates do not require scientific scrutiny. Mandates only require people to give up their power.

When people give up their power of discernment to the authority of governments, they can expect tyranny in the form of unenforceable mandates. This is a perfect time to question authority and falsehoods when the risks are unknown and undisclosed.

There are no mandates in a free society, unless you ALLOW them. In other words, you do not have to *volunteer* for mandates.

When faced with Totalitarian tactics, do you “take your medicine” or walk the other way? Do you fall in line or undo the conditioning? When you see *Panic Propaganda* in the news cycle, do you turn off the news? Or do you listen to my podcast on [The Playbook of Tyranny and How to Close It?](#)

If you do not protect your rights, be prepared to lose them. If enough people say NO, the tide will shift. Remember, [there is always a choice](#). So choose wisely.

When people realize they are born healers with defense systems called immune systems, there will be no reliance on chemical-

laden injections that offer artificial immunity with no guarantees. Even though you will not be told you have a choice, you always retain your rights to choose. You can still choose to protect your innate immunity using organic, nutrient-rich foods, herbal medicines, naturopathy, homeopathy, and many natural modalities.

Remember, colds and flus are part of a natural immune response by your body to strengthen itself. Rest and a return to Nature are the best remedies. Dis-ease need not be feared when it offers the body a chance to remember how to realign itself back to a sense of Ease.

Returning to the time before the Playbook is as simple as remembering who you are and your power to choose. Why fear the body's natural ability to heal itself when evidence shows there is more to fear from the injectable?

On the verge of more draconian government mandates, the question that you must ask yourself is, *Do you want to be a statistic of history and remain stagnant, or do you want to evolve?*

Stand your ground.

Originally posted in the [November 2013 blog](#).

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