

Mr. Chairman and esteemed committee members, thank you for allowing me to speak with you today. I am Dr. Daniel Stanislawski. I am a husband, a father of 5, and a lifelong North Dakotan who happens to hold a PhD in Molecular Biology and Biochemistry. In addition I love to think I am a philosopher, a writer, an historian, a behaviorist, and a cultural and political scientist! Though, sadly, I am not all these things. I am, however, the chief science officer of a nonprofit, public health information company. In this capacity, I spend much of my time analyzing and understanding data in order to demystify for the interested public complicated scientific problems pertaining to health not merely so that the public simply 'takes my word for it', but rather so the issues are understood so as to empower and remove fear from those who come to my organization for help.

To provide cogent answers to the many problems presented during Covid-19, I quickly realized, requires far more knowledge than what is contained in molecular biology, virology, and vaccinology. Indeed, it requires philosophy, history, behaviorism, cultural and political understanding, and probably much more!

So, to begin to grasp what happened with Covid-19 let us, for the time being, set aside our own personal experiences and feelings and personal attachments to positions or to people or to institutions and let us zoom out and consider what happened to humanity as a whole: shortly after a pandemic was declared by the world health organization, billions of people willingly shut themselves up in their homes, subsequently billions of people covered their mouths and noses with a new accoutrement, and finally people lined up across the globe to have needles plunged into their arms. Never in the history of the world have so many humans, irrespective of nation, irrespective of culture, behaved so resoundingly identically! These behaviors at such a scale, however, are not human: they are rather conditioned, automated responses, and they were performed at the behest of an international organization that was dictating truth to a fear-saturated global population.

And what was lost? Millions of closed small businesses have caused millions of livelihoods to be destroyed. Havoc was inflicted upon the world economy which is now teetering on the brink of destruction, the solution for which will be equally unprecedented. Yet a great many still died.

Were the world health organization and center for disease control and prevention dictates above reproach?

Multiple studies have analyzed the effects of shelter-in-place policies. A report from Johns Hopkins revealed lockdowns produced no effects on Covid-19 mortality and concluded that, "lockdown policies are ill-founded and should be rejected as a pandemic policy instrument."¹ Researchers from the RAND Corporation found that lockdown interventions did not attenuate excess mortality, but rather, "following the implementation of SIP [shelter in place] policies, excess mortality increases." The study continues, "We failed to find that countries or U.S. states that implemented SIP policies earlier, and in which SIP policies had longer to operate, had lower excess deaths than countries/U.S. states that were slower to implement SIP policies."²

These two studies are not alone. According to the CDC (https://www.cdc.gov/nchs/nvss/vsrr/covid_weekly/index.htm#Comorbidities), approximately five percent of Covid-19-attributed deaths in the United States were due to the virus alone while those that died with Covid-19 and other contributing factors had an average of 4.0 comorbidities; the average age of Covid-19 death is over 80. These statistics make analyses of years of life lost valuable, as Covid-19 disproportionately affects the elderly, while policies implemented in response to Covid-19 affect all ages. Research conducted by the Reason Foundation concluded that years of life lost due to “collateral deaths” likely exceed those lost to the virus by potentially two-fold or worse³. A thorough lockdown cost/benefit analysis performed in Canada concluded that the most reasonable ratio of “years of life cost” to “years of life saved” is 141, that is 141 years of life lost for every year of life saved; the author characterizes lockdown policy as, “one of the greatest peacetime policy disasters of all time.”⁴

While the expense of lockdowns analyzed using such large data sets provides the broad setting of the lockdown narrative, it tells little of the effect these lockdown policies have had on everyday experiences of those who were living in that environment. The mental and physical health and wellbeing of the global population was suffering greatly before Covid-19. The World Health Organization predicted in 2017 that depression would replace ischemic heart disease as the number one source of disease burden in the world by 2030⁵. Obesity⁶, already at an epidemic level, was rising sharply across the world and is expected to explode in the coming decades. These already alarming trends were exacerbated by Covid-19 countermeasures.

The great pastime of our modern global hegemonic culture is to plop down on a comfortable recliner and to stare into television sets, tablets or cell phones⁷. The first aspect, plopping down, increased as physical inactivity in the form of step count decreased across the globe⁸, a phenomenon associated with greater general disease burden⁹. Lockdown altered eating patterns characterized by increased snacking and meal frequencies¹⁰. The combination of increased physical inactivity and eating has resulted in significantly increased bodyweight in adults^{11,12}, and increased body-mass index, weight gain and obesity in children^{13,14}. It has long been known that being overweight or obese is associated with other chronic illnesses¹⁵; it has more recently been understood that obesity increases one’s odds of suffering from infectious diseases as well^{16,17}.

Children have been greatly negatively impacted by Covid-19 countermeasures despite suffering almost no mortality from Covid-19. It has been known for decades that social isolation and loneliness increases depression in children which can persist for years¹⁸, and several studies have now reported negative mental health impacts on children and adolescents due to Covid-19 intervention policies such as lockdowns^{19,20}. School closures have generated learning losses measured as up to half a standard deviation lower in general assessment scores in grade school Italian children²¹. Dutch schoolchildren have suffered learning losses of 2.47 months in mathematics and 2.35 months of reading comprehension²². Infants born during the Covid-19 era have suffered significant deficits in verbal and nonverbal development and early learning cognitive declines of almost two standard deviations relative to those born before January 2020²³. “Our results seem to suggest that early development is impaired by the environmental conditions brought on by the pandemic,” state the authors of the study²³.

The second mentioned aspect of the world culture also increased significantly as television, cell phone or tablet exposure, collectively known as “screen time”, experienced a massive 245 percent increase in Spain²⁴ and 296 percent increase in non-schooling screen time from 2.69 hours per day to 7.52 in Italian overweight or obese children²⁵. Escapism and anxiety motivated significantly increased non-problematic and problematic TV series binge watching during Covid-19 lockdowns²⁶. The video game industry broke sales records in 2020 (<https://www.forbes.com/sites/mattperetz/2020/08/10/video-games-set-record-second-quarter-spurred-by-pandemic-sales/?sh=7c9c75886f4e>) which resulted in, or was symptomatic of, a rise in video game addiction in the post-Covid-19 era (https://journals.lww.com/addictiondisorders/Abstract/2021/12000/Video_Game_Addiction_Among_Students_During.4.aspx). An upswing in internet addiction was instigated at the same time as Covid-19 lockdown policies^{27,28} while internet addiction’s rarely discussed offspring, pornography viewing, likewise underwent an unprecedented increase which strongly correlated to national lockdown stringency²⁹ – even the coronavirus itself became fetishized during this period²⁹. The increased exposure to all forms of media was associated with worsening mental health outcomes during the Covid-19 era^{30,31}. The decay of healthy human behaviors involving screens is associated with and suggestive of declining mental wellness³² and the occurrence of even less socially-acceptable addictive disorders.

Alcohol use disorder-associated mortalities surged almost 25 percent in 2020 and 22 percent in 2021 over the already high expected rates with the youngest cohort (25-44 years of age) enduring 40 percent and 34 percent upswings in 2020 and 2021, respectively³³. Because this younger age group suffers very little from SARS-CoV-2 infection, the authors suggest that excess deaths in this younger age group “were more likely attributable to indirect effects of the pandemic such as stay-at-home policies and reduced medical and social resources for patients with alcohol use disorder”³³. Mulligan and colleagues³⁴ recently examined non-Covid-19 excess mortality and found in excess of 97,000 Americans died annually in the Covid-19 era from causes other than Covid-19 and that these mortalities cost \$1.7 trillion in lost economic production over the course of their would-have-been lifetimes. This study found the excess mortality for those under the age of 45 increased 26 percent from all sources, but mostly from non-Covid-19 causes. Conspicuous among non-elderly excess mortality was a 13 percent rise in drug-associated deaths and a 28 percent increase in alcohol-related mortalities³⁴. Suicide rates increased in Japan in the late summer and early autumn months of 2020³⁵.

I decided to detail the ill effects of lockdowns as it is, perhaps, the least controversial of the three interventions, and the scientific case against lockdowns is, perhaps, the least well known. For the sake of brevity, I will not go into detail on the scientific cases against face masking and Covid-19 vaccinations though, I assure you, these cases have just as much merit and the data are just as, if not even more, disturbing than the lockdown data – particularly the vaccine data. Instead of being engaged in open, potentially life-saving scientific debate, the women and men, the doctors and scientists, who lent their voices to this information were instead censured and subjected to ridicule and scorn. Many of these forfeited their careers for their bravery.

All of this was suffered after the implementation of policies dictated to the world by the world health organization. I find it alarming that this same organization pays comparatively far less attention to chronic illnesses like obesity, diabetes, cancers, and cardiac disease which cause far more global disease burden than Covid-19, rates of which are expected to increase dramatically over the globe during the next few decades^{6,36-38}, and, ironically, all of which are primary risk factors for contracting Covid-19³⁹. Criminal negligence is a too kind and inaccurate term for what is occurring.

One thing that can be deduced from the Covid-19 human experience is that a powerful international bureaucracy is already in place which is absolutely mind-boggling in its depth and breadth, particularly in this country. A mandate from a top-of-the-food-chain international bureaucrat can be issued which will trickle down and be followed to the letter at the national, then state, then local health department levels. This mandate will then spread to and be implemented by local school boards in every city in this nation and the world over. The Soviets would be supremely jealous of what we now have in place.

Along with leaders of other G20 nations, the current Presidential administration has agreed to aid in advancing global initiatives around sustainable development goals, a global digital economy that includes issuance of central bank digital currencies, and digital documentation of Covid-19 vaccination status for travel (<https://www.whitehouse.gov/briefing-room/statements-releases/2022/11/16/g20-bali-leaders-declaration/>), which the world health organization released guidance on over a year ago⁴⁰.

Though the Constitution of our great nation was entirely forgotten, if not outright trampled under foot, at the dawn of 2020, it is time for understanding and practicing of it to make a resurgence. The constitution contains neither the words virus nor bacteria; our rights are not contingent upon the presence or absence of either. There must be reasonable representative authority in front of which one can air grievances; in a world dominated by international bureaucracy, there will be no recourse for individuals abused by government overreach. This is odious to the principles enshrined in our constitution.

Representative Hoverson's bill reads, "a health-related regulation of an international health organization, either directly through the organization or indirectly through law, regulation, or order of the federal government, is not enforceable in this state." To this I would also add "treaty". Notice, this bill makes no judgement on the correctness or incorrectness of any declaration emanating from an international organization, it merely allows the individual to assert his or her earthly sovereignty over his or her own body. One is still happily free to choose to follow the course of action laid out by entities like the world health organization.

By making this bill law, this legislature can solve problems which transcend party affiliation and guarantee health freedom for all North Dakotans. It is my sincere wish that this happens. Thank you for your time!

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