

Illegal and Harmful: The UK Covid Response

A Freedom & Responsibility Report



About Freedom and Responsibility

Freedom and Responsibility is a group dedicated to protecting civil liberties by holding government safely to account and tackling illegal overreach within the United Kingdom. Our ethos is that there is no danger in giving citizens freedom, so long as that freedom is coupled with responsibility. We believe that this country is a responsible one, where people can and should make informed decisions concerning their own lives. Freedom fosters community spirit and accountability, whilst offering the maximum chance for society to become safer, happier and more prosperous. Drawing together legal, medical, political, journalistic and a range of other expertise, we seek to show that.

Illegal and Harmful: The UK Covid Response

Published 1st of June 2020. Websites last accessed 28th of May 2020.

Lead Authors:

Omar Alexander & William J. Coleshill

Public Contributors:

Margaret Ager, Marc Beaton & Margarita Martel

Contact us:

info@freedomandresponsibility.uk

Our Website:

<http://freedomandresponsibility.uk/>



Contents

About Freedom and Responsibility.....	2
Contents.....	3
Foreword.....	5
Introduction.....	6
Understanding the Coronavirus Pandemic.....	6
Analysing the UK Government Response.....	15
Promoting Healthcare, Freedom and Safety.....	19
Assessing the Limits of Government Power.....	19
Protecting Against Harmful Measures.....	21
Ensuring Hope Beyond The Present.....	21
Illegal Measures Enforced by the UK Government.....	22
A Context of the UK Constitution.....	22
Suspension of Habeas Corpus.....	32
Suspension of Legal Autonomy Without Verification.....	39
Psychological Torture of Vulnerable Groups.....	43
Further Miscellaneous Illegal Measures.....	45
Legal Accountability.....	50
Harmful Measures Enforced by the UK Government.....	54
The Legalisation of Criminal Negligence by Government.....	54
Psychologically Harmful Forced Confinement.....	56
Prevention of Herd Immunity.....	59
Prevention of Safe Economic Activity.....	61
Lack of Accountability of Emergency Powers.....	64
Reduced Access to Sunlight.....	67
Prevention of Access to Qualified Medical Professionals.....	68

Prevention of Access to Medicines.....	76
Facilitation of Cross-Border Infection.....	80
Use of Flawed Data, Flawed Models and Inaccurate Recording.....	81
Potentially Harmful Measures Enforced by the UK Government.....	87
The Suspension of Responsibilities to Vulnerable Groups.....	87
Quadrupling of Time Limits for Select Warrants.....	87
Hope Beyond The Present: Recommendations to Keep People Healthy, Free and Safe.....	88
Intelligent Isolation.....	89
Protection for at-risk Households.....	89
Right of Access to Medicines.....	90
Right of Access to Medical Practitioners.....	90
Respect of Legal Autonomy.....	90
Clear Public Oversight.....	91
Secure Borders.....	91
Accountability for Preventable Malpractice.....	92
Safeguards for Vulnerable People.....	92
Financial Accountability and Proportionality.....	92
Accurate Government Reporting.....	93
Parliamentary Review of all Emergency Legislation.....	93
Action Going Forward.....	94
The Legal Case against the UK Government.....	94
The Moral Case against the UK Government.....	95
Further Research and Education.....	96
Spreading the Message.....	97
Building Networks.....	98
Critical Voices.....	98
Afterword.....	99

Foreword

The measures introduced by the UK government in the wake of the coronavirus pandemic are the most comprehensive suspension of civil liberties in British history. Within less than the space of a week, forced confinement of citizens was mandated and an unprecedented bill had passed from being proposed, to royal assent. Yet such rapidity has left little to none in the way of scrutiny. Our research finds that many government measures are not merely unnecessary to combat the disease, but actively harmful to tens of millions of people and in particularly jeopardising the lives of vulnerable people, possibly leading to many deaths. Many are also demonstrably against the law.

Healthcare, freedom and safety are not opposites to choose between, but complimentary, enhancing each other in turn. This report, does not merely expose and call for the immediate cessation of illegal, harmful and ineffective action, but produces credible alternative plans to improve on each of these three metrics, utilising the examples of more successful efforts from other infected nations, including Japan, Taiwan, Sweden and South Korea, such as *intelligent isolation*.

Unless immediate action is taken to keep people safe, using proportionate and proven methods, rather than those presently in place, disease will continue to spread, the economy will cease to function and citizens will be subject to ever more severe and widespread abuse. We must act now.

Omar Alexander and William J. Coleshill

Lead Authors, Freedom and Responsibility

Introduction

Understanding the Coronavirus Pandemic

Covid-19 has taken the world by storm since it first appeared in Wuhan. Within eight weeks, from its first instances, in late November and early December 2019, it became a global pandemic, spread by travel, with numerous epicentres around the world.

Coronavirus are a family of viruses named for the crown-like shape of the virus. They can lead to secondary illnesses, as with SARS and MERS. The current strain of Coronavirus (Covid-19) has become a Public Health Emergency. Because it is a new virus, there is a lack of immunity (natural or via an effective vaccine). This means that the virus has the potential to spread extensively. Whilst many cases as asymptomatic, most infected develop non-life threatening, flu-like symptoms.

The Risk of The Disease

The risk which Covid-19 poses to the public has been difficult to estimate. Measures taken by many countries, such as presumptions of cause of death, reduction of removal of autopsy requirements, false propaganda, lack of testing and censorship, have made this practice harder than otherwise necessary. However, harm appears much lower than first predicted. What is known is the following:

- The average age of the positively-tested deceased in Italy is circa 81 years. 10% of the deceased are over 90 years old, whilst 90% are over 70 years old. 80% of the deceased had suffered from two or more chronic diseases. 50% of the deceased had suffered from three or more chronic diseases. Fewer than 1% of the deceased were healthy persons, i.e. persons without pre-existing chronic diseases. These figures are in line with normal mortality rates attributed to pneumonia.¹

¹ Greater Institute of Sanitation, 2020. 'Report sulle caratteristiche dei pazienti deceduti positivi a COVID-19 in Italia Il presente report è basato sui dati aggiornati al 17 Marzo 2020' Greater Institute of Sanitation. Available At: https://www.epicentro.iss.it/coronavirus/bollettino/Report-COVID-2019_17_marzo-v2.pdf

- The areas worst hit by the virus (Hubei Province² and Northern Italy)³⁴⁵ have some of the poorest air qualities in the world, unlike most of the UK, and usually experience higher rates of death due to respiratory problems. Wuhan residents were protesting poor air quality as early as July 2019.⁶
- 60% of passengers that tested positive for the virus on the Diamond Princess (where most passengers were tested) were completely asymptomatic, suggesting that the overall death rate from this virus is lower than any current figure, as many asymptomatic cases may not be logged.⁷
- Covid-19 test kits are not designed for the general use they are undergoing.⁸ Meanwhile, a preliminary study from Stanford University showed that 20 to 25% of Covid-19 positive patients tested additionally positive for other influenza or cold viruses, raising false-positive concerns.⁹
- In the Lombardy, 90% of test-positive deaths occur not in intensive care units, but instead mostly at home. This raises concerns whether increased stressful forced confinement increases mortality.¹⁰
- No differentiation is made by most governments between individuals that die 'with' and 'from' Covid-19 (despite the option to). Rudi Anschober and Bernhard Benka, of the Austrian Corona Task Force articulate this, stating: "There is a clear rule at present: Died with the corona virus or died from the corona virus both count for the statistics. No difference is made as to what the patient actually died of. In other words, a 90-year-old man who dies with a fracture of the femoral neck and

2 Chen, N. et al, 2016. Analysis on the pollution levels of atmospheric particles and the correlation of pollutants in Hubei province. *Environmental Science & Technology*, 39(09), pp.194-198.

3 Fattore, E., Paiano, V., Borgini, A., Tittarelli, A., Bertoldi, M., Crosignani, P. and Fanelli, R., 2011. Human health risk in relation to air quality in two municipalities in an industrialized area of Northern Italy. *Environmental research*, 111(8), pp.1321-1327.

4 Conti, S., Harari, S., Caminati, A., Zanobetti, A., Schwartz, J.D., Bertazzi, P.A., Cesana, G. and Madotto, F., 2018. The association between air pollution and the incidence of idiopathic pulmonary fibrosis in Northern Italy. *European Respiratory Journal*, 51(1).

5 World Nomads, 2020. 'Air Pollution in Italy: Health Hazards to Be Aware Of' Available At: <https://www.worldnomads.com/travel-safety/europe/italy/pollution-other-health-hazards-in-italy>

6 Griffiths, J., (11/07) 2019. 'China has made major progress on air pollution. Wuhan protests show there's still a long way to go' CNN. Available At: <https://edition.cnn.com/2019/07/10/asia/china-wuhan-pollution-problems-intl-hnk/index.html>

7 Ioannides, J., (17/03) 2020. 'A fiasco in the making? As the coronavirus pandemic takes hold, we are making decisions without reliable data' StatNews. Available At: <https://www.statnews.com/2020/03/17/a-fiasco-in-the-making-as-the-coronavirus-pandemic-takes-hold-we-are-making-decisions-without-reliable-data/>

8 Creative Diagnostics, 2020. 'SARS-CoV-2 Coronavirus Multiplex RT-qPCR Kit' Creative Diagnostics. Available At: <https://www.creative-diagnostics.com/sars-cov-2-coronavirus-multiplex-rt-qpcr-kit-277854-457.htm>

9 Shah, N., 2020. 'Higher co-infection rates in COVID19' Medium. Available At: <https://medium.com/@nigam/higher-co-infection-rates-in-covid19-b24965088333>

10 TGC24, (20/03) 2020. 'Coronavirus, in Lombardia 9 morti su 10 mai giunti in terapia intensiva' TGC24. Available At: https://www.tgcom24.mediaset.it/cronaca/coronavirus-in-lombardia-9-morti-su-10-mai-giunti-in-terapia-intensiva_16362350-202002a.shtml

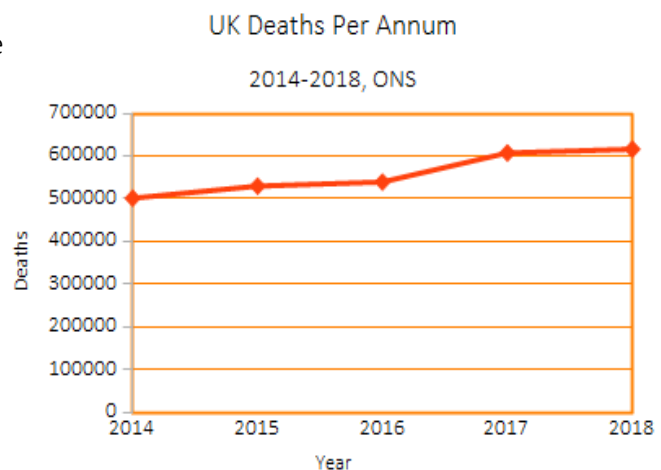
becomes infected with corona in the hours prior to his death is also counted as corona death. To name but one example."¹¹ Echoed by other doctors¹² this causes overestimated mortality.¹³

- The risk of death for a person 20-30 years old, is negligible, at 0.03%.¹⁴ Meanwhile the risk of death for a person below the age of 40, including those with pre-existing conditions, is less than 1%. The risk of death for a person under 65 (including the same) is less than 2%.¹⁵

Overall, evidence speaks to a much lower threat than governments currently estimate. To put this into context for the UK, data must be compared with the average level of mortality, the government's threat analysis and other projections. UK deaths remained lower than average until an increase in mid-April, though many of these may be down to continued forced confinement measures and poor state-controlled medical care, as opposed to Germany with minimal mortality.¹⁶

As of the 1st of June, the UK had 276,156 'confirmed' cases,¹⁷ with the impact recognised as

"moderate", in the words of the Secretary of State for Health,¹⁸ and on the 19th of March the UK removed Covid-19 from the official list of High Consequence Infectious Diseases (HCID), stating that mortality rates are "low overall".¹⁹ A vast number, 30,000 UK citizens each year, die of pneumonia and there are 600,000 UK deaths overall.²⁰ It is not yet clear how many deaths attributed to Covid-19 are beyond the norm.



11 Heute, 2020. 'österreich bei corona todesstatistik sehr liberal' Heute. Available At: <https://www.heute.at/s/osterreich-bei-corona-todesstatistik-sehr-liberal-48665863>

12 Schiffman, B., 2020. 'Corona 16 Obduktion' Youtube. Available At: https://www.youtube.com/watch?v=gSn_YaOYYcY

13 Lee, J., (28/03) 2020. 'How deadly is the coronavirus? It's still far from clear' The Spectator. Available At: <https://www.spectator.co.uk/article/The-evidence-on-Covid-19-is-not-as-clear-as-we-think>

14 Oswald, A.J. and Powdthavee, N., 2020. The Case for Releasing the Young from Lockdown: A Briefing Paper for Policymakers (No. 13113). Institute of Labor Economics (IZA).

15 Ioannidis, J.P., Axfors, C. and Contopoulos-Ioannidis, D.G., 2020. Population-level COVID-19 mortality risk for non-elderly individuals overall and for non-elderly individuals without underlying diseases in pandemic epicenters. medRxiv.

16 Yuan, J., Li, M., Lv, G. and Lu, Z.K., 2020. Monitoring Transmissibility and Mortality of COVID-19 in Europe. International Journal of Infectious Diseases.

17 Johns Hopkins University, 2020. 'Johns Hopkins Covid-19 Dashboard' Johns Hopkins University. Available At: <https://coronavirus.jhu.edu/>

18 Hancock, M. (23/03) 2020. Twitter. Available At: https://twitter.com/search?q=%22Clinical%20advice%20has%20not%20changed%20about%20the%20risk%20to%20the%20public%2C%20which%20remains%20moderate.%22&src=typed_query

19 ^

20 ONS, 2020. 'Deaths' Office for National Statistics. Available At: <https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths>

The UK Government has based its plans on an Imperial College London model.²¹ This predicted, at extremis, between 250,000 and 500,000 deaths in the UK 'from' Covid-19, however many of these deaths would not be in addition to, but rather part of the normal annual mortality rate of around 600,000 people per year.²² In other words, excess mortality would remain low, at around 20,000, possibly not exceeding 6,000. This study itself has been criticised^{23,24} for using models, which overestimate spread, however it did gain much media attention.

The impact on UK mortality and future health is therefore likely to be low. However, incentives remain for governments to inflate the danger of the disease, lest they face a public backlash and political consequences, despite the harm of such hyperbole. Dr Peter Goetzsche is Professor of Clinical Research Design and Analysis at the University of Copenhagen and founder of the Cochrane Medical Collaboration. He has written several books on medical corruption. He states:

“Our main problem is that no one will ever get in trouble for measures that are too draconian. They will only get in trouble if they do too little. So, our politicians and those working with public health do much more than they should do.”

“No such draconian measures were applied during the 2009 influenza pandemic, and they obviously cannot be applied every winter, which is all year round, as it is always winter somewhere. We cannot close down the whole world permanently.”

“Should it turn out that the epidemic wanes before long, there will be a queue of people wanting to take credit for this. And we can be damned sure draconian measures will be applied again next time. But remember the joke about tigers. “Why do you blow the horn?” “To keep the tigers away.” “But there are no tigers here.” “There you see!””²⁵

21 Ferguson, N. et al. 2020. Report 9: Impact of non-pharmaceutical interventions (NPIs) to reduce COVID19 mortality and healthcare demand.

22 ONS, 2020. 'Deaths' Office for National Statistics. Available At: <https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths>

23 Ioannidis, J., (17/04) 2020. 'A fiasco in the making? As the coronavirus pandemic takes hold, we are making decisions without reliable data' Stat News. Available At: <https://www.statnews.com/2020/03/17/a-fiasco-in-the-making-as-the-coronavirus-pandemic-takes-hold-we-are-making-decisions-without-reliable-data/>

24 Jewell N, Lewnard J and Jewell B., 2020. Predictive Mathematical Models of the COVID-19 Pandemic: Underlying Principles and Value of Projections. JAMA. Available At: <https://jamanetwork.com/journals/jama/fullarticle/2764824>

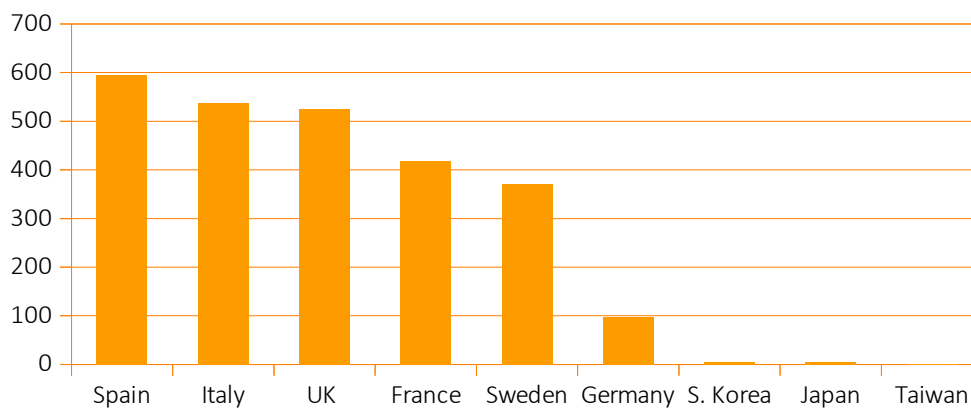
25 OffGuardian, 2020. '12 Experts Questioning the Coronavirus Pandemic' OffGuardian. Available At: <https://off-guardian.org/2020/03/24/12-experts-questioning-the-coronavirus-panic/>

The Case Studies of Other Nations

Whilst some nations have enacted measures which significantly curtail the liberty of citizens, these measures have been far from uniform globally, and have not yet a proven efficacy. In particular, South Korea, Taiwan, Sweden and Japan have been highlighted as successful examples which demonstrate that measures which infringe on civil liberties are neither necessary, nor effective, nor desirable in the containment of the illness.

Covid-19 'Confirmed Cases' Per Million Population

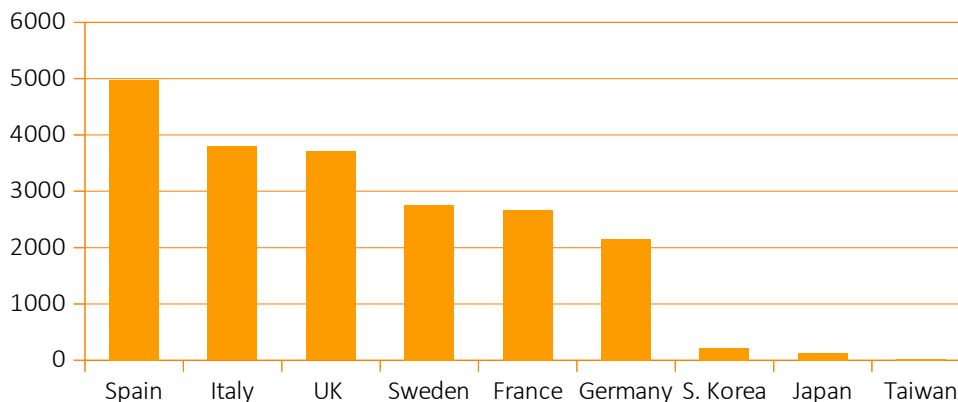
Johns Hopkins Data (17/05/2020)*



Covid-19 'deaths' per million of population.²⁶

Covid-19 'Confirmed Cases' Per Million Population

Johns Hopkins Data (17/05/2020)*



Covid-19 confirmed cases by million of population.²⁷

26 Duarte, J. et al. 2020. 'COVID-19 Deaths, Cases & Recovery Per Capita' Covid-19 Dashboards. Available At: <https://covid19dashboards.com/covid-compare-permillion/>

27 Most population data sourced from World Bank. Available At: <https://data.worldbank.org/> (Taiwan population data sourced from Worldometer. Available At: <https://www.worldometers.info/world-population/taiwan-population/>)

South Korea

South Korea has managed to quell the number of infections within the country whilst preserving civil liberties. The backbone of Korea's success has been mass indiscriminate testing, followed by rigorous tracing and quarantine of contacts. As of March 29th 2020, the country had conducted more than 394,000 tests, the highest per capita in the world. A smartphone app provides GPS maps tracking the infection's spread, whilst roadside tents offer tests with results in 24hrs. Passengers disembarking planes from epicentres are quarantined for two weeks.²⁸ According to Michael Mina, assistant professor at the Center for Communicable Disease Dynamics at Harvard University:

*"[South Korea's] extensive testing is a very valuable tool to both control the virus and understand and measure the effectiveness of the responses that are taking place," "It's allowed individuals to take matters into their own hands and make social distancing decisions on their own, both to protect those around them and to protect themselves from those who are infected around them."*²⁹

As of the 1st of June, South Korea has 11,503 confirmed cases.³⁰

Sweden

Sweden has so far pursued the most liberal strategy in dealing with Covid-19, which is based on two principles: only at-risk groups and those with flu symptoms stay at home. Chief epidemiologist Anders Tegnell explains "...there is no need for further measures, the effect of which is only marginal anyway,"³¹ and went on to state that "...in a sense we are beating it".³² Sweden also made many voluntary recommendations, such as social distancing, increased hygiene efforts, discouraging visits to retirement homes and restrictions on large gatherings of people.

Case data sourced from Johns Hopkins University. Available At: <https://coronavirus.jhu.edu/map.html>

28 Shaw, R, et al. 2020. Governance, technology and citizen behavior in pandemic: Lessons from COVID-19 in East Asia. *Progress in Disaster Science*, p.100090.

29 Bedingfield, W., (21/03) 2020. 'What the world can learn from South Korea's coronavirus strategy' *Wired*. Available At: <https://www.wired.co.uk/article/south-korea-coronavirus>

30 Johns Hopkins University, 2020. 'Johns Hopkins Covid-19 Dashboard' Johns Hopkins University. Available At: <https://coronavirus.jhu.edu/>

31 Jones, W., (29/03) 2020. 'What are the virus figures telling us?' *Conservative Woman*. <https://conservativewoman.co.uk/the-great-ventilators-myth/>

32 Gallagher, I., (04/04) 2020. 'Scientist leading Sweden's battle against coronavirus says Britain's lockdown has gone too far as his country allows bars, restaurants and schools to remain open' *The Daily Mail*. Available At: https://www.dailymail.co.uk/news/article-8188049/Scientist-leading-Swedens-battle-against-coronavirus-says-Britains-lockdown-gone-far.html?ito=email_share_article-top

Sweden's premier said, dismissing calls for an untested false confinement that "we can't legislate and ban everything".³³ The Swedish government has also acted to distinguish between deaths "by" and "with" the coronavirus, likely leading to a more accurate reduction in reported deaths.

As of the 1st of June, Sweden has 37,542 confirmed cases.³⁴

Taiwan

Taiwan immediately controlled its borders after they became aware of the disease and raised the case with the WHO, but were ignored. Taiwan strategically put in place automated scanners to detect citizens with high temperatures. They offered support to those infected, ensuring there was no need for said individuals to leave their homes. Large fines would be issued to those infected that disobeyed quarantine rules. Despite having close social and economic links to China, where the outbreak of Covid-19 originated, the country has not experienced a huge influx of cases.³⁵

As of the 1st of June, Taiwan has 442 confirmed cases.³⁶

Japan

Japan, despite being one of the first countries receiving positive test results and having imposed no forced confinement, remains one of the least-affected nations. It immediately introduced border controls and used voluntary stay at home recommendation in congested areas. Schools were closed very early on in the epidemic as it is understood that whilst children seem less susceptible to the virus, schools are zones that can greatly increase the rapid spread of disease due to the close proximity and vast number of attendees.³⁷ The 2020 Olympics were also postponed.

As of the 1st of June, Japan has 17,752 confirmed cases.³⁸

33 Erixson, F., (1/03) 2020. 'No lockdown, please, we're Swedish' The Spectator. Available At: <https://spectator.us/lockdown-please-swedish/>

34 Johns Hopkins University, 2020. 'Johns Hopkins Covid-19 Dashboard' Johns Hopkins University. Available At: <https://coronavirus.jhu.edu/>

35 Wang, C.J., Ng, C.Y. and Brook, R.H., 2020. Response to COVID-19 in Taiwan: big data analytics, new technology, and proactive testing. JAMA.

36 Johns Hopkins University, 2020. 'Johns Hopkins Covid-19 Dashboard' Johns Hopkins University. Available At: <https://coronavirus.jhu.edu/>

37 Shaw, R., Kim, Y.K. and Hua, J., 2020. Governance, technology and citizen behavior in pandemic: Lessons from COVID-19 in East Asia. Progress in Disaster Science, p.100090.

38 Johns Hopkins University, 2020. 'Johns Hopkins Covid-19 Dashboard' Johns Hopkins University. Available At: <https://coronavirus.jhu.edu/>

France

France has gradually increased its control over its citizens but has failed to control the spread of the virus within its borders. France pursued a policy of open borders in response to the pandemic, which allowed the disease to easily take root in the nation. Despite some innovations by individual doctors, the French government attacked doctors and spread misinformation about potential cures. France had very few tests and little means of manufacturing them. The French May 15th local elections went ahead despite concerns. On the 17th of March the French president ordered forced confinement of the general population in their homes, but this has had no proven reduction in the disease as to date.³⁹ France later banned exercising outside of the home but this has again had no proven positive impact.

As of the 1st of June, France has 189,009 confirmed cases.⁴⁰

Germany

Germany pursued an open border policy for the start of the virus, allowing it to take root in the country. However, it has focused on a policy of decentralisation and testing, as in Taiwan and South Korea. Any doctor was enabled to conduct a coronavirus test, rather than a central government authority. Meanwhile the liberal German healthcare market provides a substantial number of intensive care beds with respirators, compared with other nations, alongside a much higher standard of overall care, leading to an extremely low death rate.^{41,42} Whilst Germany has used forced confinement, the number of cases remains high. The low death rate is likely attributable to the medical system of the country.

As of the 1st of June, Germany has 183,500 confirmed cases.⁴³

39 Milliere, G., (13/04) 2020. 'Coronavirus: A French Disaster' Gatestone Institute. Available At: <https://www.gatestoneinstitute.org/15880/coronavirus-france-disaster>

40 Johns Hopkins University, 2020. 'Johns Hopkins Covid-19 Dashboard' Johns Hopkins University. Available At: <https://coronavirus.jhu.edu/>

41 Stafford, N., 2020. Covid-19: Why Germany's case fatality rate seems so low. *BMJ*, 369.

42 Huggler, J., (22/03) 2020. 'Why does Germany have such a low coronavirus death rate?' *The Telegraph*. Available At: <https://www.telegraph.co.uk/news/0/why-does-germany-have-low-coronavirus-death-rate/>

43 Johns Hopkins University, 2020. 'Johns Hopkins Covid-19 Dashboard' Johns Hopkins University. Available At: <https://coronavirus.jhu.edu/>

Italy

Italy was the first major epicentre in Europe, with Lombardy particularly impacted. For a significant period of time very few tests were conducted, leading to the virus going undetected until it had spread thoroughly. In response the Italian government put in place forced confinement measures for the Northern regions affected, but these have had no proven impact to date and the virus continued to spread to all regions of the country. The Italian government extended these measures to include all regions of the country but these have not curbed the spread of the disease.⁴⁴ Italy sought external help from the European Union, which was denied, but was provided assistance by Russia, which sent 100 virologists and other support.⁴⁵

As of the 1st of June, Italy has 232,997 confirmed cases.⁴⁶

Spain

Spain became the second European epicentre of the disease, driven by significant travel with Italy. Spain was slow to encourage citizens to stay indoors. Football matches and feminist political marches were not discouraged, leading to a huge spike in transmission.⁴⁷ Within a short time it too had declared forced confinement of citizens and declared a national emergency, but this has failed to curb the number of infections or spread throughout the country. Indeed, Spain has one of the highest instances of spread in Europe.

As of the 1st of June, Spain has 239,479 confirmed cases.⁴⁸

44 Paterlini, M., 2020. On the front lines of coronavirus: the Italian response to covid-19. *Bmj*, 368.

45 Emmott, R. and Orborne, A., (26/03) 2020. 'Russian aid to Italy leaves EU exposed' Reuters. Available At: <https://www.reuters.com/article/us-health-coronavirus-russia-eu-idUSKBN21D28K>

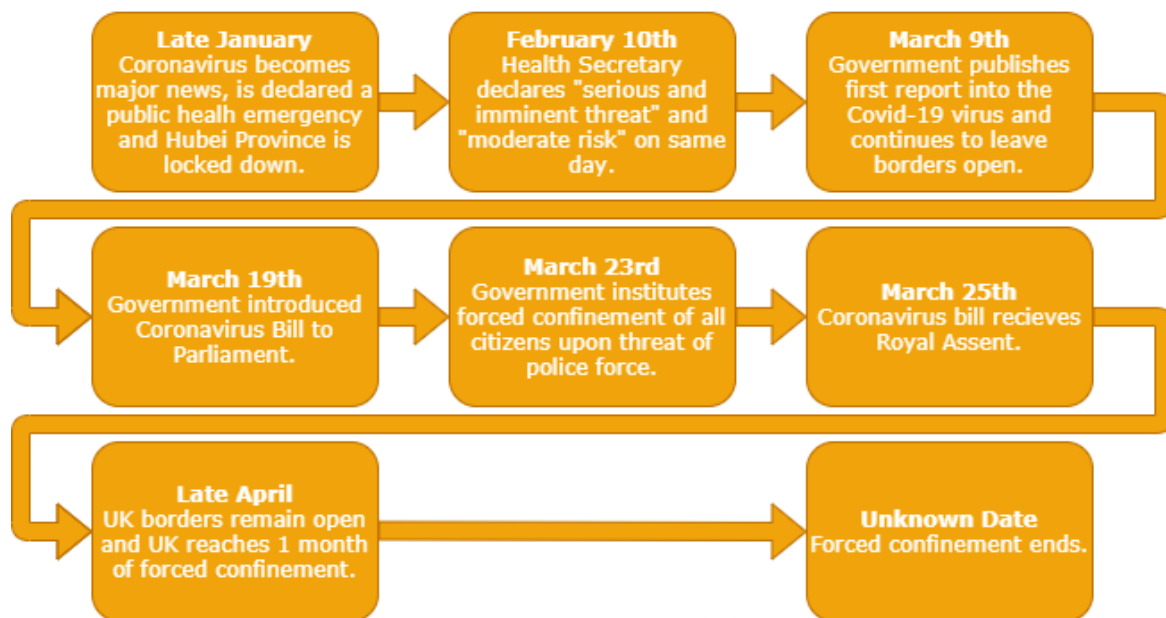
46 Johns Hopkins University, 2020. 'Johns Hopkins Covid-19 Dashboard' Johns Hopkins University. Available At: <https://coronavirus.jhu.edu/>

47 Minder, R., (13/03) 2020. 'Spain Becomes Latest Epicenter of Coronavirus After a Faltering Response' New York Times. Available At: <https://www.nytimes.com/2020/03/13/world/europe/spain-coronavirus-emergency.html>

48 Johns Hopkins University, 2020. 'Johns Hopkins Covid-19 Dashboard' Johns Hopkins University. Available At: <https://coronavirus.jhu.edu/>

Analysing the UK Government Response

The response of the UK government to the crisis was initially extremely slow. Failing to close its borders and properly screen and isolate those coming in, even from epicentres, during the first three months of the epidemic. The government only published a plan to deal with the crisis on the 9th of March 2020. In mid-March the government shifted its policy from one extreme to the other, from extremely relaxed, to heavily interventionist, though through poorly scrutinised and unproven measures due to the small window it had left itself. On the 19th of March the Coronavirus Bill was laid before parliament. On the 23rd of March the government began ordering all citizens to stay in their homes, but for ‘approved’ reasons, threatening the use of aggressive force against those who continued living their normal lives. The Coronavirus Act, which received royal assent on the 26th of March 2020, represents the most comprehensive suspension of civil liberties in British history, and yet was passed not even a week after its proposal.



The scope of the act is wide-ranging. Although the Coronavirus Act was passed as a ‘temporary’ measure, it is alarming that there is scope for it to be extended indefinitely beyond the 2-year period. A great proportion of legislation within the act is sensible and necessary to deal with the Covid-19 pandemic, however, there exist many aspects of the act with either limited or negative utility in containing the virus or tackling any public health crisis.

Clauses introduced forcible detention of all UK citizens but for 'permitted reasons'; without arrest, process, trial or access to legal counsel. Legal autonomy could be suspended without verification, time limits for select warrants were quadrupled whilst civic responsibilities to vulnerable groups were suspended and government criminal negligence legalised. Citizens were directed to:

*"Only go outside for food, health reasons or work (but only if you cannot work from home) ...not meet others, even friends or family."*⁴⁹

This was done upon threat of government force. Such powers are not merely unprecedented in our time, but in the whole of British history. This flies in stark contrast to other countries, whose responses have already been mentioned. The spine of South Korea's successful strategy has been widespread testing and public information campaigns. Taiwan, one of the first nations infected, has successfully contained the disease through thorough testing and border control.

Critical Public Response

The UK government measures have come under a significant criticism. Due to the expedited implementation, this has been slow to consolidate, yet is doing so at an ever-increasing pace:

- Former judge at the UK 'Supreme Court', Lord Jonathan Sumption, named the measures "A hysterical slide into a police state. A shameful police force intruding with scant regard to common sense or tradition. An irrational overreaction driven by fear" and declared in a BBC interview on the British measures: "This is what a police state is like."⁵⁰
- Professor Sucharit Bhakdi describes the currently discussed or imposed measures as "grotesque", "useless", "self-destructive" and a "collective suicide" that will shorten the lifespan of the elderly and which should not be accepted by society.⁵¹

49 HM Government, 2020. 'Coronavirus Act FAQs' HM Government. Available At: <https://www.gov.uk/government/publications/coronavirus-outbreak-faqs-what-you-can-and-cant-do/coronavirus-outbreak-faqs-what-you-can-and-cant-do>

50 The Spectator, 2020. 'Former Supreme Court Justice: 'This is what a police state is like'' The Spectator. Availavle At: <https://www.spectator.co.uk/article/former-supreme-court-justice-this-is-what-a-police-state-is-like->

51 OffGuardian, 2020. 'Open Letter from Prof Sucharit Bhakdi to Chancellor Merkel' OffGuardian. <https://off-guardian.org/2020/03/31/open-letter-from-prof-sucharit-bhakdi-to-chancellor-merkel/>

- Silkie Carlo, Director of Big Brother Watch, described the moves as “the greatest loss of liberty in our lifetime.”⁵²
- MP Tom Tugendhat warned powers could “be used in a particularly malicious fashion.”⁵³
- Trade unionist Paul Embry stated, “This draconian legislation should not have been enacted, as it was, without the most intense scrutiny. And every time the police abuse their powers in its name, everyone who believes in liberty and the rule of law has a duty to protest.”⁵⁴
- Pietro Vernazza, Swiss infectious disease specialist, called forced confinement and school closures counterproductive, recommending only protecting those at risk.⁵⁵
- Dr. David Katz, founding director of Yale University Prevention Research Center called forced confinement “worse than the disease”, with “more targeted ways to beat the pandemic.”⁵⁶
- The President of the World Doctors Federation, Frank Ulrich Montgomery, called forced confinement measures "unreasonable" and "counterproductive", to be reversed⁵⁷
- Lawyer Luke Gittos stated “The rule of law is being sidelined. People have been convicted for crimes that don’t exist. Defendants’ rights are being weakened, too. The Scottish government wanted to end jury trials. Even in a pandemic we must defend our rights.”⁵⁸
- The British author and journalist Peter Hitchens wrote, "There’s powerful evidence this great panic is foolish. Yet our freedom is still broken and our economy crippled.”⁵⁹

52 Spiked Online, 2020. ‘Coronavirus Bill: the greatest loss of liberty in our history’ Available At: <https://www.spiked-online.com/2020/03/25/coronavirus-bill-the-greatest-loss-of-liberty-in-our-history/>

53 Francis, P., 2020. ‘Coronavirus Kent: MP urges government to ensure emergency legislation to tackle pandemic is not used for ‘malicious’ purposes’ Kent Online. <https://www.kentonline.co.uk/tonbridge/news/mp-seeks-assurances-over-emergency-powers-224431/>

54 Embry, P., 2020. Twitter. Available At: <https://twitter.com/PaulEmbry/status/1245286122852409344>

55 Infection Disease Clinic, St Gallen. (2020) ‘Schulen schliessen – hilfreich oder nicht?’ Available At: <https://infekt.ch/2020/04/schulen-schliessen-hilfreich-oder-nicht/>

56 Katz, D., 2020. ‘Is Our Fight Against Coronavirus Worse Than the Disease?’ New York Times. Available At: <https://www.nytimes.com/2020/03/20/opinion/coronavirus-pandemic-social-distancing.html>

57 ^

58 Spiked Online, 2020. Twitter. Available At: <https://twitter.com/spikedonline/status/1246437381718396928>

59 Hitchens, P., (28/03) 2020. ‘PETER HITCHENS: There’s powerful evidence this Great Panic is foolish, yet our freedom is still broken and our economy crippled’ The Mail on Sunday. Available At: <https://www.dailymail.co.uk/debate/article-8163587/PETER-HITCHENS-Great-Panic-foolish-freedom-broken-economy-crippled.html>

- Professor of disease prevention at Stanford University, John Ioannidis, said of the data the UK government has chosen to use, “some of the major assumptions and estimates that are built in the calculations seem to be substantially inflated.”⁶⁰
- British journalist Tom Harwood described the measures as “totalitarian moves”.⁶¹
- NSA whistleblower Edward Snowden warned of a state power-grabs, saying “no civil power remaining to resist it ... Because you cannot coordinate. You cannot gather in public, because the government instantly knows all of these people are around.”⁶²
- Akiko Hart, chief of NSUN, a mental health charity said “Minimising some of the safeguards in the Mental Health Act and extending its powers, is a step in the wrong direction.”⁶³
- Fredrik Erixon, director of the European Centre for International Political Economy, wrote: “The theory of lockdown, after all, is pretty niche, deeply illiberal — and, until now, untested. It’s not Sweden that’s conducting a mass experiment. It’s everyone else.”⁶⁴
- Gracie Bradley of Liberty stated, “The powers introduced last week, without parliamentary scrutiny, are very broad, handing extraordinary new powers to the police. Affording police such extensive power to interfere in our lives is particularly concerning for communities that are already over-policed and are likely to bear the brunt of these new measures.”⁶⁵

In all, the response has reflected a deep sense of alarm at the unprecedented extent of measures.

60 Rushton, K. and Foggo, D., 2020. ‘Neil Ferguson, the scientist who convinced Boris Johnson of UK coronavirus lockdown, criticised in past for flawed research’ The Telegraph. Available At: <https://www.telegraph.co.uk/news/2020/03/28/neil-ferguson-scientist-convicted-boris-johnson-uk-coronavirus-lockdown-criticised/>

61 Harwood, T., 2020. ‘We cannot let these authoritarian coronavirus measures become the new normal’ The Telegraph. Available At: <https://www.telegraph.co.uk/politics/2020/03/19/cannot-let-authoritarian-coronavirus-measures-become-new-norm/>

62 Johnson, S., 2020. ‘Edward Snowden warns ‘bio-surveillance’ may outlast coronavirus’ Big Think. Available At: <https://bigthink.com/politics-current-affairs/coronavirus-tracking>

63 Mellor, J., 2020. ‘Mental health charity slams Govt ‘irresponsible’ Coronavirus bill which would grant single doctors power to detain mentally ill’ The London Economic. Available At: <https://www.thelondoneconomic.com/news/mental-health-charity-slams-govt-irresponsible-coronavirus-bill-which-would-grant-single-doctors-power-to-detain-mentally-ill/19/03/>

64 Erixon, F., (1/03) 2020. ‘No lockdown, please, we’re Swedish’ The Spectator. Available At: <https://spectator.us/lockdown-please-swedish/>

65 Bradley, G., 2020. ‘LIBERTY WARNS NEW POLICE POWERS ARE RIPE FOR ABUSE AND COULD UNDERMINE COMMUNITY RESPONSE TO PANDEMIC’ Liberty. Available At: <https://www.libertyhumanrights.org.uk/issue/liberty-warns-new-police-powers-are-ripe-for-abuse/>

Promoting Healthcare, Freedom and Safety

The actions of the UK government, whilst very interventionist, have not been shown to be tailored to be effective. Indeed, they are symptomatic of a school of thinking that our nation has to choose between health, freedom and safety. This is a false dichotomy. It is our firm belief, as demonstrated by this report, that freedom, healthcare and safety are not mutually exclusive, but complementary to one another. This is exhibited by the successful containment of the disease by other nations.

That is not to say there is no role for government. This report doesn't attempt to undermine the genuine and principled efforts of individuals and agencies, where these are, safe, legal and effective against the disease. It rather makes an important distinction between the necessary and appropriate measures taken, which it fully endorses, and those measures, which whilst packaged and sold as healthcare measures, have no practical bearing against the disease, instead doing quite the opposite and restricting the freedoms and endangering public health in the process. The UK efforts, including legislation, were made in haste and resulted in substandard blanket measures. Intelligent measures, rather than blanket ones, are the best means to combat the disease and keep people safe, as has been shown by other countries. This report is one step towards that reality.

Assessing the Limits of Government Power

The response of the UK government is reflective of knee-jerk responses taken by many governments, with a bill passing through parliament with a negligible level of debate and scrutiny. Neither citizens nor independent organisations were given sufficient time during which to review the many intricate impacts, or the executive measures or regulations ordered by ministers. An urgency to pass legislation was not tempered with the same urgency to ensure debate and scrutiny.

Meanwhile, the UK constitution exists, as with nearly all constitutions, as a semi-scribed set of documents and principles which set the framework within which institutions such as Parliament may legally operate. Yet unlike most others it is particularly fragmented, written in several locations

with no single overarching document. Furthermore, the UK constitution, unlike in most other nations, is not even a marginal topic of study, including for law or history students in UK universities, leading to widespread misinformation and misunderstanding of its core principles. This is a problem which has existed for more than a century, although definitely not the norm when placed in the perspective of history.

It is for this reason that no questions were raised as to whether government had the legal authority to enforce many of the unprecedented measures which it now seeks to, including the forced confinement of over 60 million of its citizens and the removal of legal autonomy from citizens without adequate verification so as to establish a burden of proof.

Questions as to the legality of many measures are growing around the globe. In Germany, an open letter was published decrying forced confinement as unconstitutional and illegal.⁶⁶ Italy's measures were similarly attacked by legal expertise as "unacceptable, illegitimate, and unconstitutional".⁶⁷ In the U.S., the Mayor of New York warned such action would be illegal,⁶⁸ former senator and presidential candidate Ron Paul decried it as unconstitutional house arrest,⁶⁹ whilst armed protests have sprung up around the country, including in state administrative buildings.⁷⁰ The Democratic Alliance of South Africa declared imposed restrictions unconstitutional.⁷¹ Civil rights protests have erupted in Melbourne, Warsaw, Brussels, Cape Town, Milan, Berlin, Brasilia, Vienna and a host of other nations.⁷² Meanwhile, protests in the UK have also begun to spring up and at least one group has begun to bring a UK legal case.⁷³

66 Thompson, A. (14/04) 2020. 'Coronavirus lockdown: German lawyer detained for opposition' UK Column. Available At: <https://www.ukcolumn.org/article/coronavirus-lockdown-german-lawyer-detained-opposition>

67 Williams, (28/04) 2020. 'Law Professor: Italy's Ban on Public Worship 'Unacceptable, Illegitimate, Unconstitutional'' Breitbart. Available At: <https://www.breitbart.com/health/2020/04/28/law-professor-italys-ban-on-public-worship-unacceptable-illegitimate-unconstitutional/>

68 Kimball, S. (28/03) 2020. 'New York Gov. Cuomo says Trump has no authority to impose quarantine: 'It would be illegal'' CNBC. Available At: <https://www.cnn.com/2020/03/28/ny-gov-cuomo-says-trump-has-no-authority-to-impose-quarantine.html>

69 Public Intelligence. (10/04) 2020. 'Dr. Ron Paul: Resist the Lockdown — Virtual Illegal Imprisonment or "House Arrest" Is Unconstitutional and UnAmerican' Public intelligence. Available At: <https://phibetaiota.net/2020/04/dr-ron-paul-resist-the-lockdown-virtual-illegal-imprisonment-or-house-arrest-is-unconstitutional-and-unamerican/>

70 Fruen, L and Lethan, M. '(16/04) 2020. 'Protesters in MAGA hats and flying Confederate flags swarm Michigan, North Carolina, Ohio, Utah, Wyoming, New York and Virginia to demonstrate 'tyrannical' and 'unconstitutional' lockdown orders that are 'worse than the virus'' Available At: <https://www.dailymail.co.uk/news/article-8225759/Protesters-swarm-Michigan-North-Carolina-Ohio-Utah-Wyoming-demonstrate-lockdown-orders.html>

71 Meyer, D. (14/04) 2020. 'DA to challenge 'unconstitutional' lockdown measures in court' The South African. Available At: <https://www.thesouthafrican.com/news/dacourt-end-lockdown-ramaphosa-level-3-john-steenhuizen-2020/>

72 Reuters. (18/05) 2020. 'Anti-Lockdown Protests Around The World' Reuters. Available At: <https://www.reuters.com/news/picture/anti-lockdown-protests-around-the-world-idUSRTX7H61S>

73 Ferguson, E. (01/05) 2020. 'Boris Johnson faces court battle as businessman Simon Dolan argues lockdown is ILLEGAL' Express. Available At: <https://www.express.co.uk/news/uk/1276697/Boris-johnson-coronavirus-lockdown-illegal-court-judicial-review-simon-dolan>

It is our belief, as demonstrated, that the UK parliament has passed acts and regulations which must be considered to be *ultra vires*, unlawful and thus with no binding power regarding citizens of the UK. The enforcement of these is not merely unlawful but illegal, as shown in this report.

Protecting Against Harmful Measures

The measures of the UK government are not merely limited to those which are unlawful. The same pressures to issue a response, which prevented adequate scrutiny of the legality of the act and other measures, have also led to a similar failure to analyse measures which actively cause harm to many people, including the most vulnerable. The UK government is attempting a “control” strategy, however, just as with controlled economies, this creates more problems than it solves. Whether through the psychological impact of the confinement of citizens or the prevention of safe participation in the economy and development of herd immunity in healthy people⁷⁴ (so as to protect those most at risk in our society), these measures are detrimental. Whilst government does need to act, it must act intelligently and in a considered manner, adapting to criticism constructively, lest it worsen an already deadly situation.

Ensuring Hope Beyond The Present

Despite the immediate flaws in government policy, there have been some good aspects to the action taken. However, a system with vast fundamental flaws will not suffice on a matter of this magnitude, where every single person in the UK is impacted in even their most basic daily functions. Government control does not necessarily equal safety. Beyond criticism, we propose an alternative, amending plans to draw from a greater pool of knowledge, resolving the existing flaws and, most of all, delivering on not one, but all of our criteria; healthcare, freedom and safety.

⁷⁴ Developing herd immunity in healthy people will cut the rate of transmission and thus protect those most at risk from infection. See “Prevention of Herd Immunity”

Illegal Measures Enforced by the UK Government

"For parliament to develop or improve on a fundamental right is one thing. But to enact legislation which expressly removes an already existing fundamental right, and to have that enactment blindly upheld by a court, is quite another."

"If there is one thread which runs through the whole turbulent history of British constitutional development, it is the belief that we (parliament and the courts) are the servants of fundamental constitutional rules which were there before us and will be there after we are gone."

Allott, *The Courts and Parliament*, 1979.⁷⁵

A Context of the UK Constitution

The constitution of the United Kingdom is not a codified constitution. That is to say, it is not stated in one place, as with the constitution of the United States of America, for example. However, it is not entirely or even mostly unwritten⁷⁶. Like nearly all constitutions, the UK constitution is reliant upon a contextual understanding of history and cultural reference of its nation, the UK and England in particular. It forms the parameters within which the parliament and citizens are able to function. The constitution is composed of three forms of written document; the founding common law treaties between the crown and the people which establish the legitimacy and sovereignty of the crown itself, the subordinate statute laws, which have been legally entrenched and finally further subordinate statutes concerning matters, considered 'constitutional' but which are not entrenched.

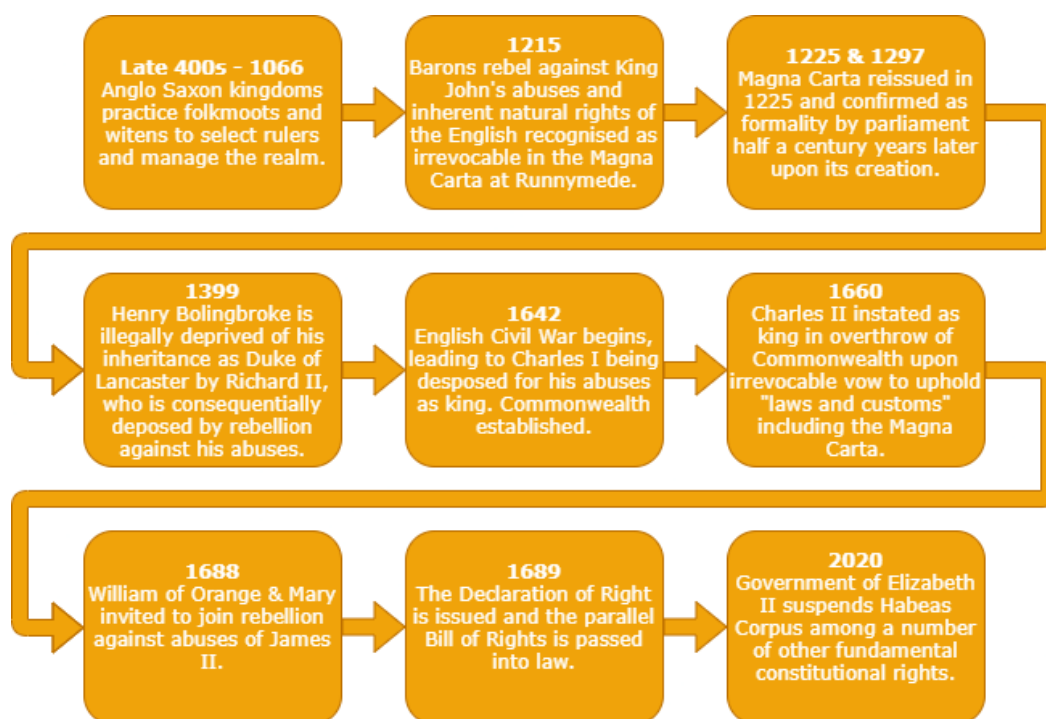
⁷⁵ Allott, P., 1979. *The Courts and Parliament: Who Whom?*. The Cambridge Law Journal, 38(1), pp.79-117.

⁷⁶ *"The British Constitution is said to be 'unwritten'. This only means that, unlike most countries, the United Kingdom does not possess a single comprehensive constitution and much of its constitutional principle is embodied in the common law. There are nevertheless a number of historic statutes regarded as embodying and setting forth the state's constitutional principles."*

Halsbury, H.S.G., 1987. *Halsbury's laws of England* (Vol. 54, No. 2). Butterworths.

Treaties between the crown and the people are often formalised as statute but do not depend on statute for their existence. The first instance of these is the Magna Carta, a treaty between King John and the people of England, represented by the barons, where the king formally and irrevocably acknowledged the limits of the crown in its exercise of power and the dependence for legal legitimacy on acting in a manner which upheld and did not violate certain traditional natural rights of the people, known as the “laws and customs” of the land. It also established that no person, not even the king, could be above the law and contradict what had been issued. Sovereignty in the United Kingdom is thus held by the crown, in contractual exchange for its defence of these rights.

This was the way of Anglo Saxon kings of old, being rulers elected or deposed by consent at a Witenagemot, a Witen (for short) itself being an elaboration of a Folkmoot, a democratic assembly used to decide and conduct law, including the selection of earldormen or kings.⁷⁷ This is demonstrated quite interestingly in the manner in which there is no ‘government of the people’, but a royal government, Her Majesty’s Government (though referred to as the ‘UK government’ here), which doesn’t bear its own logo, but the coat of arms of the monarch themselves.



77 Forrest, S., 2018. Our English inheritance. Institute of Public Affairs Review: A Quarterly Review of Politics and Public Affairs, The, 70(2), p.12.

During the two later fundamental treaties (the Coronation Oath of Charles II and Declaration of Right) subsequent to the violation of these natural rights by the monarch, this sovereignty came to be shared with parliament, however, deriving its legal authority from the same source, a contract in receipt for fundamental rights and customs. This being so, sovereignty in the UK remains an exercise of the power of the crown, limited by the same treaty and subsequent statute.

Acts are able to change and amend the remit of the constitution, however, this is not an indefinite power. Statutes such as the Laws in Wales Acts and Acts of Union have increased the boundaries of the English constitution so as to cover the breadth of the entire United Kingdom, a point salient to this matter. Similarly acts have defined the nature of which electoral system is used, which boundaries are used and other such measures which may be understood to be 'constitutional' in nature.

However, acts cannot amend the constitutional common law treaties as this invalidates the basis from which they derive their own authority. This is both entrenched specifically through statutory treaty and through acts which legally entrench and make such treaties unrepealable not once, but twice over. The Magna Carta states:

*"We have also granted to all free men of our kingdom, for ourselves and our heirs for ever, all the liberties written below, to be had and held by them and their heirs, of us and our heirs."*⁷⁸

Although the Magna Carta pre-dates parliament by half a century it was subsequently enacted in 1297 with the passage of Edward I's Confirmation of the Great Charter Act, which included:

*"And we will that if any judgement be given henceforth contrary to the points aforesaid by the justices or by any other (of) our ministers that hold plea before them against the points of the charters it shall be undone and holden for nought."*⁷⁹

The charters cannot therefore be broken within the law, as this is prohibited through extant acts in every part as much as through legal treaty. The text also includes words to the effect that the:

78 Magna Carta, Section 63.

79 Charter Confirmation Act, Section 2.

*"charter of liberties shall be kept on every point."*⁸⁰

This is echoed by historian Professor David Starkey, who states for historical context in his authoritative work on Magna Carta, where he spoke of legal writs:

*"The most authoritative of these agreements to special form - like Magna Carta itself - of charters were especially valued as binding on the king and his successors."*⁸¹

Such sentiment is echoed by Sir Winston Churchill, Nobel Prize-winning author of *A History of the English Speaking Peoples*, who describes the Magna Carta as a "supreme law"⁸² and states of it:

*"Here is a law which is above the King and Parliament, and which even He and They must not and may not legally break. And in the event they or anyone else were to try to abrogate it, such attempt at abrogation shall have no force nor effect and can be safely ignored with no legal ill effect."*⁸³

Such is the same of the two other foundational and binding common law treaties, mentioned earlier. The Coronation Oath of Charles II legally requires:

*"to the People of England, the Laws and Customs to them granted, by the Kings of England, [the king's] lawful and Religious Predecessors..."*⁸⁴

*"agreeable to the Prerogative for the Kings thereof..."*⁸⁵

Similarly, the Bill of Rights (1689), establishes itself and those rights earlier stated in the parallel Declaration of Right (constitutional common law treaty) as unrepealable in perpetuity:

80 Charter Confirmation Act, Section 1.

81 Starkey, D., 2015. *Magna Carta: The True Story Behind the Charter*. Hachette UK, p.62

82 Churchill, W., 1956 *A History of the English-Speaking Peoples: Volume I*. Folio Society 2003 Edition. London. p.218

83 ^

84 Ogilby, J., 1988. *The entertainment of His Most Excellent Majestie Charles II in his passage through the city of London to his coronation (Vol. 43)*. Mrts.(Attachment referencing the coronation)

85 ^

"...for the ratifying, confirming and establishing the said declaration and the articles, clauses, matters and things therein contained by the **force of a law made in due form by authority of Parliament**, do pray that it may be declared and enacted that all and singular **the rights and liberties asserted and claimed in the said declaration are the true, ancient and indubitable rights and liberties of the people** of this Kingdom, and so shall be esteemed, allowed, adjudged, deemed and taken to be; and that all and **every the particulars aforesaid shall be firmly and strictly holden and observed as they are expressed in the said declaration, and all officers and ministers whatsoever shall serve their Majesties and their successors according to the same in all times to come.**"¹⁸⁶

Where the crown, or HM Government for which the crown is responsible, has acted beyond the remit of the constitution by enforcing acts that contravenes such an irrevocable constitutional common law treaty, it is recognised that the acts are unlawful and their enforcement is illegal. Parliaments' power being derived from prerogative, they cannot be used to usurp the authority from which they themselves derive.

This is surmised by the research of the Magna Carta Society Research Paper (2000) as:

*"Prerogative may not be subversive of the rights and liberties of the subject. (The case of Nichols v. Nichols, 1576, stated "Prerogative is created for the benefit of the people and cannot be exercised to their prejudice".)"*⁸⁷

*"...a repeal of a statute which gives effect to common law does not repeal the underlying common law itself"*⁸⁸

This was clearly the intention of those who passed such acts into statute. Sir Robert Howard, a member of the Convention Parliament, and of the drafting committee for the Bill of Rights, wrote:

86 Bill of Rights, Section 9.

87 The Magna Carta Society, 2000. Research Paper.

88 ^

“The people have always had the same title to their liberties and properties that England’s kings have had unto their crowns. The several charters of the people’s rights, most particularly the Magna Carta were not grants from the King, but recognitions by the King of rights that have been reserved or that appertained unto us by common law and immemorial custom.”⁸⁹

In other words, any attempts to reduce the rights, freedoms and liberties enshrined in the constitution would be *ultra vires* for three reasons. First, the font of legal authority, by reason alone, cannot be abolished without itself removing the legal authority of that which sought to abolish it. Further, if such common law treaties described earlier ever did represent law (as is not in doubt), then they cannot ever have been repealed and thus remain extant. Finally, where such entrenched acts were passed in Parliament, if they ever did represent law (as is also not in doubt), then they cannot ever have lawfully been repealed either and would similarly remain extant.

	Amendable via Act of Parliament	Contravened by current UK Government
Constitutional Treaty	No	Yes
Fully Entrenched Act	No	Yes
Normal Act	Yes	Yes

Sir Edward Coke, leading jurist of Elizabethan England, made clear that such power of Parliament to pass laws was not infinite and instead subject to basic principles by attesting in *Thomas Bonham vs The College of Physicians* that:

“One cannot be Judge and attorney for any of the parties.... And it appears in our books, that in many cases, the common law will control Acts of Parliament, and sometimes adjudge them to be utterly void; for when an act of Parliament is against common right and reason, or repugnant, or impossible to be performed, the common law will control it, and adjudge such an Act to be void; and, therefore in.... Thomas Tregor's case... Herle saith, some statutes are made against law and right, which those who made them perceiving would not put them in execution.”⁹⁰

This was confirmed and endorsed by Chief Justice Holt in *City of London v Wood* (1701):

⁸⁹ ^

⁹⁰ Pollard, D., Parpworth, N. and Hughes, D., 2007. *Constitutional and administrative law: text with materials*. Oxford University Press. p.51

“What my Lord Coke says in Dr. Bonham’s case... is far from any extravagancy, for it is a very reasonable and true saying, That if an Act of Parliament should ordain that the same person should be party and judge, or what is the same thing, judge in his own cause, it would be a void Act of Parliament.”⁹¹

It was also stated by Chief Justice Hobart in *Day v Savadge* (1614):

“...even an Act of Parliament, made against natural equity, as to make a man Judge in his own case, is void in itself...”⁹²

This is further unequivocally asserted in *R v Love* (1653):

“Whatsoever is not consonant to the law of God, or to right reason which is maintained by scripture,...be it Acts of Parliament, customs, or any judicial acts of the Court, it is not the law of England.”⁹³

This is again repeated, in a Scottish case (*Andrew v Murdoch* (1806)), Lord Hermand stated in the Court of Session that:

“...there is a power paramount to acts of Parliament, and that is the power of right reason, to which Kings and Parliaments themselves must be subject.”⁹⁴

And once again this was recognised in *Forbes v Cochrane* (1824), in which Best J stated that he would refuse to recognise a statute legitimising slavery, since it would be:

“...against the law of nature and God.”⁹⁵

91 Hamburger, P.A., 1994. *Revolution and Judicial Review: Chief Justice Holt's Opinion in City of London v. Wood*. *Colum. L. Rev.*, 94, p.2092.

92 *Day v Savadge* (1614) Hob 85; 80 ER 235

93 Keble J, *R v Lowe* (1853) 5 St Tr 825

94 *Andrew v Murdoch*. (1806) Mor 38_5

95 *Forbes v Cochrane* (1824) 2 B & C 448

It may also be inferred from *Oppenheimer v Cattermole* (1976), in which Lord Cross said, in reference to an anti-semitic Nazi law:

*“To my mind a law of this sort constitutes so grave an infringement of human rights that the courts of this country ought to refuse to recognise it as a law at all.”*⁹⁶

Similarly Lord Woolf stated in his F A Mann lecture in 1994:

*“If Parliament did the unthinkable then I would say that the courts would also be required to act in a manner which would be unprecedented.... I myself would consider there were advantages in making it clear that ultimately there are even limits on the supremacy of Parliament which it is the courts’ inalienable responsibility to identify and uphold.”*⁹⁷

In situations in which a government seeks to pass statutes which edit the ancient contract between the crown and the people (treaties) from which the crown derives its legal sovereignty, it is a moral imperative and legal right that the crown and the government which acts in its name is called to account. This has been the case at least five times in English and British history:

- The multiple rebellions of the Barons against King John
- The revolution of Henry Bolingbroke against Richard II
- The revolution of the Roundheads against Charles I
- The glorious revolution of William of Orange and Mary Stuart against James II

In each of these cases it was confirmed that the action of the monarch and the government in their name was extrajudicial (*ultra vires*), beyond the powers of the crown, and thus illegal and non-binding. The rebellions were all found lawful. It was held that acts cannot remove the rights guaranteed inviolably by the crown without removing the legitimacy of the crown to legislate. Our present monarch, government and parliament are the legal successors to all of these revolutions and thus bound by their source of legitimacy, their common law treaties and their irrevocable acts.

96 *Oppenheimer v Cattermole* [1976] AC 249

97 Woolfe, H., 1994. FA Mann Lecture

Whilst Magna Carta has been passed as an act, as has the Declaration of Right as the English Bill of Rights, these are formalisations on which the treaties do not depend.

The inviolability of the treaties which present hard constrictions on the power of a monarch and by extension a government or parliament to legislate, have long been the consensus of English legal opinion. Bracton's great constitutional work written directly after the Magna Carta, some time between 1235 and 1259, makes clear the nature of the Magna Carta's scope:

*"...the law makes the King. Let the King therefore bestow upon the law what the law bestows upon him, namely dominion and power, for there is no King where will rules and not law."*⁹⁸

The limitations of royal prerogative, including those to enact statute, are also summarised by Sir Robert Howard (1385-1456):

*"No prerogative may be recognised that is contrary to Magna Carta or any other statute, or that interferes with the liberties of the subject. The courts have jurisdiction therefore, to enquire into the existence of any prerogative, it being a maxim of the common law that the king ought to be under no man, but under God and the law, because the law makes the king. If any prerogative is disputed, the courts must decide the question of whether or not it exists in the same way as they decide any other question of law. If a prerogative is clearly established, they must take the same judicial notice of it as they take of any other rule of law."*⁹⁹

This is confirmed by William Blackstone (1723-1780) in his Commentaries on the Laws of England:

*"The rights or...liberties of Englishmen...consist primarily in the free enjoyment of personal security, of personal liberty, and of private property...To vindicate these rights, when actually violated or attacked, the subjects of England are entitled, in the first place, to the regular administration and free course of justice in the courts of law; next, to the right of petitioning the king and parliament for redress of grievances; and lastly to the right of having and using arms for self-preservation and defence."*¹⁰⁰

98 De Bracton, H., 1915. Bracton De legibus et consuetudinibus Angliæ (Vol. 1). Yale University Press.

99 The Magna Carta Society, 2000. Research Paper.

100 Blackstone, W., 1966. Commentaries on the Laws of England: 1765-1769. Dawson's.

*"And all these rights and liberties it is our birthright to enjoy entire; unless where the laws of our country have laid them under necessary restraints...so gentle and moderate...that no man of sense or probity would wish to see them slackened."*¹⁰¹

In so Blackstone argues that no restraints can survive a legal challenge and their only method of being maintained is that no person of means to challenge them does so. Halsbury's Laws of England chart the same thing:

*"Magna Carta is as binding upon the Crown today as it was the day it was sealed at Runnymede."*¹⁰²

Indeed, there can be no legal validity to any act which contravenes the ancient and natural rights of Englishmen, more-so than any un-entrenched statute which has been abrogated by a later act. At the moment of passing into law, the statute is rendered null and void as the government itself is subject to the law, the parliament being a creation of the law itself. It is therefore legal for any UK citizen, the legal successor to a free Englishman, to resist such measures.

The UK constitution, whilst not written in one single place, is not entirely or even mostly unwritten, as has been documented in this segment. Valid legal documents clearly testify the existence certain rights which exist now not merely for all English, but all UK citizens. The case against the UK government therefore rests threefold. First, that treaties which are constitutionally inviolable as the source of legal authority in themselves have indeed been broken. Second that statutes which are legally entrenched into UK (English) Law have also been broken. Further to this are those statutes which have been broken illegally whilst not entrenched.

101 ^

102 Halsbury, H.S.G. and Simonds, G.T., 1952. The Laws of England: being a complete statement of the whole law of England. Butterworth.

Suspension of Habeas Corpus

Habeas Corpus is the fundamental natural and legal right, recognised and enshrined in constitutional treaty and statute, that no free man (by law) may be detained without trial. As fundamental to English Law as the presumption of innocence it is the bedrock of all legal justice. Section 39 of the Magna Carta States:

“No free man shall be seized or imprisoned or stripped of his rights or possessions or outlawed or exiled, or deprived of his standing in any other way, nor will we proceed with force against him, or send others to do so...”¹⁰³

Meanwhile section 40 of the Magna Carta states:

“To no one will we sell, to no one deny, or delay right of justice.”¹⁰⁴

These rights did not spring forth from a vacuum, however, these were rights which pre-existed the treaties of Magna Carta and Declaration of Right, inherent to all free Englishmen, which arose in the Anglo Saxon kingdoms, as is illustrated by Sir James Holt:

“Magna Carta was not a sudden intrusion into English society and politics, on the contrary, it grew out of them ... Laymen had long been discussing and applying the principles of Magna Carta long before 1215. They could grasp it well enough.”¹⁰⁵

Purportedly in response to the coronavirus, the UK government has declared that it will fine and prosecute any person who leaves their home for any reason but for four reasons explicitly permitted by the government which do not include ‘free will’ or ‘choice’. Indeed, the “permitted” activities by the UK government mirror more those afforded to prisoners in a gaol being granted

103 Magna Carta, Section 39.

104 Magna Carta, Section 40.

105 Holt, J.C. and Holt, J.C., 1992. Magna carta. Cambridge University Press. 295.

exercise or parole upon the fiat of judges and prison officials than they do the natural civil liberties to which all Englishmen are endowed as their birthright. According to Blackstone:

*"A right of every Englishman is that of applying to the Courts of Justice for redress of injuries. Since the law in England is the supreme arbiter of every man's life, liberty and property, Courts of Justice must at all times be open to the subject, and the law be duly administered therein."*¹⁰⁶

Illegal Measures Commencing the 23rd of March

Alexander Johnson, the Primeminister of the UK publicly broadcast on the 23rd of March 2020:

*"From this evening I must give the British people a very simple instruction - **you must stay at home.** ... That is why people will only be allowed to leave their home for the following very limited purposes: shopping for basic necessities, as infrequently as possible. One form of exercise a day - for example a run, walk, or cycle - alone or with members of your household; any medical need, to provide care or to help a vulnerable person; and travelling to and from work, but only where this is absolutely necessary and cannot be done from home. **That's all - these are the only reasons you should leave your home.** You should not be meeting friends. If your friends ask you to meet, you should say No. You should not be meeting family members who do not live in your home. You should not be going shopping except for essentials like food and medicine - and you should do this as little as you can. And use food delivery services where you can. **If you don't follow the rules the police will have the powers to enforce them, including through fines and dispersing gatherings.**"*¹⁰⁷

This command to "stay at home" barring "four reasons" was promoted to all citizens by the UK government through letters, television, radio and the like. The UK government website states:

*Every person in the UK must comply with these new measures, which came into effect on Monday 23 March. The relevant authorities, including the police, have been given the powers to enforce them – including through fines and dispersing gatherings."*¹⁰⁸

¹⁰⁶ Blackstone, W., 1966. Commentaries on the Laws of England: 1765-1769. Dawson's. 1:137-38

¹⁰⁷ Alexander Johnson, 2020. 'PM address to the nation' HM Government. Available At: <https://www.gov.uk/government/speeches/pm-address-to-the-nation-on-coronavirus-23-march-2020>

¹⁰⁸ HM Government, 2020. 'Staying at home and away from others (social distancing) guidance' HM Government. Available At: <https://www.gov.uk/government/publications/full-guidance-on-staying-at-home-and-away-from-others/full-guidance-on-staying-at-home-and-away-from-others>

However, the fines mentioned take purported authority from the Public Health Act 1984, Part 2A, inserted by the Health and Social Care Act 2008. The government at the time proposing this legislation ((HL Debates, Vol. 700, Col. 452 (28 March 2008)) claimed that it ‘provided significant safeguards... to protect individuals’¹⁰⁹. “Special restriction or requirement” regulations by ministers under Section 45C(4) were intended as limited measures to be used sparingly, not blanket controls.

Further, blanket measures are explicitly ruled out. The power of a Minister to issue regulations, i.e. specific rules with the weight of law, for a public health ‘emergency’ is subject to a clause which prevents a form of confinement in “isolation of quarantine” (under 45D). This government has breached both the implicit intention and explicit text of the Act. As Jim Duffy accurately raises:

“Not only does section 45C not expressly contain any power of detention, isolation or quarantine, section 45D(3) states that Regulations under section 45C “may not include provision imposing a special restriction or requirement mentioned in section 45G(2)(a), (b), (c) or (d).” Section 45G(2)(c) refers to a restriction or requirement “that P be detained in a hospital or other suitable establishment”, and 45G(2)(d) refers to a restriction or requirement “that P be kept in isolation or quarantine”.”¹¹⁰

Furthermore, no regulations by the Health Secretary whatsoever can be made unless:

“(a) the regulations are made in response to a serious and imminent threat to public health, or (b) the imposition of the restriction or requirement is expressed to be contingent on there being such a threat at the time when it is imposed.”¹¹¹

The notion that there was a serious and imminent threat is contradicted by the statements of the Health Secretary (Matthew Hancock MP) who on the same day as issuing the unlawful regulations (February the 10th) said:

109 HL Debates, Vol. 700, Col. 452, (28/03) 2008.

110 Duffy, J. (13/02) 2020. ‘Corona-vires: Has the Government exceeded its powers?’ UK Human Rights Blog. Available At: <https://ukhumanrightsblog.com/2020/02/13/corona-vires-has-the-government-exceeded-its-powers/>

111 Hancock, M. (23/03) 2020. HM Government. Available At: <https://www.gov.uk/government/news/secretary-of-state-makes-new-regulations-on-coronavirus>

“Clinical advice has not changed about the risk to the public, which remains moderate.”¹¹²

and the continued assertion by UK Chief Medical Officers that:

“...the risk to individuals remains low.”¹¹³

This would therefore mean that there could not be considered to be a “serious and imminent threat”.

The Health Secretary thus acted unlawfully, not merely in declaring a “serious and imminent risk to public health” on the same day as describing the situation as “moderate”, but also by issuing regulations which specifically could not include quarantine or detention, and which, even if they could, would have had no power to do so en masse. Not only were the actions of the government unlawful, but actively illegal due to the threats of unlawful force by Mr Johnson’s government. Further, and to greater detriment, despite the passage of further measures, these regulations imposed as of the 23rd still remain in place as an option for police to illegally employ.

Illegal Measures Commencing the 25th of March

Even upon the passage of the Coronavirus Act (2020), the legality of forced confinement measures is disproven. The coronavirus act stipulated that police have the power to detain any person who they have reasonable grounds to suspect is (concerning the coronavirus) is:

“potentially infectious”¹¹⁴

The UK government has stated that up to 80% of the public may become infected with the virus. Therefore every single person in the United Kingdom is potentially infected with the virus, but for a few thousand people who have overcome the virus. Indeed, the word potentially retards the presumption of innocence itself. Reasonable suspicion of involvement is required for police action,

112 Hancock, M. (23/03) 2020. Twitter. Available At: https://twitter.com/search?q=%22Clinical%20advice%20has%20not%20changed%20about%20the%20risk%20to%20the%20public%2C%20which%20remains%20moderate.%22&src=typed_query

113 UK Chief Medical Officers, (30/01) 2020. ‘Statement from the 4 UK Chief Medical Officers on novel coronavirus’ HM Government. Available At: <https://www.gov.uk/government/news/statement-from-the-four-uk-chief-medical-officers-on-novel-coronavirus>

114 Coronavirus Act 2020.

not merely a capacity to act. For example, nearly every person in the UK could potentially be a thief, having a capacity to take without permission. Whether there is a likelihood they are a thief is another matter. Indeed, it would not constitute sufficient grounds to arrest a person on the grounds that there is reasonable suspicion that they have the *potential to be* a thief, but only that there is reasonable suspicion that they *are* a thief, or at least involved with one. This statute therefore, if it were valid, would allow the detention of a person who has not been suspected of involvement with a crime. This contradicts over 800 years of entrenched common law, as the government admits:

“To arrest you the police need reasonable grounds to suspect you’re involved in a crime for which your arrest is necessary.”¹¹⁵

This is also articulated by other practitioners:

“UK law says that a police officer can only arrest a person if they are wanted on a warrant or if they have “reasonable belief” that someone might have been involved in a criminal offence, or be about to commit an offence, and they therefore believe it is necessary to arrest them.”¹¹⁶

The effect of the legislation is thus that UK citizens are, without question, detained, whether in a cell or in their homes, without trial. They cannot engage in their liberties, even if these liberties do not have any meaningful risk of endangering others whatsoever. For example, it is supposedly ‘illegal’ for two people who are isolated in their homes alone and have been so for more than two weeks, to walk across a deserted street to see each other. It is also purportedly ‘illegal’ for an individual to leave what is, for many people who live by themselves, solitary confinement.

It is not a complex argument to state that the UK government has no such power to detain citizens without arrest, due process and trial. If individuals who are confirmed to have been infected with the disease wish to leave their homes, then it is *still* doubtful whether the government has the legal capacity to enforce this, given people with all manner of diseases have never been forcibly confined to their own homes by government. However, to take only the prior of these two cases, the government is obliged to press charges against a person should they wish to detain them as that

115 HM Government, 2020. ‘Police powers of Arrest’ HM Government. Available At: <https://www.gov.uk/police-powers-of-arrest-your-rights>

116 Hodgell Solicitors, 2020.

person is by rights at liberty. No more can the government could enact measures to the effect that a healthy English person cannot leave their home than it could legally build a hundred-foot wall around a property and neglect to allow them a practical right of exit.

The suspension of Habeas Corpus is not one item in itself but all other rights derivative of freedom from detention without trial, the freedom to associate, the freedom to protest and so forth. These are fundamental freedoms. The dismissal of Habeas Corpus also has profound political implications on the ability of the public to be able to democratically make their will known through a petition of the crown or courts, given that individuals are prevented from freely associating and thus organising a response against said measures. In such, it institutes that Parliament and the Crown are not answerable to the people, acting as their own judge, something which again defies the fundamental judicial principles (as noted in Dr Bonham's case).

The UK government, meanwhile, has neither published the advice of the attorney general concerning this matter, nor has it justified its legality by presenting another legal argument, perhaps seeking for its measures to pass without legal scrutiny and challenge. Whilst it may attempt to refer to wartime precedent, all precedent is subordinate to both constitutional common law treaties and entrenched acts and so irrelevant to the argument made here.

It may be expected that the actions taken might be instead argued in court from a point of 'necessity' as 'reasonable force' for the protection of individuals in the same way that an individual may be restrained as a present and immediate threat to themselves or others. In so, the infractions could not be considered meaningful infractions on natural liberty, given that liberty precludes the ability to meaningfully harm others. Yet, this comparison is not accurate for the following reasons:

1. The low death rate from coronavirus is comparable to other diseases such as, tuberculosis and HIV, carriers (let alone non-carriers) of which the government would have no legal right by 'necessity' to detain.
2. It has been established from examples of other nations, such as Taiwan and Japan that mass detention of healthy citizens is not necessary to the successful disease containment.¹¹⁷

117 See "The Response of Other Nations"

3. The government did take lesser steps to demonstrably control the disease without an infringement of the civil liberties of citizens, such as border control. This is a tacit admission through the actions of the government that their actions are therefore not 'necessary'.¹¹⁸
4. The government explicitly calls the Covid risk "moderate"¹¹⁹, downgrading its threat level.
5. These measures do not discriminate between those who hold the disease and those who do not (beyond reasonable doubt, having undergone isolation or testing) or indeed cannot (having immunity) hold the disease, for whom they are even less necessary.
6. The harm to citizens through a decrease in mental health is likely to cause such a significant level of harm, including domestic abuse, self abuse and suicide, that any benefit the government presumes will occur is likely to be negated and thus overall harmful.¹²⁰¹²¹
7. Detention inside a property is not a restraint, a restraint being a temporary measure which ceases to have force after police may take a person into custody.
8. These are long-term measures which will prevent the full democratic function and accountability of the government (abolishing free association, the right to protest and right of occupation), despite the government indicating rapid resolution in their own reports.¹²²
9. Qualified doctors being turned away from volunteering in the 'National Health Service' is another tacit admission that the situation is not so dire as government claims.¹²³
10. The government continues to inflate statistics of deaths artificially, meaning that all government projections are significant over-inflations.¹²⁴

It therefore cannot credibly be claimed that the measures are legalised through a necessity. For this the government must be held to account. Not only did the government act illegally on the 30th of January (when unlawful regulations were invoked) and later 23rd and 25th of March, but given both the constitutional (statute and treaty) limits on what government in the UK may legally do, and the fact that this measure is not necessary to the containment of the disease, it is evident that it continues to act illegally at present.

118 See "Facilitation of Cross-Border Infection"

119 Hancock, M. (23/03) 2020. Twitter. Available At: https://twitter.com/search?q=%22Clinical%20advice%20has%20not%20changed%20about%20the%20risk%20to%20the%20public%2C%20which%20remains%20moderate.%22&src=typed_query

120 See "Psychological Harm of Forced Confinement"

121 Slack, T. and Newbery, A., (27/05) 2020. 'Coronavirus: Domestic abuse website visits up 10-fold, charity says' Available At: <https://www.bbc.com/news/uk-england-52755109>

122 See "Critical Public Response" and "Prevention of Safe Economic Activity"

123 See "Prevention of Access to Medical Practitioners"

124 See "Use of Flawed Data, Flawed Models and Inaccurate Recording"

Suspension of Legal Autonomy Without Verification

Legal autonomy is the right of an individual to act for themselves and hold choice over their own decisions. Without it an individual has no control whatsoever over their own life, their legal rights being held by somebody other than them, who is theoretically supposed to act in their interest. This may only occur when a person does not have the mental capacity to exercise their own rights and like any suspension of legal rights, as in the case of prosecution and trial, must be proven.

Under the Mental Health Act 1983, individuals may only have their legal autonomy stripped from them in this manner upon the opinion of two doctors, one of whom is acquainted with the patient (so as to be able to make an informed choice).¹²⁵ This is a fundamental safeguard against the government having the power to remove legal autonomy without a sufficient burden of proof.

Further, patients who are being treated without their consent being given:

“have the right, after three months, to have their treatment reviewed by a Second Opinion Appointed Doctor, a service provided by the Care Quality Commission.”¹²⁶

This establishes that no person can be held for more than a short term period, similar to the time a suspect is held during an investigation, without further enquiry by a third doctor to ensure (beyond reasonable doubt) that they indeed do lack the capacity to exercise their legal rights themselves.

In contrast to these safeguards of the 1983 legislation, the UK government, purportedly due to Covid-19 has enacted the Coronavirus Act, which seeks, according to the government’s website to:

“enable existing mental health legislation powers to detain and treat patients who need urgent treatment for a mental health disorder and are a risk to themselves or others, to be implemented using just one doctor’s opinion (rather than the current 2).”¹²⁷

¹²⁵ Mental Health Act, 1983. Section 58.

¹²⁶ ^

¹²⁷ HM Government, 2020. ‘Coronavirus Bill Summary of Impacts’ HM Government. Available At: <https://www.gov.uk/government/publications/coronavirus-bill-summary-of-impacts/coronavirus-bill-summary-of-impacts>

This is done through section 12, enabling schedule 8 of the act, schedule 8 stating:

“An application by an approved mental health professional under section 2 or 3 made during a period for which this paragraph has effect may be founded on a recommendation by a single registered medical practitioner (a “single recommendation”), if the professional considers that compliance with the requirement under that section for the recommendations of two practitioners is impractical or would involve undesirable delay.”¹²⁸

The reason given by the government is:

“This will ensure that those who were a risk to themselves or others would still get the treatment they need, when fewer doctors are available to undertake this function.”¹²⁹

This amounts to a license for indefinite detention without review, upon the opinion of one doctor, given that the government is also seeking to:

“...allow extension or removal of time limits in mental health legislation...”¹³⁰

Specifically, that:

“Sections 35(7) (period of remand to hospital for report on mental condition) and 36(6) (period of remand to hospital for treatment) have effect as if the words “or for more than 12 weeks in all” were omitted.”¹³¹

To summarise, a person may have their legal autonomy removed indefinitely upon the single opinion of one doctor, who they may not know, without any review.

¹²⁸ Coronavirus Act, 2020. Schedule 8, Part 2, Section 3.

¹²⁹ HM Government, 2020. ‘Coronavirus Bill Summary of Impacts’ HM Government. Available At:

<https://www.gov.uk/government/publications/coronavirus-bill-summary-of-impacts/coronavirus-bill-summary-of-impacts>

¹³⁰ ^

¹³¹ Coronavirus Act, 2020. Schedule 8, Part 2, Section 5.

	Previously	Current Government
Number of Doctors to Commit Initially	2	1
Number of Doctors to Commit for > 3 Months	3	1
Acquaintance with one Doctor	Yes	No
Time held without Review	3 months	Indefinite

Table 1: Comparison of Doctors for Deprivation of Legal Autonomy¹³²

This is not a necessary measure. The doctors who have been referenced by the government are in nearly all cases neither general practitioners, nor are they surgeons or any other staff member intrinsically related to treating a pulmonary (lung) disease, as with Covid-19. The members of staff concerned are psychologists. To equivocate a psychologist with these roles does not hold water. Even if there were some pressures on demand and supply, it remains a foundational government responsibility to expedite training, raise wages or cut bureaucracy to incentivise psychologists, such as those who have retired, are studying, have changed profession or have decreased their workload, to take on any necessary increase in capacity for such legal cases. The government may also incentivise other doctors to volunteer or take employment, to properly plug gaps elsewhere through the same methods, rather than use psychologists as stand-in staff. Any deficiency is down to government action, not necessity and thus cannot constitute an excuse for failings.¹³³

However, regardless of the necessity, the legality is the ultimate matter of question. It is our legal hypothesis that a person cannot have their legal autonomy removed under the entrenchment (treaty and statutory) of the “laws and customs” of our land unless this is proven under the same

¹³² Sourced from legislation.

¹³³ See “Prevention of Access to Qualified Medical Professionals”

burden of proof (beyond reasonable doubt) as other crimes. This is generally echoed in the Mental Capacity Act 2005, which holds that an individual must be presumed competent unless it is established otherwise,¹³⁴ however, this is something previously established under common law (as in *Banks vs Goodfellow* (1870)),¹³⁵ for the necessary functions of exercising liberty. Indeed, the presumption of capacity is equal in this regard to the presumption of innocence. For this reason it should be considered to be a burden of proof beyond reasonable doubt, equal to that for criminal conviction.

There is also a second, more moderate argument (though equally sufficient to invalidate the government's measures), that assuming that a person may lawfully be held to be mentally incapable 'on the balance of probabilities', that the opinion of one single doctor would be inadequate to meet this threshold and thus fail constitutionally again. Psychology is an extremely complicated subject and much of the subject still remains unproven by science. It is often commonplace for psychologists to disagree on their decisions regarding patients and in any case regarding the mental capacity, there is a likelihood that there may be another side to the case. Given this, it is reasonable to doubt the hypothesis of one single expert, these experts not being anywhere near infallible, especially when regarding the justiciability of removing the legal autonomy of a person with whom they have no acquaintance, potentially indefinitely.

In either case, the individual in question could not be lawfully considered to have been proven to be mentally incapable and any detention of them (beyond a term equal to that of custody during an investigation) would be an unlawful breach of Habeas Corpus, the legality of which is addressed thoroughly in the previous segment of this report.

134 Mental Capacity Act, 2005. Section 2.

135 *Banks v Goodfellow* (1870) LR 5 QB 549

Psychological Torture of Vulnerable Groups

Further to the point of suspension of Habeas Corpus, the actions of the government, in their impact upon those who happen to live alone, have enforced solitary confinement, a form of torture.¹³⁶ Even those who may leave for exercise are de facto prevented from socialising by the pervasive and isolating culture of panic and fear which government propaganda has fostered. The impact is also particularly pronounced on other groups, such as individuals with mental health conditions including depression.¹³⁷ This has already resulted in multiple suicides directly attributed by the individual to the actions of the government. This will only continue whilst forced confinement continues leading to many more deaths.

One woman suffering from depression and living alone gave testimony:

“Since being in lockdown, my mental health has seriously deteriorated to the point where I contemplate suicide on a daily basis. I live alone and my ability to sustain my relationships with friends and family has all but evaporated. I do not, and have never enjoyed telephone conversations or texting. I maintain my relationships by spending quality time with people face to face. I feel so alone.

I have followed social distancing measures since they were recommended, before the imposed lockdown on the 23rd March and am now in a position where I haven't even brushed hands with another human being for over two months. Life can only be described as an unbearable, monotonous and meaningless mere existence. I was told recently that I have no job to return to because of this confinement and I just don't know how to cope with even paying the rent.

These feelings are compounded when I take my allotted walk around my local park and I see other members of my species reel away from me in absolute horror, like there's something wrong with me. Men, women and children alike. Even dogs, usually non-judgemental and unconditionally loving, have been shouted at by their owners so frequently in the last few weeks that they now no longer come near me. I am as worthless and invisible to them as I am to myself now.

I'm unable to earn myself a living. I'm unable to secure the hope of happiness. I'm unable to enjoy the fleeting British sunshine. I'm unable to see the light at the end of, what is for me, a living hell.”¹³⁸

136 Metzner, J. and Fellner, J., 2010. Solitary confinement and mental illness in U.S. prisons: a challenge for medical ethics. *Journal of American Academy of Psychiatry and the Law* 38:104-108.

137 Matthews, T., Danese, A., Wertz, J., Odgers, C.L., Ambler, A., Moffitt, T.E. and Arseneault, L., 2016. Social isolation, loneliness and depression in young adulthood: a behavioural genetic analysis. *Social psychiatry and psychiatric epidemiology*, 51(3), pp.339-348.

138 Testimony of a woman living alone and suffering from depression during the Government enforced confinement.

The result of this, in both cases, is a physiological response which lowers overall health and thus costs lives.¹³⁹¹⁴⁰ Whilst the scale of this cost is not exactly known, higher estimates suggest 1 in 4 people suffer from a mental health problem each year,¹⁴¹ with one in six reporting a condition in any given week.¹⁴² Meanwhile, 7.7 million people live in households by themselves.¹⁴³ This would amount to, at minimum, in excess of ten million people at considerable risk (and many more facing a lower risk)¹⁴⁴ of being acutely harmed, of whom a significant amount would experience the effects of torture.

Given that such blanket forced confinement is a form of torture, it is as such a violation of the Bill of Rights, Section 4 of which prohibits:

*“cruel and unusual punishments”*¹⁴⁵

As such it is illegal for government to bring into force such measures which constitute torture, as has traditionally been recognised as an inherent concept of English law.

139 Friedmann, E., Thomas, S.A., Liu, F., Morton, P.G., Chapa, D., Gottlieb, S.S. and Sudden Cardiac Death in Heart Failure Trial (SCD-HeFT) Investigators, 2006. Relationship of depression, anxiety, and social isolation to chronic heart failure outpatient mortality. *American heart journal*, 152(5), pp.940-e1.

140 Rico-Urbe, L.A., Caballero, F.F., Martín-María, N., Cabello, M., Ayuso-Mateos, J.L. and Miret, M., 2018. Association of loneliness with all-cause mortality: A meta-analysis. *PLoS one*, 13(1).

141 McManus, S. and Bebbington, P., 2009. Adult psychiatric morbidity in England, 2007: results of a household survey. National Centre for Social Research.

142 McManus, S., Bebbington, P., Jenkins, R. and Brugha, T., 2016. Mental health and wellbeing in England: Adult Psychiatric Morbidity Survey 2014. A survey carried out for NHS Digital by NatCen Social Research and the Department of Health Sciences, University of Leicester.

143 ONS, 2019. The Cost of Living Alone. Available At: <https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/families/articles/thecostoflivingalone/2019-04-04>

144 See “Psychologically Harmful Forced Confinement”.

145 Bill of Rights, Section 4.

Further Miscellaneous Illegal Measures

Unlawful and Disproportionate Seizure of Funds

In addition to the items previously mentioned, the Coronavirus Act also makes unlawful provisions for the seizure of assets, beginning at £60 and then doubling upon each issuance until £960. If they then refuse to comply with such fines the government has threatened that they can:

“be taken to court, with magistrates able to impose unlimited fines.”¹⁴⁶

This is unlawful on two fronts; first it is an unlawful seizure of assets under threat (as the government has no authority to detain people unlawfully) in so constituting theft. Second, a fine of even £120 for that which, even if it were an offence, would be the most trivial of trivial offences, would be vastly disproportionate, explicitly prohibited under section 20 of the Magna Carta:

“For a trivial offence, a free man shall be fined only in proportion to the degree of his offence, and for a serious offence correspondingly, but not so heavily as to deprive him of his livelihood.”¹⁴⁷

As such, these ‘fines’, even if the acts to which they pertain had validity, could not be considered by a magistrate or judge to be proportionate.

Systematic Police Abuse

Finally, there exists the large body of recordings of police-members abusing members of the public beyond both the spirit of the law and even the measures of the government themselves. This has generated a climate of fear and hostility, which has been compared to that of East Germany. These abuses of the public by UK police include, but are not limited to:

¹⁴⁶ HM Government, 2020. ‘Coronavirus Act FAQs’ HM Government. Available At: <https://www.gov.uk/government/publications/coronavirus-outbreak-faqs-what-you-can-and-cant-do/coronavirus-outbreak-faqs-what-you-can-and-cant-do>

¹⁴⁷ Magna Carta, Section 20.

Police Covid-19 Abuses	
1	Aggressively threatening members of the public to stay out of their own front gardens ¹⁴⁸¹⁴⁹
2	Threatening to stalk members of the public to check “the items in baskets and trolleys”. ¹⁵⁰
2	Stalking dog-walkers and broadcasting insults addressed at them online ¹⁵¹
4	Blocking roads and harassing motorists ¹⁵²¹⁵³
5	Trespassing and conducting road blocks on private land without permission ¹⁵⁴
6	Harassing, assaulting and falsely detaining members of the public for walking ¹⁵⁵¹⁵⁶
7	Threatening members of the public who drive to a park ¹⁵⁷
8	Assaulting members of the public and detaining them unlawfully whilst waiting for a train ¹⁵⁸
9	Aggressively threatening members of the public for recording their abuses ¹⁵⁹¹⁶⁰¹⁶¹
10	Arbitrary enforcement, ignoring violations by influential individuals ¹⁶²¹⁶³¹⁶⁴
11	Sending letters threatening drivers and dog-walkers ¹⁶⁵
12	Humiliating, baiting and threatening members of the public ¹⁶⁶¹⁶⁷
13	Threatening members of the public who exercise for longer than one hour ¹⁶⁸
14	Masses of police, including Cressida Dick, most senior police force member in the entire UK,

148 Robertson, A., (10/04) 2020. ‘Police tell locked-down Brits they can’t go in their own GARDENS: Officer scolds family for letting their children play on the lawn- before force bosses apologise for ‘ill-informed’ approach’ Available At: <https://www.dailymail.co.uk/news/article-8207393/Sales-Easter-eggs-wine-barbecues-paddling-pools-soar-ahead-four-day-break.html>

149 UK Freedom Audits, 2020. ‘Cop Tells Man To Get Inside & Out Of His Own Garden’ Youtube. Available At: <https://www.youtube.com/watch?v=DyGuYJUR8dQ>

150 Taylor, R., (09/04) 2020. Twitter. Available At: <https://twitter.com/RTaylorUK/status/1248204770977996800>

151 BBC, (27/03) ‘Coronavirus: Peak District drone police criticised for ‘lockdown shaming’ 2020. Available At: <https://www.bbc.com/news/uk-england-derbyshire-52055201>

152 UK Freedom Audits, 2020. ‘You’re Not Driving The Shortest Way Home..... Cop Stop’ Youtube. Available At: <https://www.youtube.com/watch?v=9gGao03A19w>

153 Warrington Police, 2020. Twitter. Available At: <https://twitter.com/PoliceWarr/status/1243305216180736003>

154 UK Freedom Audits, 2020. ‘Get Off My Land Cops’ Youtube. Available At: <https://www.youtube.com/watch?v=tEs3-96aFT8>

155 UK Freedom Audits, 2020. ‘Cop Arrests Woman Exercising Her Right To Exercise’ Youtube. Available At: <https://www.youtube.com/watch?v=L5Er2ESrYJI>

156 UK Column, 2020. Twitter. Available At: <https://twitter.com/ukcolumn/status/1248590133307363328>

157 ITV, (26/03) 2020. ‘Police ban driving anywhere to walk your dog or exercise’ Available At: <https://www.itv.com/news/westcountry/2020-03-26/police-ban-driving-anywhere-to-walk-your-dog-or-exercise/>

158 BBC, (01/04) 2020. ‘York woman fined for breaching coronavirus rules’ BBC. Available At: <https://www.bbc.com/news/uk-england-york-north-yorkshire-52121216>

159 Segalov, M., 2020. Twitter. Available At: <https://twitter.com/MikeSegalov/status/1246848400835973122>

160 Childs, S., 2020. Twitter. Available At: <https://twitter.com/simonchild13/status/1250718305889013760>

161 Busby, M., (11/04) 2020. ‘

UK lockdown: police apologise after man threatened with pepper spray’ The Guardian. Available At: <https://www.theguardian.com/uk-news/2020/apr/11/uk-lockdown-police-apologise-after-man-threatened-with-pepper-spray>

162 Gardener, B. and Yorke, H., (10/04) 2020. ‘Robert Jenrick under pressure to quit as claim that mansion is family home is called ‘codswallop’ The Telegraph. Available At: <https://www.telegraph.co.uk/politics/2020/04/10/robert-jenrick-pressure-quit-claim-mansion-family-home-called/>

163 Mek, A., 2020. Twitter. Available At: <https://twitter.com/AmyMek/status/1249776089297088512>

164 Bienkov, A. (28/05) 2020. ‘Boris Johnson’s top aide Dominic Cummings did break lockdown rules, say police’ Business Insider. Available At: <https://www.businessinsider.com/boris-johnsons-aide-dominic-cummings-broke-lockdown-rules-say-police-2020-5>

165 Ms Counsel, 2020. Twitter. Available At: <https://twitter.com/seeyouatthebar/status/1244527665434046464>

166 UK Freedom Audits, 2020. ‘Man Gets Knicked For Doing Errand For Mum’ Youtube. Available At: <https://www.youtube.com/watch?v=o3x7-nTme34>

167 <https://www.theguardian.com/uk-news/2020/apr/11/uk-lockdown-police-apologise-after-man-threatened-with-pepper-spray>

168 Dodd, V., and O’Carroll, L., (31/03) 2020. ‘UK police warned against ‘overreach’ in use of virus lockdown powers’ The Guardian. Available At: https://www.theguardian.com/uk-news/2020/mar/30/uk-police-guidelines-coronavirus-lockdown-enforcement-powers-following-criticism-lord-sumption?CMP=Share_AndroidApp_Tweet

	flagrantly ignoring social distancing, in the UK's primary infection hotspot ¹⁶⁹
15	Conducting unwarranted home-invasions of members of the public ¹⁷⁰
16	Defacing areas of natural beauty ¹⁷¹
17	Harassing elderly disabled people for their neighbour helping to tend their garden ¹⁷²
18	Preventing travel between counties ¹⁷³
19	Intimidating members of the public during secluded meals ¹⁷⁴
20	Using their office to publicly lobby government for legislation ¹⁷⁵
21	Threatening cyclists not to exercise by cycling ¹⁷⁶
22	Harassing businesses for making chalk distancing measures on pavements ¹⁷⁷
23	Threatening, assaulting and unlawfully detaining people for sitting on a bench ¹⁷⁸
24	Stranding members of the public without transport. ¹⁷⁹
25	Causing public disturbances at night. ¹⁸⁰
26	Intimidating members of the public with banned weapons. ¹⁸¹
27	Intimidating retailers into changing their stocks ¹⁸²
28	Threatening to assault members of the public and provide false testimony ¹⁸³
29	Violently assaulting and intimidating children ¹⁸⁴
30	Making frivolous trips to their second homes despite threatening others not to do the same ¹⁸⁵

169 FMS Newsflow, 2020. Twitter. Available At: <https://twitter.com/FMSNewMedia/status/1251042368146550784>

170 UK Freedom Audits, 2020. 'Be Scared To Open Your Door, Be Angry If It's Forced Open' Youtube. Available At: <https://www.youtube.com/watch?v=Wvrj2jKr98g>

171 Andrews, L., and Boyle, D., (29/03) 2020. 'Black day at blue lagoon: Picture shows picturesque lake turned COMPLETELY black after police put dye in it to stop Instagrammers break virus lockdown' Available At: <https://www.dailymail.co.uk/news/article-8165217/Picture-shows-idyllic-lake-turned-COMPLETLY-black-police-dye-stop-Instagrammers.html>

172 Watson, P., (14/04) 2020. 'UK: Disabled Man Gets Police Visit Because Neighbor Offered to Cut His Grass' Summit News. Available At: <https://summit.news/2020/04/14/uk-disabled-man-gets-police-visit-because-neighbor-offered-to-cut-his-grass/>

173 St Austell Police, 2020. Twitter. Available At: https://twitter.com/StAus_Police/status/1248292525003112452

174 PC Dan, 2020. Twitter. Available At: <https://twitter.com/P1DanH/status/1247219638091624455>

175 Robertson, A., (10/04) 2020. 'Police tell locked-down Brits they can't go in their own GARDENS: Officer scolds family for letting their children play on the lawn- before bosses apologise for 'ill-informed' approach' Available At: <https://www.dailymail.co.uk/news/article-8207393/Sales-Easter-eggs-wine-barbecues-paddling-pools-soar-ahead-four-day-break.html>

176 ^

177 Gordon, A. and Robinson, M., (27/03) 2020. "If I don't do this there will be ANARCHY': Now police officer threatens to fine shopkeeper for 'criminal damage' after she drew social-distancing markers in CHALK outside her bakery- as forces across country flex their new coronavirus lockdown powers' Daily Mail. Available At: <https://www.dailymail.co.uk/news/article-8159177/Police-forces-accused-overzealousness-follow-dog-walkers.html>

178 Collman, A., (09/04) 2020. 'A woman in London defied the UK lockdown, telling police she was 'exercising mentally' by sitting on park bench for nearly an hour. She got arrested.' MSN News. Available At: <https://www.msn.com/en-us/news/world/a-woman-in-london-defied-the-uk-lockdown-telling-police-she-was-exercising-mentally-by-sitting-on-park-bench-for-nearly-an-hour-she-got-arrested/ar-BB12nknX?ocid=spartanntp>

179 BeachMilk, 2020. Twitter. Available At: <https://twitter.com/BeachMilk/status/1245997704267870208>

180 Shah, M., 2020. twitter. Available At: https://twitter.com/search?q=police%20uk&src=typed_query

181 LAGUD, 2020. Twitter. Available At: <https://twitter.com/Lagud5/status/1245359673525624832>

182 Montgomery, J., (30/03) 2020. 'UK Govt Suggests Police Made Up Rule Against Selling 'Non-Essential' Easter Eggs' Breitbart. Available At: <https://www.breitbart.com/europe/2020/03/30/uk-govt-suggests-police-made-up-rule-against-selling-non-essential-easter-eggs/>

183 Thought Criminal, 2020. 'Lockdown Police UK threaten to falsify crimes' Youtube. Available At: <https://www.youtube.com/watch?v=KLBR3XPoDuc>

184 English, B., Twitter. Available At: <https://twitter.com/Brendan3nglish/status/1266394184040284161>

185 Herald Scotland Online. (16/05) 2020. 'Scots Transport Police chief makes 480-mile round trip to second home in Yorkshire during lockdown' Available At: <https://www.heraldsotland.com/news/18454337.scots-transport-police-chief-makes-480-mile-round-trip-second-home-yorkshire-lockdown/?ref=twtrrec>

This action does not merely speak to a few bad apples but constitutes the apex of a body of evidence¹⁸⁶¹⁸⁷¹⁸⁸¹⁸⁹ which exposes a wide-scale and wholly inadequate appointment of police members, of all ranks, with thuggish intent and character, in contradiction of Section 45 of the Magna Carta, which requires:

“We will appoint as justices, constables, sheriffs, or other officials, only men that know the law of the realm and are minded to keep it well.”¹⁹⁰

This therefore again illegally holds the constitution and law itself in utter contempt. Government is, in the end, accountable for the actions of the agencies which it controls and must be held accountable so to prevent continued abuse.

Intrusive Threats

The government is presently engaged in an unavoidable, all-permeating and repeated broadcast of unlawful threats. Just as no company may issue such threats, whether by television, radio, internet or otherwise, neither may government. On the 23rd of March it utilised the telephone network to broadcast mass texts to the public which are un-blockable (unlike with numbers or anonymous calls, which may both be blocked via handsets), thus targetting children and vulnerable adults. Not only is the mass hysteria as a result of such panic harmful, but it is the threatening and unavoidable nature of it which constitutes harassment.

Whilst the adverts and general communications which are avoidable lay within precedent, as a major escalation of government conduct, the unavoidable nature of un-blockable texts represents a major threat to personal privacy and could be utilised further by government in increasingly intrusive ways if not held in check.

186 Crime Bodge, 2020. ‘Crime Bodge Channel’ Youtube. Available At: https://www.youtube.com/channel/UCUSL8poMxM_uXWzWEXJaY-w

187 Ng, K., (14/01) 2020. ‘Police officers filmed punching and kicking suspect after he voluntarily lies on ground during arrest’ The Independent. Available At: <https://www.independent.co.uk/news/uk/home-news/police-filmed-punching-kicking-suspect-voluntarily-surrenders-video-a9282791.html>

188 Darbyshire, N., (07/03) 2015. ‘The shocking truth about police corruption in Britain’ The Spectator. Available At: <https://www.spectator.co.uk/article/the-shocking-truth-about-police-corruption-in-britain>

189 Gallagher, P., (02/05) 2015. ‘Over 3,000 police officers being investigated for alleged assault - and almost all of them are still on the beat’ The Independent. Available At: <https://www.independent.co.uk/news/uk/crime/over-3000-police-officers-being-investigated-for-alleged-assault-and-almost-all-of-them-are-still-on-10220091.html>

190 Magna Carta, Section 45.

Legal Accountability

Judges and magistrates have both a duty to uphold the law when brought before their courts and to strike down Acts which are *ultra vires* through their court rulings. Through this, many of the people who have been illegally persecuted may face some form of restitution. However, further measures must also be addressed, in prosecuting those illegally causing harm.

It is important to note that the statute itself passed through parliament cannot be considered to have been illegal in its passage, as process was nominally followed, although it is legally rendered null and void upon royal assent. It is the enforcement of such invalid measures which constitutes an offence. Given that the measures of the UK government, in enforcing unlawful statute, noted above, are beyond the remit of constitutional power that the government can lawfully hold, it is appropriate that these be reviewed in a court case against the government, citing the above arguments. This may be pursued under the right of demonstrating 'sufficient interest' as a citizen of the UK who has been confined through illegal threats of prosecution. Whether these would ultimately be held in the 'Supreme' Court, in the House of Lords, an Assembly of Lords or by a joint committee of parliament is a matter of significant depth that this report will not focus upon.

There is also a further ability to pursue this case through the European Court of Human Rights, as established in the Human Rights Act of 1998, however, it is doubtful that these rulings can be considered binding within the UK, it being a foreign court. Indeed, many of the rights discussed with reference to the UK constitution are partially endorsed as part of Human Rights law. Despite this, even should these 'rights' not truly be rights as such (being non-binding), a judge may rule that a conflict has occurred through a "declaration of incompatibility",¹⁹¹ thus holding that there may be a case for compensation and referring the matter to parliament for scrutiny and possible resolution.

With regards to the Ministers of the Crown and Officers of the Law, in addition to any other agents of the government who enforce these measures, they may be charged with a number of criminal offences, these being:

¹⁹¹ Section 4 of the Human Rights Act, 1998.

- **Misfeasance (Misconduct) in Public Office**

“For the offence of misconduct in public office, the defendant must be a public officer acting as such, there must be a breach of duty by the officer. It may consist of an act of commission or one of omission. The conduct must be wilful: ‘There must be an awareness of the duty to act or a subjective recklessness as to the existence of the duties. The recklessness test will apply to the question whether in particular circumstances a duty arises at all as well as to the conduct of the defendant if it does. The subjective test applies both to reckless indifference to the legality of the act or omission and in relation to the consequences of the act or omission’. The element of culpability ‘must be of such a degree that the misconduct impugned is calculated to injure the public interest so as to call for condemnation and punishment.’ The action should have been without reasonable excuse or justification.”¹⁹²¹⁹³

Attorney General’s Reference (No3 of 2003): CACD 7 Apr 2004

The most accurate charge for the conduct of the government. Misfeasance in Public Office arises from the breach of the oath which all ministers and agents of the crown must take governing their conduct in office, to the effect that they will uphold the laws and customs of our land, not using their office to act in any manner which their office does not grant them the power to do so. It applies to cases in which a holder of public office would seek to subsume the rights of those that they have sworn, by oath, to protect. There is a strong case to be made that the entire cabinet bears joint-enterprise responsibility for the actions of the government given *collective cabinet responsibility*.

- **False Imprisonment**

“False imprisonment is a common law offence involving the unlawful and intentional or reckless detention of the victim. An act of false imprisonment may amount in itself to an assault. If a separate assault accompanies the detention this should be reflected in the particulars of the indictment.”

“Where the detention was for a period of several hours, or days, then it will be proper to reflect the unlawful detention with a count for false imprisonment.”¹⁹⁴

192 CPS, 2018. ‘Misconduct in Public Office’ Crown Prosecution Service. Available At: <https://www.cps.gov.uk/legal-guidance/misconduct-public-office>

193 Attorney General’s Reference (No3 of 2003): CACD 7 Apr 2004

194 CPS, 2020. ‘Offences against the Person, incorporating the Charging Standard’ Crown Prosecution Service. Available At: <https://www.cps.gov.uk/legal-guidance/offences-against-person-incorporating-charging-standard>

Crown Prosecution Service

False imprisonment is a clearly indicated crime, which has been committed by the government and its agents, given the threats they have used to keep people unlawfully detained. Given the scale of the crime, it would be prudent to conduct this as a joint case.

- **Unlawful Act Manslaughter**

“Where an unlawful killing is done without an intention to kill or to cause grievous bodily harm, the suspect is to be charged with manslaughter not murder. Apart from the absence of the requisite intent, all other elements of the offence are the same as for murder. There are two types of involuntary manslaughter, that caused by the defendant's gross negligence and that caused by his unlawful or dangerous act.”¹⁹⁵

Crown Prosecution Service

Given the recent suicides of at least one mentally vulnerable girl, Emily Owen and another man, Daniel Furniss, due to their illegal detention enforced by the UK government measures, it is highly likely that such suicides will continue and may be attributed to government action. These cases are unlikely to be immediate and are extremely personal in nature. Any action should, of course, be brought by those close to those who have sadly lost their lives, not by any general effort against the general illegality of government measures unless specifically requested by those bereaved.

- **Robbery**

“A person is guilty of robbery if he steals, and immediately before or at the time of doing so, and in order to do so, he uses force on any person or puts or seeks to put any person in fear of being then and there subjected to force.”¹⁹⁶

Crown Prosecution Service

Whilst theft may be an appropriate common term for the stealing of funds through illegal “fines”, it is likely that an “intention” defence might be mounted and used to quash charges.

195 CPS, 2019. ‘Homicide: Murder and Manslaughter’ Crown Prosecution Service. Available At: <https://www.cps.gov.uk/legal-guidance/homicide-murder-and-manslaughter>

196 CPS, 2019. ‘Theft Act Offences’ Crown prosecution Service. Available At: <https://www.cps.gov.uk/legal-guidance/theft-act-offences>

In its stead robbery seems the more likely of the two charges to carry weight, considering the threats of unlawful violence now routinely issued or implied by police.

The importance of these charges being brought against those primarily responsible is paramount and in the public interest. Indeed, no charge whatsoever could be more so. It is imperative at a time when measures are seen to be arbitrarily enforced against those without power, whilst those at the centre of government are given exemption,¹⁹⁷ that all people are held equal before the law. As is succinctly put by Alistair MacDonald QC, Chairman of the Bar Council of England and Wales, who spoke in an issue of 'The Barrister' (page 3, pa, 25):

"I am convinced that the principles enshrined in Magna Carta are as important today as they were in 1215. It is a terrible irony that, as we celebrate Magna Carta, it is being undermined by an executive which pays lip service to its principles. If the legacy of Magna Carta is to last another 800 years, it requires everyone with a sense of history and an understanding of the critical importance of the rule of law to our society to stand up and fight for it. The liberties conferred by this great document were hard won. We owe it to posterity to ensure that they are not lost in our time."¹⁹⁸

197 Bienkov, A. (28/05) 2020. 'Boris Johnson's top aide Dominic Cummings did break lockdown rules, say police' Business Insider. Available At: <https://www.businessinsider.com/boris-johnsons-aide-dominic-cummings-broke-lockdown-rules-say-police-2020-5>

198 Mcdonald, A., (11/07) 2015. 'Magna Carta 1215 to 2015' The Barrister. Available At: <http://www.barristermagazine.com/magna-carta-1215-to-2015/>

Harmful Measures Enforced by the UK Government

The Legalisation of Criminal Negligence by Government

During a pandemic or any other emergency situation it is likely that patients may receive a lower quality of service than otherwise usually provided. It is also understandable that the government may wish to provide indemnity for those staff who voluntarily give their time to assist in such a crisis, as opposed to those already employed. However, the UK government, in the Coronavirus Act, created a blanket indemnity which goes far beyond this. The indemnity for the NHS can be applied to almost any incident or death which may not in every case be attributable to the pressures of a pandemic but to irresponsible decisions of health professionals or government ministers.

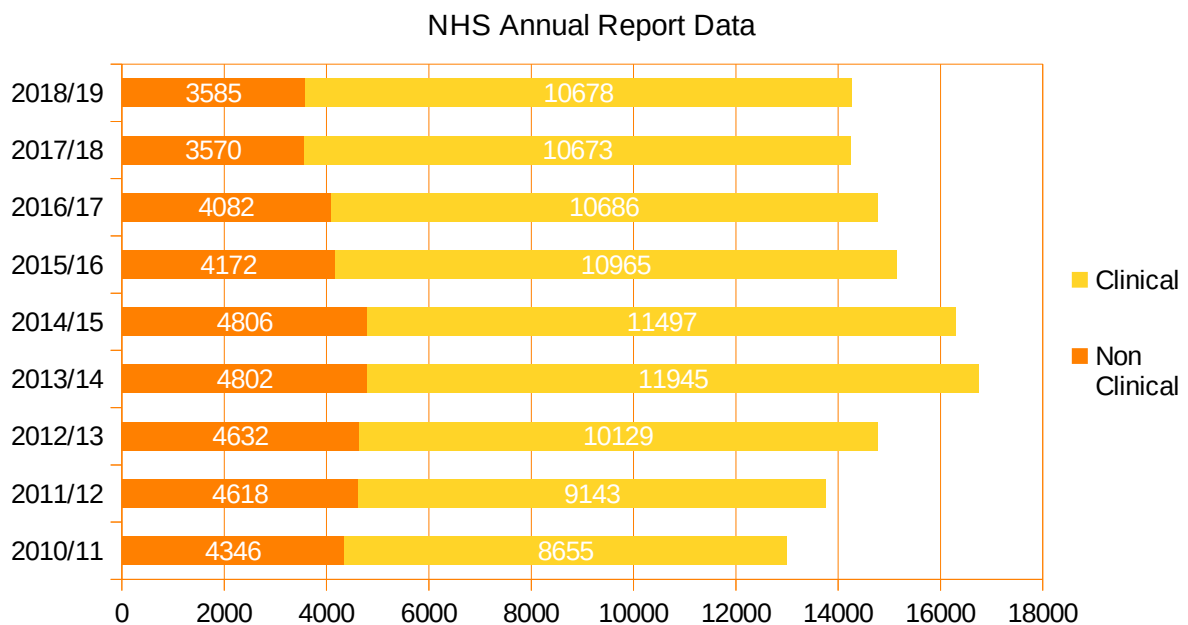
It is easy for medical professionals to claim that a negligent error was beyond their control and in the absence of post-mortems, reviews of such claims are likely to go unchallenged. Given that Covid-19 is an illness which poses a small risk for vulnerable demographics, this is a time at which a government may have traditionally sought to raise standards, not lower them. These indemnities dangerously incentivise a level of recklessness and risk-taking by health professionals on the grounds that mistakes or mal-practice are forgivable during the pandemic. The Coronavirus Act explicitly states that health professionals will be protected against:

"clinical negligence liabilities arising from NHS activities connected to the diagnosis, care and treatment of those who have been diagnosed as having coronavirus disease or who are suspected, or who are at risk, of having the disease".¹⁹⁹

199 HM Government, 2020. 'Coronavirus Bill: Summary of Impacts' Hm Government. Available At: <https://www.gov.uk/government/publications/coronavirus-bill-summary-of-impacts/coronavirus-bill-summary-of-impacts>

Such a law is an implicit admission that the government has declared they have lost the battle before it has even begun. Late March and early April bear testimony to the fact that UK testing numbers are below standard for a reason, a paltry 16,000 tests per day being carried out at a time whilst Germany conducted 500,000 a week.²⁰⁰ The fact that the indemnity covers care and treatment are an indication that the government are attempting to preclude a public health review or enquiry in which key decision makers are held responsible and accountable for a series of failings that will cost thousands of lives. Indeed, the impending scandal of purposefully negligent coronavirus diffusion into elderly care homes²⁰¹ is likely to be covered by such legislation, leading to no accountability for what may be thousands of deaths by government negligence.

New NHS Negligence Claims 2010/11 - 2018/19



New NHS Negligence Claims 2010/11 – 2018/19²⁰²

Given the large number of claims each year (of which roughly half are awarded), measures will likely rob hundreds, if not thousands of families of the justice they deserve for where their loved one has been killed by preventable error, not an unavoidable calamity. Such legislation can only perpetuate a culture of unaccountability for deaths by negligence and many more deaths in future.

200 Drewett, Z., (01/04) 2020. 'Germany tests 500,000 a week, so why can't UK even do a quarter of that?' The Metro. Available At: <https://metro.co.uk/2020/04/01/uk-wont-test-25000-people-per-day-coronavirus-mid-april-12490572/>

201 Dlingpole, J. (19/05) 2020. 'Delingpole: Killing the Elderly In Care Homes to Save the NHS. Nice Work, Boris!' Breitbart. Available At: <https://www.breitbart.com/europe/2020/05/19/delingpole-killing-the-elderly-in-care-homes-to-save-the-nhs-nice-work-boris/>

202 NHS. 2019. 'Annual Report and Accounts 2018/19' NHS. Available At: <https://resolution.nhs.uk/wp-content/uploads/2019/08/NHS-Resolution-Annual-Report-2018-19.pdf>

Psychologically Harmful Forced Confinement

Since the Government's order on the 23rd of March 2020, for the general population of Britain to stay at home (aside from severely limited proscriptions), questions have arisen as to the medical effectiveness of these measures. There is evidence to suggest that taking this action may be more damaging than Covid-19 itself. Studies have shown that sustained increases in stress and worry can have a negative impact on overall life expectancy and the immune system. Heightened levels of cortisol, a key stress hormone, is implicated in the pathogenesis of many age-related diseases.²⁰³

Forced confinement in combination with this can result in:

“Significant psychological and psychiatric disturbances such as post-traumatic stress disorder, depression, anxiety, panic disorders, and behavioural disorders.”²⁰⁴

A large number of families will face a reduction in income over the indefinite period of forced confinement and this alone will be creating an unnatural amount of anxiety. Along with higher household expenses, such as electricity and heating costs, this will undoubtedly leave many citizens in a prolonged state of hyper anxiety that is detrimental to all human relationships and health. Instances of domestic violence are increasing,²⁰⁵²⁰⁶ as the government has tacitly admitted.²⁰⁷ Pressures on relationships will lead to a rise in married couples making the heart breaking decision to divorce,²⁰⁸ among many other types of familial and health problems including suicide and self harm.²⁰⁹

203 Moffat, S.D., An, Y., Resnick, S.M., Diamond, M.P. and Ferrucci, L., 2020. Longitudinal Change in Cortisol Levels Across the Adult Life Span. *The Journals of Gerontology: Series A*, 75(2), pp.394-400.

204 Sood, S., 2020. Psychological effects of the Coronavirus disease-2019 pandemic. *Research & Humanities in Medical Education*, 7, pp.23-26.

205 Parveen, S., Greerson, J., (26/03) 2020. 'Warning over rise in UK domestic abuse cases linked to coronavirus.' *The Guardian*. Available At: <https://www.theguardian.com/society/2020/mar/26/warning-over-rise-in-uk-domestic-abuse-cases-linked-to-coronavirus>

206 Slack, T. and Newbery, A., (27/05) 2020. 'Coronavirus: Domestic abuse website visits up 10-fold, charity says' Available At: <https://www.bbc.com/news/uk-england-52755109>

207 HM Government, 2020. 'Guidance Coronavirus (COVID-19) and domestic abuse.' HM Government. Available At: <https://www.gov.uk/government/publications/coronavirus-covid-19-and-domestic-abuse>

208 Global News, (02/04) 2020. China's divorce rates rise as couples emerge from coronavirus quarantine. Available At: <https://globalnews.ca/news/6767589/china-divorce-rates-coronavirus/>

209 Panayi, A., (03/04) 2020. COVID-19 Is Likely to Lead to an Increase in Suicides. *The Scientific American*. Available At: <https://blogs.scientificamerican.com/observations/covid-19-is-likely-to-lead-to-an-increase-in-suicides/>

Most acutely impacted by forced confinement are those who happen to live alone, for whom this is a sentence of solitary confinement. Government propaganda has created a climate of isolation which prevents such individuals from engaging with others even if able to exercise outdoors. This is recognisable as a form of torture.²¹⁰ Similarly, those with mental health conditions are severely at risk of experiencing the same torture-like symptoms.²¹¹ This is further elaborated upon in “Psychological Torture of Vulnerable Groups”.²¹²

During the SARS outbreak, a study found that for 184 of 338 hospital staff, being quarantined was a predictor of symptoms of acute stress disorder, with quarantined staff significantly being more likely to report a range of psychological symptoms such as exhaustion, anxiety and insomnia amongst others. For members of the population that live alone, particular psychological problems may start to quickly arise.

Further research²¹³ shows that quarantine was a predictor of post-traumatic stress symptoms of hospital employees as long as three years after the quarantine period, with those who had been quarantined, worked in high risk areas or had friends or relatives who contracted SARS two to three times more likely to report post traumatic stress symptoms.

It is safe to say that the policy response by governments around the world is unprecedented and with this in mind it is difficult to consult research on mass isolation on this scale. However there is enough evidence²¹⁴ to suggest that altruistic acceptance of quarantine measures can help to mitigate the negative stress indicators somewhat. There are also other contexts which show that stressful situations can be easier to bear if there is an understanding that the stress will help others in the long term and it’s reasonable to assume that this would apply to a pandemic situation.

210 Metzner, J. and Fellner, J., 2010. Solitary confinement and mental illness in U.S. prisons: a challenge for medical ethics. *Journal of American Academy of Psychiatry and the Law* 38:104-108.

211 Matthews, T., Danese, A., Wertz, J., Odgers, C.L., Ambler, A., Moffitt, T.E. and Arseneault, L., 2016. Social isolation, loneliness and depression in young adulthood: a behavioural genetic analysis. *Social psychiatry and psychiatric epidemiology*, 51(3), pp.339-348.

212 See “Psychological Torture of Vulnerable Groups”.

213 Wu, P., Fang, Y., Guan, Z., Fan, B., Kong, J., Yao, Z., Liu, X., Fuller, C.J., Susser, E., Lu, J. and Hoven, C.W., 2009. The psychological impact of the SARS epidemic on hospital employees in China: exposure, risk perception, and altruistic acceptance of risk. *The Canadian Journal of Psychiatry*, 54(5), pp.302-311.

214 Liu, X., Kakade, M., Fuller, C.J., Fan, B., Fang, Y., Kong, J., Guan, Z. and Wu, P., 2012. Depression after exposure to stressful events: lessons learned from the severe acute respiratory syndrome epidemic. *Comprehensive psychiatry*, 53(1), pp.15-23.

With this in mind it bears thinking about research²¹⁵ which demonstrated that dependency symptoms were positively associated with medical workers who were quarantined during the SARS outbreak. This is underlined by a multivariate analysis approach to control for demographic factors and suggests a link between quarantine and dependency symptoms even when controlling for factors such as age, gender, socio-economic class etc.

Whilst the negative effects may be more pronounced in the specific case of medical workers and others close to an outbreak, there is not enough research to ascertain exactly to what degree this negative impact generalises to a population level with the implementation of forced confinement measures in the same way. However there is a clear trend in research around other isolation contexts such as simulated Mars trips²¹⁶ and Antarctic expeditions²¹⁷ in which respondents in confined spaces with limited social contact present psychological symptoms at a higher rate than a control group. This long term effect is of particular concern due to the nature of the symptoms persisting beyond just a few days or weeks after a quarantine situation.

This may have further derivative negative impacts, one of the most concerning being a civic backlash against any harmful measures being enforced on a mass scale, leading to fallout from a conflict which could dwarf the small number of excess deaths from Covid-19 by itself.

When taking into account the intelligent isolation measures of other nations, which do not enforce confinement, it is apparent that forced confinement is an optional measure which does unnecessary harm. Given both the deep, lasting psychological trauma of many individuals, many of whom have been whipped up into a state of constant fear, alongside the risk of backlash, it is unlikely that deaths, even at their upper bound, will exceed the vast damage that is being done psychologically by the measures purportedly to contain the disease, just by itself.

215 Wu, P., Liu, X., Fang, Y., Fan, B., Fuller, C.J., Guan, Z., Yao, Z., Kong, J., Lu, J. and Litvak, I.J., 2008. Alcohol abuse/dependence symptoms among hospital employees exposed to a SARS outbreak. *Alcohol & Alcoholism*, 43(6), pp.706-712.

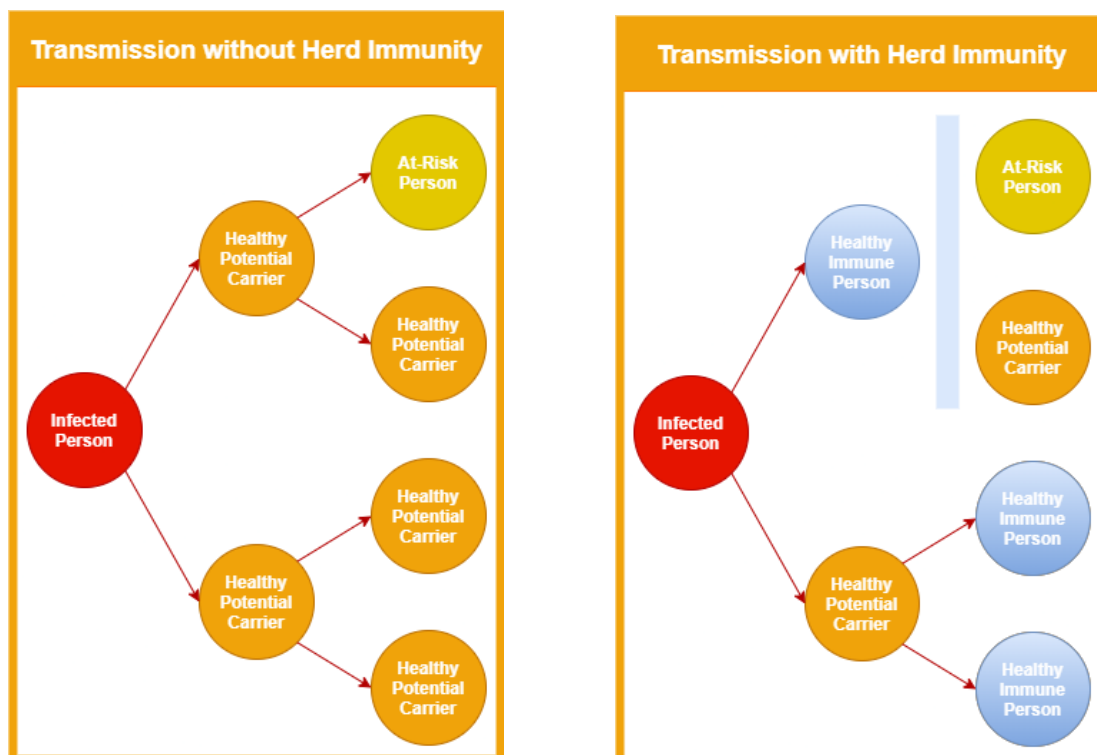
216 Basner, M., Dinges, D.F., Mollicone, D.J., Savelev, I., Ecker, A.J., Di Antonio, A., Jones, C.W., Hyder, E.C., Kan, K., Morukov, B.V. and Sutton, J.P., 2014. Psychological and behavioral changes during confinement in a 520-day simulated interplanetary mission to mars. *PloS one*, 9(3).

217 Oliver, D.C., 1991. Psychological effects of isolation and confinement of a winter-over group at McMurdo Station, Antarctica. In *From Antarctica to outer space* (pp. 217-227). Springer, New York, NY.

Prevention of Herd Immunity

Herd immunity is the practice by which members of a population are protected against a disease through a significant number of that population as a whole having immunity towards it and thus being poor methods of transmission. A significant number of breaks in the chain of transmission can often be fatal to a virus on the whole. The UK Chief medical officers have stated that should the rate of immunity in the UK reach 60%²¹⁸, this would be likely sufficient to cause the disease to naturally decline, especially in the summer seasons with increased ultraviolet solar rays.

With a vaccine unlikely for the next 12 months, it is a strong possibility that the UK shall have to weather another Winter with the coronavirus²¹⁹, unless it develops such immunity. The coronavirus, unlike the Spanish Flu, has a low death rate and primarily kills those with underlying health conditions²²⁰. However, these individuals only constitute a small percentage of the population.



218 Lintern, S., (13/03) 2020. 'Coronavirus: 60% of UK population need to become infected so country can build 'herd immunity', government's chief scientist says.' The Independent. Available At: <https://www.independent.co.uk/news/health/coronavirus-herd-immunity-uk-nhs-outbreak-pandemic-government-a9399101.html>

219 ^

220 Ioannidis, J.P., Axfors, C. and Contopoulos-Ioannidis, D.G., 2020. Population-level COVID-19 mortality risk for non-elderly individuals overall and for non-elderly individuals without underlying diseases in pandemic epicenters. medRxiv.

For the vast majority of people with the disease, it is asymptomatic or only mildly so. For those of a younger age with robust health, the likely impact is negligible, with a fatality rate of 0.03% for those aged 20-30²²¹, as argued for persuasively by Oswald and Powdthavee.²²²

The UK government at the beginning of crisis, though failing in most measures, did talk of developing herd immunity, however the blanket measures of forced confinement have prevented a large number of healthy individuals from contracting the disease and becoming immune, thus protecting the most vulnerable, as the UK enters the Summer months. Indeed, the present is the exact best time, due to falling pressures on the NHS given improving weather,²²³ for herd immunity to develop.

Herd immunity is not a monolithic concept, and can be targetted, unlike measures proposed by the UK government in early March. Healthy individuals catching and overcoming diseases, whilst those at risk choose to stay at home will, in the long run, protect those most at risk. By failing to allow for herd immunity, the UK government thus guarantees that the moment that enforced confinement is lifted, if it is, it will lead to a resurgence - likely to swamp those most at risk. If, as is the case in other nations, the UK adopted *intelligent isolation* (as in Sweden, Japan, South Korea or Taiwan), members of the public immune to the disease could be certified as safe for some contact with those most at risk, rather than the uncertified nature of any contact at present.

Such a system would not only save thousands to tens of thousands of lives, but spare further harmful forced confinement measures of the UK over the entirety of the next Winter, something which it would not be capable of surviving economically,²²⁴ psychologically,²²⁵ politically²²⁶ or otherwise.

221 Oswald, A.J. and Powdthavee, N., 2020. The Case for Releasing the Young from Lockdown: A Briefing Paper for Policymakers (No. 13113). Institute of Labor Economics (IZA).

222 ^

223 Afza, M. and Bridgman, S., 2001. Winter emergency pressures for the NHS: contribution of respiratory disease, experience in North Staffordshire district. *Journal of Public Health*, 23(4), pp.312-313.

224 See "Prevention of Safe Economic Activity"

225 See "Psychologically Harmful Forced Confinement" and "Psychological Torture of Vulnerable Groups"

226 See "Illegal Measures Enforced by the UK Government"

Prevention of Safe Economic Activity

Measures of confinement of UK citizens are not merely illegal, but have profound detrimental effects on the UK economy. Only 4.5% of workers usually work from home and working from home is an option not available to a large proportion of the workforce.²²⁷ Similarly it is shown to increase loneliness and may in the long run significantly reduce output for those not voluntarily choosing it.²²⁸ They will lead to mass unemployment, over 800,000 small businesses going into liquidation immediately²²⁹, whilst 45% of companies reporting a significant drop in income and only 40% of businesses with confidence they would be able to continue operating²³⁰, something which will exacerbate the UK's health and social problems in the long-term. One third of the UK population is now subsidised through government Covid-19 schemes.²³¹ The UK economy has not merely entered recession. It has entered super-recession. GDP has collapsed at a time when global demand is slowing and the UK needs most to grow and innovate. Whilst in many cases, it would be advisable for some citizens to stay at home and be compensated financially for this, such as if an at-risk person lives in their household, it isn't necessary for the majority of citizens whatsoever, who are being kept from participating in the economy and will likely trigger an overall collapse.²³²

The government approach precipitates such a crash. Alok Sharma, Business Secretary, has issued state loans and begun pressuring banks to offer high risk loans to finance a furlough period, stating that it was time that they "repay the favour"²³³ for the financial crash. Whilst the state subsidy of multi-billion pound banks may have been inadvisable, the exact measure which caused the crash was the issuance of loans which could not be repaid. In such, the government is indicating that should banks issue such loans, these would be underwritten by the government, in the same way

227 Shackleton, J., 2020. Pass the Remote: Why we can't all work from home. Institute of Economic Affairs.

228 Edwards, L.N. and Field-Hendrey, E., 2002. Home-based work and women's labor force decisions. *Journal of Labor Economics*, 20(1), pp.170-200.

229 cFN, 2020. 'CBILS overhaul is not working – now 20% Of All SMEs Are Set To Collapse Within The Next 2 Weeks' Corporate Finance Network. Available At: <https://www.thecfn.org.uk/cbils-overhaul-is-not-working-now-20-of-all-smes-are-set-to-collapse-within-the-next-2-weeks/>

230 ONS, 2020. 'Coronavirus, the UK economy and society, faster indicators: 9 April 2020.' Office for National Statistics Available At: <https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/conditionsanddiseases/bulletins/coronavirustheukeconomyandsocietyfasterindicators/9april2020>

231 Tapsfield, J., (28/05) 2020. 'A THIRD of UK workforce is being subsidised by the government and job adverts fall by 50%- as Bank of England chief warns coronavirus recovery will be tough' *The Mail*. Available At: <https://www.dailymail.co.uk/news/article-8365175/Bank-England-chief-warns-coronavirus-recovery-tough.html>

232 See "Prevention of Herd Immunity"

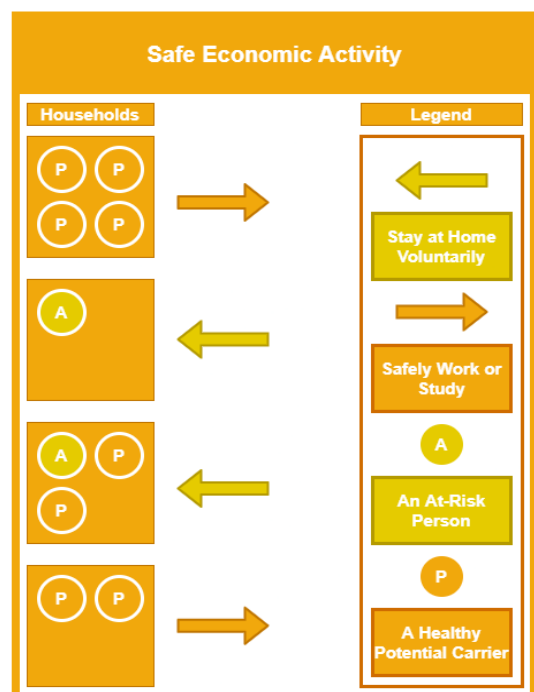
233 Bunchan, L. (01/04) 2020. 'Coronavirus: Government tells banks to 'repay the favour' and hand out loans to struggling businesses' *The Independent*. Available At: <https://www.independent.co.uk/news/uk/politics/coronavirus-bank-loan-business-bailout-rishi-sunak-alok-sharma-a9440941.html>

the government is issuing loans of its own. Yet given that the economic super-recession will not resolve itself in short order, many companies will fall irreversibly into debt. Further, many industries will collapse altogether, such as international tourism. A property collapse is speculated.²³⁴ Worse, the UK cannot rely on exports due to the global nature of this crisis.

This would leave all UK citizens liable for hundreds of billions, if not trillions of pounds in bad loans, during a super-recession. As Nobel prize-winning economist Paul Rober stated in late March:

“To protect our way of life, we need to shift within a couple of months to a targeted approach that limits the spread of the virus but still lets most people go back to work and resume their daily activities.”²³⁵

The UK has a choice. It can allow those whose households are not at risk back to work, where, as shown by the diagram, they do not endanger any other person. By Summer it may have its GDP up to halved, with irreparable damage, or it can face marginal impacts. Debt to GDP in April likely to be strongly exceeding 100% under current blanket confinement measures (with estimates of an immediate drop of around 20%)²³⁶, as receipts dry up this could reach hundreds of percent by the end of the year, long before a vaccine is produced. As the ratio skyrockets, the cost of borrowing would consequently soar exponentially, the UK credit rating being drastically lowered. A government cannot regulate and borrow its way out of the situation to which it has pledged itself without incurring debts so significant that they would be impossible to meet interest payments on. Thus the



UK would be forced to declare bankruptcy. As articulated by popular economist Dominic Frisby:

234 Elliot, L., (24/05) 2020. 'Most ingredients are in place for a property crash later this year' The Guardian. Available At: <https://www.theguardian.com/business/2020/may/24/most-ingredients-are-in-place-for-a-property-crash-later-this-year>

235 Rober, P. and Garber, A. M. (23/03) 2020. 'Will Our Economy Die From Coronavirus?' New York Times Available At: <https://www.nytimes.com/2020/03/23/opinion/coronavirus-depression.html>

236 Marris, S., (09/04) 2020. 'Coronavirus: GDP figures show UK economy was struggling before COVID-19 lockdown' Sky News. Available At: <https://news.sky.com/story/coronavirus-gdp-figures-show-uk-economy-was-struggling-before-covid-19-lockdown-11970814>

“Far greater harm comes from the alarm and from all the blunders.”²³⁷

The outcome of the measures the government is pursuing equates to the loss of millions of livelihoods, the breakup of hundreds of thousands of families, poverty, impacts on nutrition²³⁸, tens of thousands of suicides²³⁹, depression,²⁴⁰ all constituting a profound loss of quality of life. This would be extremely likely to, by itself, impact the health of the population to a far greater level than the Covid-19 virus. Professor François Balloux, chair in computational biology at University College London explained:

“If you trash the economy you trash the health system and education - and if you trash the health system and education you trash life expectancy.”²⁴¹

Such consequences dwarf the current crisis. As such it is not merely harmful action that the government is taking in the prevention of safe economic activity - a measure which would rather save lives via herd immunity - it is cataclysmic.

237 Frisby, D., 2020. ‘Maybe’ (Covid 19 Coronavirus edition) Youtube. Available At: https://www.youtube.com/watch?v=_ds9u006X8o

238 Griffith, R., Connell, M.O. and Smith, K., 2012. Food purchases and nutrition over the recession. Institute for Fiscal Studies. Available at: <http://www.ifs.org.uk/publications/6722>

239 Reeves, A., Stuckler, D., McKee, M., Gunnell, D., Chang, S.S. and Basu, S., 2012. Increase in state suicide rates in the USA during economic recession. *The Lancet*, 380(9856), pp.1813-1814.

240 Ayers, J.W., Althouse, B.M., Allem, J.P., Childers, M.A., Zafar, W., Latkin, C., Ribisl, K.M. and Brownstein, J.S., 2012. Novel surveillance of psychological distress during the great recession. *Journal of affective disorders*, 142(1-3), pp.323-330.

241 Gullan, A., (17/04) 2020. ‘Economic shutdown could kill more than coronavirus, experts warn.’ *The Telegraph*. Available At: <https://www.telegraph.co.uk/global-health/science-and-disease/economic-shutdown-could-kill-coronavirus-experts-warn/>

Lack of Accountability of Emergency Powers

In recent history governments around the world have introduced emergency legislation to deal with various crises from wars to pandemics. Such legislation is justified on the grounds of saving lives however, there are a number of case studies which show that emergency powers tend to remain longer than necessary and are open to abuse. One of the most common consequences of these emergency periods is that they are often replaced with legislation that leads to permanent changes of legal systems. In other words, a state of emergency usually starts out as a series of exceptional measures which tend to become dominant governing and legal apparatuses to deal with any foreseeable event requiring sweeping state interference.

France declared a state of Emergency in 2015 in response to the Paris Islamic terrorist atrocities in November of that year. While the state of emergency ended in 2017 new anti-terror legislation was introduced that gives police extended powers to “search properties, conduct electronic eavesdropping and shut mosques or other locations suspected of hate preaching”.²⁴² Human Rights Watch expressed concern that abusive measures are now ‘ordinary law’. The laws allow the government to restrict the movement of its citizens by putting security blockades in public areas. These laws have also alarmed Amnesty International who has noted that the definition of ‘threat to national security’ remains ill defined and that a number of French citizens have been subject to ‘wanton violence’²⁴³ at the hands of the authorities. The bill effectively allows the detention of citizens who have committed no crime, in contravention of the French constitution.

The United States of America similarly introduced emergency powers subsequent to the 2001 Islamic terror attack on the New York Twin Towers. The ‘Patriot’ Act, which fundamentally violated their constitution, allowed the indefinite detention of migrants, searches of private property without permission or knowledge, the stalking of citizens phone calls, emails and transactions, which eventuated in the mass-stalking of all every single American citizen by the ‘National Security

242 Hartmann, C., (01/11) 2017. ‘Two years after the Paris attacks, France ends state of emergency’ Reuters. Available At: <https://www.reuters.com/article/us-france-security-idUSKBN1D14KD>

243 Perolini, M., (26/09) 2017. ‘France’s permanent state of emergency’ Amnesty International. Available At: <https://www.amnesty.org/en/latest/news/2017/09/a-permanent-state-of-emergency-in-france/>

Agency' (later exposed in its criminality by whistleblower loyalist Edward Snowden).²⁴⁴ Whilst there were clauses which meant to wind up provisions from 2006 onwards, these were repeatedly renewed, beginning 2005, after the unconstitutional action had become 'normalised'.

Egypt was administrated under emergency law from 1967 to 2012, barring a year and a half break in 1980 to 1981. Imposed with good reason during the 1967 Arab-Israeli War, it was reimposed following the assassination of President Anwar Sadat. The law, despite being 'temporary' was continuously extended every three years after 1981. Free speech was abolished and protest was banned, whilst police were able to abuse citizens at will.²⁴⁵

Israel has been in a state of Emergency since it was founded 1948. Enacted with good reason, as a temporary measure during the unrest in the British Mandate, the measure was never repealed, even in times of stability, which has allowed successive governments to tip the balance of power in their favour, as was never intended, using measures as a "governing tool" to avoid full oversight by the Israeli people via the Knesset and to discriminate against some political opposition groups.²⁴⁶

From 1975 to 1977 Prime Minister Indira Ghandi declared 'the Emergency' in India. Launched, with good reason, in response to the civil unrest caused by the India-Pakistan war and waves of public demonstrations, the emergency powers were also used in ways not intended by India's founders. Forced sterilisations were carried out and the right to protest was removed, alongside other civil liberties.²⁴⁷ The government was able to avoid scrutiny by their population through the introduction the Thirty-Eighth Amendment of the Constitution of India, which prohibited judicial reviews of state power and which remains as a permanent continuation of the emergency measures today.²⁴⁸

Whilst in all of these cases there seems to be good reason for the situation to be judged as an emergency, through wars, terrorist attacks or civil unrest, in each and every of them, the powers handed to governments were twisted in a way that they were not intended, sometimes illegally,

244 American Civil Liberties Union, 2020. 'SURVEILLANCE UNDER THE USA/PATRIOT ACT' ACLU. Available At:<https://www.aclu.org/other/surveillance-under-usapatriot-act>

245 Shehata, S., 2004. Egypt After 9/11: Perceptions of the United States. Social Science Research Council, 26.

246 Mehozay, Y., 2012. The Fluid Jurisprudence of Israel's Emergency Powers: Legal Patchwork as a Governing Norm. *Law & Society Review*, 46(1), pp.137-166.

247 Gupte, P.R., 2017. India: "The Emergency" and the Politics of Mass Sterilization. *Education About Asia*, 22(3), pp.40-44.

248 Henderson, M., 1979. Setting India's Democratic House in Order: Constitutional Amendments. *Asian Survey*, 19(10), pp.946-956.

even in nations usually praised for their pursuit of freedom. Although none of these cases will necessarily reflect the direction of the UK's legal system post-Covid-19, the record of such powers is inherently dangerous. Even after the state of emergency has formally ended it would do well to remain vigilant and ensure that the emergency provisions are not smuggled through parliament to become permanent laws. A belief in the exceptionalism of common law and the United Kingdom is complacent, particularly if certain surveillance powers are used infrequently as to escape attention. The way in which the measures of the UK government are currently used are not of sole concern. It is that they can be used in future that is even more threatening. A fluid, elastic legal system that allows powers to be stretched without checks and balances is very dangerous.²⁴⁹ It is not necessary to analyse the intention of governments to abuse power, only to look at the legal system, which allows government to abuse powers whilst hiding behind the veil of legality. This Covid-19 response, as evidenced by the rampant police abuses²⁵⁰, represents a watershed moment in British history.

249 Nemeth, M., 2020. 'Government Overreach in the Age of COVID-19' Von Mises Institute. Available At: <https://mises.org/wire/government-overreach-age-covid-19>

250 See "Further Miscellaneous Illegal Measures"

Reduced Access to Sunlight

Sunlight helps to protect individuals from viruses through two means, boosting vitamin D (and so overall health)²⁵¹ and destroying viruses through ultraviolet light. Forced confinement and the stigmatisation of outdoor pursuits prevents some individuals from producing sufficient amounts of vitamin D through sunlight exposure, thus weakening immune systems, especially in the Northern UK climate. This is likely to disproportionately impact three groups; the poor, the elderly and those with dark skin. Those on low incomes are most likely to live in housing without outdoor space, while individuals with dark skin (through increased melanin),²⁵² are susceptible to vitamin D deficiencies given climactic incompatibility. Finally, elderly individuals have particular difficulty.²⁵³

	Skin Pigmentation					
	Lightest					Darkest
Approx. Recommended Minutes in Sun ²⁵⁴ Per day, March-May, Non-noon (10-11am or 3-5pm)	30	60	90	120	150	180

The second means by which sunlight benefits health is through damage to the RNA structure of many viruses, including Covid-19.²⁵⁵ Whilst this does not necessarily need be outside, viruses are generally exposed to a greater proportion of ultraviolet light whilst outdoors. As such, confinement within households, which include apartments in large buildings, may contribute to an increased quantity of the virus circulating through moisture droplets or dust particles, increasing infection.

In sum, there are two medical reasons regarding sunlight, which suggest pastimes may be preferable to in-household forced confinement. Given that these have not been modelled, there is a possibility that measures may contribute to cause more harm than any benefit, although the scale of such harm remains unknown.

251 Holick, M.F., 2004. Sunlight and vitamin D for bone health and prevention of autoimmune diseases, cancers, and cardiovascular disease. *The American journal of clinical nutrition*, 80(6), pp.1678S-1688S.

252 Khalid, A.T., Moore, C.G., Hall, C., Olabopo, F., Rozario, N.L., Holick, M.F., Greenspan, S.L. and Rajakumar, K., 2017. Utility of sun-reactive skin typing and melanin index for discerning vitamin D deficiency. *Pediatric research*, 82(3), pp.444-451.

253 Lips, P., 2001. Vitamin D deficiency and secondary hyperparathyroidism in the elderly: consequences for bone loss and fractures and therapeutic implications. *Endocrine reviews*, 22(4), pp.477-501.

254 Von Helden, R., 2020. 'Independent Vitamin D Guide' Vitamin Delta. Available At: <http://www.vitamindelta.de/dosierung/sonnendauer.html>

255 Eren, N.Y.E., Kalayci, Z., Saribek, F. and Oz, C., Relationship between ultraviolet, hot and humidity with Covid-19 outbreak.

Prevention of Access to Qualified Medical Professionals

The UK government has relied heavily on slogans and imagery which focus upon supporting the state owned and run 'National Health Service', however, there is a chasmic disconnect between the rhetoric and what is actually delivered. Huge levels of bureaucracy and negligent management stemming from a managerial class have created an institutionalised anti-opportunity mentality which has prevented many doctors, nurses and other staff from feeling it is safe to return²⁵⁶. Such conditions in the UK are not new, nor are they unique to this government. However, government must take responsibility for the power it holds and use it to place the right incentives for managers and quangos, carrot and stick. When government has the final say, it must take accountability. If it doesn't act then lives will continue to be lost.

For those who wish to volunteer their valuable skills in a time of national crisis, barriers are placed at every single step of their way. Below is an excerpt of an account of one such doctor detailing just the first few weeks of him furiously attempting to volunteer his skills to save lives:

An Account of a Qualified Doctor attempting to Volunteer in the NHS during Covid-19

"Nanny, Insanity and the NHS: A Slow Suffocation

That title sounds like the name of a hospital music band, doesn't it? If only! Sadly, it captures the state of affairs in the running of our NHS and in turn the NHS exemplifies the typically inefficient, bureaucratic culture pervading our public institutions today. In hidden ways, this inhibits freedom. The following true story illustrates this perfectly but first a little background information.

Since 1858, to practice medicine in the UK, a doctor needed to have a medical qualification and some experience to be registered. That's two layers of safety checks. In 2009, a third layer of safety was added; a doctor has to be licenced as well as registered as well as qualified.

256 Weaver, M., (04/03) 2020. 'Majority of retired NHS staff don't want to return to tackle Covid-19 crisis' The Guardian. Available At: <https://www.theguardian.com/world/2020/mar/04/majority-of-retired-nhs-staff-dont-want-to-return-to-tackle-covid-19-crisis>

So, here's the opening scene; coronavirus is raging, the NHS is on its knees and the government has urgently called for retired doctors to return to service. You'd have thought getting these medical reinforcements to re-enter the NHS would be facilitated at this time of dire need. How hard could they make it for a returning volunteer medic? Well, think again. I am one of those retired doctors seeking to help out. Having stopped practice, I was qualified and registered but not licenced. Here's my story. I didn't care what task they ask me to do. I just wanted to be helpful.

Attempt 1:

16th March - I first thought to step up as a volunteer on 16th March 2020. That day, I casually offered my time to a local GP who felt he was OK without help. A dead end.

Attempt 2:

20th March - Three days later, knowing that I am unlicenced, and on the advice of other practicing doctors, I thought to help the NHS111 health advice call centre. I called them and waited 25 minutes. No answer. So I pulled up the NHS111 website looking for a page or phone number for volunteers to register. Nothing! I thought I must be missing something, so I scoured the website. Still nothing, but I stumbled upon a standard page for NHS111 careers, which linked to the NHS jobs website. Now, I wasn't looking for a career with them but realised the advertised job descriptions might have a contact who could point me in the right direction for volunteering. From these job descriptions, I learned that NHS111 call centres are not operated by the NHS but are outsourced. The contact on these job descriptions were from private call centre providers. There were two providers. On Friday 20th March I called both. Call centre A was on voicemail and call centre B's receptionist took my number for a call back. I got no call back. A dead-end.

Attempt 3:

23rd March - On day 7 of my volunteer effort, I re-attempted to call one of the private call centre providers and finally got through to a junior administrator who also didn't have an established channel for volunteers but he thought to give me the private mobile number of their Director of Quality, who I then called. She listened to my frustrated efforts and she felt that I might be more useful to the NHS front-line than in NHS111. She gave me another number to call the local county Medical Director. I called, left a voicemail and then got a call back. He was very enthusiastic and

clearly hungry for medical back up and requested me to send him my CV, to discuss with colleagues. I emailed that to him and waited.

Attempt 3 ended:

1st April - A week later after discussing with colleagues, he emailed to say he could not find a role for me due to lack of qualification. He suggested I might try volunteering for NHS111, which I had already pursued. How ironic! A dead-end.

Attempt 4:

23rd March - By this time I discovered that the website of the doctor's regulator (the GMC) had uploaded instructions for returning retired doctors. Just one little catch. They had set a cut off – it was only for doctors who left within the last 3 years and I had left much earlier. Not to be deterred, I called the GMC to see if there was a way around this artificial cut off and explained my story thus far to a very understanding advisor. I quickly realised that she shared my frustration with the bureaucracy in this emergency. In that moment a mini-miracle occurred. A sort of instant unwritten pact developed between she and I against bureaucrats, and she gave me the best advice. She told me to ignore the 3 year cut off and apply anyway; the IT system had no checks on that. So I did. That was a sweet moment, momentarily getting past the bureaucracy. I wish I could remember her name to call and share our mini-victory. That day, I was delighted to receive an email thanking me for stepping up and instructing me to now wait for further instruction.

26/27th March - Four days later this was followed up with a call from Health Education England to verify my ID and clarify my area of medical knowledge as well as an email containing a mind-boggling array of forms to fill; all of them geared towards avoiding risks:

- The risk of a fake person*
- The risk of illegal immigrant workers*
- The risk of criminal or barred workers*
- The risk of bogus doctors*
- The risk of the recruit giving childhood illnesses like measles to a patient*
- The risk of the new recruit themselves suffering ill-health or injury in the job*
- The risk of litigation*

- *The risk of any form of discrimination*
- *The risk of compliance for the tax man*

Are your eyes glazing over in disbelief yet? Let's just pause and step back. Hundreds of people including NHS staff are dying daily from a rampant virus and the NHS is dying (literally) for manpower, while the economy is strangled. Yet, the recruitment bureaucracy, in its wisdom is sticking to all the standard pre-employment safety checks, which were set up in happy days to protect vulnerable people from rogues. Now, I ask you - Really? Do we really want urgently needed volunteers to be required to fill forms about health and safety in this moment? Now? Is that how risk averse our excessively bureaucratic safety systems have become? Millions are at risk of dying including medical staff without protective equipment and we waste time worrying that the medical volunteer might suffer a workplace injury or give someone measles?

In the meantime, many nurses in the front line, without adequate protective equipment are being threatened with disciplinary action for wearing masks they purchased at the hardware store, which fail to conform with bureaucratic standards. Some of them have resigned. Such levels of bureaucracy are nothing less than an obscene and abject failure to strike the right risk/reward balance. It is outrageous!

This is the healthcare equivalent of that great financial proverb: 'Don't be penny wise and pound foolish'. In healthcare, we might say: 'Don't be sniffle wise and snuff-it foolish.'

What happened to the common sense that would swiftly loosen that risk/reward balance for speed? Alas, common sense started being slain by nanny state about 20 years ago. It is dearly missed, at least by me. Let's bring back common sense.

Nevertheless, I spent hours over days to complete, scan and send back the reams of paperwork; and then waited for the recruitment staff to take time to verify it all, whilst they work from home without full access to their workplace computer systems.

Attempt 5:

30 March - Now during this time-frame, I got concerned that the 3 year cut off factor might get picked up and exclude me. So I made sure to keep pursuing other avenues because I really wanted to help out with this Covid-19 crisis. A semi-retired doctor friend of mine was also seeking to volunteer and told me he just spoke directly to the medical director of his local hospital. Deciding to try that angle, I called several hospitals in London, expressing my willingness to volunteer for that urgent government call but none of the hospital receptionists had the faintest clue to whom my enquiry should be referred. One of them did put me through to a junior doctor who took my number to discuss with senior colleagues. I was never called back. A dead-end.

Attempt 6:

31st March - Fed up and bemused with all these dead-ends, I was wondering if my offers to step up are being spurned because perhaps the NHS strain is being overblown. A no-nonsense spirit took hold of me and I resolved to drive down to the nearest major hospital to see how pressured they are and find the Medical Director for a chat. As luck would have it she was in her office and left me under no illusion how desperate they are for doctors, especially juniors. I communicated my willingness to take up any role however mundane and she, unperturbed by my years out of medicine, could detect a valuable team member. She was unable to hide her hope for my offer to transform into manpower on the shop floor, as she gave me her preferred recruiting agent's contact details and alerted him to hear from me.

1st April - By this time, my licence to practice had been renewed. I followed up with that recruiting agent, whose team emailed me a mind-boggling array of forms to fill; mostly the same forms, all over again. I was required to print, fill, scan and send back the following along with digging deep for copies of countless certificates:

- Degree certificate*
- Registered doctor certificate*
- Licence to practice number*
- Vaccinations from childhood and previous NHS work*
- DBS Criminal background checks*
- Occupational health declarations*
- Curriculum Vitae*

- *Three medical references*
- *HMRC form*
- *Proof of address x2*
- *Proof of ID x2*
- *Face-time identification or equivalent*
- *Equal opportunities form*
- *Diversity statement.*

I duly committed more hours and days to complete and send these too.

And then waited....and waited. You get the idea. Each trust or its agency or outsourced private provider is required to repeat this process with their own forms in their own system.

Attempt 7:

2nd April - By now, my aforementioned semi-retired friend who simply presented himself to a hospital had got recruited with the benefit of being already licenced. Inspired by his experience, I again decided to present myself to another local hospital. This time reception was closed but I managed to speak with a ward matron who, again, confirmed the dire staffing situation and provided me with that trust's contact centre for recruitment. Long story short, nobody knew how to channel the enquiry. I left a message for the most appropriate person to call me back but heard nothing. A dead-end.

Attempt 8: full circle

7th April - By now the London death toll was getting darker, whilst we all watched medical staff pleading on news bulletins. Having heard nothing for a week, I decided to start again with NHS111 and again contacted those call centre providers. I got through and was transferred from one agent to another till finally someone who knew how to handle a volunteer. She emailed me to request a CV to forward to a medical director, which I sent. Just as I was expecting another volley of forms...

Attempt 4 progress

9th April - ...I received an email from Health Education England confirming clearance and enrolment in a return to work training programme for retired doctors. This was twenty-four days

since my first attempt to offer help and it will still be several days before I am making myself useful, but we have progress.

In summary, since I first reached out to three NHS trusts and several NHS111 services as well as a GP call service, bureaucracy has impeded and scuppered six out of my eight attempts to volunteer. The first successful attempt has taken a month to process. I am shocked. The inefficiency is stark. I have no doubt there are individuals who have worked their backs off against the odds and hats off to them. It is the bureaucratic structure and systemic risk aversion that is under the spotlight here. It is all symptomatic of nanny state; an approach to society, which has sought to minimise risk at all costs and with that has come an utter loss of how to achieve a healthy and fruitful risk/reward balance.

'Nanny state' is a term that became popular in British lexicon some decades ago when many aspects of life were being increasingly regulated in the name of protecting vulnerable members of society against fraudsters and cheats and negligence and health and safety and, also, against the stupidity towards themselves of the un-thinking citizen. Once upon a time, I was in favour of such state-led compassion but the state didn't know when to stop and over-reached. As a result, I think we have become excessively bureaucratic and common sense has evaporated. We now have public institutions that work against anyone taking any risk, even if that person is not vulnerable and desires to take responsibility for themselves.

What a contrast with that ancient dictum from Roman law for the marketplace "Caveat emptor", (Buyer beware). This dictum is underpinned by the basic idea that one is to take responsibility for one's choices and actions, especially if we wish to enjoy greater freedoms.

Right now, an unbridled, runaway risk aversion is a second great enemy threatening the UK after Covid-19. Who will be the ones to rebuild the economy post-Covid? It will be those who take risk to start new businesses to get the ball rolling again. Therefore, a blanket societal risk aversion of the sort which pervades our public institutions cannot be allowed to dominate willy-nilly. You cannot have freedom without responsibility.

- Dr Parag Shah 10th of April 2020²⁵⁷

Whilst the full account cannot be detailed here due to its sheer size, Dr Shah will be making the full account available in due time. It took a number of weeks further before he was allowed to finally assist, and this was not without many further obstacles. What is clear from just this snippet is the sheer ineptitude of many managerial staff and by default, their ministerial superiors of multiple governments, who have allowed a risk-averse anti-patient culture to fester.

Whilst the UK government fails to act, people will continue to suffer. It must take this opportunity to liberalise our healthcare system by enshrining accountability and responsibility for staff, allowing hospital managers to choose who they hire and to be rewarded or held accountable on that basis. Wrong incentives lead to wrong outcomes.

257 Dr Shah was kind enough to record his experience at the request of the team and hopes to use his record to drastically improve healthcare in the UK in future.

Prevention of Access to Medicines

In the same way that risk aversion can lead to harm through placing unnecessary barriers during a recruitment process, it can also hamper access to necessary medicines and so cost lives. Indeed, trying too hard to be safe can be harmful in itself. Risk aversion is opportunity aversion.

Unfortunately this has been the attitude that the UK government has taken with regards to medicine access, preventing medicines with plentiful anecdotal evidence of efficacy from being used, despite the wishes of those who are treated and thus denying an individual's right to choose their own treatment. This is despite the fact that doing so would quite probably result in an overall saving of both lives and money. Whilst these are measures that have been in place for some time and were not introduced by the current government, they are measures which are becoming rapidly outdated and which the current government has not taken sufficient steps to remove. Whilst front-line staff valiantly battle the disease, management and quangos continually fail to deliver. The government must act immediately to remedy or be ultimately held accountable for actions of its subordinate agencies and staff.

The passage of the 'Right to Try' legislation²⁵⁸ in the United States shines the way for the future of the medical industry. Similarly, the decentralisation in Germany,²⁵⁹ where any doctor can conduct a Covid-19 test, is likely to have contributed significantly to the very low death rate and high rate of testing. Such systems rely on individual choice of patients and doctors, trusting in their front-line, and prioritising on-the-ground decisions far more than managerial staff. The UK medical system doesn't reflect this flexibility or choice. The UK, in stark contrast, has one of the most heavily centralised healthcare systems in the world, reflective of a systematic mindset of risk-aversion.

Risk assessment has its place. Dangers must be foreseen and accounted for where possible.

However, outright risk aversion goes too far. It prioritises precious time to be spent doing checks to ensure the type of volunteer who willingly steps up to work in the coronavirus atmosphere, is not dodgy (for example, by falsifying their qualifications). Of course, that risk exists, but it is hardly a

258 U.S. Food and Drug Administration, 2020. 'Right to Try' FDA. Available At: <https://www.fda.gov/patients/learn-about-expanded-access-and-other-treatment-options/right-try>

259 Lesh, A., (02/04) 2020. 'TESTING TIMES: THE URGENT NEED TO DECENTRALISE COVID-19 DIAGNOSTIC TESTING IN THE UNITED KINGDOM' The Adam Smith Institute. Available At: <https://www.adamsmith.org/research/testing-times>

large risk, nor likely to be widespread. This risk pales into insignificance against the risk of coronavirus deaths from not having the hundreds of staff who may be held up by a day or two in assisting. Meanwhile, risk-embracing individuals would rather minimise checks to get volunteers into super-fast productive action in the treacherous Covid-19 battlefield. The lack of personal protective equipment for staff adds a layer of risk which dwarfs the volunteer recruitment risks. All this amounts to a topsy-turvy attitude to risk in which an inordinate amount of time and effort goes into mitigating small health risks while death from much larger risks is all around.

Two well-known medicines are reported to be effective against Covid-19 around the world, Hydroxychloroquine combined with Azithromycin and Zinc. The first is a 30 year old anti-malaria drug, used safely by billions. It's also cheap because its patent has expired. The second is a well known powerful anti-microbial. Zinc is a standard mineral all humans need just like vitamins. Whilst this paper is not here to prove or state categorically that this treatment works, it does state that treatments such as these should be available to doctors to consider offering. If something is, on balance, likely to save lives in a crisis, then red tape shouldn't get in the way.

This combination has, however, not yet passed the gold standard test against Covid-19 by a human randomised controlled drug trial, but those trials take time, months of time. Yet at present, the UK is in the middle of a pandemic, with thousands reportedly dying. In such circumstances it would be prudent to empathise with those whose relatives are dying in hospital.

Scientists in many countries agree these drugs have a possibility of preventing deaths from the disease.²⁶⁰ The drug combination has been given the go-ahead in South Korea,²⁶¹ China,²⁶² USA²⁶³ and Belgium²⁶⁴ as well as other countries. It is reported that doctors in Malaysia and India have

260 Betuel, E., (07/04) 2020. 'CHLOROQUINE: THE STRANGE STORY BEHIND THE "CURE" FOR COVID-19 THAT'S GOING VIRAL' Inverse. Available At: <https://www.inverse.com/mind-body/chloroquine>

261 Shim, E., (12/03) 2020. 'South Korea experts recommend anti-HIV, anti-malaria drugs for COVID-19' UPI. Available At: https://www.upi.com/Top_News/World-News/2020/03/12/South-Korea-experts-recommend-anti-HIV-anti-malaria-drugs-for-COVID-19/6961584012321/

262 Gao, J., Tian, Z. and Yang, X., 2020. Breakthrough: Chloroquine phosphate has shown apparent efficacy in treatment of COVID-19 associated pneumonia in clinical studies. Bioscience trends.

263 Economic Times, (30/03) 2020. 'Malaria medicine 'Hydroxychloroquine' being administered to 1,100 COVID19 patients in New York: US President Donald Trump' Economic Times. Available At: https://m.economicstimes.com/news/international/world-news/malaria-medicine-hydroxychloroquine-being-administered-to-1100-covid19-patients-in-ny-trump/amp_articles/74885135.cms

264 Van Ierssal, S. et al, 2020. 'INTERIM CLINICAL GUIDANCE FOR ADULTS WITH SUSPECTED OR CONFIRMED COVID-19 IN BELGIUM' Belgian Coronavirus Taskforce. Available At: https://epidemiology.wiv-isp.be/ID/Documents/Covid19/COVID-19_InterimGuidelines_Treatment_ENG.pdf

been using it with success for quite a while and doctors in France and Italy have resorted to it with very positive results. It is not known perfectly how it works but evidence shows that it seems to be working.

It appears to help prevent that sudden unexpected deterioration in a patient whose breathing difficulty descends into a pneumonia. That pneumonia is often due to other bacteria, which take advantage of the situation after Covid-19 has exhausted a person's immune system. The sequence is:

Example of the Stages of a Typical Covid-19 Pneumonia	
Stage 1	Covid-19 virus weakens immune defences.
Stage 2	A bacterium might cause a type of pneumonia.
Stage 3	Extreme difficulty breathing can lead to Acute Respiratory Distress Syndrome which will need ventilator support.

As understood from preliminary reports, Hydroxychloroquine and Azithromycin may be beneficial if given at the moment it looks like stage 1 is about to slip into stage 2 - an indicator of an aggressive viral infection.

Yet, in the UK, although the government has started bulk buying this drug,²⁶⁵ the combination is still awaiting approval. Officials say randomised controlled trials to test its efficacy and safety are not yet done. Thus ministers refuse to give the green light or supplies for doctors to prescribe treatment when people would willingly take the chance. This once again embodies a deadly aversion to risk.

From what has been reported, it seems that it is the combined synergistic effect of Hydroxychloroquine and Azithromycin that has merit. Whether it's a silver bullet or not, it appears to tip the balance in favour of the immune system against the Covid-19 illness. The questions must be asked:

265 Payne, A., (20/05) 2020. 'The UK is bulk-buying millions of hydroxychloroquine tablets in case Trump is right that it works against the coronavirus' Business Insider. Available At: <https://www.msn.com/en-us/health/medical/the-uk-is-bulk-buying-millions-of-hydroxychloroquine-tablets-in-case-trump-is-right-that-it-works-against-the-coronavirus/ar-BB14mqy3>

Should we wait for studies to prove its efficacy beyond a large margin and ignore the deluge of anecdotal evidence?

Risk aversion culture perceives anything less than a zero risk approach as gung-ho. It disregards the risk reward ratio. Risk aversion culture will disregard the many positive experiences with this drug combination, being tried in places that are desperate around the world. These places deem the risk as worth it, because with risks comes reward.

In perilous times of emergency the data-led approach is not automatically the best. It takes luxury of time seeking to minimise risk by slowly collating trial results. That time is not available. That is not to say that data should be dismissed. Data must be gathered in the background and crunched and analysed when we find time. However, it can catch up and be informative down the line. Making decisions to take advantage of opportunities with express and informed consent of patients, may not merely save lives now, but save lives in the future with the data it generates.

Nearly every operation carries some risk and when the situation changes, decision-making also needs to change. Although they may not have the gold standard test behind them, it is wrong to suggest the doctors prescribing this drug combination are flying blind²⁶⁶. They simply have an instinctively balanced approach to risk, reward and downside. Unless the UK government recognises the rewards of taking measured risks, with patient consent, during this crisis, many more thousands of people may die than otherwise.

266 Park, A., (06/04) 2020. 'President Trump Called Hydroxychloroquine a 'Game Changer,' But Experts Warn Against Self-Medicating With the Drug. Here's What You Need to Know' Time. Available At: <https://time.com/5808894/hydroxychloroquine-coronavirus/>

Facilitation of Cross-Border Infection

Throughout the crisis the UK government has allowed the free flow of individuals from major epicentres, without any measure of control. Indeed, the only people who faced quarantine upon their return were a small percentage of British people - not foreign nationals. Only in Late May did the UK announce measures, still yet to be introduced, enacting some form of quarantine.²⁶⁷

UK Border Time-frame		
Date	Event	UK Border Status
Jan 30th	China Confines Hubei. Health Emergency Declared.	Open
Jan 31st	First UK cases recorded	Open
Jan-Feb	Japan, Taiwan, S. Korea, Russia and others close borders	Open
Feb 21st	Italy becomes major epicentre	Open
Feb 22nd	Iran becomes major epicentre	Open
March 23rd	UK forcibly confines its entire population	Open
April 12th	The UK records its 10,000 th death 'with' Covid-19	Open
May 23rd	The UK reaches 2 months under forced confinement	Open

Open border policy renders it impossible for the UK to ever eradicate Covid-19, as reinfection will perennially occur. Indeed, as the UK enters the Summer months, it will be at risk of reinfection from southern hemisphere climates where the virus is likely to spread more strongly due to a lesser quantity of ultraviolet rays.²⁶⁸ Whilst the measures the UK government has announced may help somewhat, they remain crucially flawed and unnecessarily delayed (until June 8th). The measures fail to account for people residing in the same household who are not quarantined, meaning that infection can be spread by other householders entering and leaving a property. Further, they do not account for spread during transport. Finally, they do not account for illegal migration which the UK government is also facilitating.²⁶⁹ Unless all of these matters are addressed, the efficacy of all other measures remains negligible.

267 HM Government. 2020. 'Entering the UK' HM Government. Available At: <https://www.gov.uk/uk-border-control>

268 Karapiperis, C., Kouklis, P., Papastratos, S., Chasapi, A. and Ouzounis, C., 2020. Assessment for the seasonality of Covid-19 should focus on ultraviolet radiation and not 'warmer days'.

269 Zinulka, K. (26/05) 2020. 'Watch: Farage Again Catches French Ships Escorting Illegal Migrant Boats Into British Waters' Breitbart. Available At: <https://www.breitbart.com/europe/2020/05/26/farage-films-more-migrant-boats-being-escorted-british-waters-french/>

Use of Flawed Data, Flawed Models and Inaccurate Recording

From the beginning of the emergence of coronavirus, the UK government has worked upon the basis of flawed data and models and have contributed to further spread of inaccurate information. This had led to decisions which have not been fully informed and so to measures which, rather than help those in need, put them and others at increased risk through ill-informed measures.

Inaccuracy of Covid-19 Test Kits

The test kits being used in most hospitals to determine whether a patient has Covid-19 were not designed for that purpose. Their regulatory status is as follows:

“For research use only, not for use in diagnostic procedures. The test are also highly susceptible to being compromised by incorrect storage temperature, which is very specific, both before and after use.”²⁷⁰

The internationally used virus test kits can thus can render false positives and negatives.²⁷¹ Test kits are also not standardised, and fake kits are known to have entered circulation. The American Food and Drug Administration has used hesitant language concerning kits.²⁷² Meanwhile a preliminary study by researchers at Stanford University showed that 20 to 25% of Covid-19 positive patients tested additionally positive for other influenza or cold viruses.²⁷³ This could signify that many Covid-19 cases could indeed be false-positives from other coronaviruses.

As such the incidence rate for the disease is very much in doubt, leading to inaccurate estimates of mortality.

270 Creative Diagnostics, 2020. 'SARS-CoV-2 Coronavirus Multiplex RT-qPCR Kit' Creative Diagnostics. Available At: <https://www.creative-diagnostics.com/sars-cov-2-coronavirus-multiplex-rt-qpcr-kit-277854-457.htm>

271 Kolona Research, 2020. '10 Proofs that COVID-19 Testing Is Not Reliable.' Available At: https://kolona-research.org/10_proofs_that_COVID_19_test_kits_are_unreliable.pdf

272 ^

273 Shah, N., 2020. Higher co-infection rates in COVID19 Available At: <https://medium.com/@nigam/higher-co-infection-rates-in-covid19-b24965088333>

Rate of Spread Modelling

Whilst the number of tests has increased exponentially, the proportion of infections has remained stable and mortality has decreased, which speaks to a lower trajectory spread of the virus itself. The increase in test-positive persons is proportional to the increase in the number of tests, i.e. in percentage terms it remains roughly the same. This may indicate that the increase in the number of cases is mainly due to an increase in the number of tests and that exponential growth rates are overstated.

The number of test-positives depends very much on the type and number of tests and should be considered as a ratio, in addition to the nominal figure.

Use of Falsified Data

The UK government continues to rely upon data from both the “World Health Organisation” and China, both of which have promoted falsified data and narratives. According to Dr Dena Grayson, expert in infectious diseases:

"The WHO waited much too long to declare a 'Global Health Emergency,' a designation that importantly would have alerted public health officials in countries neighbouring China to start preparing. Similarly, the WHO initially refused to declare a global pandemic, bizarrely claiming that they no longer used this designation, but then ultimately did so,"

"This also likely caused substantial delays in preparedness by other nations in advance of this deadly virus."²⁷⁴

Not only did the WHO fail for a number of weeks to announce what was, by medical definition, a worldwide pandemic,²⁷⁵ but its figures significantly rely on those of China, and continue to

²⁷⁴ McKay, H., (28/03) 2020. 'World Health Organization under the microscope: what went wrong with coronavirus?' Fox News. Available At: <https://www.foxnews.com/world/world-health-organization-coronavirus-what-went-wrong>

²⁷⁵ ^

inaccurately ignore, inflate and misreport the figures in Taiwan (The Republic of China)²⁷⁶²⁷⁷²⁷⁸, which they irresponsibly ignore as an independent sovereign state.

Meanwhile, China continues to promote “obviously false conspiracy”²⁷⁹ theories, has manipulated data²⁸⁰ and violently censors independent reporting which disproves its presented figures.²⁸¹ As such, the measures which China has taken are the least credible globally, with no scientific validity.

The UK basing its approach upon China therefore relies on the most unreliable and thus dangerous data in the world.

Inaccurate Recording Methods

The UK has adopted an anti-scientific measure of recording cause of deaths, so that all individuals who die with Covid-19, are listed as dying of Covid-19. This massively artificially inflates the death rate. Dr. John Lee wrote in The Spectator:

*"Statistically, we would expect about 51,000 to die in Britain this month. At the time of writing, 422 deaths are linked to Covid-19 — so 0.8 per cent of that expected total."*²⁸²

He went on to say:

"But there's another, potentially even more serious problem: the way that deaths are recorded. If someone dies of a respiratory infection in the UK, the specific cause of the infection is not usually

276 Martel, F., (23/04) 2020. 'Taiwan: World Health Organization 'Mostly Ignored' Coronavirus Warnings in December.' Breitbart. Available At: <https://www.breitbart.com/asia/2020/03/23/taiwan-world-health-organization-mostly-ignored-coronavirus-warnings-in-december/>

277 Baumann, B., (28/04) 2020. 'WHO's Senior Advisor Had an Astonishing Response When Asked About Taiwan' Townhall. Available At: <https://townhall.com/tipsheet/bethbaumann/2020/03/28/watch-whos-senior-advisor-hangs-up-on-a-reporter-for-asking-about-taiwan-n2565899>

278 Hong Kong Free Press, (12/04) 2020. Blocking Taiwan from helping the world to tackle Covid-19 is a travesty for the WHO. Available At: <https://hongkongfp.com/2020/04/12/blocking-taiwan-from-helping-the-world-tackle-covid-19-is-a-travesty-for-the-who/>

279 Historian, author and broadcaster Niall Ferguson posed a series of questions on Twitter to Xi Jinping, Dictator of China, fourth of which was: "What possessed your Foreign Ministry spokesman to start peddling an obviously false conspiracy theory on social media and why has he not been fired?" Ferguson, N., (07/04) 2020. Twitter. Available At: <https://twitter.com/nfergus/status/1247498213709320195>

280 Krawczyk, K., (06/03) 2020. 'China's coronavirus recovery is 'all fake,' whistleblowers and residents claim' This Week. Available At: <https://theweek.com/speedreads/900488/chinas-coronavirus-recovery-all-fake-whistleblowers-residents-claim>

281 Koettl, C. et al., (23/02) 2020. 'China Is Censoring Coronavirus Stories. These Citizens Are Fighting Back.' New York Times. Available At: <https://www.nytimes.com/video/world/asia/100000006970549/coronavirus-chinese-citizens.html>

282 Lee, J. (28/03) 2020. 'How deadly is the coronavirus? It's still far from clear' The Spectator. Available At: [spectator.co.uk/article/The-evidence-on-Covid-19-is-not-as-clear-as-we-think](https://www.spectator.co.uk/article/The-evidence-on-Covid-19-is-not-as-clear-as-we-think)

recorded, unless the illness is a rare 'notifiable disease'. So the vast majority of respiratory deaths in the UK are recorded as bronchopneumonia, pneumonia, old age or a similar designation. We don't really test for flu, or other seasonal infections. If the patient has, say, cancer, motor neurone disease or another serious disease, this will be recorded as the cause of death, even if the final illness was a respiratory infection. This means UK certifications normally under-record deaths due to respiratory infections.

Since the emergence of Covid-19 the list of notifiable diseases has been updated. This list — as well as containing smallpox (which has been extinct for many years) and conditions such as anthrax, brucellosis, plague and rabies (which most UK doctors will never see in their entire careers) — has now been amended to include Covid-19, but not Flu. This means every positive test for Covid-19 must be notified, in a way that it just would not be for flu or most other infections.

In the current climate, anyone with a positive test for Covid-19 will certainly be known to clinical staff looking after them: if any of these patients dies, staff will have to record the Covid-19 designation on the death certificate — contrary to usual practice for most infections of this kind. There is a large difference between Covid-19 causing death, and Covid-19 being found in someone who died of other causes. Making Covid-19 notifiable might give the appearance of it causing increasing numbers of deaths, whether this is true or not. It might appear far more of a killer than flu, simply because of the way deaths are recorded."²⁸³

In addition to this, the number of asymptomatic people largely going untested, will greatly change the mortality rate of the disease. Italian immunology professor Sergio Romagnani from the University of Florence comes to the conclusion in a study of 3000 people that 50 to 75% of the test-positive people of all ages remain completely symptom-free – significantly more than previously assumed.²⁸⁴ Despite this, governments, including that of the UK, fail to conduct random test samples of the public to determine the actual prevalence of the spread of the disease within their nations.

283 ^

284 Repubblica. (16/03) 2020. 'Coronavirus: "Il 50-75% dei casi a Vo' sono asintomatici. Una formidabile fonte di contagio"' Repubblica. Available At: https://www.repubblica.it/salute/medicina-e-ricerca/2020/03/16/news/coronavirus_studio_il_50-75_dei_casi_a_vo_sono_asintomatici_e_molto_contagiosi-251474302/

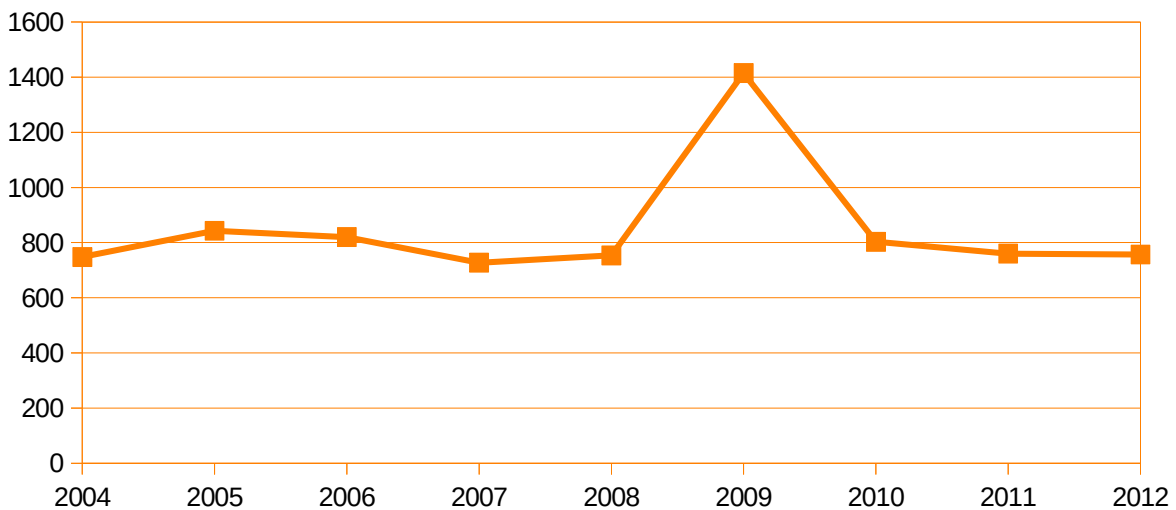
Reliance Upon Legacy Media Hysteria

Since this epidemic was first picked up on by the British legacy media in early February 2020, there has been a hyper-focus on the issue. Each and every death globally is recorded every day and meticulously advertised by media corporations, falsely heightening the sense of fear and severity of the disease in the public and political arena.

It is crucial that this is put in context. If, for example, the British deaths from pneumonia in 2012 were individually announced, daily, the British public would likely be shocked and demanding action from the government. In 2012, of the 28,952 deaths from pneumonia: 58 were among those aged 0–14 years of age, 1,374 were among those aged 15–64, and 27,520 were among those aged 65 and above.²⁸⁵ During winter it would have been easily possible for an announcement of the death of one more younger person from the disease.

Yearly Pneumonia Deaths in UK Youths (Ages 0-20) 2004-2012

Respiratory Health of the Nation Project Data (University College London et al)



Yearly Pneumonia Deaths in Youths (Ages 0-20) 2004-2012.²⁸⁶

The sustained hyperbolisation by the media, led by the state propaganda broadcaster, the ‘BBC’ (described by popular economist Dominic Frisby as “riddled with bias”²⁸⁷), generated a large outcry

²⁸⁵ British Lung Foundation, 2020. ‘Statistics: Pneumonia.’ British Lung Foundation. Available At: <https://statistics.blf.org.uk/pneumonia>

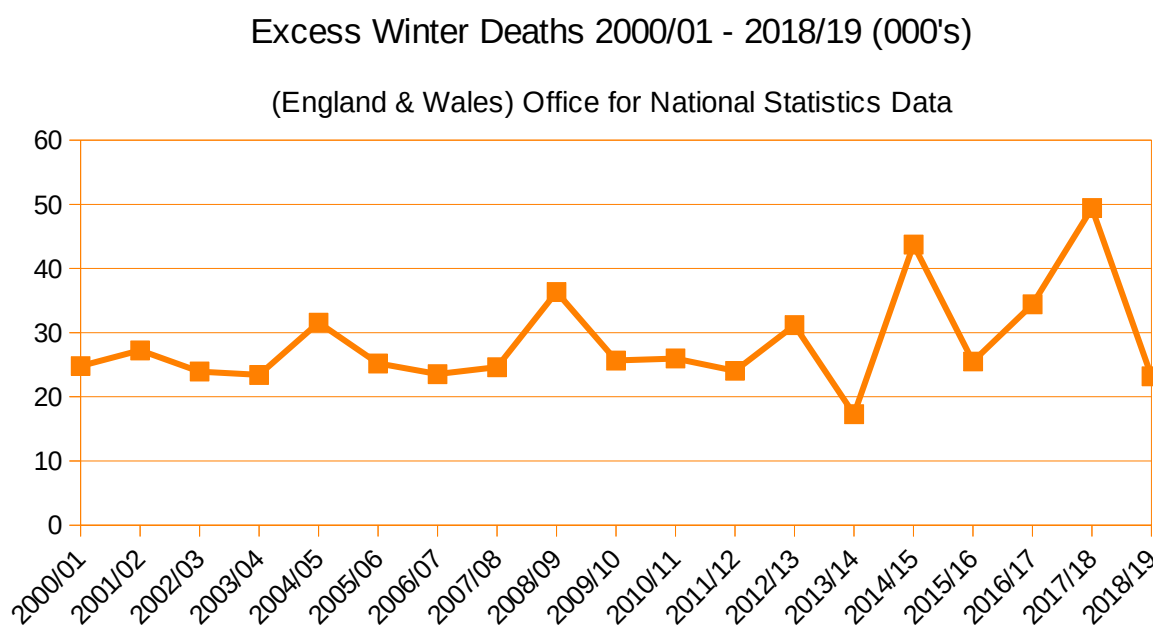
²⁸⁶ Office for national Statistics Data.

²⁸⁷ Frisby, D., 2020. ‘‘Maybe’ (Covid 19 Coronavirus edition)’ Youtube. Available At: https://www.youtube.com/watch?v=_ds9u0O6X8o

by the minority of people reliant on legacy media outlets for their information. This has thus led to disproven measures being put in place, rather than measures both proven and proportionate.

Complications from Normal/Regular Flu.

The Winter of 2018/2019 was an extremely weak flu season, in which there were only roughly half the 2017/2018 flu-related admissions to intensive care units in the UK²⁸⁸. Excess Winter deaths were at their lowest in five years. This spared thousands to tens of thousands of critically ill people who would probably have died and has likely inflated the number of deaths in 2019/20.



Excess Winter Deaths 2000/01 – 2018/19 (thousands).²⁸⁹

In addition to this, Dr Danuta Skowronski, an influenza expert from the University of British Columbia raised that the 2019/20 year flu shot for the Northern Hemisphere - including the US, UK and Canada - is likely to be a 'mismatch',²⁹⁰ which would further inflate Covid-19 death figures.

288 Campbell, D., (20/02) 2019. 'Britons urged to get flu vaccine as critical cases rise above 2,000' The Guardian. Available At: <https://www.theguardian.com/society/2019/feb/20/britons-urged-to-get-flu-vaccine-as-critical-cases-rise-above-2000>

289 Office for National Statistics Data.

290 Ruhhal, N., (30/09) 2020. 'Another flu shot fail? This season's vaccine for the US, UK and Canada is likely to be a 'mismatch' for the deadly virus, expert warns' Daily Mail. Available At: <https://www.dailymail.co.uk/health/article-7520845/This-years-flu-shot-likely-ineffective-UK-Canada-expert-warns.html>

Potentially Harmful Measures Enforced by the UK Government

The Suspension of Responsibilities to Vulnerable Groups

The Coronavirus Act also suspended many of the responsibilities which local authorities hold towards vulnerable people. Given that these have been offered by government as a facility to be relied upon, an immediate withdrawal of support, rather than a tapering, will leave vulnerable people without the time to arrange for viable alternatives.

Quadrupling of Time Limits for Select Warrants

One of the measures included within the Coronavirus act was the quadrupling of time limits for “emergency” warrants, thus reducing oversight of how the government operates and endangering members of the public to abuse. Silkie Carlo of Big Brother Watch stated:

“This is no time for parliamentarians to abdicate their vital function of scrutiny. These extraordinary powers risk permanently rebalancing the relationship between citizens and the state.”²⁹¹

Given the systematic corruption and poor character of the police forces of the UK, this is a likely occurrence. The government appears to justify this by stating that it will relieve pressure on the police force, however if the police force were not conducting illegal harassment and abuse of citizens²⁹², it would likely not be under such pressure. As such this is a problem of the government’s own making and should not be visited upon citizens.

291 Big Brother Watch, 2020. EMERGENCY CORONAVIRUS BILL “MOST DRACONIAN POWERS IN PEACE-TIME BRITAIN” Big Brother Watch. Available At: <https://bigbrotherwatch.org.uk/2020/03/emergency-coronavirus-bill-most-draconian-powers-in-peace-time-britain/>

292 See “Further Miscellaneous Illegal Measures” under “Illegal Measures Enforced by the UK Government”

Hope Beyond The Present: Recommendations to Keep People Healthy, Free and Safe

Our report has been so far mostly a negative enterprise of analysing the actions of the UK government. There have been some good measures our report unfortunately does not have time to cover, due to the size and speed of the enactment of the government's measures. It has been necessary, due to the severity of the medical, legal, economic and civil impacts to focus on the negatives of what is being carried out.

However, it is irresponsible to simply criticise without providing adequate alternatives, especially given the gravity of the findings of our report and their potential political ramifications. Disorder is not our goal. Hope Beyond the Present is a considered alternative to the present situation, drawing from both a wealth of critical knowledge and the experiences of the past months. It embodies our vision that health, safety and freedom are complimentary, not exclusive. Preserving civil liberties, ensuring public safety and complying legally with our rich constitutional history all work hand in hand to keep people safer, healthier, wealthier and free to take responsibility over their own lives. Not only can the UK lead the world in caring for its people, but it can emerge with a strong economy and vibrant political ecosphere.

We recommend the following provisions in our 12-point plan:

● Intelligent Isolation

Government threats are detrimental to the economy, the safety and the health of people. Intelligent voluntary isolation means only those from households which have an at-risk person should stay at home, thus enabling greater health overall (improved both mental and physical health through access to the outside and herd immunity), freedom of choice and economic resilience during the crisis.

In the unlikely case that a person is purposefully attempting to spread the disease, a measure which would constitute a form of assault (via poisoning) or attempted murder, it should be prosecuted as such without any additional legislation. Any legislation seemingly enforcing confinement should be immediately recognised as unlawful and repealed to prevent abuse.

● Protection for at-risk Households

At-risk households should be financially protected in this time (in compensation for their voluntary cooperation). Legal exemption should be made for any person from a household containing an at-risk person from attending work for the temporary future (four weeks). Further, given that households not at risk will be able to participate in economic activity, this would afford (at lower cost overall) the full (100%) compensation of their employer (until equalling average salary), including for the self-employed.

At first this would not be a verifiable measure and would have to rely, as it does at the moment, on trust. This should be replaced slowly with a low-threshold verification of at-risk status for those who desire continued payment and finally phased out. State employees not otherwise able to be utilised should be retained online to carry out verification from home.

- Right of Access to Medicines

People have a right to choose what they want to put in their bodies. A statutory entrenched law should immediately be passed enshrining a “Right to Try” for any medicine which they believe will help their condition, should this be legally signed for (with themselves being entitled to a copy) of a comprehension of the risks, in the presence of two doctors.

- Right of Access to Medical Practitioners

Just as people have a right to choose what they put in their bodies, this applies for whom they choose to treat their bodies. A similar statutory entrenched law should be passed immediately enshrining a “Right to Choose” between any medical practitioner or doctor whom they believe to be suitably qualified to treat their condition, should this be legally signed for (with themselves being entitled to a copy) of a comprehension of the risks, in the presence of two doctors.

- Respect of Legal Autonomy

Legal autonomy is a fundamental right which can only be rightfully removed in cases of incompetence beyond reasonable doubt. The clauses in the Coronavirus Act must immediately be recognised as unlawful and repealed for additional security to protect anybody who may be at risk of abuse.

Further to this point all clauses enabling indefinite detention of citizens due to mental capacity without review should also be immediately repealed and recognised as similarly unlawful.

● Clear Public Oversight

Oversights of government are needed more at time of crisis than at any other time.

Therefore they should be the last thing to be amended at a time like this. A reversal of any time limit to warrants and unchecked appointments to judicial commissioners should be immediately legislated for.

The Attorney General should make his legal advice on the measures the government have taken immediately available, free of charge. He should further issue an immediate response to the legal concerns raised.

● Secure Borders

Only secure borders can protect people in the UK from constant re-infection from epicentres of the Coronavirus pandemic. UK borders, in line with the actions of other countries, should be immediately closed from entry by anybody but UK citizens and those specifically approved by a UK Minister.

All citizens from epicentres and non-citizens (from any location) choosing to enter the country should be quarantined for 14 days as a condition of their entry, whilst all other citizens should be financially incentivised to do so voluntarily (unless having left the UK recently). Exceptions should be made for logistics operatives such as haulage drivers, though these groups should be monitored for disease on entry.

Those people being quarantined who live alone (or solely with those they entered the country with) should be required to quarantine at home, being directly bussed to their homes, with check-ups at random times, multiple times a day (as done successfully in other nations). Other individuals should be placed in designated quarantine centres.

- Accountability for Preventable Malpractice

If a government fails to prepare for an outbreak of deadly disease and makes mistakes which cost thousands of people their lives, they must be held criminally accountable for the way they have operated. Medical negligence is the result of poor planning and execution and must be treated as such to properly compensate those who unfairly suffer its harms.

Only those practitioners and staff who have no choice but to operate under substandard conditions should be immune from prosecution. Where there is the ability, standards must be maintained to keep people safe, lest families be denied justice.

- Safeguards for Vulnerable People

The state has issued rights to vulnerable groups that they have come to rely on. This is a contract which could only be phased out and cannot, with good conscience, be immediately abolished at a local level. The government should issue a recognition of responsibilities to vulnerable groups, now more than ever, and restore these rights of care by local authorities.

- Financial Accountability and Proportionality

Companies which fall into debt and branches of the government which have done the same must not be given the money of UK citizens. The entire global economy has entered super-recession and funding many businesses, which in the post-pandemic paradigm are set to fail, whilst receipts plummet, will eventuate in the wholesale state bankruptcy. Through *intelligent isolation*, most businesses will continue functioning normally without any subsidy, cutting costs and becoming more efficient, enabling the UK to emerge from the crisis as a world-leader, just as the USA emerged from the Second World War. Reparatory payments should be sought from nations which aided the spread of the disease through censorship.

- **Accurate Government Reporting**

One of the greatest barriers to the true understanding of the virus has been the way in which governments have failed to accurately record the numbers of cases, leading to a surplus of data, yet a glut of credible data. The UK Government should record causes of deaths accurately and carry out autopsies whilst it retains the capacity to do so, to determine the true number of deaths. Further the government should conduct voluntary test-samples on 10,000 citizens (proportionate to 10% of one single day's target), to understand the lethality of strains in the UK and the actual prevalence.

- **Parliamentary Review of all Emergency Legislation**

Emergency powers are inherently dangerous and frequently abused by governments to stifle dissent. Our government is no exception. The government should immediately legislate for a time-limit of the remainder of the coronavirus bill, to be renewed by parliament every month.

Our Definition of an At-Risk Person is the following:

A person with an underlying health condition which could cause significant harm through complications with the coronavirus or of an older age group. This should be treated as a guideline and not an absolute measure for those who voluntarily assert that they are not an at-risk individual.

For example: John is a physically and mentally healthy 58 year-old who regularly exercises, eats well, has a positive attitude, does not smoke and has no underlying health conditions and asserts that he would not like to be considered an at-risk person. He therefore should not be considered to be at-risk.

Action Going Forward

The Legal Case against the UK Government

The powers which the UK government seeks to enforce, with little to no scrutiny, represent the greatest increase in government power in British history. Action against the UK government for its enforcement of illegal, harmful and unnecessary measures is therefore an absolute imperative. The first measure of this must be the request for the legal advice of the Attorney General on the legality of these measures, with other items to follow, whether in the case of compliance or non-compliance.

Legal Challenge and Organisation

It is important to hold the government to account for *all* of its actions which have been illegal, not merely actions in place now, lest a precedent be falsely implied (as it should not, but could likely be nonetheless). For a case to have the best chance of success, a legal challenge should be brought by a union of multiple groups working together for the common interest, utilising the advice of a range of individuals and organisations. We advise that such a group be formed immediately.

We also recommend that those in government and members of police forces either carrying out these measures or issuing unlawful threats are reported to the relevant authorities, with documentary evidence.

We further highly recommend a convention of 25 hereditary peers (barons as under Section 61 of the Magna Carta²⁹³) to immediately petition the Queen to command cessation of illegal acts by her

293 Magna Carta, Section 61.

government and agencies within 40 days. We advise that attention be drawn to this specifically at the anniversary of Magna Carta on June 15th.

Fostering Responsible Civic Resistance

The illegal conduct by the UK government can only take root if citizens choose to obey unlawful orders. Whilst we do not advocate any action that would endanger people, we encourage responsible resistance by continuing with any actions that do not put other people at any meaningful risk. We advocate that any person charged with enforcing illegal measures cite the reasons provided here and conscientiously decline. We support the action of any independent trade unions who choose to decline further work until legal compliance is met by government.

As the UK progresses into Summer, the need to resist illegal confinement will become more urgent and it is suggested that the 15th of June be used as a rallying date.

Overseas Application

Given the shared root of common law in many anglospheric nations, such as Canada, Australia, New Zealand, the United States of America and many smaller Commonwealth nations, the legal case documented here against the UK government has equal validity in such jurisdictions, should the respective overseas governments act in the same fashion as has happened in the UK. It is common for cases relying upon principles established before the independence of former territories to be shared for consideration by anglospheric courts, despite their nominal differences.

The Moral Case against the UK Government

The moral case against the dangers imposed by the actions of the UK government is just as important as the legal case against them. Whilst we are hopeful that the government will realise that all humans are prone to error and accept our report as constructive criticism to be acted upon, we do not think this likely going forward.

Political Pressure

Political Pressure will need to be a key component of the effort to push back against some of the measures which may be legal but which cause injury or hazard to the public. It's vital that in this endeavour, all political parties and groups are given an opportunity to join together, regardless of any previous animosity, for the common good. Avenues include an open letter to the government calling for them to cease illegal and harmful activity, a joint petition of parliament to require consideration of a debate, individual petitions of MPs and safe protest.

Awareness and Increased Scrutiny

Through the public asking the questions raised here, of their representatives, we believe that the government will begin to reassess its position. It is our belief that the vast majority of the public do not understand the full implications of the government's action, but that that will soon change.

Further Research and Education

Constitutional Law

In the UK, we have a rich and deep constitutional history that is inadequately taught in schools, colleges or universities, leading to our nation being extremely unequipped for crises. We will continue to study and encourage others to similarly study these vital historical and legal facts.

Coronavirus Effects and Transmission

We will continue, and we encourage others, to monitor the spread of the coronavirus and study the nature of its effects in a realistic perspective, compared with other diseases and factoring in the quality of data (such as the misreporting of deaths or politicised misinformation).

Medical Mal-legislation and Misorganisation

What has been exposed by this crisis is a deadly plethora of mal-legislation of our healthcare industry, by people seeking to save lives, but in reality doing the opposite. Also brought to the fore has been the ineptitude or outright negligence of certain bodies, created to care for people and raise alarms, but in-fact hampering such efforts (as with the 'World Health' Organisation). In future we intend to take an in-depth look at the impacts of both such organisations (national and international) and legislation, including the selection of decision-makers who create and staff them.

Developing Expertise

We will continue to grow our expertise and encourage other similar groups to take on supporters in order to develop their ability to hold government to account in these pressing times.

Spreading the Message

We will continue to update our report and produce briefings on sections of it and new topics as they arise. We believe by providing both in depth reports and bite-size information we will reach a much wider audience that indirectly impacts upon policy-makers.

Building Networks

We believe that it's vital that critical voices share and network ideas to keep people safe. Freedom and Responsibility continues to be open to help and assistance by those with the skills to help develop and promote our reports further. More information can be found on our website.

Critical Voices

Whilst creating this report, our team has kept abreast of current events and the discussion growing in our media. From our observation there have been a number of generally concerned organisations and commentators, who we list* below should readers take further interest:

- Big Brother Watch
- Lord Sumption
- Peter Hitchens
- Amnesty UK
- Professor John Ioannides
- Dr John Lee
- Professor Rudi Anschober
- Spiked Online
- Liberty UK
- Trevor Kavanaugh
- Chris Daw QC
- Paul Embery
- The London Economic
- Dr John Oxford
- Silkie Carlo
- Dr. Jay Bhattacharya
- Toby Young
- Adam Wagner
- Professor Sukrit Baktri
- Dr Tad Tietze
- Tom Harwood
- Frank Furedi
- The Spectator
- Mind
- Nigel Pope QC
- Edward Snowden
- Steve Toppie
- Andrew Doyle
- Brendan O'Neill
- Breitbart News
- NSU Network
- Dr Frank Montgomery
- Jim Duffy
- New Culture Forum
- James Delingpole
- Nigel Farage
- Edward Snowden
- Robert Craig
- The Guardian
- The Telegraph
- Dr Ansgar Lohse
- RT News
- Triggernometry
- InProportion2
- Lockdown Sceptics
- Mahyar Tousi
- The Daily Mail
- Fredrik Erixon

* Please note that this is not an endorsement of any views of the noted individuals or groups, past, present or future, nor is this a scientific or exhaustive list. It is purely for the functional use.

Afterword

Freedom and Responsibility recognises the efforts made by different governments with the aim of alleviating suffering and commends the work of individuals and groups who have striven to mitigate the harm of this pandemic. We do, however, also recognise our duty as citizens who want to minimise the destruction of Covid-19, to criticise measures which evidence points to as illegal, harmful or simply unnecessary and thus detrimental to physical and mental health of millions. We cannot allow ourselves to sleepwalk into an unrecognisable world without civil liberties, out of fear of a temporary pandemic.

Our motto, ‘hope beyond the present’, is an invitation for all of us to remember that there was a way of life before this virus and that way of life must be preserved. We owe it to past generations who laid the foundations of our freedoms, to uphold those same freedoms for ourselves and generations to come. We cannot allow the measures put in place to become normalised. We implore both individuals and organisations to make our plan a reality and to reject the false dichotomy of freedom versus safety, for it can only eventuate in a society with neither. We must live meaningful lives again, where we can work, travel and see those we love, without fear of punishment.

Omar Alexander and William J. Coleshill

Lead Authors, Freedom and Responsibility

