

Dear Local Education Agency,

This formal grievance is to address the masking policy our school district has implemented regarding "recommended" mask mandates. Our non-profit will address and cite some of the overwhelming body of published studies and science as well as experiences that will demonstrate the following:

- 1) Mask ineffectiveness; Neither cloth nor paper masks can inhibit transmission or acquisition of a virus
- 2) The potential adverse effects of wearing masks
- 3) Psychological impact on children and adolescents
- 4) The blatant disregard and unlawful discrimination for religious and medical freedom convictions
- 5) The bully-like tactics and inhumane treatment endured at school

In actuality, students, children 19 and under, have a near-zero risk of dying of Covid, (.003%). In fact, children in the United States, aged 5-14 have 1 in 569,363 risks of death from Covid. Both Oxford and Cambridge had stated, for the same age group, the risk of death is 1 out of 3,579,551. (25.5)

Countries like, Sweden, a million kids, no school closures, no lockdowns, and no masks, and not a single death among children.

The LEA's one size fits all masking policy, puts all students at risk for adverse health effects, as I will outline, and for criminals escaping detection because they are required to conceal their identities. Segregating our vaccinated versus non-vaccinated students who have received an experimental vaccine is discriminatory.

Children's health is being detrimentally affected and their safety is jeopardized, the complete opposite of what the stated intentions are.

1) INEFFECTIVENESS OF MASKS

First, I will address the ineffectiveness of masks. It's important to look and rely on randomized controlled trials with verifiable outcomes and not associative data or epidemiology since correlation doesn't mean causation. The quality of evidence is vital as well as the predictability of conclusions.

Let's start with quoting the **New England Journal of Medicine**: *"We know that wearing a mask outside health care facilities offers little if any, protection from infection.....In many cases, the desire for widespread masking is a reflexive reaction to anxiety over the pandemic.....It is also clear that masks serve symbolic roles. Masks are not only tools, but they are also talismans that may help increase health care workers' perceived sense of safety, well-being, and trust in their hospitals."* (2)

(For clarification, a talisman is a good luck charm, like a rabbit's foot.)

A retrospective meta-analysis was done in May of 2020 by the CDC, looking at various PPE data/studies from 1946-2018, entitled, **"Nonpharmaceutical Measures for Pandemic Influenza in Nonhealthcare Settings-Personal Protective and Environmental Measures"** (3)

I'll provide four quotes from the meta-analysis:

1. "In pooled analysis, we found no significant reduction in influenza transmission with the use of face masks"
2. "Disposable medical masks (also known as surgical masks) are loose-fitting devices that were designed to be worn by medical personnel to protect accidental contamination of patient wounds, and to protect the wearer against splashes or sprays of bodily fluids. There is limited evidence for their effectiveness in preventing influenza virus transmission either when worn by the infected person for source control or when worn by uninfected persons to reduce exposure. Our systematic review found no significant effect of face masks on the transmission of laboratory-confirmed influenza."
3. "Proper use of face masks is essential because improper use might increase the risk for transmission." (I'm going to add my personal opinion...my guess is 99% of students are not using their masks properly, hence mask policies are increasing the risk of transmission)
4. "We did not find evidence that surgical-type face masks are effective in reducing laboratory-confirmed influenza transmission, either when worn by infected persons (source control) or by persons in the general community to reduce their susceptibility"

This retrospective study is on the influenza virus which is similar in particle size to the coronavirus approximately 0.12 Microns, which comparatively, for reference, is 1/24 the size of TB bacteria which is 3 Microns.

In light of this data, it stands to reason why Surgeon General, Jerome Adams had stated: "***the data doesn't show***" wearing masks in public will help people during the coronavirus pandemic.

This next study shows both, the ineffectiveness of masks, and one of many ways they can impose a serious risk, it is entitled: **A cluster of a randomized trial of cloth masks compared with medical masks in healthcare workers.** (4)

The study found that in the over 1600 subjects, those wearing cloth masks contracted 13 times or 1300% more ILI (influenza-like illnesses) Those results are staggering! Especially, since most policies use the verbiage "cloth face covering"

Cloth face masks are hydrophilic, not hydrophobic like medical masks; therefore, they provide a warm, moist environment for pathogens to proliferate. What a filthy practice!! And the results validate the logic.

Your policies are flat out, putting kids at a much greater risk for developing other illnesses. Shameful.

And anything goes with these "cloth" coverings, LEA's is only regulating one aspect – that a student's identity is concealed). You have no (mask) parameters in the guidelines you are trying to enforce/impose – any material/cloth will do. By your own standards, you are implying it's not about science, it's just about compliance.

The CDC did another "study" just recently. It was based on the association of mask-wearing and the impact on cases. Headlines were everywhere, giving the idea that masks are saving the day!! However, if you actually looked at the table included in the study (5) you will find cases dropped by a whopping .5% - 1.8%. The media didn't report the actual facts, just shameful exaggerations

of the data. And anyone who knows how PCR tests work can cause cases to increase or decrease just by increasing or decreasing the cycle thresholds you run the tests at. Deception at every turn. And of course, as I previously mentioned, this type of associative data is not proof of causation, unlike the clinical trials showing that masks, cannot, and do not mitigate viral transmission or spread.

The CDC has finally, of late, stopped their flip-flopping on the droplets versus aerosols -also known as droplet nuclei, "conundrum". But the truth of the matter was there all along, despite their desperation to skirt around it. An unbiased virologist knows that the large droplets that a mask can contain, contain a very little active virus, it's mostly dead viral debris, but the aerosols/droplet nuclei do contain the active virus and become part of the fluid air and pose the main risk for transmission.

If you asked an industrial hygienist (whose expertise is in the limitations and functionality of various types of masks and respirators, who also are experts in airflow fluid mechanics), or even a physicist, they will tell you the aerosols will take the path of least resistance and simply go out the sides of medical-grade masks and pass straight through most cloth masks. Lydia Bourouba, Director of The Fluid Dynamics of Disease Transmission Laboratory at MIT, has demonstrated someone's normal breath, which contains aerosols, can expand out up to 27 feet...-so much for 6-foot social distancing. (The CDC just recently amended this to 3 feet)

Surgeons are taught, if they need to sneeze to not turn their head since the plumage will go out the sides of the mask and into the cavity, they need to sneeze forward and just spray their co-workers. This is also why the boxes of earloop masks state this product will not provide any protection against Covid-19 or other viruses or contaminants.

As stated, aerosols, or droplet nuclei, that contain the active viruses and are the main risk for transmission, unlike droplets that are much larger, which are heavier than air, and fall to the ground. Aerosols, or droplet nuclei, can be suspended in the air for up to 2 hours depending on the humidity. Humidity will cause the aerosols to clump and fall to the ground much more quickly than under dry conditions. Winter air is much drier, allowing greater suspension time for the aerosols, and this is a contributing factor to "cold and flu season" since the air is dry in the winter and the relative humidity is greater in the summertime.

So, good ventilation and humidifiers in confined indoor spaces, especially in winter, would help more than any mask.

Even if you were to put on 2 or 3 masks, the aerosols, which are the main risk for transmission would still take the path of least resistance, mostly out the sides of most masks since they don't have a hermetic seal like a respirator, and they will be emitted into the fluid air. You would only be increasing the intake of your own poisonous waste gas, and further displacing your ability to get adequate, essential oxygen.
No benefit, all risk.

2) ADVERSE EFFECTS OF WEARING MASKS

Now, moving on to the potential adverse effects of wearing masks, I'll show this is far from a benign medical intervention. And as with all medical interventions and healthcare decisions, **the CA Parent's Bill of Rights**(6) recognizes a parent's right to: Make healthcare decisions for their child. I do not consent to this medical intervention for my children. Others in our community do not consent and yet many of us are obliging out of threats, fear, and loss of economic safety.

We are in a dystopian world of thought policing, fact-checkers, that typically provide no counter-evidence, just an appeal to "authority". This blind trust in authority is an integral part of the official narrative that is being pushed upon us, without proper scientific debate or civil discourse. The current belief, by faith, not facts, is that masks, both:

- 1) Do not cause you to rebreathe your waste gas, CO₂, causing hypercapnia
- 2) Nor do they in turn displace your ability for adequate oxygen, causing hypoxemia and hypoxia.

First, let's quickly address the most common point made by mask apologists who believe masks are benign, and that is: What about surgeons? They must wear masks, for hours, sometimes.

If you talk to OSHA, even the surgeons themselves may not realize the conditions in operating rooms are monitored and regulated so closely. The gas exchange, ventilation, temperature, and humidity are all perfectly calibrated, and as you will see in the next article I cite, which proves, that despite these ideal conditions, hypoxia and hypercapnia still, do, in fact, take place.

This study puts the 2 above, stated beliefs, to rest. A 2005 study entitled, **The Physiological Impact of N95 masks on Medical Staff**. (7) Quoting from the description: Wearing N95 masks results in hypooxygenemia and hypercapnia which reduce working efficiency and the ability to make the correct decisions.

The masks caused hypercapnia, lowered oxygen, reduced work efficiency, and the ability to make correct decisions. Far from a benign intervention.

Carbon dioxide poisoning is no joke. As a matter of fact, carbon dioxide is commonly used for euthanizing animals. A quick quote from **BU Research Support, Carbon Dioxide Euthanasia for Rats and Mice**(8):

"Carbon dioxide (CO₂) overdose causes rapid unconsciousness followed by death."

That known effect of rapid unconsciousness and death appears to be what happened to these children in China. **'Two boys drop dead in China while wearing masks during gym class.'** NY Post. (9) How tragic.

You're blindly following these foolish government recommendations, in attempts to mitigate an infinitesimally small risk, puts all your students in danger. Even the corrupt **WHO**, warned **wearing masks while exercising is a health hazard**. (9.5)

When I found out that masks are being required in my children's PE class, my blood nearly boiled. How could you implement such a dangerous policy? I sent both the above articles and more to the school and they assured me they were doing low-intensity exercise and children could let the teaching know if they needed a mask break. Still completely unacceptable.

When my daughter, at EVIT, has been caught with her mask below her nose, she gets "punished" by having to do additional (rigorous) exercises, and she is expected to perform them with her mask on correctly. That is beyond cruel, abusive, and dangerous.

Common sense, which is becoming less common these days, bears witness, to the self-evident fact, that breathing in a mask is simply more difficult. There is a varying level of resistance to your inspiratory flow depending on the mask you are wearing.

And sometimes you just need to see it for yourself. I purchased a pulse oximeter, last year, and I've offered to test, and have tested many suffering individuals, working with masks on, out in public, and have noted very low blood oxygen levels and proportionate increases in their pulse. Just as the doctor in the above article describes.

Another study confirms that simply wearing a surgical mask induces dyspnea. Dyspnea, according to mayoclinic.org under definitions: **"Few sensations are as frightening as not being able to get enough air. Shortness of breath -known medically as DYSPNEA - is often described as an intense tightening in the chest, air hunger, difficulty breathing, breathlessness or a feeling of suffocation."**

According to the Mayo Clinic, dyspnea is one of the most frightening things one can experience, and this abusive policy allows everyone to experience this form of extreme stress.

The study that demonstrates this reality is entitled: **Effect of a surgical mask on six-minute walking distance 2018** (10) The conclusion states: "Wearing a surgical mask modifies SIGNIFICANTLY and clinically dyspnea without influencing walked distance."

This 2015 study entitled: **Respiratory consequences of N95 type Mask usage in pregnant healthcare workers- a controlled clinical study.** (11) That study stated, "Volumes of oxygen consumption and carbon dioxide expired were also SIGNIFICANTLY reduced." (less O₂, and more CO₂ retention) "while breathing through N95 mask materials REDUCED mean tidal volume by 23%. (tidal volume means normal lung volumes of air.)

I'm so proud of a dear pregnant, nurse friend of mine, who overturned her hospital's reckless attempt to implement a 2-mask policy on staff, by bringing the facts, studies, and data to the hospital's attention. How tragic for the pregnant teachers, being forced to induce oxygen deprivation to their baby and themselves along with chronic poisoning of CO₂.

A study from 1972 entitled: **Hypoxia and Hypercapnia from Bedcovers** (12) This study used a bed sheet and up to 2 blankets weighing between 3-4 pounds covering subjects for up to 20 minutes. Levels of hypoxia as low as 16.5% oxygen and hypercapnia as high as 4.1% were obtained.

Just to put this in context, the ambient air around us is only .04% CO₂, but upon exhalation, the concentration is 4%, which is 100x greater. This level of 4.1% CO₂ (anything over 4% CO₂) according to OSHA and NIOSH is considered an IDLH -an immediate danger to life and health, which is defined by: an atmosphere that both pose an immediate threat to life or can cause irreversible adverse health effects.

The study had O₂ levels as low as 16.5% O₂ and OSHA regulations state, "An oxygen-deficient atmosphere is an atmosphere that contains less than 19.5% oxygen". This is considered an IDLH as well. Granted, this study is on blankets over the head, but is easily extrapolated and validates numerous informal, anecdotal CO₂ measurements taken with various masks that recorded CO₂ levels at much higher percentages.

For the infinitesimally small risk of Covid complications in children, your abusive policy is putting them in a state of immediate danger to life and health.

This position of danger to life and health has been articulated by three world-renowned neurologists, neuroscientists/brain surgeons/spine surgeons who have tried to sound the alarm on the dangers of mask-wearing, but instead, they were censored and ignored. One of whom is,

world-renowned neurologist, Dr. Margareta Griesz-Brisson, who warned, masks cause oxygen deprivation and permanent neurological damage, especially in the developing brains of children.

She stated, so many warnings within this arena, including, **"To deprive a child's or an adolescent's brain of oxygen, or to restrict it in any way, is not only dangerous to their health, it is absolutely criminal."**

Neuroscientists/brain surgeons/spine surgeons, Dr. Lee Merritt, and Dr. Russell Blaylock both concur. Dr. Lee Merritt is the past president of the Association of American Physicians and Surgeons and is the only woman to be appointed as the Louis A. Goldstein Fellow of Spinal Surgery. She served 9 years as a Navy physician and surgeon, is currently in private practice, and sat on the board of the Arizona Medical Association. She has given multiple lectures on both the dangers and ineffectiveness of masks as well as speaking out against the current covid-19 vaccines.

Dr. Shiva Ayyadurai, who has 4 degrees from MIT, including a PhD, would agree with all the above, and brings an additional adverse health condition to light from wearing masks. Masks are detrimental to oral health and the microbiome of the mouth. Dr. Shiva has identified 3 bacteria out of the plethora of oral bacteria in one's mouth that can be particularly problematic if they are too numerable and an imbalance in the microbiome occurs. Masks increase mouth temperature on an average of 1-2 degrees, masks increase the acidity of the mouth from the rebreathing of CO₂, and mask-wearing increases mouth breathing, which dries the mouth, therefore, there is less saliva to keep the proper ph. These three factors give rise to an altered and more favorable environment for those 3 bacteria to proliferate and cause a cascade of negative oral health consequences as a result.

Yet another VERY frightening cause for concern is what's known as the friable particulates, or the loose fibers that detach from the mask and can become embedded into the lung tissue. This is further exacerbated by the greater inspiratory flow due to the resistance from the mask, which causes an even deeper inhalation force. This has the potential to cause painful symptoms of the pulmonary fibrosis-like condition. A local doctor, here in Tempe, co-authored multiple papers on the dangers of masks, including one, entitled: **Masks, false safety and real dangers, Part1: Friable mask particulate and lung vulnerability.** (13)

They aren't the only ones sounding an alarm to this danger. Another paper was published earlier this year entitled: **Need for assessing the inhalation of the micro(nano)plastic debris shed from masks, respirators, and homemade face coverings during the COVID-19 pandemic.** (14)

The University of Edinburgh recently published a statement in an article entitled: **Nanofibre health risk quantified.** (15) a quick quote: "Concern has been expressed that new kinds of nanofibres being made by nanotechnology industries might pose a risk because they have a similar shape to asbestos."

Health Canada has issued a warning regarding the potential for "early pulmonary toxicity" from the SNN200642 masks made in China, which contain microscopic graphene particles. Graphene is a very strong, thin material, and can be harmful to lungs when inhaled and cause long-term health problems, according to the article: **Potentially toxic masks distributed in schools and daycares in Quebec.** (16)

These grave risks that come with ___ USD's abusive, experimental mask policy are beyond unconscionable.

3) PSYCHOLOGICAL IMPACTS

I'll now address the devastating psychological impact this abusive policy is having on children and teens. Again, kids and teens, have an infinitesimally small risk from this coronavirus. Yet, the media and those in authority have been shamelessly driving fear, stress, panic, and anxiety to grossly negligent levels for over a year. This is taking a toll on young people.

I'll add that multiple experts have said and are continuing to say these deaths of despair, from lockdowns, are due to the fact, you simply can't separate life from livelihood, including, depression, suicides, alcohol abuse, domestic violence, drug overdoses, and those plunged into poverty will far exceed deaths from COVID in the long run.

A recent Telegraph article entitled: **Almost half of the young adults at clinical risk of mental health disorders in 'profound crisis', study shows.** (17)

Another Telegraph article entitled: **Facemasks for children are damaging more than just their mental health.** (18) Citing loneliness, sleep disorders, and self-harming behaviors.

Yet one more article from the Telegraph, entitled **Forcing Pupils to wear masks is a total betrayal of children -and bad for learning.** (19) George McLellan, a public law expert at DLA Piper told the Telegraph: "The primary ground for judicial review would be unreasonableness or irrationality. The concern with masks is that there's no rational basis for them to be required. School District could be sued for enforcing masks.

While Dr. Robert Redfield was acting director of the CDC, he was addressing the negative impact lockdowns and school closures had on young people's mental health, he stated, **"We're seeing, sadly, far greater suicides now than we are deaths from COVID."** (19.5)

Lockdowns, a prison term, have forced people into isolation. Solitary confinement is one of the cruelest forms of punishment, and we have published science that confirms isolation is extremely detrimental to one's health. An excellent article from Stanford Medicine, entitled, **'Connectedness and Health: The Science of Social Connection'** (20) which includes a fantastic 'Connect to Thrive' info-graphic, explaining the declines in physical and psychological health from the lack of social connection, as well as a link to a landmark study, entitled **Social Relationships and Health. Science. Vol. 241 1988** (21) This landmark study showed lack of social connections is a greater detriment to health than obesity, smoking, and high blood pressure. These issues pack a heavy punch on their own and they also are some of the comorbid conditions that put you in a category for a much more severe disease process with Covid19. Keeping kids distanced, under lockdown, isolated, and alone is acutely harmful. The actions authorities are imposing on us are worse than the disease.

This grievance is to address masks, so I don't want to get off-topic, I will make one point since I overlapped into the arena of lockdown. Lockdowns are a foolish strategy, and being from NY, I'll quote the Emmy award-winning governor, Cuomo, who was so surprised last year, in May, when **66% of new hospitalizations were people who were sheltering in place.** (21.5)

Kids are being taught to fear each other, and even the air they breathe. Prolonged fear is terror, and terror becomes a trauma. I'm an adult and I feel very uneasy looking across the sea of faceless drones, people all concealing their identity. I've learned from astute psychologists, that people's AGGRESSION can INCREASE when they feel anonymous. I can't imagine how kids are

processing it. Should we be surprised that suicide, depression, anxiety, alcohol and drug abuse, self-harming behavior, and despair are all on the rise with our kids?

We need face to face connection! Kids need to see smiles! The majority of communication is non-verbal, kids' language development is being hampered when they can't see people speaking.

Historically masks have been used to dehumanize individuals and break their will, induce submission, in fact, metal masks were put on slaves, they were known as iron muzzles. (22)

With masks being ancient tools used to break one down psychologically, removing one's unique individuality. Taking away the individuality, the face of young children and teens is so cruel during this stage of their lives and development, and with no scientific justification to back it up, as I've proved beyond measure.

Let me reiterate, this mask policy is child abuse according to the law, and not only are we impairing their ability to breathe and release waste, but we are also muzzling their voices, we are covering up their expressions, invoking terror and shame.

4) RELIGIOUS DISCRIMINATION

In this section, I will be addressing the violation of my children's as well as my own religious convictions. My first amendment rights should be sufficient, but the Civil Rights Act of 1964 protects me and my kids from religious discrimination by civil law.

As a devoted Christian who believes the Bible is the inspired/God-breathed Word of God, the words: Spirit, inspiration, respiration, are all related. God breathed into Adam's nostrils and he became a living soul. The breath of life is sacred. Nothing can be more essential to life than respiration. No one has the authority to hinder the sacred breath of life.

We live in a land of religious freedom for all faiths. Some religions require you to veil your face, in an act of submission to their deity. They should have the freedom to practice their religion according to their individual beliefs and doctrines. If public schools deny entry to a person of this faith, simply because they veiled their face according to their religious practice, that would be a blatant violation of law, according to the 1964 Civil Rights Act.

It's the same with me and my children. As Christians, we do not veil our faces.

2 Corinthians 3:18: 'And we, who with UNVEILED faces all reflect the glory of the Lord, are being transformed into His image with intensifying glory, which comes from the Lord, who is the Spirit.' -Berean Study Bible

As Christians, we believe we are created in the image of God. We cannot reflect the glory of the Lord, as the verse states, if our faces are covered.

Forcing my children to wear masks, is an outright infringement of our religious liberty as protected by law.

5) UNACCEPTABLE TREATMENT OF OUR KIDS

Lastly, moving on to the bullying from teachers and staff my own kids have endured over the years, along with the discouragement to their critical thinking. This is an appropriate place to bring up social engineering and propaganda.

Fear is a very powerful tool that can be used to manipulate human behavior. Due to months of fear-inducing propaganda, the majority of people have become overcome with panic, and they can only react by emotion and are no longer capable of logically analyzing facts and data.

This state of fear suspends one's faculty of reason. The facts and data should have easily quelled the trepidation in anyone with the ability to objectively examine them. Unfortunately, their judgment and risk assessment are driven by feelings rather than statistics and evidence.

Prolonged fear and stress alter both brain chemistry and structure, negatively impacting the autonomic nervous system, endocrine system, even the immune system and can lead to emotional despair. This outcome of psychological degeneration and helplessness is the purpose of coercive techniques.

This state of mind only amplifies what the Milgram experiments had already revealed about people's dangerous tendency to blindly trust and obey authority figures. My children know the material I have presented here. They have further lost tremendous respect for academia as well as their teachers for not critically examining the policies they are enforcing. For if they had, they would have discovered for themselves, they are not based on sound science, but just arbitrary and capricious nonsense.

The risk of death from Covid for these children is so small, but mitigating that minuscule risk seems to be all that matters. When you understand the science around masks and individual rights, this is beyond ludicrous. And yet, our children want to be with their friends above all this nonsense.

FINAL THOUGHTS

Independent research has been a professional obligation for over 20 years throughout my career. Masks are a topic that I have only just explored this year. Areas, where I have accumulated thousands of hours of study, include genetic engineering, vaccines, fasting, and alternative treatments for cancer. I have been a guest speaker for college, church groups, assisted living, and multiple media platforms.

As society drifts away from individual liberty to a state of totalitarianism, and medical tyranny, the battle has begun against vaccine passports.

The White House has just launched a historic \$1.5 billion of taxpayer dollars on an ad campaign, to promote the vaccine, according to Business Insider. (24)

Money, especially if coupled with the billions that went into development and looming profits from this vaccine, could save many more lives if invested into those dying of starvation. If people spent just 1/10 of the time, they spend on researching products they buy, like a new blender, for example, as they did this novel vaccine, they wouldn't fall for the marketing campaign, and they would NOT be lining up like cattle to get it. Especially, in light of all, the now indisputable, proven effective treatments, such as ivermectin, Budesonide, and HCQ, plus the vital importance of Vitamin D, A, C zinc, selenium, and others in the event you MIGHT get ill, instead of risking a vaccine when you are perfectly healthy.

The truth about these treatments was suppressed because they are dirt cheap, and you can't qualify a vaccine for Emergency Use Authorization which gives the manufacturers immunity from liability if there are effective treatments available. That's the only real immunity I see since this "vaccine" does not stop transmission of infection, but, at best, can reduce your symptoms. My children have suffered enough at the hands of Big Pharma.

I'm friends with, have met, know, and have personally interviewed doctors and scientists that are sounding the alarm. Several countries are banning the AstraZeneca vaccine due to the blood clots it's causing, and with the over 2000 deaths reported from these various experimental "vaccines", here in the U.S., as well as neurological disorders, and many other permanent disabilities, it's deplorable that they haven't recalled these dangerous products. **In 1976, the swine flu vaccine was withdrawn after just 10 weeks and only 25 deaths and around 500 cases of GBS, Guillain-Barre Syndrome from the vaccine.** (24.5) Even Mike Wallace, covered the debacle, '60 Minutes Swine Flu, 1976'.

The FDA has listed 22 severe potential adverse reactions, for the Covid-19 vaccines, including death, Guillain Barre, and blood issues, such as: Thrombocytopenia, Venous Thromboembolism, and Disseminated Intravascular Coagulation. (25)

These, "vaccines", are only authorized for Emergency use, they are not approved, yet some states are pushing an experimental medical intervention, with death as a potential side effect, as a requirement for school? Work? Concerts? Sports? Travel? That is a direct violation of international Nuremberg law.

If the government can force you to take an experimental injection, you no longer own your body, the government does, you are no longer free, the government is your master, and you are a slave. Your individual inalienable rights are what the government is supposed to secure, not strip away for a theoretical "collective good".

And, if you are thinking, well, kids must be vaccinated for school, you don't know your rights, I made it over 50 years without a vaccine. This will be the next battle to fight. This issue, like the masks, has not been afforded proper public discourse with a counter perspective. The many physicians and scientists that risk their reputations and careers to speak out against it, with nothing to gain and everything to lose, are censored, canceled, and de-platformed. Yet those, with gross financial conflicts of interest, are the darlings of the media every day. I could talk about this for hours. When in history were those that controlled the message, avoided debate and scrutiny, committed the book burning and censoring, EVER on the side of truth?

In light of the published science and facts, it's a travesty that you have implemented a meritless, ineffective, abusive policy, that puts thousands of children at risk for permanent neurological/brain damage, straining other biological systems not limited to the cardiovascular, pulmonary, and renal systems.

A policy that has detrimental psychological effects, - including depression, anxiety, and suicidal ideations, risk of long-term pulmonary fibrosis conditions in an attempt to mitigate a 1 in over 500,000 risks of death from Covid in kids 5-14. 1 in a half million risk. (There have been only 72 deaths in kids 5-14, and there are over 60,570,000 kids in that age range in the U.S.) If you factored in that only 6% of Covid deaths were Covid only, the rest had an average of 2.6 comorbidities, according to the CDC, the risk would be even lower, I'm being conservative. Cambridge and Oxford scientists had estimated the odds of children aged 5-14 dying from Covid in England and Wales was 1 in over 3,500,000, less than that of being struck by lightning. (25.5)

One of the reasons children have such a low risk is due to the fact that this virus enters the ACE2 receptors. Children incrementally develop and accumulate these ACE2 receptors from the time that born until about age 24. So young children have fewer points of entry for this virus.

Masking, as a mitigation strategy, for a virus, has been shown in randomized control trials to be ineffective. When combined with the multitude of risks from using said strategy, all in an attempt to avoid an infinitesimally small risk of death to children, the risk/benefit analysis becomes self-apparent.

In NY, a FOIA (Freedom of Information Act) request was sent to the NY Department of Health, asking to supply all records that indicate: **1) the efficacy (pro/con) of wearing masks (face coverings) by the general public is an effective method of stopping the spread of infectious diseases, such as influenza or Covid-19. (26) The Health Department replied: After conducting a diligent search, no records responsive to your request have been located.**

Being an institution of learning, I would pose the same inquiry... what science are you basing this abusive policy on? I certainly hope it's not the CDC, since their own scientific meta-analysis clearly is a blatant contradiction to what their appointees state in front of the camera.

The CDC just recently changed its "rules" on cleaning, stating the **disinfectants can do more harm than good. (27) making mention that calls to poison control has been on the rise.** I will personally add, these chemicals, and the synergistic effect of using multiple chemicals together, may have carcinogenic and endocrine-disrupting effects that will yet again present a much greater risk to children than Covid. And the constant use of sanitizers, which many are being recalled for containing various toxins, can dry out the skin so much, they create cracks and fissures in the skin which destroys the natural barrier to pathogens and increasing susceptibility to infection.

Everything the CDC has been recommending is flawed and unconstitutional and making people afraid, lonely, sick, depressed, lazy, vulnerable, anxious, dependent, and weak. The farthest thing from strong and healthy. Bottom line is, masking kids is child abuse, it's the unjustified dominion, and the farthest thing from health and... anything but safe. You know better. Our community knows better.

QUESTIONS

If you read the current guidance recommendations by the Center for Disease Control and the Department of Public Health, face masks are required for unvaccinated individuals and for those who are vaccinated when they are 1) on public transit, 2) in public schools, 3) in health care facilities, 4) in correctional facilities, and 5) homeless shelters. (See <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/guidance-for-face-coverings.aspx>).

However, on June 11, 2021, for example, Gavin Newsom signed an executive order rescinding Executive Order N-33-20 and N-60-20 which required the people of California to heed/obey the public health orders. (See <https://www.gov.ca.gov/wp-content/uploads/2021/06/6.11.21-EO-N-07-21-signed.pdf>). Since these Executive Orders have been rescinded, that means that the public health officers only have the powers that the legislature has given to them.

I do not see anything in the California Public Health Code, or other States alike, that would give a public health official the authority to mandate anyone who is healthy wear a mask (vaccinated or unvaccinated). I know you have to wear a mask on a plane because the current president is refusing to follow the science. However, other than the current regulations on airports, I honestly would like to know what authority any public health officer has to mandate behavior associated with COVID-19.

Absent some sort of legal authority, all the public health officers can do is make recommendations which means Californians are free to decide whether or not to follow the recommendations. Again, can someone please show me where the public health officers' recommendations are anything but recommendations? More importantly, why would this school district recommend violating the constitution of America, support medical tyranny, and condone child abuse?

Sincerely,

Jamie L. Juarez, PhD-C, Licensed Marriage & Family Therapist
Hope Counseling and Family Therapy, Inc.

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