



OTTAWA POLICE SERVICE
SERVICE DE POLICE D'OTTAWA
A Trusted Partner in Community Safety
Un partenaire fiable de la sécurité communautaire

RESULTS FOR POLICE RECORD CHECK

LEVEL 1-CRIMINAL RECORD CHECK (Sec. 1-2)

STEVEN LEONARD ANTHONY REYNEN
2720 MCMULLEN
OTTAWA, ONTARIO
K0G 1J0

DATE OF REQUEST: 2024-11-13
REQUEST NUMBER: 2024-15583626
DATE OF BIRTH: 1989-08-24

NOTE: The Youth Criminal Justice Act (YCJA) restricts individuals from sharing records made under that Act. Findings of guilt and other dispositions under the YCJA may not be reported on this response.

SECTION 1: RESULTS FOR RCMP NATIONAL REPOSITORY CRIMINAL RECORD CHECK

☐	INCOMPLETE	Based solely on the name(s) and/or the date of birth provided, a search of the RCMP National Repository of Criminal Records could NOT be completed. Positive identification that a criminal record does or does not exist requires the applicant to SUBMIT FINGERPRINTS to the RCMP National Repository of Criminal Records; which has NOT been done. Delays do exist between a conviction being rendered in court, and the details being accessible on the RCMP National Repository of Criminal Records. Not all offences are reported to the RCMP National Repository of Criminal Records. ☐ FINGERPRINT SUBMISSION REQUIRED
☒	NEGATIVE (Not confirmed by prints)	Based solely on the name(s) and date of birth provided, a search of the RCMP National Repository of Criminal Records did NOT identify any records with the name(s) and date of birth of the applicant. Positive identification that a criminal record does or does not exist at the RCMP National Repository of Criminal Records can only be confirmed by FINGERPRINT comparison. Delays do exist between a conviction being rendered in court, and the details accessible on the RCMP National Repository of Criminal Records. Not all offences are reported to the RCMP National Repository of Criminal Records.
☐	NEGATIVE (Confirmed by prints)	Based on the fingerprints, name(s), and date of birth submitted by the applicant, this message certifies that a search of the RCMP National Repository of Criminal Records did not identify any records associated with the applicant that may be disclosed in accordance with federal laws. Delays do exist between a conviction being rendered in court, and the details being accessible on the RCMP National Repository of Criminal Records. Not all offences are reported to the RCMP National Repository of Criminal Records.
☐	CRIMINAL RECORD (Confirmed by prints)	Based on the fingerprints, name(s), and the date of birth submitted by the applicant, this message certifies that a search of the RCMP National Repository of Criminal Records identified that the fingerprints submitted by the applicant were certified as identical to fingerprints registered under a criminal FPS Number. Delays do exist between a conviction being rendered in court, and the details accessible on the RCMP National Repository of Criminal Records. Not all offences are reported to the RCMP National Repository of Criminal Records. This document may not contain all criminal records associated with the applicant. ☐ SEE ATTACHED POLICE RECORD CHECK SUPPLEMENTARY INFORMATION FORM FOR DETAILS
☐	CRIMINAL RECORD (Not confirmed by prints)	Based solely on the name(s) and date of birth provided, a search of the RCMP National Repository of Criminal Records has resulted in a possible match to a registered criminal record. Positive identification that a criminal record does or does not exist at the RCMP National Repository of Criminal Records can only be confirmed by fingerprint comparison. As such, the criminal record information declared by the applicant does not constitute a Certified Criminal Record by the RCMP. Delays do exist between a conviction being rendered in court, and the details being accessible on the RCMP National Repository of Criminal Records. Not all offences are reported to the RCMP National Repository of Criminal Records. This document may not contain all criminal record convictions associated with the applicant. ☐ SEE ATTACHED POLICE RECORD CHECK SUPPLEMENTARY INFORMATION FORM FOR DETAILS ☐ FINGERPRINT SUBMISSION REQUIRED

SECTION 2: RESULTS OF INVESTIGATIVE DATABANK AND LOCAL INDICES SEARCH

- ☒ **NEGATIVE** - No information was revealed that can be disclosed in accordance with federal laws and RCMP policies
☐ **POSITIVE** - ☐ Criminal Record
☐ SEE ATTACHED POLICE RECORD CHECK SUPPLEMENTARY INFORMATION FORM FOR DETAILS

SECTION 3: RESULTS OF VULNERABLE SECTOR CHECK ONLY

- ☒ **NOT APPLICABLE**
A search of sex offenders who were granted a record suspension (pardon) was conducted. No information to release.
A search of sex offenders who were granted a record suspension (pardon) was conducted. Information authorized for release.
☐ SEE ATTACHED POLICE RECORD CHECK SUPPLEMENTARY INFORMATION FORM FOR DETAILS
☐ Response(s) have not been received from all police agencies to previous addresses

Date Completed: 2024-12-12

Badge Number: 9605

Personal information contained in this form is collected pursuant to the Community Safety and Policing Act S.11 and is collected for the purpose of processing this police record check. Questions concerning this collection should be directed to:

Background Clearance Section of the Ottawa Police Service
P.O. Box 9634 Station T, Ottawa, ON K1G 6H5

NOT VALID UNLESS THIS FORM IS EMBOSSED WITH A PHYSICAL SEAL
OR
INCLUDES A VERIFIABLE DIGITAL SIGNATURE

Ministry No./No. du ministère
478-5-1144

Search Date/Date de recherche (Y/A M D/J)
2024/11/13

3 YEAR DRIVER RECORD SEARCH/
RECHERCHE DANS LE DOSSIER DU CONDUCTEUR DES 3 DERNIÈRES ANNÉES

PAGE 01

DRIVER INFORMATION/RENSEIGNEMENTS SUR LE CONDUCTEUR

Name/Nom.....REYNEN, STEVEN, LEONARD, ANTHONY
Address/Adresse.....

Reference No. or Driver's Licence No./
No de référence ou du permis de conduire.....R2988-72368-90824
Date of Birth/Date de naissance (Y/A M D/J).....1989/08/24
Sex/Sexe.....MALE/HOMME
Height/Taille.....180
Class/Catégorie.....G***
Condition/Restriction.....X/N
Earliest Licence Date Available/
Date d'obtention du premier permis de conduire...2005/09/13
Expiry Date/Date d'expiration (Y/A M D/J).....2028/08/24
Status/Statut.....LICENCED/TITULAIRE D'UN PERMIS DE CONDUIRE

DATE CONVICTIONS, DISCHARGES, AND OTHER ACTIONS
Y/A M D/J CONDAMNATIONS, LIBÉRATIONS ET AUTRES ACTIONS

REQUIRES CORRECTIVE LENSES
VERRES CORRECTEURS REQUIS

CURRENT DEMERIT POINTS TOTAL 00
TOTAL ACTUEL DES POINTS D'INAPTITUDE

***** END OF RECORD/FIN DU DOSSIER *****

DSS

Instructions: For each statement below, click on or mark a button to show how much each thing has happened to you IN THE PAST WEEK.

STEVEN REYNEV FEB 28/2025
IN THE PAST WEEK

	Not at all	Once or twice	Almost every day	About once a day	More than once a day
1. My body felt strange or unreal.	☐	☐	☐	☐	☒
2. Things around me seemed strange or unreal.	☐	☐	☐	☐	☒
3. I got reminded of something upsetting and then spaced out for a while.	☐	☐	☐	☐	☒
4. I had moments when I lost control and acted like I was back in an upsetting time in my past.	☐	☐	☐	☒	☐
5. I felt like I was outside myself, watching myself do things.	☒	☐	☐	☐	☐
6. I heard something that I know really wasn't there.	☐	☐	☒	☐	☐
7. I got upset about something and can't remember what happened next.	☐	☐	☒	☐	☐
8. I felt like I was in a movie – like nothing that was happening was real.	☐	☐	☐	☒	☐
9. I didn't feel pain when I was hurt and should have felt something.	☐	☒	☐	☐	☐
10. A memory came back to me that was so strong that I lost track of what was going on around me.	☐	☒	☐	☐	☐
11. I found myself staring into space and thinking of nothing.	☐	☐	☐	☐	☒
12. I couldn't remember things that had happened during the day even when I tried to.	☐	☐	☐	☐	☒
13. I felt like I wasn't myself.	☐	☐	☐	☐	☒
14. I saw something that seemed real, but was not.	☒	☐	☐	☐	☐
15. I suddenly realized that I hadn't been paying attention to what was going on around me.	☐	☐	☐	☐	☒
16. Parts of my body seemed distorted - like they were bigger or smaller than usual.	☐	☒	☐	☐	☐
17. I reacted to people or situations as if I were back in an upsetting time in my past.	☐	☒	☐	☐	☐
18. I got so focused on something going on in my mind that I lost track of what was happening around me.	☐	☐	☒	☐	☐
19. I noticed there were gaps in my memory for things that happened to me that I should be able to remember.	☐	☐	☐	☐	☒
20. I smelled something that I know really wasn't there.	☐	☐	☐	☐	☒

STEVEN
REYNEIN

FEB 28 / 2025

Severity of Dissociative Symptoms—Adult*
***Brief Dissociative Experiences Scale (DES-B)—Modified**

Name: _____ Age: _____ Sex: Male ☐ Female ☐ Date: _____

Instructions: For each statement below, please check (✓) the box that best answers each question to show how much each thing has happened to you in the past SEVEN (7) DAYS.

						Clinician Use	
		Not at all	Once or twice	Almost every day	About once a day	More than once a day	Item score
1.	I find myself staring into space and thinking of nothing.	☐ 0	☐ 1	☐ 2	☐ 3	☒ 4	4
2.	People, objects, or the world around me seem strange or unreal.	☐ 0	☐ 1	☐ 2	☐ 3	☒ 4	8
3.	I find that I did things that I do not remember doing.	☐ 0	☐ 1	☐ 2	☐ 3	☒ 4	12
4.	When I am alone, I talk out loud to myself.	☐ 0	☐ 1	☐ 2	☐ 3	☒ 4	16
5.	I feel as though I were looking at the world through a fog so that people and things seem far away or unclear.	☐ 0	☐ 1	☒ 2	☐ 3	☐ 4	18
6.	I am able to ignore pain.	☐ 0	☐ 1	☐ 2	☒ 3	☐ 4	21
7.	I act so differently from one situation to another that it is almost as if I were two different people.	☐ 0	☐ 1	☐ 2	☐ 3	☒ 4	25
8.	I can do things very easily that would usually be hard for me.	☒ 0	☐ 1	☐ 2	☐ 3	☐ 4	25
Total/Partial Raw Score:							25
Prorated Total Raw Score: (if 1-2 items left unanswered)							
Average Total Score:							73

DES-B (Dalenberg C, Carlson E, 2010) modified for DSM-5 by C. Dalenberg and E. Carlson.
 This measure is based on measures produced using U.S. federal government resources and is therefore in the public domain and freely available for use without permission so long as authorship is accurately attributed.

Between 36 and 48
DD-NOS DID
43

Screening Test for Dissociative Identity Disorder

Dissociative Experiences Scale

Instructions for Completing this Screening Test:

This questionnaire consists of twenty-eight questions about experiences you may have in your daily life. We are interested in how often you have these experiences (only when you are *not under the influence of alcohol or drugs*).

When answering, please determine the degree in which the experience described in the question applies to you as a percentage of the time you have the experience. 'Never' corresponds to 0% of the time and 'Always', corresponds to 100% of the time. The range covers 0% to 100% in 10% increments.

Please note: You MUST answer every question for the test to score correctly.

1. Some people have the experience of driving or riding in a car or bus or subway and suddenly realizing that they don't remember what has happened during all or part of the trip.

(Never) ○ ○ ○ ○ ○ ○ ○ ● ○ ○ ○ (Always) 7

2. Some people find that sometimes they are listening to someone talk and they suddenly realize that they did not hear part or all of what was said. 7 14

(Never) ○ ○ ○ ○ ○ ○ ○ ● ○ ○ ○ (Always)

3. Some people have the experience of finding themselves in a place and having no idea how they got there. 0 14

(Never) ● ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ (Always)

4. Some people have the experience of finding themselves dressed in clothes that they don't remember putting on. 0 14

(Never) ● ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ (Always)

5. Some people have the experience of finding new things among their belongings that they do not remember buying. 1 15

(Never) ○ ● ○ ○ ○ ○ ○ ○ ○ ○ ○ (Always)

6. Some people sometimes find that they are approached by people that they do not know who call them by another name or insist that they have met them before. 1 16

(Never) ○ ● ○ ○ ○ ○ ○ ○ ○ ○ ○ (Always)

7. Some people sometimes have the experience of feeling as though they are standing next to themselves or watching themselves do something and they actually see themselves as if they were looking at another person. 1 17

(Never) ○ ● ○ ○ ○ ○ ○ ○ ○ ○ ○ (Always)

not
clinical
not
clinical
not for
10+
years

8. Some people are told that they sometimes do not recognize friends or family members.

(Never) ☒ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ (Always)

0/17

9. Some people find that they have no memory for some important events in their lives (for example, a wedding or graduation).

(Never) ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☒ ☐ (Always)

9/26

bad memory?

10. Some people have the experience of being accused of lying when they do not think that they have lied.

(Never) ☐ ☐ ☐ ☐ ☐ ☒ ☐ ☐ ☐ ☐ (Always)

5/31

11. Some people have the experience of looking in a mirror and not recognizing themselves.

(Never) ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☒ ☐ (Always)

8/39

12. Some people have the experience of feeling that other people, objects, and the world around them are not real.

(Never) ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☒ ☐ (Always)

8/47

gone down

13. Some people have the experience of feeling that their body does not seem to belong to them.

(Never) ☐ ☐ ☐ ☐ ☒ ☐ ☒ ☐ ☐ ☐ (Always)

4/51

14. Some people have the experience of sometimes remembering a past event so vividly that they feel as if they were reliving that event.

(Never) ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☒ ☐ ☐ (Always)

7/58

used to a lot more

15. Some people have the experience of not being sure whether things that they remember happening really did happen or whether they just dreamed them.

(Never) ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☒ ☐ (Always)

8/66

16. Some people have the experience of being in a familiar place but finding it strange and unfamiliar.

(Never) ☐ ☒ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ (Always)

1/67

17. Some people find that when they are watching television or a movie they become so absorbed in the story that they are unaware of other events happening around them.

(Never) ☒ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ (Always)

0/67

lays to this

18. Some people find that they become so involved in a fantasy or daydream that it feels as though it were really happening to them.

(Never) ☐ ☐ ☐ ☐ ☐ ☒ ☐ ☐ ☐ ☐ (Always)

5/72

19. Some people find that they sometimes are able to ignore pain.

(Never) ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☒ ☐ (Always)

8/80

20. Some people find that that they sometimes sit staring off into space, thinking of nothing, and are not aware of the passage of time.

5/85

(Never) ☐ ☐ ☐ ☐ ☒ ☒ ☐ ☐ ☐ ☐ (Always)

21. Some people sometimes find that when they are alone they talk out loud to themselves.

(Never) ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☒ ☐ (Always)

8/93

22. Some people find that in one situation they may act so differently compared with another situation that they feel almost as if they were two different people.

(Never) ☐ ☐ ☒ ☐ ☐ ☐ ☐ ☐ ☐ ☐ (Always)

2/95

23. Some people sometimes find that in certain situations they are able to do things with amazing ease and spontaneity that would usually be difficult for them (for example, sports, work, social situations, etc.).

(Never) ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☒ ☐ (Always)

8/103

24. Some people sometimes find that they cannot remember whether they have done something or have just thought about doing that this (for example, not knowing whether they have just mailed a letter or have just thought about mailing it).

(Never) ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☒ ☐ ☐ (Always)

7/110

25. Some people find evidence that they have done things that they do not remember doing.

(Never) ☐ ☒ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ (Always)

1/111

26. Some people sometimes find writings, drawings, or notes among their belongings that they must have done but cannot remember doing.

(Never) ☒ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ (Always)

0/111

27. Some people sometimes find that they hear voices inside their head that tell them to do things or comment on things that they are doing.

(Never) ☐ ☐ ☒ ☐ ☒ ☐ ☐ ☐ ☐ ☐ (Always)

5/116

28. Some people sometimes feel as if they are looking at the world through a fog so that people and objects appear far away or unclear.

(Never) ☐ ☐ ☐ ☐ ☒ ☒ ☐ ☐ ☐ ☐ (Always)

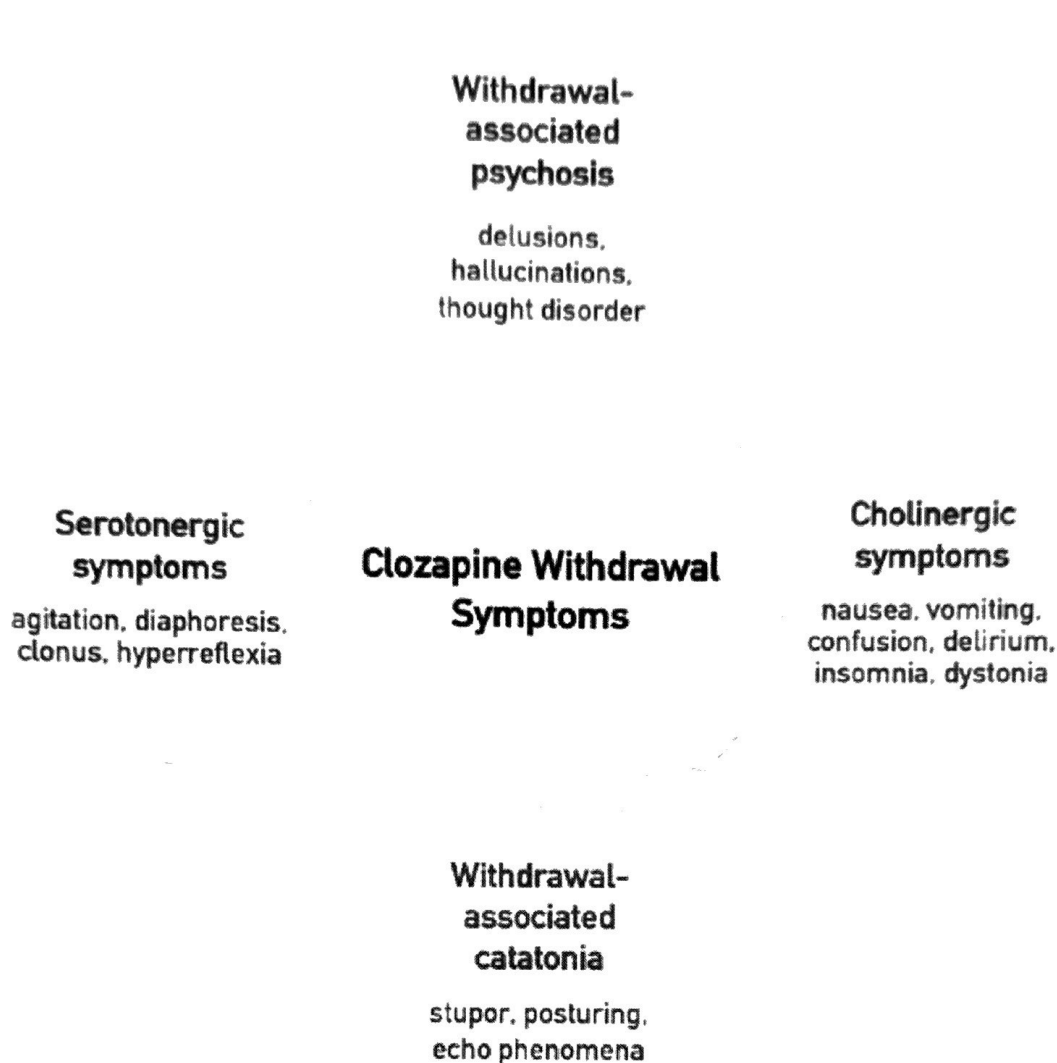
5/121

[Score My Answers](#)[Clear Form](#)

The Dissociative Experiences Scale (DES) was developed by Eve Bernstein Carlson, Ph.D. and Frank W. Putnam, M.D.

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Figure 1.



[Open in a new tab](#)

Clozapine withdrawal symptoms. A diverse range of symptoms have been reported; however, they can be broadly grouped according to the proposed underlying mechanism as (a) Withdrawal-associated psychosis, (b) Cholinergic discontinuation symptoms, (c) Serotonergic discontinuation symptoms and (d) Withdrawal-associated catatonia. Example symptoms within each group are listed. A patient may experience symptoms from one or more groups and symptom profile between groups may overlap.

On the Need for New Criteria of Diagnosis of Psychosis in the Light of Mind Invasive Technology

<http://www.globalresearch.ca/on-the-need-for-new-criteria-of-diagnosis-of-psychosis-in-the-light-of-mind-invasive-technology/123>

Apr. 28, 2013

"We have failed to comprehend that the result of the technology that originated in the years of the arms race between the Soviet Union and the West, has resulted in using satellite technology not only for surveillance and communication systems but also to lock on to human beings, manipulating brain frequencies by directing laser beams, neural-particle beams, electro-magnetic radiation, sonar waves, radiofrequency radiation (RFR), soliton waves, torsion fields and by use of these or other energy fields which form the areas of study for astro-physics. Since the operations are characterised by secrecy, it seems inevitable that the methods that we do know about, that is, the exploitation of the ionosphere, our natural shield, are already outdated as we begin to grasp the implications of their use." [Excerpt]

For those of us who were trained in a psychoanalytical approach to the patient which was characterised as patient centred, and which acknowledged that the effort to understand the world of the other person entailed an awareness that the treatment was essentially one of mutuality and trust, the American Psychiatry Association's Diagnostic Criteria for Schizotypal personality was always a cause for alarm. The Third Edition (1987) of *Diagnostic and Statistical Manual of Mental Disorders* (DSM) required that there be at least four of the characteristics set out for a diagnosis of schizophrenia, and an approved selection of four could be: magical thinking, telepathy or sixth sense; limited social contact; odd speech; and over-sensitivity to criticism. By 1994, the required number of qualifying characteristics were reduced to two or more, including, say, hallucinations and 'negative' symptoms such as affective flattening, or disorganised or incoherent speech – or only one if the delusions were bizarre or the hallucination consisted of a voice keeping up a running commentary on the person's behaviour or thoughts. The next edition of the DSM is not due until the year 2010.

In place of a process of a labelling which brought alienation and often detention, sectioning, and mind altering anti-psychotic medication, many psychoanalysts and psychotherapists felt that even in severe cases of schizoid withdrawal we were not necessarily wasting our time in attempting to restore health by the difficult work of unravelling experiences in order to make sense of an illness. In this way, psychoanalysis has been, in its most radical form, a critic of a society, which failed to exercise imaginative empathy when passing judgement on people. The work of Harry Stack Sullivan, Frieda Fromm-Reichmann, Harold Searles or R.D. Laing – all trained as psychiatrists and all of them rebels against the standard procedures – provided a way of working with people very different from the psychiatric model, which seemed to encourage a society to repress its sickness by making a clearly split off group the carriers of it. A psychiatrist in a mental hospital once joked to me, with some truth, when I commented on the number of carrier bags carried by many of the medicated patients around the hospital grounds, that they assessed the progress of the patient in terms of the reduction of the number of carrier bags. It is too often difficult to believe, however, when hearing the history of a life, that the "schizophrenic" was not suffering the effects of having been made, consciously and unconsciously, the carefully concealed carrier of the ills of the family.

For someone who felt his mind was going to pieces, to be put into the stressful situation of the psychiatric examination, even when the psychiatrist acquitted himself with kindness, the situation of the assessment procedure itself, can be 'an effective way to drive someone crazy, or more crazy.' (Laing, 1985, p 17). But if the accounting of bizarre experiences more or less guaranteed you a new label or a trip to the psychiatric ward, there is even more reason for a new group of

people to be outraged about how their symptoms are being diagnosed. A doubly cruel sentence is being imposed on people who are the victims of the most appalling abuse by scientific-military experiments, and a totally uncomprehending society is indifferent to their evidence. For the development of a new class of weaponry now has the capability of entering the brain and mind and body of another person by technological means.

Harnessing neuroscience to military capability, this technology is the result of decades of research and experimentation, most particularly in the Soviet Union and the United States. (Welsh, 1997, 2000) We have failed to comprehend that the result of the technology that originated in the years of the arms race between the Soviet Union and the West, has resulted in using satellite technology not only for surveillance and communication systems but also to lock on to human beings, manipulating brain frequencies by directing laser beams, neural-particle beams, electromagnetic radiation, sonar waves, radiofrequency radiation (RFR), soliton waves, torsion fields and by use of these or other energy fields which form the areas of study for astro-physics. Since the operations are characterised by secrecy, it seems inevitable that the methods that we do know about, that is, the exploitation of the ionosphere, our natural shield, are already outdated as we begin to grasp the implications of their use. The patents deriving from Bernard J. Eastlund's work provide the ability to put unprecedented amounts of power in the Earth's atmosphere at strategic locations and to maintain the power injection level, particularly if random pulsing is employed, in a manner far more precise and better controlled than accomplished by the prior art, the detonation of nuclear devices at various yields and various altitudes. (ref High Frequency Active Auroral Research Project, HAARP).

Some patents, now owned by Raytheon, describe how to make "nuclear sized explosions without radiation" and describe power beam systems, electromagnetic pulses and over-the-horizon detection systems. A more disturbing use is the system developed for manipulating and disturbing the human mental process using pulsed radio frequency radiation (RFR), and their use as a device for causing negative effects on human health and thinking. The victim, the innocent civilian target is locked on to, and unable to evade the menace by moving around. The beam is administered from space. The Haarp facility as military technology could be used to broadcast global mind-control, as a system for manipulating and disturbing the human mental process using pulsed radio frequency (RFR). The super-powerful radio waves are beamed to the ionosphere, heating those areas, thereby lifting them. The electromagnetic waves bounce back to the earth and penetrate human tissue.

Dr Igor Smirnov, of the Institute of Psycho-Correction in Moscow, says: "It is easily conceivable that some Russian 'Satan', or let's say Iranian – or any other 'Satan', as long as he owns the appropriate means and finances, can inject himself into every conceivable computer network, into every conceivable radio or television broadcast, with relative technological ease, even without disconnecting cables...and intercept the radio waves in the ether and modulate every conceivable suggestion into it. This is why such technology is rightfully feared." (German TV documentary, 1998).

If we were concerned before about diagnostic criteria being imposed according to the classification of *recognizable symptoms*, we have reason now to submit them to even harsher scrutiny. The development over the last decades since the Cold War arms race has included as a major strategic category, psycho-electronic weaponry, the ultimate aim of which is to enter the brain and mind. Unannounced, undebated and largely unacknowledged by scientists or by the governments who employ them – technology to *enter and control minds from a distance* has been unleashed upon us. The only witnesses who are speaking about this terrible technology with its appalling implications for the future, are the victims themselves and those who are given the task of diagnosing mental illness are attempting to silence them by classifying their evidence and accounts as the symptoms of schizophrenia, while the dispensers of psychic mutilation and

Maupassant, Guy de: *Le Horla*, 1886. Livre de Poche.

Carole Smith is a British psychoanalyst. In recent years she has been openly critical of government use of intrusive technology on non-consenting citizens for the development of methods of state control. Carole Smith

E-mail: rockpool@dircon.co.uk

Begich, Dr N. and Manning, J.: 1995 *Angels Don't Play this HAARP, Advances in Tesla Technology*, Earthpulse Press.

ZDF TV: "Secret Russia: Moscow – The Zombies of the Red Czars", Script to be published in *Resonance*, No. 35

Aftergood, Steven and Rosenberg, Barbara: "The Soft Kill Fallacy", in *The Bulletin of the Atomic Scientists*, Sept/Oct. 1994.

Becker, Dr Robert: 1985, *The Body Electric: Electromagnetism and the Foundation of Life*, William Morrow, N.Y.

Babacek, Mojmir: International Movement for the Ban of Manipulation of The Human Nervous System: <http://mindcontrolforums.com/babacek.htm> and go to: Ban of Manipulation of Human Nervous System

"Is it Feasible to Manipulate the Human Brain at a Distance?" www.aisjca-mft.org/braindist.htm

"Psychoelectronic Threat to Democracy" <http://mindcontrolforums.com/babacek.htm>

Nature: "Advances in Neuroscience May Threaten Human Rights", Vol, 391, Jan. 22, 1998, p. 316; (ref Jean- Pierre Changeux)

Space Preservation Act: Bill H.R.2977 and HR 3616 IH in 107th Congress – 2nd Session: see: www.raven1.net/govptron.htm

Sessions European Parliament: www.europarl.eu.int/home/default_en.htm?redirected=1

Click at Plenary Sessions, scroll down to Reports by A4 number, click, choose 1999 and fill in oo5 to A4

Delgado, Jose M.R.: 1969. "Physical Control of the Mind: Towards a Psychocivilized Society", Vol. 41, *World Perspectives*, Harper Row, N.Y.

US News & World Report: Lockheed Martin Aeronautics/ Dr John Norseen; Report January 3/10 2000, P.67

Freud, Sigmund: 1919: *Art and Literature: "The Uncanny"*. Penguin, Also "Those Wrecked by Success."

Marks, John: 1988 :*The CIA and Mind Control – the Search for the Manchurian Candidate*, ISBN 0-440-20137-3

Persinger, M.A. "On the Possibility of Directly Accessing Every Human Brain by Electromagnetic Induction of Fundamental Algorithms"; *In Perception and Motor Skills*, June, 1995, vol. 80, p. 791 – 799

Tyler, J. "Electromagnetic Spectrum in Low Intensity Conflict," in "Low Intensity Conflict and Modern Technology", ed. Lt. Col. J. Dean, USAF, Air University Press, Centre For Aerospace Doctrine, Research and Education, Maxwell Air Force base, Alabama, June, 1986.

Rees, Martin *Our Final Century*. 2003, Heinemann.

Conrad, Joseph: *The Secret Sharer*, 1910. Signet Classic.

programmed pain continue with their work, aided and unopposed.

If it was always crucial, under the threat of psychiatric sectioning, to carefully screen out any sign of confused speech, negativity, coldness, suspicion, bizarre thoughts, sixth sense, telepathy, premonitions, but above all the sense that "others can feel my feelings, and that *someone seemed to be keeping up a running commentary on your thoughts and behaviour*," then reporting these to a psychiatrist, or anyone else for that matter who was not of a mind to believe that such things as mind-control could exist, would be the end of your claim to sanity and probably your freedom. For one of the salient characteristics of mind-control is the running commentary, which replicates so exactly, and surely not without design, the symptoms of schizophrenia. Part of the effort is to remind the victim that they are constantly under control or surveillance. Programmes vary, but common forms of reminders are electronic prods and nudges, body noises, twinges and cramps to all parts of the body, increasing heart beats, applying pressures to internal organs – all with a personally codified system of comments on thoughts and events, designed to create stress, panic and desperation. This is mind control at its most benign. There is reason to fear the use of beamed energy to deliver lethal assaults on humans, including cardiac arrest, and bleeding in the brain.

It is the government system of secrecy, which has facilitated this appalling prospect. There have been warning voices. "...the government secrecy system as a whole is among the most poisonous legacies of the Cold War ... the Cold War secrecy (which) also mandate(s) Active Deception... a security manual for special access programs authorizing contractors to employ 'cover stories to disguise their activities. The only condition is that cover stories must be believable.'" (Aftergood & Rosenberg, 1994; *Bulletin of Atomic Scientist*). Paranoia has been aided and abetted by government intelligence agencies.

In the United Kingdom the fortifications against any disturbing glimmer of awareness of such actual or potential outrages against human rights and social and political abuses seem to be cast in concrete. Complete with crenellations, ramparts and parapets, the stronghold of nescience reigns supreme. To borrow Her Majesty the Queen's recent observation: "There are forces at work of which we are not aware." One cannot say that there is no British Intelligence on the matter, as it is quite unfeasible that the existence of the technology is not classified information. Indeed it is a widely held belief that the women protesting against the presence of cruise missiles at Greenham Common were victims of electro-magnetic radiation at gigahertz frequency by directed energy weapons, and that their symptoms, including cancer, were consistent with such radiation effects as reported by Dr Robert Becker who has been a constantly warning voice against the perils of electro-magnetic radiation. The work of Allen Frey suggests that we should consider radiation effects as a grave hazard producing increased permeability of the blood-brain barrier, and weakening crucial defenses of the central nervous system against toxins. (Becker, 1985, p. 286). Dr Becker has written about nuclear magnetic resonance as a familiar tool in medicine known as magnetic resonance imaging or MRI. Calcium efflux is the result of cyclotron resonance which latter can be explained thus: If a charged particle or ion is exposed to a steady magnetic field in space, it will begin to go into a circular or orbital, motion at right angles to the applied magnetic field. The speed with which it orbits will be determined by the ratio between the charge and the mass of the particle and by the strength of the magnetic field. (Becker, 1990, p.235) The implications of this for wide scale aggression by using a combination of radar based energy and the use of nuclear resonating are beyond the scope of the writer, but appear to be worth the very serious consideration of physicists in assessing how they might be used against human beings.

Amongst medical circles, however, it has so far not been possible for the writer to find a neuroscientist, neurologist or a psychiatrist, nor for that matter, a general medical practitioner, who acknowledges *even the potential* for technological manipulation of the nervous system as a

problem requiring their professional interest. There has been exactly this response from some of England's most eminent practitioners of the legal profession, not surprisingly, because the information about such technology is not made available to them. They would refer anyone attempting to communicate mind-harassment as a psychiatric problem, ignoring the crime that is being committed.

The aim here is not to attempt a comprehensive history and development of the technology of mind control. These very considerable tasks – which have to be done under circumstances of the most extreme difficulty – have been addressed with clarity and courage by others, who live with constant harm and threats, not least of all contemptuous labelling. Their work can be readily accessed on the internet references given at the end of this paper. For a well-researched outline of the historical development of electro-magnetic technology the reader should refer to the timeline of dates and electromagnetic weapon development by Cheryl Welsh, president of Citizens Against Human Rights Abuse. (Welsh 1997; 2001). There are at least one and a half thousand people worldwide who state they are being targeted. Mojmir Babacek, now domiciled in his native Czech Republic, after eight years of residence in the United States in the eighties, has made a painstakingly meticulous review of the technology, and continues his research. (Babacek 1998, 2002)

We are concerned here with reinforcing in the strongest possible terms:

- i) The need for such abuses to human rights and the threats to democracy to be called to consciousness, and without further delay.
- ii) To analyse the reasons why people might defend themselves from becoming conscious of the existence of such threats.
- iii) To address the urgent need for intelligence, imagination, and information – not to mention compassion – in dealing with the victims of persecution from this technology, and
- iv) To alert a sleeping society, to the imminent threats to their freedom from the threat from fascist and covert operations who have in all probability gained control of potentially lethal weaponry of the type we are describing.

It is necessary to emphasise that at present there is not even the means for victims to gain medical attention for the effects of radiation from this targeting. Denied the respect of credulity of being used as human guinea pigs, driven to suicide by the breakdown of their lives, they are treated as insane – at best regarded as 'sad cases'. Since the presence of a permanent 'other' in one's mind and body is by definition an act of the most intolerable cruelty, people who are forced to bear it but who refuse to be broken by it, have no other option than to turn themselves into activists, their lives consumed by the battle against such atrocities, their energies directed to alerting and informing the public of things they don't want to hear or understand about evil forces at work in their society. It is necessary, at this point, to briefly outline a few – one might say the precious few – attempts by public servants to verify the existence and dangers inherent in this field:

- In January 1998, an annual public meeting of the French National Bioethics Committee was held in Paris. Its chairman, Jean-Pierre Changeux, a neuroscientist at the Institut Pasteur in Paris, told the meeting that "advances in cerebral imaging make the scope for invasion of privacy immense. Although the equipment needed is still highly specialized, it will become commonplace and capable of being used at a distance. That will open the way for abuses such as invasion of personal liberty, control of behaviour and brainwashing. These are far from being science-fiction concerns...and constitute "a serious risk to society." ("Nature," Vol 391, 1998.

There are, more seriously, if the afore-going is characterised as non-lethal, the potential lethal effects since the capability of ultrasound and infra-sound to cause cardiac arrest, and brain lesions, paralysis and blindness, as well as blinding by laser beam, or inducing asphyxia by altering the frequencies which control breathing in the brain, epileptic seizure – all these and others may be at the fingertips of those who are developing them. And those who do choose to use them may be sitting with the weapon, which resembles, say, a compact mobile telephone, on the restaurant table next to the bottle of wine, or beside them at the swimming pool.

Finally – if the victims at this point in the new history of this mind-control, cannot yet prove their abuse, it must be asserted that, faced with the available information about technological development – it is certainly not possible for those seeking to evade such claims – to *disprove* them. To wait until the effects become widespread will be too late.

- For these and other reasons which this paper has attempted to address, we would call for an acknowledgement of such technology at a national and international level. Politicians, scientists and neurologists, neuroscientists, physicists and the legal profession should, without further delay, demand public debate on the existence and deployment of psychotronic technology; and for the declassification of information about such devices which abuse helpless people, and threaten democratic freedom.
- Victims' accounts of abuse should be admitted to public account, and the use of psycho-electronic weapons should be made illegal and criminal,
- The medical profession should be helped to recognise the symptoms of mind-control and psychotronic abuse, and intelligence about their deployment should be declassified so that this abuse can be seen to be what it is, and not interpreted automatically as an indication of mental illness.

If, in the present confusion and insecurity about the search for evidence of weapons of mass destruction, we conclude that failure to locate them – whatever the truth of the matter – encourages us to be generally complacent, then we shall be colluding with very dark forces at work if we conclude that a course of extreme vigilance signifies paranoia. For there may well be other weapons of mass destruction being developed and not so far from home; weapons which, being even more difficult to locate, are developed invisibly, unobstructed, unheeded in our midst, using human beings as test-beds. Like ESP, the methods being used on humans have not been detectable using conventional detection equipment. It is likely that the signals being used are part of a physics not known to scientists without the highest level of security clearance. To ignore the evidence of victims is to deny, perhaps with catastrophic results, the only evidence which might otherwise lead the defenders of freedom to becoming alert to the development of a fearful new methods of destruction. Manipulating terrorist groups and governments alike, these sinister and covert forces may well be very thankful for the professional derision of the victims, and for public ignorance.

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through a phase of individual development corresponding to the animistic phase in primitive men, that none of us has passed through it without preserving certain residues and traces of it which are still capable of manifesting themselves, and that everything which now strikes us as 'uncanny' fulfils the condition of touching those residues of animistic mental activity within us and bringing them to expression." (Freud: 1919, p.362)

The separation of birth, and the childhood fear of 'spooks in the night', also leave their traces in each and every one of us. The individual experience of being alone in one's mind – the solitary fate of man which has never been questioned before, and upon which the whole history of civilised nurture is based – is now assaulted head-on. Since growing up is largely synonymous with acceptance of one's aloneness, the effort to assuage it is the basis for compassion and protection of others; it is the matrix for the greatest good, that of ordinary human kindness, and is at the heart of the communicating power of great art. Even if we must all live and die alone, we can at least share this knowledge in acts of tenderness which atone for our lonely state. In times of loss and mental breakdown, the starkness of this aloneness is all too clear. The best of social and group constructiveness is an effort to allay the psychotic anxieties that lie at the base of every one of us, and which may be provoked under extreme enough conditions.

The calculated and technological entry into another person's mind is an act of monumental barbarism which obliterates – perhaps with the twiddling of a dial – the history and civilisation of man's mental development. It is more than an abuse of human rights, it is the destruction of meaning. For any one who is forced into the hell of living with an unseen mental rapist, the effort to stay sane is beyond the scope of tolerable endurance. The imaginative capacity of the ordinary mind cannot encompass the horror of it. We have attempted to come to terms with the experiments of the Nazis in concentration camps. We now have the prospect of systematic control authorised by men who issue instructions through satellite communications for the destruction of societies while they are driving new Jaguars and Mercedes, and going to the opera.

This is essentially about humiliation, and disempowerment. It is a manifestation of rage acted out by those who fear impotence with such dread, that their whole effort is directed into the emasculation and destruction of the terrifying rival of their unconscious fantasies. In this apocalypse of the mind the punitive figure wells up as if out of the bowels of the opera stage, and this phantasmagoria is acted out on a global scale. These men may be mad enough to believe they are creating a 'psychocivilised world order'. For anyone who has studied damaged children, it is more resonant of the re-enactment from the unconscious, reinforced by a life devoid of the capacity for empathic identification, of the obscenities of the abused and abusing child in the savage nursery. Other people – which were to them like Action Man toys to be dismembered, or Barbie Dolls to be obscenely defiled – become as meaningless in their humanity as pixillated dots on a screen.

Although forced entry into a mind is by definition obscene, an abbreviated assessment of the effects that mind-invaded people describe testifies to the perverted nature of the experiments. Bizarre noises are emitted from the body, a body known well enough by its owner to recognise the noises as extrinsic; air is pumped in and out of orifices as if by a bicycle pump. Gradually the repertoire is augmented – twinges and spasms to the eyes, nose, lips, strange tics, pains in the head, ringing in the ears, obstructions in the throat, pressure on the bowel and bladder causing incontinence; tingling in the fingers, feet, pressures on the heart, on breathing, dizziness, eye problems leading to cataracts; running eyes, running nose; speeding up of heart beats and the raising of pressure in the heart and chest; breathing and chest complaints leading to bronchitis and deterioration of the lungs; agonizing migraines; being woken up at night, sometimes with terrifying jolts; insomnia; intolerable levels of stress from the loss of one's privacy. This collection of assorted symptoms is a challenge to any medical practitioner to diagnose.

- In January 1999, the European Parliament passed a resolution where it calls "for an international convention introducing a global ban on all development and deployment of weapons which might enable any form of manipulation of human beings. It is our conviction that this ban can not be implemented without the global pressure of the informed general public on the governments. Our major objective is to get across to the general public the *real threat which these weapons represent for human rights and democracy and to apply pressure on the governments and parliaments around the world to enact legislature which would prohibit the use of these devices to both government and private organisations as well as individuals.*" (Plenary sessions/Europarlament, 1999)
- In October 2001, Congressman Dennis J. Kucinich introduced a bill to the House of Representatives which, it was hoped would be extremely important in the fight to expose and stop psycho-electronic mind control experimentation on involuntary, non-consensual citizens. The Bill was referred to the Committee on Science, and in addition to the Committee on Armed Services and International Relations. In the original bill a ban was sought on 'exotic weapons' including electronic, psychotronic or information weapons, chemtrails, particle beams, plasmas, electromagnetic radiation, extremely low frequency (ELF) or ultra low frequency (ULF) energy radiation, or mind control technologies. Despite the inclusion of a prohibition of the basing of weapons in space, and the use of weapons to destroy objects or damage objects in space, there is no mention in the revised bill of any of the aforementioned mind-invasive weaponry, nor of the use of satellite or radar or other energy based technology for deploying or developing technology designed for deployment against the minds of human beings. (Space Preservation Act, 2002)

In reviewing the development of the art of mind-invasive technology – there are a few outstanding achievements to note:

In 1969 Dr Jose Delgado, a Yale psychologist, published a book: "Physical Control of the Mind: Towards a Psychocivilized Society". In essence, he displayed in practical demonstrations how, by means of electrical stimulation of the brain which had been mapped out in its relations between different points and activities, functions and sensations, – by means of electrical stimulation, how

the rhythm of breathing and heartbeat could be changed, as well as the function of most of the viscera, and gall bladder secretion. Frowning, opening and closing of eyes and mouth, chewing, yawning, sleep, dizziness, epileptic seizures in healthy persons were induced. The intensity of feelings could be controlled by turning the knob, which controlled the intensity of the electric current. He states at the end of his book the hope that the new power will remain limited to scientists or some charitable elite for the benefit of a "psychocivilized society."

In the 1980's the **neuromagnetometer** was developed which functions as an antenna and could monitor the patterns emerging from the brain. (In the seventies the scientists had discovered that electromagnetic pulses enabled the brain to be stimulated through the skull and other tissues, so there was no more need to implant electrodes in the brain). The antenna, combined with the computer, could localize the points in the brain where the brain events occur. The whole product is called the **magnetoencephalograph**.

In January 2000 the Lockheed Martin neuroengineer Dr John D. Norseen, was quoted (US News and World Report, 2000) as hoping to turn the **electrohypnomenalaphone**, a mind reading machine, into science fact. Dr Norseen, a former Navy pilot, claims his interest in the brain stemmed from reading a Soviet book in the 1980's claiming that research on the mind would revolutionize the military and society at large. By a process of deciphering the brain's electrical activity, electromagnetic pulsations would trigger the release of the brain's own transmitters to fight off disease, enhance learning, or alter the mind's visual images, creating a 'synthetic reality'.

By this process of **BioFusion**, (Lockheed Martin, 2000) information is placed in a database, and a **composite model of the brain** is created. By viewing a brain scan recorded by (functional) magnetic resonance imaging (fMRI) machine, scientists can tell what the person was doing at the time of recording – say reading or writing, or recognise emotions from love to hate. “If this research pans out”, says Norseen, “you can begin to manipulate what someone is thinking even before they know it.” But Norseen says he is ‘agnostic’ on the moral ramifications, that he’s not a mad scientist – just a dedicated one. “The ethics don’t concern me,” he says, “but they should concern someone else.”

The next big thing looks like being something which we might refer to as a **neurocomputer** but it need not resemble a laptop – it may be reducible to whatever size is convenient for use, such as a small mobile phone. Arising from a break-through and exploitation of PSI-phenomena, it may be modelled on the nervous-psyche activity of the brain – that is, as an unbalanced, unstable system of neurotransmitters and interacting neurones, the work having been derived from the creation of a copy of a living brain – accessed by chance, and ESP and worked on by design.

On receiving a communication from the writer on the feasibility of a machine being on the horizon which, based on the project of collecting electromagnetic waves emanating from the brain and transmitting them into another brain that would read a person’s thoughts, or using the same procedure in order to impose somebody else’s thoughts on another brain and in this way direct his actions – there was an unequivocal answer from IBM at executive level that there was no existing technology to create such a computer in the foreseeable future. This is at some variance with the locating of a patent numbered 03951134 on the Internet pages of IBM Intellectual Property Network for a device, described in the patent, as capable of picking up at a distance the brain waves of a person, process them by computer and emit correcting waves which will change the original brain waves. Similar letters addressed to each of the four top executives of Apple Inc., in four individual letters marked for their personal attention, produced absolutely no response. This included the ex- Vice President of the United States, Mr Al Gore, newly elected to the Board of Directors of Apple.

Enough people have been sufficiently concerned by the reports of victims of mind control abuse to organise The Geneva Forum, in 2002, held as a joint initiative of the Quaker United Nations Office, Geneva; the United Nations Institute for Disarmament Research; the International Committee of the Red cross, and the Human Rights Watch (USA), and Citizens against Human Rights Abuses (CAHRA); and the Programme for Strategic and International Security Studies, which was represented by the Professor and Senior Lecturer from the Department of Peace Studies at the University of Bradford.

In England, on May 25, 1995, the Guardian newspaper in the U.K. carried an article based on a report by Nic Lewer, the peace researcher from Bradford University, which listed “more than 30 different lines of research into ‘new age weapons’ ... ‘some of the research sounds even less rational. There are, according to Lewer, plans for ‘pulsed microwave beams’ to destroy enemy electronics, and separate plans for very-low-frequency sound beams to induce vomiting, bowel spasm, epileptic seizures and also crumble masonry.” Further, the article states, “There are plans for ‘mind control’ with the use of ‘psycho-correction messages’ transmitted by subliminal audio and visual stimuli. There is also a plan for ‘psychotronic weapons’ – apparently the projection of consciousness to other locations – and another to use holographic projection to disseminate propaganda and misinformation.” (Welsh, *Timeline*). Apart from this notable exception it is difficult to locate any public statement of the problem in the United Kingdom.

Unfortunately, the problem of credulity does not necessarily cease with frequent mention, as in the United States, in spite of the number of reported cases, there is still not sufficient public will to

The New Barbarism

Since access to a mind-reading machine will enable the operator to access the ideas of another person, we should prepare ourselves for a new world order in which ideas will be, as it were, up for grabs. We need not doubt that the contents of another’s mind will be scooped up, scooped out, sorted through as if the event was a jumble sale. The legal profession would therefore be well advised to consider the laws on Intellectual Property very judiciously in order to acquit themselves with any degree of authenticity. We should accustom ourselves to the prospect of recognizing our work coming out of the mouth of another. The prospect of wide-scale fraud, and someone posturing in your stolen clothes will not be a pretty sight. The term “personal mind enhancement” is slipping in through the back door, to borrow a term used by the Co-Director of the Center for Cognitive Liberty and Ethics, and it is being done through technologically-induced mental co-ercion – mind raping and looting. In place of, or in addition to, cocaine, we may expect to see ‘mind-enhanced’ performances on “live” television.

The brave new science of neuropsychiatry and brain mapping hopes to find very soon, with the fMRI scanner – this “brand new toy that scientists have got their hands on” – “the blob for love” and “the blob for guilt”, (BBC Radio 4: All in the Mind, 5 March, 2003). Soon we will be able to order a brain scan for anyone whose behaviour strikes us as odd or bizarre, and the vicissitudes of a life need no longer trouble us in our diagnostic assessments. In his recent Reith Lectures for the BBC (2003), Professor Ramachandran, the celebrated neuroscientist from the La Jolla Institute in San Diego, California, has demonstrated for us many fascinating things that the brain can do. He has talked to us about personality disorders and shown that some patients, who have suffered brain damage from head injury, do not have the capacity to recognise their mothers. Others feel that they are dead. And indeed he has found brain lesions in these people. In what seems to be an enormous but effortless leap, the self-styled “kid in a candy store” is now hoping to prove that all schizophrenics, have damage to the right hemisphere of the brain, which results in the inability to distinguish between fantasy (sic) and reality. Since Professor Ramachandran speaks of schizophrenia in the same breath as denial of illness, or *agnosia*, it is not clear, and it would be interesting to know, whether the person with the head injury has been aware or unaware of the head injury. Also does the patient derive comfort and a better chance at reality testing when he is told of the lesion? Does he feel better when he has received the diagnosis? And what should the psychoanalysts – and the psychiatrists, – feel about all those years of treating people of whose head injuries they were absolutely unaware? Was this gross negligence? Were we absolutely deluded in perceiving recovery in a sizeable number of them?

It is, however, lamentable that a neuroscientist with a professed interest in understanding schizophrenia should seek to provide light relief to his audience by making jokes about schizophrenics being people who are “convinced that the CIA has implanted devices in their brain to control their thoughts and actions, or that aliens are controlling them.” (Reith Lecture, No 5, 2003).

There is a new desire for **concretisation**. The search for meaning has been replaced by the need for hard proof. If it doesn’t light up or add up it doesn’t have validity. The physician of the mind has become a surgeon. “He found a lump as big as a grapefruit!”

Facing up to the Dread and Fear of the Uncanny

Freud believed that an exploration of the uncanny would be a major direction of exploration of the mind in this century. The fear of the uncanny has been with us for a very long time. The evil eye, or the terrifying double, or intruder, is a familiar theme in literature, notably of Joseph Conrad in *The Secret Sharer*, and Maupassant’s short story, *Le Horla*. Freud’s analysis of the uncanny led him back to the old animistic conception of the universe: “...it seems as if each one of us has been

hens, we might not regard it morally irrelevant to scrutinise the large corporations producing electronically innovative 'software.' We might also be wary about the origins of the sort of bland enticements of dating agencies who propose finding your ideal partner by matching up brain frequencies and 'bio-rhythms'.

We do not know enough about the background of such technology, nor how to evaluate it ethically. We do not know about its effects on the future, because we are not properly informed. If governments persist in concealing the extent of their weapon capability in the interests of defence, they are also leaving their citizens disempowered of the right to protest against their deployment. *More alarmingly, they are leaving their citizens exposed to their deployment by ruthless organisations whose concerns are exactly the opposite of democracy and human rights.*

Back in the United Kingdom

Meanwhile, back in England, the Director of the Oxford Centre for Cognitive Neuroscience, Professor Colin Blakemore, also the elective Chief Executive of the Medical Research Council writes to the author that he "... knows of no technology (not even in the wildest speculations of neuroscientists) for scanning and collecting 'neuronal data' at a distance." (Blakemore, 2003,) This certitude is at distinct variance with the fears of other scientists in Russia and the United States, and not least of all with the fears of the French neuroscientist, Jean-Pierre Changeux of the French National Bioethics Committee already quoted (see page 5). It is also very much at odds with the writing of Dr Michael Persinger from the Behavioural Neuroscience Laboratory at Laurentian University in Sudbury, Ontario, Canada. His article "On the Possibility of Directly Accessing Every Human Brain by Electromagnetic Induction of Algorithms" (1995), he describes the ways that individual differences among human brains can be overcome and comes to a conclusion about the technological possibilities of influencing a major part of the approximately six billion people on this planet without mediation through classical sensory modalities but by generating electromagnetic induction of fundamental algorithms in the atmosphere. Dr Persinger's work is referred to by Captain John Tyler whose work for the American Air Force and Aerospace programmes likens the human nervous system to a radio receiver. (1990)

Very recently the leading weekly cultural BBC radio review had as one of its guests, the eminent astro-physicist and astronomer royal, Sir Martin Rees, who has recently published a book, "Our Final Century", in which he makes a sober and reasoned case for the fifty-fifty chance that millions of people, probably in a 'third-world country' could be wiped out in the near future through biotechnology and bio-terrorism – "by error or malign release." He spoke of this devastation as possibly coming from small groups or cults, based in the United States. "...few individuals with the right technology to cause absolute mayhem." He also said that in this century, human nature is no longer a fixed commodity, that perhaps we should contemplate the possibility that humans would even have implants in the brain.

The other guests on this programme were both concerned with Shakespeare, one a theatre producer and the other a writer on Shakespeare, while his remaining guest was a young woman who had a website called "Spiked", the current theme of which was Panic Attack, that is to say, Attack on Panic. This guest vigorously opposed what she felt was the pessimism of Sir Martin, regarding his ideas as essentially eroding trust, and inducing panic. This reaction seems to typify one way of dealing with threat and anxiety, and demonstrates the difficulty that a warning voice, even from a man of the academic distinction of Martin Rees, has in alerting people to that which they do not want to hear. This flight reaction was reinforced by the presenter who summed up the morning's discussion at the end of the programme with the words: "We have a moral! Less panic, more Shakespeare!"

make strenuous protest against what is not only already happening, but against what will develop if left unchecked. It appears that the administration believes that it is necessary and justifiable, in the interests of national security, to make experimental human sacrifices, to have regrettable casualties, for there to be collateral damage, to suffer losses in place of strife or war. This is, of course, totally incompatible with any claims to be a democratic nation which respects the values of human life and democracy, and such an administration which tutors its servants in the ways of such barbaric tortures must be completely condemned as uncivilised and hypocritical.

Disbelief as a Defence Mechanism

In the face of widespread disbelief about mind-control, it seems worth analysing the basis of the mechanisms employed to maintain disbelief:

i) In the sixties, Soviet dissidents received a significant measure of sympathy and indignant protest from western democracies on account of their treatment, most notably the abuse of psychiatric methods of torture to which they were subjected. It is noteworthy that we seem to be able to access credulity, express feelings of indignant support when we can identify with victims, who share and support our own value system, and who, in this particular historical case, reinforced our own values, since they were protesting against a political system which also threatened us at that time. Psychologically, it is equally important to observe that support from a safe distance, and the benefits to the psyche of attacking a split-off 'bad father', the soviet authorities in this case, presents no threat to one's internal system; indeed it relieves internal pressures. On the other hand, recognizing and denouncing a similar offence makes very much greater psychic demands of us when it brings us into conflict with our own environment, our own security, our own reality. The defence against disillusion serves to suppress paranoia that our father figure, the president, the prime minister, our governments – might not be what they would like to be seen to be.

ii) The need to deposit destructive envy and bad feelings *elsewhere*, on account of the inability of the ego to acknowledge ownership of them – reinforces the usefulness of persons or groups, which will serve to contain those, disowned, projected feelings which arouse paranoid anxieties. The concepts of mind-invasion strike at the very heart of paranoid anxiety, causing considerable efforts to dislodge them from the psyche. The unconscious identification of madness with dirt or excrement is an important aspect of anal aggression, triggering projective identification as a defence.

iii) To lay oneself open to believing that a person is undergoing the experience of being invaded mentally and physically by an unseen manipulator requires very great efforts in the self to manage dread.

iv) The defence against the unknown finds expression in the split between theory and practice; between the scientist as innovator and the society who can make the moral decisions about his inventions; between fact and science fiction, the latter of which can present preposterous challenges to the imagination without undue threat, because it serves to reinforce a separation from the real.

v) Identification with the aggressor. Sadistic fantasies, unconscious and conscious, being transferred on to the aggressor and identified with, aid the repression of fear of passivity, or a dread of punishment. This mechanism acts to deny credulity to the victim who represents weakness. This is a common feature of satanic sects.

vi) The liberal humanist tradition which denies the worst destructive capacities of man in the effort to sustain the belief in the great continuity of cultural and scientific tradition; the fear, in one's own past development, of not being 'ongoing', can produce the psychic effect of reversal into the opposite to shield against aggressive feelings. This becomes then the exaggerated celebration of

the 'new' as the affirmation of human genius which will ultimately be for the good of mankind, and which opposes warning voices about scientific advances as being pessimistic, unenlightened, unprogressive and Luddite. Strict adherence to this liberal position can act as overcompensation for a fear of envious spoiling of good possessions, i.e. cultural and intellectual goods.

vii) Denial by displacement is also employed to ignore the harmful aspects of technology. What may be harmful for the freedom and good of society can be masked and concealed by the distribution of new and entertaining novelties. The technology, which puts a camera down your gut for medical purposes, is also used to limit your freedom by surveillance. The purveyors of innovative technology come up with all sorts of new gadgets, which divert, entertain and feed the acquisitive needs of insatiable shoppers, and bolster the economy. The theme of "Everything's up to date in Kansas City" only takes on a downside when individual experience – exploding breast implants, say – takes the gilt off the gingerbread. Out of every innovation for evil (i.e. designed for harming and destroying) some 'good' (i.e. public diversion or entertainment) can be promoted for profit or crowd-pleasing.

viii) Nasa is sending a spacecraft to Mars, or so we are told. They plan to trundle across the Martian surface searching for signs of water and life. We do not hear dissenting voices about its feasibility.

Why is it that, when a person accounts that their mind is being disrupted and they are being persecuted by an unseen method of invasive technology, that we cannot bring ourselves to believe them? Could it be that the horror involved in the empathic identification required brings the shutters down? Conversely, the shared experience of the blasting of objects into space brings with it the possibilities of shared potency or the relief that resonates in the unconscious of a massive projection or evacuation – a shared experience which is blessed in the name of man's scientific genius.

ix) The desire 'not to be taken in', not to be taken for a fool, provides one of the most powerful and common defence mechanism against credulity.

Power, Paranoia and Unhealthy Governments

The ability to be the bearer and container of great power without succumbing to the pressures of latent narcissistic psychoses is an important matter too little considered. The effect of holding power and the expectation and the need to be seen as capable of sustaining it, if not exercising it, encourages omnipotence of thought. In the wake of this, a narcissistic overevaluation of the subject's own mental processes may set in. In the effort to hold himself together as the possessor, container and executor of power, he (or indeed, she) may also, undergo a process of splitting which allows him, along with others, to bear enthralled witness of himself in this illustrious role. This may mean that the seat of authority is vacated, at least at times. The splitting process between the experiencing ego and the perceiving ego allows the powerful leader to alternate his perception of himself inside and outside, sometimes beside, himself. With the reinforcement of himself from others as his own narcissistic object, reality testing is constrained. In this last respect, he has much in common with the other powerful figure of the age, the movie star. or by those, in Freud's words, who are "ruined by success."

In a world, which is facing increasing disillusion about the gulf between the public platforms on which governments are elected, and the contingencies and pragmatics of retaining defence strategies and economic investments, the role of military and intelligence departments, with their respective tools of domination and covert infiltration, is increasingly alarming. Unaccountable to the public, protected from exposure and prosecution by their immunity, licensed to lie as well as to kill, it is in the hands of these agents that very grave threats to human rights and freedom lies. Empowered to carry out aggression through classified weapon experimentation which is

undetectable, these men and women are also open to corruption from lucrative offers of financial reward from powerful and sinister groups who can utilize their skills, privileged knowledge and expertise for frankly criminal and fascist purposes.

Our information about the psychological profiles of those who are employed to practice surveillance on others is limited, but it is not difficult to imagine the effects on the personality that would ensue with the persistent practice of such an occupation, so constantly exposed to the perversions. One gains little snatches of insight here and there. In his book on CIA mind control research (Marks, 1988), John Marks quotes a CIA colleague's joke (always revealing for personality characteristics): "If you could find the natural radio frequency of a person's sphincter, you could make him run out of the room real fast." (One wonders if the same amusement is derived from the ability to apply, say infra-sound above 130 decibels, which is said to cause stoppage of the heart, according to one victim/activist from his readings of a report for the Russian Parliament.)

Left to themselves, these servants of the state may well feel exempt from the process of moral self-scrutiny, but the work must be dehumanising for the predator as well as the prey. It is probably true that the need to control their agents in the field was an incentive to develop the methods in use today. It is also an effectively brutalising training for persecuting others. Meanwhile the object, the prey, in a bid for not only for survival but also in a desperate effort to warn his or her fellows about what is going on, attempts to turn himself into a quantum physicist, a political researcher, a legal sleuth, an activist, a neurologist, a psychologist, a physiologist – his own doctor, since he cannot know what effects this freakish treatment might have on his body, let alone his mind. There are always new methods to try out which might prove useful in the search to find ways of disabling and destroying opponents – air injected into brains and lungs, lasers to strike down or blind, particle beams, sonar waves, or whatever combination of energies to direct, or destabilise or control.

Science and Scepticism

Scientists can be bought, not just by governments, but also by sinister and secret societies. Universities can be funded by governments to develop technology for unacceptably inhumane uses. The same people who deliver the weapons – perhaps respected scientists and academics – may cite the acceptable side of scientific discoveries, which have been developed by experimenting on unacknowledged, unfortunate people. In a cleaned up form, they are then possibly celebrated as a break-through in the understanding of the natural laws of the universe. It is not implausible that having delivered the technical means for destruction, the innovator and thinker goes on, wearing a different hat, to receive his (or her) Nobel Prize. There are scientists who have refused to continue to do work when they were approached by CIA and Soviet representatives. These are the real heroes of science.

In the power struggle, much lies at stake in being the first to gain control of ultimate mind-reading and mind-controlling technology. Like the nuclear bomb, common ownership would seem by any sane calculations to cancel out the advantage of possession, but there is always a race to be the first to possess the latest ultimate means of mass destruction. The most desirable form is one that can be directed at others without contaminating oneself in the process – one that can be undetected and neatly, economically and strategically delivered. We should be foolish to rule out secret organisations, seeing threat only from undemocratic countries and known terrorist groups.

As consumers in a world which is increasingly one in which shopping is the main leisure activity, we should concern ourselves to becoming alert to the ways in which human welfare may have been sacrificed to produce an awesome new gadget. It may be the cause for celebration for the 'innovator', but brought about as the result of plugging in or dialling up the living neuronal processes of an enforced experimentee. If we are concerned not to eat boiled eggs laid by battery

The Executive Summary Neuropsychological and Electronic No-touch Torture Report

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Torture is a horrific topic and most minds will turn away from it because it can't be comprehended that humans can be motivated, or computer programs can be run to do this to other sentient beings. Just when we believed we were becoming more civilized as a culture, the technology for torture has advanced more than a hundred fold in recent decades.

This summary will get into 'the minds of the dishonorable monsters' of the psychology of torture. Those like Dick Cheney who helped authorize it under certain administrations and regimes of the U.S. government which have been proven to be criminal under U.S. law, treaties, and the International Criminal Court. There are many people involved in the conspiracy and cover-up including General Hayden.

The full report discloses the spectrum of techniques of interrogation and torture used by the U.S. and its allies. The United States government will officially deny the claims of this "no-touch torture report" but in time it will stand firm.

The technologies used are still classified as state secrets and will not be discussed in this summary. The torture methods have been leaked through thousands of American citizens who have survived the no-touch torture programs. The research and testimony has been accumulated since 2002 and merely used as examples but the names of the victims are withheld.

This report will not use skewed, misleading language such as "enhanced interrogation" to describe the torture techniques.

Why torture? The CIA claims it works. The assumption is that it works to gain actionable intelligence. Torture is often used for revenge, punishment, interrogation, and behavior modification. In other terms torture is used to remove the continuity of thought to confuse the target to reveal information, erase brain patterns such as values and beliefs, or to break down the human spirit to make them submit and obey their handlers.

The downside of torture is that the countries that do it lose "moral soft power" in world politics. Without due process, over 25% of those reported in the *Senate Torture Report* were declared innocent. Blowback is always a repercussion of torture. Torture often takes a long time to affect the target from months to years. Torture has shown to be unreliable except for getting false confessions and bad information but the U.S. and its allies are improving on their tactics and techniques.

The purpose of this report is to draw the parallels between physical torture techniques and no-touch torture methods used in secret by governments who possess the technologies that still go on today. This is a brief summary of offensive psychological and information warfare methods using traditional methods and modern cybernetic techniques while exploring hyper-game theory to walk the target to the desired path: leak intelligence, commit assassinations, or change beliefs.

Numerated Torture Methods for Interrogation and Behavior Modification

(A comparison between physical and no-touch torture tactics)

1. Induction of Depressive/Manic states

The idea is to shake up the emotional states of the target because different information can be accessed at each state. Making the target feel despair and helplessness is the objective. This cycle of hope building and then breaking is done in many ways. The techniques between the physical methods and the no-touch technological methods are similar. Speech is very important during this process of emotional manipulation. Such examples are, "We have imprisoned you without due processes or hope of it. You are indefinitely detained." Hope building examples include, "Sorry. We have mistaken you for someone else. You will be compensated for false imprisonment and torture." The main difference between the cybernetic technology and physical is that emotional state clusters can be entrained into the target mind which speeds up the process. The communication is done differently but is perceived as human speech. In the no-touch torture methods it is helpful if the target is labeled with mental illness that is being created for discrediting purposes so as not to draw human rights groups' attention.

2. Memory Erasure

The military and CIA have been researching memory erasing drugs for half a century. The focus of this summary report is on interrogation. Memory erasure is an important technique during interrogation. It is used in combination with sleep deprivation. There are many drugs that have been developed for physical memory erasure. One such interrogation method requires acquiring information from the target while on these drugs and recording the subject. After a sleeping cycle, the interrogator claims that the target has confessed. Of course the target remembers nothing of their conversation. The interrogator will play samples of the subject's conversation back to them making the subject believe that the interrogator knows more than they do. Similar techniques are used in the wireless, no-touch torture and interrogation programs. The cybernetic methods of memory erasure have additional purposes. The memory erasure can be used on the cybernetic target to make the target believe people have broken in and moved their belongings. While physical black bag jobs do occur, it is a way to make the target more paranoid.

3. Electricity and Shocks

Pain and fear of death are common tactics during interrogation. Shocking by electricity is a traditional method of torture and exposed in the CIA's secret prisons. Shocking the testicles and nipples are the most common due to their sensitivity. Interestingly, the thousand of interviews of no-touch torture involves "stings" and "shocks" to various parts of their bodies over long durations.

4. Fear and Terror

There are many techniques to induce extreme fear in the target. In physical renditions dogs, power drills, guns, insects, mutilation, blow torches, water boarding, suffocation, mock burials, and mock executions are just a few the United States government have used. Remember that many targets of torture die from the physical effects. It is torture to death. Let us compare the **no-touch torture methods** used to inflict the same terror and mental anguish. In several of these techniques the **target needs to hear their handler's voice**. This report does not describe the technologies used to broadcast voices to the target at a distance. While the subject can be broadcast **mental images to their mind using hypnosis and other suggestions as well as visual entrainments**, the more **invasive controls of the brain manipulation technologies** can be used to entrained the brain's autonomic nervous systems such as **not breathing causing the target to not be able to sleep from fear of suffocation** equivalent to water boarding. The **neural linguistic programming** can add fears such as **heart attack, stroke, and cancer threats**. Even motor cortex mapping can cause **twitches in any part of the body**. One example used a swift neck movement with a voice transmission, **"We are trying to break your neck."** Directed energy effects such as Active Denial System can make the target feel that they are **on fire indefinitely without the target dying from burns**. Maximum pain and torture weapons have been evolving. **Every drug effect can be artificially induced into the target mind including those of poisons.**

5. Imprisonment and Isolation

Isolation is commonly used as punishment in prisons. Many whistleblowers like Bradley Manning suffer this condition. In soft interrogation it is used to get the **target to talk to their interrogator since humans have the need for companionship**. In no-touch torture the target is driven from their friends and family using different techniques in order to isolate them so that the **electronic mind control has more effect on their psyche**. Like in Guantanamo, the target becomes isolated losing their job and medical care. Part of the method involves **slander in their community**. They end up on the most part in **poverty and paranoid about doctors and other people from false correlations that are purposefully induced into their lives**. Isolation is also a form of sensory deprivation which will be discussed later. **Days and weeks lose their meaning.**

6. Sexually Disturbing Tailored Pornography

The *Summary of the Senate Torture Report* disclosed the disgusting revelations that in the secret torture prisons the targets were forced to perform homosexual acts on each other against their will and religion in order not to be beaten or killed. This is a common break down tactic of belief systems and the human will. In no-touch torture the techniques are more **psychologically specialized for each target**. Most common examples include **homosexual targets that are forced with voices that are derogatory to their lifestyle and similar mental images**. **Almost all targets are forced to view child pornography in their minds.**

And vice versa is true, that heterosexual targets are forced to view homosexual sexual acts like in the secret U.S. torture prisons.

7. Mutilation

Also mentioned in the declassified report on torture was mutilation of the human. Cutting the naked target's penis and scrotum, pulling nails or teeth is common. In no-touch torture mutilation is done by trickery. Let us look at a couple examples. There have been several targets who believed that the microwave hearing effect and other voice induction methods were done by microchips implanted in their teeth or ears. They had all their teeth pulled because they believed it was a technology called bone conductance. Others have poked out their ear drums in the belief they had micro implants in their ears. There are many more examples of trickery used to make the targets mutilate themselves.

8. Personal and Spiritual Defamation

In physical torture the CIA and other groups use propaganda and defamation of character for those they oppose. For detainees they try to disenfranchise the target from their religion. They will defecate on their Bible or Koran for example. They might say, "Why is your God not saving you?" In no touch torture and behavior modification they might try to make an atheist believe in god. It is just a mechanism to alter belief systems for control and experimentation. Perhaps the target may wish to confess their secrets to a "voice of god weapon". Information warfare covers the gamut of electronic communication as well. The government training exercise uses language like "befriend", "infiltrate", "mask/mimic", "ruse", "set-up", "disrupt", "create cognitive stress", "use deception", "ruin business relationships", and "post negative information on appropriate forums" - in a malicious effort to target bloggers, activists, journalists, social event organizers and anyone else deemed to be a 'emerging leader' or voice in the public sphere.

01
God let
us do
this to
you.
Penance
him.
01
where
is
your
God?

9. Psychological Intimidation

This is a topic for a target at the beginning of the trials and programs. Physical break-ins are common even if the target has an alarm system. The NSA has used stalking of foreign officials in the past for economic gain. The FBI does black bag jobs to invade a home without a warrant. The point is to let the target know they are being watched and to increase their paranoia. The NSA easily hacks all computer systems and causes harm to the victim's intellectual property and their relationships from that endpoint. In the no touch torture false correlations between pain and a neighbor coming home can be induced.

10. Rape

Rape is a common practice in torture. It causes much psychological trauma. In the United States methods of rape in their military and CIA secret prisons it is often relabeled. It is commonly done by prods but "rectal rehydration" is the more common misnomer. Often they call it forced feeding through the rectum but it is meant to induce psychological scaring and trauma. Several have died from the technique due to rectal bleeding. In no-touch

torture the psychological trauma of simulated rape takes on different forms. Using technique often called EEG-heterodyning the targets will receive molestation effects of their genitals. In men this can be the anus and genitals. Similarly women can be wirelessly raped by the analogous function of perception.

11. Dietary Manipulation, Forced Weakness and Sickness

The idea behind dietary manipulation is to weaken the target. This is easily done in a physical setting but in no-touch the hunger trigger needs to be suppressed. Sometimes a false correlation between eating food and sickness is induced to make the target believe they are being poisoned. However, poisoning is common in physical renditions too.

12. Repetition

Verbal breakdown is most important during interrogations and torture. Obviously speaking the language of the target is necessary. This is why there are interrogators in all languages. Repetition is an important neural linguistic programming interrogation tactic to influence the target mind. During the breakdown process, threats to kill and to torture the target's family or friends are common. Repetitious questioning and breakdown phrases are automated in both the physical and no-touch versions of torture. An interesting technology that is used for no-touch torture is called chatter bots. Chatter bots, an artificial intelligence program, automate much of the repetition so that the interrogators don't drive themselves crazy during the neural linguistic torture and programming phases. Let us not forget the Chinese Water Torture, a single drop of water on the forehead of the detainee for months. Repetition is a form of torture.

Every Day

13. Sensitization of Pain Impulses

While the reverse can be obtained, optimizing perceived pain and misery is the objective in torture. Each trauma adds to the overall misery throughout life. Optimization of pain has been studied by the military and intelligence agencies. In the past the CIA has used drugs such as LSD to enhance fear and terror in the subject. Other methods such as hypnosis can increase perceived pain and the power of suggestion such as telling the subject his pinky finger is going to be cut off before it is done. In no-touch torture the same psychological manipulations are exerted. Subliminal and overt suggested are often told to the subject before the directed energy or EEG heterodyning pain inductions in order to maximize their effectiveness.

cut off
X/7/2

14. Sensory Overload and Deprivation

Again, this technique of overloading or depriving the human of sensory stimulus is ubiquitous in torture around the world not just in U.S. secret prisons. Torture subjects in the United States have reported the use of repetitive bad music and noise campaigns. An unusual torture technique used in the U.S. secret prisons was of a use of a plastic suit filled with ice while they beat the target. Ultra bright lights for days on end in the prison and hot/cold temperature changes in the environment are frequent. In no-touch torture, the target's brain

is forced to release dopamine which causes pupil dilatation. This acts as a sensory overload. For example the non-lethal microwave weapons research done by a professor in University of Nevada has shown this capability. Body metabolism can be altered with these weapons causing cold and hot flashes. Targets of no-touch torture often hear endless tinnitus.

15. Sexual Humiliation and Lack of Privacy

Often used in common prisons is a lack of privacy. It is both necessity for security and a form of sexual humiliation. Also in prison many people are raped. No-touch torture offers the same sexual humiliation and lack of privacy by using through wall radar, cameras, and EEG visual cloning to let the target know they are being watched. Degrading comments are often used on the no-touch torture subjects while they are naked or in the bathroom.

16. Maximum Sensory Pain Techniques

Basic torture involves brutalization, i.e. physical strikes, kicks in the groin, pepper spray or tear gas, etc. Anything that involves maximum pain is the objective. Amazingly, these same basic tortures can be done wirelessly into the human mind. All forms of sickness have been reported without any real illness behind the suffering. All suffering can be entrained into the minds of no-touch torture subjects.

17. Sleep Deprivation

This is the number one torture method along with the popularity in the press of water boarding. This is done in every country that uses torture. The United States is number one in torture since they are currently the world's only superpower. A repetitive sleep deprivation cycle is generally done 180 hrs/7.5 days at a time in the physical renditions, or in no-touch torture five days awake and two days of sleep. Sleep deprivation accomplishes the objective of memory loss during interrogation and induces hallucinations which help with the interrogation process. In behavior modification and programming it is necessary too.

18. Stress Positions

Keeping detainees handcuffed above their head and to walls so that they must stand for days is a common ploy in torture. These types of poses are called stress positions. They can be mimicked in no-touch torture. An example of one such trick requires the target to believe they can deflect radar energy using pots or pans and that it is directional. The target is being given an ample amount of pain until their hands and arms are spread apart holding the pans trying to block the signals. They must maintain that position in order to get any relief from the torture signals. However the stress position itself is physical torture. Often accompanying this technique are voices saying to the target, "You are doing it to yourself."

We will finish off this summary of U.S. and its allies' torture, interrogation, and behavior modification experimentation with ideas of why they are done to the general public and falsely accused

detainees. Anyone can be put into these programs. Justice and rule of law does not exist at the highest levels of government. Treaties are worthless because the #1 agreement in the rules of war, a ban against torture, is not obeyed. This creates a more brutal and barbaric society lead by example.

No-touch torture uses the same interrogation tactics as physical interrogations but with some new twists. Techniques such as "Jeff and Mutt" a.k.a. "Good Cop Bad Cop" are used. The bad cop tortures the target and the good cop tries to gain their trust. In mind control, trust games are commonly employed to manipulate the beliefs of the target. Creating hatred of groups through false correlations and deception is a common CIA method of trickery.

In the CIA programs, the target is put through these phases as written in the documentation, "Disorient and confuse the target. Use them for our purposes, and then dispose of them in any way possible." We can only surmise by our sample set of a thousand people what "dispose" means: prison, suicide, or perhaps a mental hospital. Coercing and torturing people to suicide is very common. Both tactics in physical or no-touch torture involves plausible deniability.

threaten
and
w/ all
3

The no-touch interrogations are better than physical rendition techniques for exposing support networks. Traditional NSA tracking of email and phones calls are useful but if the targets are taken into a secret prison they can't contact their networks. In no-touch torture, the target will contact everyone who might help them. Then those relationships can be destroyed to isolate the target. All these techniques rely on the target having a fear of death and pain.

Deception is very important during interrogation. In physical interrogations the targets are often drugged. This creates the confusion necessary to pull off certain trickery. In terrorist interrogations, for example, the CIA uses fake newspapers to make the target believe whatever event they were suspected of plotting had already happened, obviously looking for a confession. Sometimes the government in charge of the torture is looking for a political gain through a false confession. None-the-less false flag operations are commonly used in both forms of torture and interrogation. The trick is to make the target believe another foreign country is doing it to them. In no-touch torture the trick is to make them believe someone related to them is behind their suffering.

Alter
info
on
internet
to
my cell

Voice transformation and morphing is an interesting technology also used in both physical and wireless interrogations. It is a form of deception used against a target to trick them into believing that they are speaking to real people that they know. It has been used in war to trick generals. Obviously spoofing email and other identities on internet forums can be used in this manner too.

Finally, the topic of human experimentation for improving weapons, torture, interrogation, and social disruption methods will be breached. Most of the techniques mentioned above work most effectively if the target has no SERE training (Survival, Evasion, Resistance and Escape) or psychological understanding of the methods to influence the human mind. Unfortunately, every sample point in the world's society needs to be studied to improve the weapons systems. This is why many random people are put into the torture and mind control experiments. There are some devious uses of a secret army of remote controlled assassins in every country in the world. The samples must include different education, language, culture, and economic factors. Obviously, silencing dissidents, oppositions of

Deane
God
etc

to blame my family (my wife) to my cell

political parties, and whistleblowers are included in the lists of applications. The most disturbing of the trends in torture is testing and improving it. No-touch torture is much more complex than physical torture. Testing design flaws and weaknesses of the signal intelligence is one reason why it is necessary to test on innocent targets. Often the subject will be taunted by the statement, "Try to stop us." This statement forces the torture subject to try to figure out shielding and jamming techniques to stop the wireless torture and helps the weapons designers to improve on the system.

However, the psychological and perceived physical pain is only half the story with no-touch torture. It also involves a set of scripts, mind games if you will, to walk the target to murder and/or suicide. This is called "Hyper Game Theory". It is used in war games to determine how to control your enemies and targets. Game Theory can be used on governments, individuals, or for determining propaganda to alter cultures. The experiments on the public provide a means to test the efficacy of these scripts and determine under what circumstances to use them.

One last comment on why "We must guard against the acquisition of unwarranted influence, whether sought or unsought, by the military industrial complex" as President Eisenhower warned. During these torture programs run by the United States and its allies, accurate "truth" data points need to be used to judge the efficiency of the interrogation methods. This is why there is a dispute between the CIA and Senate Intelligence Committee reports about the usefulness of torture. Subterfuge by the CIA hacking into the senate oversight committee's computers is a big deal; a rogue agency has been formed. Data fusion centers, Homeland Security Data Fusion Centers, NSA, and FBI collect data on Americans. This data in turn is used during torture and interrogation of Americans in no-touch torture.

IMPORTANT TO REVIEW DAILY FOR STEVEN R

Please keep a copy for the safety board and in the MAR Binder of his nurse

Steven has an advanced directive for a Code White. Please follow the steps outlined below if a Code is called:

PRIOR to a Code White being called, use the following de-escalation techniques:

1. First, gently ask Steven to **go to his room**.

Encourage him to take deep breaths, ~~meditate~~, or sing a hymn if he finds it helpful.

2. Ask him to take a **bath** to help calm him.

If unsuccessful and leads to a Code White:

3. **Mechanical restraints** are used first prior to chemical restraints.

Please note: If a Code White is called, **do not let Steven off the unit** until the physician has assessed him.

Only code white injection is available.

physical threat of mechanical restraint is not
- no longer threat period

Behavioural Care Plan for Intrusive, Labile or Inappropriate Behaviour:

- If, based on the care team's clinical assessments, his behavior is found to be challenging, disruptive, intrusive, labile, inappropriate, or incongruent, the team will support Steven by setting appropriate limits. Please use these exact words describing his behaviour to help him understand how he is acting in the moment.
- As part of this support, the following privileges can temporarily be restricted. These include the use of his iPad, cell phone and other electronics, access to the courtyard, paper and pens, and the ability to order food. This also includes his ability to use the patient computer. All the privileges need to be restricted at once and at the same time.
 - First occurrence: These privileges will be restricted for 24 hours.
 - Repeated behavior: If the behavior continues, the duration of the restriction will increase by 24 hours each time (e.g., 48 hours for a second occurrence, 72 hours for a third, and so on).
 - Steven will have the opportunity to earn back these privileges based on improved behavior and ongoing collaboration with your care team.
- Encourage to re-direct him to his room as well.
- Steven can use the patient phone only once on day shift and once on evening shift for 30 minutes at a time.

Writing About Staff on the Internet:

- We have already had several conversations with Steven regarding writing staff names in his blog. He is aware that he is not allowed to do so, and this would fall under the category of inappropriate behaviour. Should you find that there are posts about staff, please let the manager know. Steven is to delete the post. If he does not delete the post, the same rules apply regarding setting limits.

Going Off Ward to the Court Yard:

- Since Steven is permitted to go off the ward with two staff members twice per shift, we will be standardizing these times moving forward. This approach aims to promote consistency in his routine and help manage any behaviour that may arise from unclear expectations
- Steven can go off between the times of 8:30 – 8:50 AM, 2:00 – 2:20 PM, 4:00 – 4:20 PM, 8:30 – 8:50 PM
- If a second orderly is not available to help, his nurse for that day should be assisting with this task.

Code White Procedure:

- The care plan for his code white is based on our corporate code white policy for clients who wish to have a specific plan for a code.
- If you need to provide him with a chemical restraint during a code, there is no problem with this from a legal standpoint. This is because it is a psychiatric emergency and this is covered under the mental health act. It is not considered treatment. If this does happen, it is important that this is communicated to Steven as a chemical restraint and not treatment and also documented correctly.
- After the code, he would automatically be placed on CTE

- **Code White Directive:**

- PRIOR to a Code White being called, use the following de-escalation techniques.
 - First, gently ask Steven to go to his room. Encourage him to take deep breaths, meditate, or sing a hymn if he finds it helpful.
 - Ask him to take a bath to help calm him.
- If unsuccessful and leads to a Code White:
 - Mechanical restraints are used first prior to chemical restraints.
- Please note: If a Code White is called, do not let Steven off the unit until the physician has assessed him.
- Please note – des-escalation techniques are standard practice we do with all of our patients. We are not insinuating that if the situation escalates quickly or is very unsafe that he take a shower first. Please use your clinical judgement.

Other:

- He is not allowed to have his camera in his room, unless under the discretion of staff. An example would be using it to meet with his lawyer.
- We will not providing him with any photocopies or printed material, unless it is required by SW or MD (for example – filling out paperwork for ID)
- He is not allowed a service dog
- He is not allowed a printer in his room.
- Dr. Rogers will be considering him going to appointments off the unit and will review this on a bi-weekly basis. The reason would require a clinical/therapeutic reason/indication where it cannot be addressed if he doesn't go off unit. An example would be an appointment for getting new glasses.

From Fiona Barnett's Eyes Wide Open

Committing suicide due to the lockdown and restrictions. I hear of people giving up **hope** because they don't want to live in the emerging social structure in which people are subjected to the same **torturous** conditions I **experienced** as a child at the hands of military mind controllers: **Isolation**, **deprivation**, **confusing and contradicting instruction**, **loss of identity**, **and culture**, **discrimination**, **shock and trauma**, **excessive scrutiny**, **humiliation**, and **reduced self-worth**. To such fragile folk, I implore, Humanity has been promised that we will never be tested **beyond what we can endure**. What you experience now, **I have endured my entire life**.

We will never return to the life we knew. They will **toy with us until we submit** - or not. To illustrate, the **Nazis** did not simply kill everyone upon their arrival at the death camps, and not all were **experimented on**. Instead, the fascists dragged the internment experience out to where people either **broke or persevered**.

This is because the **Devil** is **doomed**, his time is short, and all he can do is **bitingly take as many to kill with him as possible**. To achieve this he must pressure people into **artificially giving up hope**, **giving up God**, and **relinquishing their right to eternal life**. That is why the **Mark of the Beast**, which **guarantees eternal damnation**, will be a **conscious choice**.

We are at war. The current battle is for our **minds and wills**. Their weapon is **psychology**. Our defense is **vigilance**, **adaptation**, **wisdom**, **patience**, and **endurance**. It is time for everyone to adapt to the new normal, just as we **Military Mind Control victims** learned to do as young children. It is time to redefine the means of life, the universe and everything, and to realize what truly matters.

The **Book of Daniel (12:10)** said of these **latter times**:

Many shall be purified and made white and tried;
but the wicked shall do wickedly,
and none of the wicked shall be understood,
but the one shall be understood.

Forgive men,
Not
Vengeance.

For our struggle is not against flesh and blood, but against the rulers, against the powers of this dark world and against the spiritual forces of evil in the heavenly realms.

Ephesians 6:12

*currently undergoing review

CORPORATE POLICY & PROCEDURE
EMERGENCY USE OF RESTRAINTS
(ROHCG)
CORP X-ii – 200

EMERGENCY USE OF RESTRAINTS (Least Restraint)			
SECTION: X-ii PATIENT CARE – Patient Care Procedures		NO: 200	
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		Date Revised: 06/01/2012, 17/05/2012, 17/04/2015, 16/10/2017, 20/06/2019	
		Date Implemented: 01/12/2011, 15/05/2014, 27/05/2015, 20/06/2019	
Key Words:	Restraint, Seclusion, Chemical, Physical, Mechanical, Environmental, Least Restraint, Safety Device, Mobility Device, Protective Device,	Cross Reference(s)	CORP X-ii 201 Seclusion, CORP IX-i 110 Code White, CORP X-ii 140 Therapeutic Engagement & Assessment, CORP IV-i 110 Prevention & Management of Violence in the Workplace, CORP VII-iii 100 Patient Incident Reporting & Response, CORP X-ii 202 Safety Devices, CORP II-i 130 Officer-in-Charge, CORP II-i 131 Person-in-Charge,

1. PURPOSE:

To establish criteria for the emergency use of restraints in situations where there is risk of harm to self or others at the Royal Ottawa Health Care Group (ROHCG)

2. POLICY STATEMENT:

Chemical/physical/mechanical restraints will only be used as a last resort in emergency situations where a patient presents aggressive or violent behaviours that place the patient and others at an immediate risk of serious bodily harm. Restraints must only be used for the shortest possible duration to safely manage a situation based on continuing clinical assessments. Restraints are never to be used for punitive reasons. Any event resulting in the use of restraint must be reported in Client Safety Incident and Feedback System (CSIF).

3. SCOPE:

This policy applies to the ROHCG excluding Long-Term Care Beds which are covered by *CORP XII 120 Minimization Of Use Of Restraints*. This policy does not cover the use of seclusion (*CORP X-ii 201 Seclusion*) or positioning/protective devices (*CORP X-ii 202 Safety Devices*).

4. GUIDING PRINCIPLES:

Any type of restraint use will be in accordance with provisions set out by current legislation and ROHCG policies. The ROHCG encourages and supports a philosophy of least

CORPORATE POLICY & PROCEDURE
EMERGENCY USE OF RESTRAINTS
(ROHCG)
CORP X-ii – 200

restraint, requiring, when possible, the use of all possible alternative interventions prior to the use of restraints. Care is provided with dignity and compassion, respecting a patient's rights. Initiation of restraint constitutes a serious change in a patient's status. The patient's Substitute Decision Maker (SDM) and family members, with the patient's consent, should be informed of the application of restraint. Ongoing communication with the patient and SDM/family, with the patient's consent, is required for changes in communication. All discussions are to be documented in the patient's Electronic Health Record (EHR). The Manager-Patient Care Services (PCS)/delegate will be notified of the initiation of restraint at the time of application of restraint.

5. DEFINITIONS:

Restrain to place under control when necessary to prevent serious bodily harm to the patient or to another person by the minimal use of such force as is reasonable, having regard to the physical and mental condition of the patient. *(Revised from the Mental Health Act, 2000)*

Restraint: Any intervention used to limit a patient's movement, control their mobility or inhibit a behaviour that may be injurious to themselves or others and with whom other intervention, for example, communication and de-escalation have been unsuccessful.

Chemical Restraint: means a pharmacological intervention administered which is used to address patient behaviours that represent a risk for imminent harm to that patient and/or others.

Mechanical Restraint: Any approved device used with the primary intent to restrict or confine the patient's movement. This does not include safety/protective devices or required mobility equipment.

Physical Restraint: The use of techniques taught in Non-Violent Crisis Intervention (NCI) training by staff to physically restrict the patient's movement and/or behaviour; the intentional restriction of a patient's movement by the use of physical force.

6. PROCEDURE:

6.1 Initial/Admission Assessment:

6.1.1 As part of the admission process, a comprehensive assessment of the patient must be completed and documented by the Admitting Physician and/or Nurse (RN) in the patient's EHR. The assessment will include the patient's antecedents and triggers, early warning signs, crisis prevention, de-escalation preferences and a description of the therapeutic interventions used to maintain safety, all of which will be documented in the Crisis Prevention Plan intervention in the EHR.

6.1.2 Should a patient arrive at the ROHCG in handcuffs (or any other type of restraint) accompanied by Police or Correctional Officers, ROHCG staff will assess the patient and in collaboration with the accompanying officers decide on a plan for discontinuing the restraint. When it is determined that it is safe to do so the Police or Correctional Officers will remove the handcuffs and ROHCG staff will assume responsibility for the patient.

6.2 Initiation of Restraint: Staff will implement identified alternative measures prior to restraint initiation. There must be documentation in the EHR that the alternative measures were unsuccessful and the patient continued to exhibit behaviour that places self or others at risk of serious bodily harm. The RN and Attending Physician will consult regarding:

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staff
have to evaluate:

- The patient's current physical and mental status and any risks associated with the initiation of restraint;
- Events leading up to the initiation of restraint, less restrictive measures considered and/or employed, the clinical rationale for restraint and the patient's response to the intervention; and
- Interventions to be implemented to expedite the discontinuation of restraint.

6.2.1 Chemical restraint and mechanical restraint must be ordered in the EHR by a physician as soon as possible. There shall only be one active order for mechanical restraint for a given patient. There shall be **no** PRN (as needed) orders for any form of chemical restraint, mechanical restraint or seclusion. In the event that a physician is not present at the time of the emergency, a nurse may initiate the use of mechanical restraint and obtain a telephone or written order from the physician as soon as feasible. If the patient is voluntary at the time of initiation of restraint, it can be administered if there is an immediate danger to self or others (*Health Care Consent Act – S.7*). Should the patient require further restraint intervention then the Physician is required to initiate a Form 1 or a Form 3.

6.2.2 The interprofessional team should coordinate and plan for the administration of a chemical restraint or the application of a mechanical restraint. When responding to an episode of restraint only approved Personal Protective Equipment (PPE) is to be used (*CORP XI-200 Routine Practices & Additional Precautions*). This includes explanation to the patient and preparation of the environment. The patient's dignity and safety should be promoted by:

- Making every effort to gain the patient's cooperation and proceeding with the least restrictive options;
- Providing the patient with a choice of options to enable him/her to regain control; and
- Clearly communicating behavioral expectations to the patient, including the reason(s) for restraint and the behaviour necessary for discontinuing the restraint.

6.3 Methods of Restraints:

6.3.1 Chemical Restraint:

Use of Chemical Restraint:

- a) Chemical restraint is used to address patient behaviours that represent a risk of imminent harm to the patient and/or others. Chemical restraint medication should be administered via the least invasive route possible (i.e. oral medications should be considered prior to an intramuscular injection, when clinically indicated.)
- b) A chemical restraint is ordered by a Physician as a one time only dose order. The medication order will specify the name of the medication, its intended use as a restraint, dose and route. Should this chemical restraint order be acted upon, the Attending Physician/delegate will be immediately informed of the administration of the order. Since the order represents a one-time only dose, all chemical restraint orders will be discontinued on the patient's electronic Medication Administration Record (eMAR) following administration.

Care and Observation during Chemical Restraint:

- a) Patients who have received a chemical restraint will be monitored and assessed on continuous, face-to-face monitoring for the first hour after administration of each dose of chemical restraint medication, ensuring patient and staff safety.

Staff at the Royal
(copy for Steven's
records)

I am a Christian.

(Whether Dr. Rogers says it is a grandiose delusion
or NOT → Religious Discrimination.)

WANT TO GO TO
CARLETON THIS FALL
NOT SUICIDAL
NOT VIOLENT.
NO CREMATION RECORD

Pharmaceuticals is SIN.

(Anti psychotics are psychotropic)

Psychotropics are Pharmaceuticals, ~~and~~
(~~Even~~ if they were ~~NOT~~ and they ARE)
Psychotropics are SIN.

Romans 14:23
Romans 13
Luke 17:1-3

Wrote Advance Directive saying this.

reynhenca/my-advance-directive-2/
backup on archive.org.

~~ccc~~
July 17, 2025

Even if Form D application appeal process is
~~interfered~~ with, it is still

MEDICAL BATTERY

to treat ~~one~~ with anti-psychotics ~~ever~~
ever

it violates my religious freedoms which are protected
by the Canadian Charter of Rights & Freedoms.

Dr. Rogers is making it impossible for me to self-represent
and get a fair trial! → ILLEGAL

Dr. Rogers, (Acopy for Steven's
records, hopefully
they do not confiscate)

Romans 4:13
Romans 13
Luke 17:1-3

I am a Christian.

(Even if you say it is a grandiose delusion)

Pharmakeia is SIU.

Psychotropics are Pharmakeia.

Anti-psychotics are Psychotropics.

Psychotropics are SIU

See my
advance
directive
on
Reynn.ca
(hosted upon archive.org)

Even if the Form D application process
results in the government discarding my
advance directive.

I consider anti-psychotics to be SIU.

Forcing 'TREATMENT' is MEDICAL BATTERY
and VIOLATES my religious freedom
which are in the Canadian Charter of Rights
and Freedoms.

You are also interfering with my right to self
representation and have a fair trial.

This is ILLEGAL
Please, STOP!

-Steven Reynn
Scl, 17th, 2017

cc reynen@pm.me
receipt from fax please

Consent for Collection, Use and Disclosure of Personal and Personal Health Information

This form governs consent to collect, use and disclose personal information or personal health information under the *Freedom of Information and Protection of Privacy Act*, the *Municipal Freedom of Information and Protection of Privacy Act* and the *Personal Health Information Protection Act*, 2004.

This consent form must be signed by the patient or the substitute decision-maker (if the patient is not capable)

I, the undersigned, understand the purpose for the collection, use and disclosure of personal information and personal health information between Patient Ombudsman and the Health Sector Organization. I understand that I can refuse to sign this consent form.

Print name: Steven Reynen

Full name of Patient or Substitute Decision-Maker

Signature: [Signature]

Date: May 3, 2025

Telephone: 343-254-4590

Email: reynen@pm.me

The person signing is: the patient ☒ or the substitute decision-maker ☐

Authorization

cc The Royal Ottawa Mental Health Centre
I give permission to Patient Ombudsman (including its delegates, agents and employees) and the following health organization(s): The Royal Ottawa Hospital, The Ottawa Hospital Civic Campus, Royal Ottawa Mental Health Centre

Provide the name of the health organization (hospital, long-term care home, home care service organization, or community surgical and diagnostic centre)

to share with each other the personal and personal health information of the patient named below.

Patient Details

Patient Name: Steven Reynen

First Name

Last Name

Date of Birth: 1989/08/24

YYYY/MM/DD

Send the completed and signed consent form by mail, email, or fax:

Mail or courier:

Email: Mycomplaint@patientombudsman.ca

Fax: 416.597.5372

Box 130, 77 Wellesley St. W.
Toronto, ON M7A 1N3

Notice of Collection

Personal information on this form is collected by the Patient Ombudsman and staff of the Patient Ombudsman under the authority of s. 13.1, 13.2 and 13.3 of the *Excellent Care for All Act*, 2010, and of the *Freedom of Information and Protection of Privacy Act*. Information will be used to contact you and to attempt to facilitate a resolution of a complaint to the Patient Ombudsman. Information may be used in an investigation by the Patient Ombudsman and staff of the Patient Ombudsman. Questions about information collection should be directed to the Records Management & Privacy Specialist at 416.597.0339 ext. 5377 or 1-888-321-0339 ext. 5377.

Dr. Rogers,

I am non-violent
& am not suicidal.

Even if you need to better me
I hunger & thirst for justice!

You have restricted me to unit
until I get before the SCJ
regardless of my behavior. ~~How can I get there,
given what you have
done?~~

You have made it impossible for me
to self represent and get a fair trial.

I will self-represent. This is my right.

You said it was a grandiose delusion for
me to be one of God's elect.

consider
myself to be

I will not take down my
website, backed up on archive.org.

That just means I am adopted by my Abba,
because I accepted Christ Jesus free gift,
and am therefore sealed in the Holy Spirit.

You said this on an audio recording you
conducted to, and were aware of, available on
my website vegman.ca.

You and Nataria say content on my website
is inappropriate, and this is why you have
imposed a ~~strict~~ draconian care plan that
further infringes upon the religious freedoms that I have

which are protected by the Canadian Charter
of Rights and Freedoms,

I can't appeal the Form D decision,
given what you have done and I fully
intend to.

I can't self-represent on the 29th of July, 2025
@ 09:00, given what you have done.

The Form 9 expires on August 2nd, 2025,

I can't appeal this even, given what you have
done. Please let me order food to have with others,
I am called to do this as a Christian and you are interfering
with my religious beliefs.

I told the PG+T the situation. I spoke with
my SDM, she told me they are seeking legal counsel.

You told me that I told them that you injected me
once more. This never happened.

But, staff at the Royal, since some are complicit ^{and}
in illegal activity now have means, motive,
and opportunity to access email and send
communication impersonating me since you had
my laptop, cellphone, tablet, and password book confiscated.
Steven
Payson
July 21, 2025

I am ready to be homeless.

I want to go to Carleton Place in September.
Love you Mr. Payson and Jesus does too!

I dare to
be a Daniel,
in no small
part, thanks to
you.

Dr. Rogers

A copy for my records,

Please give me back my laptop,
cellphone, tablet, papers, pen,
reference books, paperwork,
password book.

I am self representing and have
a right to a fair trial.

Keeping this from me is illegal.

You are interfering with my rights!

-Steven Reynen

July 17th, 2017

I disagree what I did was inappropriate,
and just because you don't like what I
do, doesn't mean you can do something
illegal.

Steven Reynon
u u
July 16, 2018

R.C. v Dr. Klukach, 2018

For my records

Meeting w Dr. Rogers. Update Nelson Luker

Me: you are making it impossible for me to self represent and get a fair trial

Dr. Rogers: Well then get a lawyer

Me: No, I am self representing, this is my right

She denied me access to Health Care
I asked to go to Capital Optical, she
said 'NO'. Nothing else.

Told her NO suicide. If government
continues to support her in the pharmaceutical
I will let them kill me slowly.
(two options in a double-bind).

She refused to answer question about why she
said her current body is her glorified body.

Instead of \$7 CAD or the cost of a can of coke,
I am \$75,000 now from the small claims court
for how she has continued to treat me.
Can buy a service dog, she has denied me.

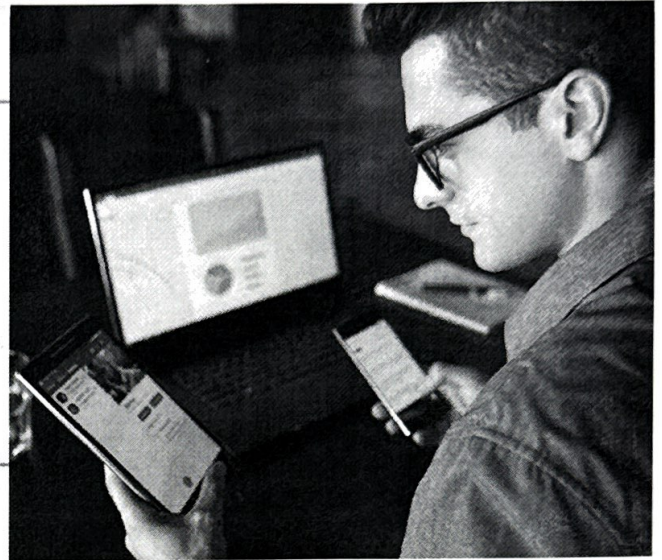
Schedule an Appointment

Pay Online



you keep your focus for longer stretches of time. Declutter and simplify your surroundings at home to remove distractions and improve focus. Simplification helps at work, too. Improve your concentration by completing existing projects before starting new ones.

**Improve your concentration
by completing existing projects
before starting new ones.**



Avoid overscheduling and learn to say no to new tasks or responsibilities. Saying no to unnecessary tasks gives you the time and focus to say yes to crucial ones.

How to Deal With Adult ADHD at Work

What distracts you the most at work? Social media? News alerts? Email? Texts? Your messy desk surface? Noisy co-workers? Distractions at work are a common challenge for employees with ADHD. Be honest with yourself about what causes your primary distractions and curtail those diversions using these tips.

- **Turn off notifications:** Route calls to voicemail. If you can, turn off message notifications. Check your messages at set times during the day.
- **Use noise-canceling headphones:** Headphones are ideal for busy or loud environments.
- **Choose a quiet space:** Request a quiet office space or cubicle.
- **Listen to music:** Play music or a white noise machine. Research shows that music structure helps the ADHD brain stay on a linear path and address timing deficits. However, not all music works the same way. Loud songs with lyrics can have a distracting effect on some adults with ADHD. The best music options for the benefit of concentration are classical composers and soothing instrumentals.
- **Adjust your work schedule:** Start work earlier in the day or stay later than usual when it's quieter at the office.
- **Maintain a clean desk:** Keep your workspace clutter-free to prevent visual distraction.

5. Respect Your Limits

If you start each morning feeling optimistic about how much work or activity you can incorporate into your day, you're not alone. Many people overextend themselves by taking on more tasks than they can handle or underestimating the amount of time they need to get things done. Nothing creates more pressure than committing yourself beyond your limits day after day. Failing to deliver on your promises, whether you've made them to your boss, family, friends or yourself, can take the wind out of your sails and leave you feeling even more



About

a little one of Christ Jesus (reynen.ca) is an independent publication launched in May 2025 by Steven Reynen. If you subscribe, you'll get email newsletters about new content when it's available. If you so choose, you may donate monthly or yearly as an ongoing donation to help support me financially while I am a psychiatric prisoner at the Royal Ottawa Mental Health Centre in Ottawa, Ontario Canada. The content will be the exact same as a free subscription. Thank you and God bless you!

Jesus Loves You!

Who is Steven Reynen?

A born again Christian (saved by grace through faith alone).

An ex-MK ULTRA slave - free in Christ since 2019.

(if I had an 'MK ULTRA backstory' - it would be John Egbert from [Homestuck](#))

A psychiatric prisoner. (Forms D, 4, and 33 - the age Christ Jesus died)

A satanic ritual abuse survivor.

A gang-stalking survivor.

A no-touch torture survivor (various mind invasive technologies).

A victim of EEG Heterodyning. (I had sleep studies done years ago here at The Royal - could have been done to me when I was three too though!)

I was '*third-eye blinded by Satan*' after I was saved (he was mocking me saying 'trust your Abba' as he did it). [\[Article here\]](#)

I believe I have Williams Syndrome. [\[Article here\]](#)

2 Corinthians 12:9-11

But he said to me, "My grace is sufficient for you, for my power is made perfect in weakness." Therefore I will boast all the more gladly about my weaknesses, so that Christ's power may rest on me. That is why, for Christ's sake, I delight in weaknesses, in insults, in hardships, in persecutions, in difficulties. For when I am weak, then I am strong.

My favourite gift from my Abba, Christ Jesus and the Holy Spirit (God Almighty - all-powerful, all-knowing, everywhere, eternal) is love.

I love Jesus Christ (The Lord of Lords and King of Kings).

I love my neighbours and enemies (my buddies: they can be both enemies and neighbours at the same time) - by God's grace.

I love my nation: Canada! (just not impressed with its legislation surrounding mental health)

I enjoy tobacco, music (especially hymns), basketball, puppies, nature, walking, and laughter.

I am working on making my humour more Godly, with my Abba's help of course! (Regeneration, baby!)

Despite the fact that I love them and respect them, I had to decide who I loved more, God or them, so I have cut ties with my extended biological family per:

Luke 18:29-30

And he said unto them, Verily I say unto you, There is no man that hath left house, or parents, or brethren, or wife, or children, for the kingdom of God's sake, Who shall not receive manifold more in this present time, and in the world to come life everlasting.

I am a grown man that thinks guinea pigs are adorable.

I can't wait to connect with some of my family (my brothers and sisters in Christ) - but I have major trust issues on account of all of the abuse. I hope they will be patient with me - even if I am a bit weird.

I have been justified. I am being sanctified. And I **will** be glorified!

I am a sinner, and a saint simultaneously.
 Of sinners I am chief, but I am no Paul - something I like to say.
 I look up to Paul. He said to imitate him as he imitated Christ - and I cannot wait to give **both** of them a hug.

I want all of my buddies (all over the world) to accept Christ's free gift (which will not be forced upon them). They have free will.
 It doesn't matter who they are - I am no better than they.
 So hear this, please:
 If you are:
 a Catholic
 a Muslim
 a Baha'i
 an Atheist
 a Freemason
 a Jesuit
 a Satanist
 a Rothschild
 a King or Queen
 a 'pure-blooded' Luciferian
 a MK-ULTRA slave
 etc.

I want you to be my brother or sister in Christ and have eternal life rather than experiencing eternal torment along with the Devil (who is **doomed**) and all the spiritual powers and principalities that serve him.
 Repent less ye perish.
 The only way is by believing in Jesus.

John 6:29

Jesus told them, "This is the only work God wants from you: Believe in the one he has sent."

Ephesians 2:8-9

For it is by grace you have been saved, through faith—and this is not from yourselves, it is the gift of God— not by works, so that no one can boast.

Ephesians 6:12

For our struggle is not against flesh and blood, but against the rulers, against the authorities, against the powers of this dark world and against the spiritual forces of evil in the heavenly realms.

Believe in Jesus and accept him as your Lord and Saviour and he will save you. You will face trials and tribulations, but you can be of good cheer.
 There is no better friend or counsellor than Jesus Christ.
 I pray you get the honeymoon period with Jesus that I never had the luxury of having (Mine only lasted an approximate literal day - but it was the best day of my life, bar none).

How to contact Steven?

email:
 steven@reynen.ca

mail:
 Steven Reynen
 1145 Carling Avenue
 Room 3861
 Schizophrenia North
 Ottawa, Ontario
 K1Z 7K4

Want to donate?

[donate here!](#)

(one time donation! you can put money on my commissary!)

This will go towards cigarettes/pipe tobacco/essentials/ and perhaps pizza for myself and the other patients and staff.

You can also donate clothes and essentials to The Royal for the other psychiatric prisoners here, many of which are MK ULTRA slaves.

They are needy - and could use your help!

Major Transgressions!

In was brutally raped and was made to murder at least one person at the age of three (I think his name was James)

I slept with many prostitutes.

I was a chronic masturbator and porn addict.

I was a addicted to drugs and alcohol.

I have driven many times under the influence. (Thankfully never hurt anyone).

I slept with many girlfriends (outside of marriage).

I had various delusions (some from MK ULTRA programming).

I used to fantasize about suicide and had to be resuscitated from one suicide attempt.

I have stolen.

I have lied.

I have cheated.

I was a violent man and an abusive big brother.

I did a very poor job of honouring my parents.

I used to be addicted to movies and video games (I was an idolater).

I was a blasphemer.

I used to take pharmakeia. (I have written an advance directive since).

I was addicted to the card game Magic the Gathering - digitally and physically.

One of my ex-girlfriends pregnant with my child had an abortion.

I was a misogynist.

I made a lot of racist remarks and jokes.

Despite all these transgressions, I do not have any criminal charges, and was able to get a vulnerable sector check from the Ottawa Police Services in 2024 so I could volunteer.

I am being regenerated by the Holy Spirit. I am still fallible, but I am not the same man I once was: I make mistakes every day.

My enemies (some are neighbours as well if they are human - making them my buddies, not friends) are trying to walk me to suicide by threatening to inject me with pharmakeia against my will, despite having written an advance directive when I was declared mentally capable. I am choosing to remain hopeful and placing my trust in my Abba, Christ Jesus and the Holy Spirit.

Heads up to my Brothers and Sisters in Christ (my family):

I love you dearly. Because of my abuse - I have major trust issues.

If you are born again - and you come up to me and profess your faith - I will call you brother or sister. The problem is many people that gang stalk me and ritually abuse me claim to be my family, and then throw up a 666 hand gesture or something similar.

If you love me as your brother I would appreciate your prayers to **our** Abba!

He is keeping me safe. But your prayers help me - thank you for them brother! Thank you for them sister! Don't you worry about me! Thanks and praise to God Almighty for them!

2 Corinthians 1:11

And you are helping us by praying for us. Then many people will give thanks because God has graciously answered so many prayers for our safety.

I need space to heal from all my emotional, psychological, physical abuse.

I will continue to pray for you.

It breaks my heart each and every time someone professes their faith to me and I can't be 100% certain whether they are my family.

So... **for now** please give me space.

Romans 10:6-10

But the righteousness that is by faith says: "Do not say in your heart, 'Who will ascend into heaven?'" (that is, to bring Christ down) "or 'Who will descend into the deep?'" (that is, to bring Christ up from the dead). But what does it say? "The word is near you; it is in your mouth and in your heart," that is, the message concerning faith that we

proclaim: If you declare with your mouth, "Jesus is Lord," and believe in your heart that God raised him from the dead, you will be saved. For it is with your heart that you believe and are justified, and it is with your mouth that you profess your faith and are saved.

You **know** you will be glorified because you accepted Christ. And I **know** we will love each other **perfectly** when we are glorified. We will be united in love.

Revelation 21:4

He will wipe every tear from their eyes, and there will be no more death or sorrow or crying or pain. All these things are gone forever.

My life has been triple R rated. It is hard to make triple R rated PG. So I will put disclaimers on my posts for my family in case it discusses something too graphic. You aren't worldlings - but I don't want to upset you.

a little one of Christ Jesus © 2025

[Sign up](#)

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My Advance Directive

I sent this advance directive to my psychiatrist (Dr. Baines, my immediate biological family, and my social worker at the time, Robert Taylor) on July 7th, 2024.

Hi Family and Robert,

I wanted to take the time to write this letter.

As you all know, I have a diagnosis of Schizoaffective Disorder. As well as ADHD Inattentive Type. And, if I am not mistaken, Generalized Anxiety Disorder.

I have a history of substance abuse (primarily marijuana but also alcohol).

I also have a history of suicide attempts and suicidal ideation.

And a long history of things I wish I never did.

Over the past couple years, you guys have been helping me in my journey to get off of the medication (Clozapine, which in turn caused me to take a heart medication and metformin to treat the pre-diabetes). Without your support this would likely never have happened. The withdrawal of this medication is no laughing matter. I am down to 68.75 mg from 250 mg. It will likely take more time to completely get off of it.

As you also all know – I now consider myself to be a Christian. Saved by the grace of God alone – completely unmerited – especially after all I have done.

This doesn't mean I don't make mistakes – I do every day unfortunately. But I am battling my sinful nature and trying to do less of a disservice to God and to the church (the believers in Christ).

But it is important to note that I no longer believe in suicide as an option. Nor do I now believe it is appropriate to commit violence.

The topic of Power of Attorney (PoA) and Substitute Decision Maker (SDM) has recently come up.

I am not going to assign a PoA. But, after my recent appointment with Doctor Baines (Robert was there with me) – where doctor Baines told me I was presently considered mentally capable - I have thought about the idea of my wishes (also known as an advance directive) should I ever be ruled incapable again according to the Mental Health Care Act.

I am not going to make a lengthy list of things that I wish are adhered to.

Only one thing.

And I will provide my reasoning.

I never, ever, wish to be put on any psychotropic medication (including anti-psychotics, anti-depressants, etc.) ever again. Under any circumstance.

As a human being:

The psychotropics damaged my physical health. They caused me to gain over 200 pounds. This caused me to develop heart problems and pre-diabetes. I was told that I was at risk for stroke and heart failure. I had to resist more prescriptions than this – which could have resulted in severe polypharmacy.

The psychotropics damaged my cognition. This interfered with my ability to think and do things.

The psychotropics sedated me. This caused me to sleep most of the day away and severely limited my ability to do things.

The psychotropics damaged my ability to feel. This scares me the most. God willing this is not irreversible – and I am experiencing more emotion again presently.

As a Christian:

The scariest piece for me is the dampening of my ability to feel love.

There are so many quotes in the bible stressing the importance of feeling love for one another.

If you don't believe me, just do a quick search.

I am not saved by my capabilities. Most days I am reminded of my failings.

I am saved by what Christ Jesus did for me at Calvary. Period. And I **know** it is unmerited.

All this being said.

This is my only wish I care to state while I am mentally capable.

I never wish to be put on psychotropics **ever** again.

Yours,

Steven

a little one of Christ Jesus © 2025

Sign up

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CANADIAN CHARTER OF RIGHTS AND FREEDOMS

Whereas Canada is founded upon principles that recognize the supremacy of God and the rule of law:

Guarantee of Rights and Freedoms

1. The *Canadian Charter of Rights and Freedoms* guarantees the rights and freedoms set out in it subject only to such reasonable limits prescribed by law as can be demonstrably justified in a free and democratic society.

Fundamental Freedoms

2. Everyone has the following fundamental freedoms: (a) freedom of conscience and religion; (b) freedom of thought, belief, opinion and expression, including freedom of the press and other media of communication; (c) freedom of peaceful assembly; and (d) freedom of association.

Democratic Rights

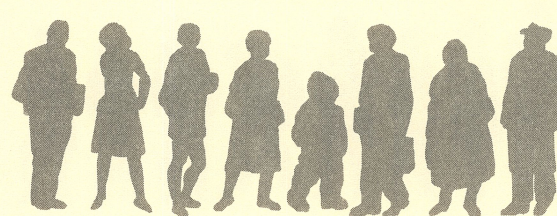
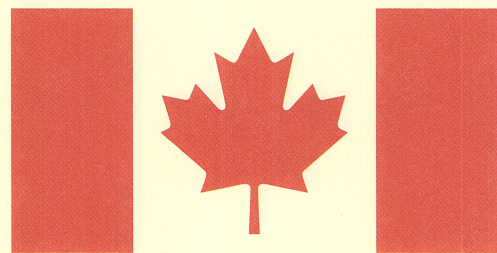
3. Every citizen of Canada has the right to vote in an election of members of the House of Commons or of a legislative assembly and to be qualified for membership therein. 4.(1) No House of Commons and no legislative assembly shall continue for longer than five years from the date fixed for the return of the writs at a general election of its members. (2) In time of real or apprehended war, invasion or insurrection, a House of Commons may be continued by Parliament and a legislative assembly may be continued by the legislature beyond five years if such continuation is not opposed by the votes of more than one-third of the members of the House of Commons or the legislative assembly, as the case may be. 5. There shall be a sitting of Parliament and of each legislature at least once every twelve months.

Mobility Rights

6.(1) Every citizen of Canada has the right to enter, remain in and leave Canada. (2) Every citizen of Canada and every person who has the status of a permanent resident of Canada has the right (a) to move to and take up residence in any province; and (b) to pursue the gaining of a livelihood in any province. (3) The rights specified in subsection (2) are subject to (a) any laws or practices of general application in force in a province other than those that discriminate among persons primarily on the basis of province of present or previous residence; and (b) any laws providing for reasonable residency requirements as a qualification for the receipt of publicly provided social services. (4) Subsections (2) and (3) do not preclude any law, program or activity that has as its object the amelioration in a province of conditions of individuals in that province who are socially or economically disadvantaged if the rate of employment in that province is below the rate of employment in Canada.

Legal Rights

7. Everyone has the right to life, liberty and security of the person and the right not to be deprived thereof except in accordance with the principles of fundamental justice. 8. Everyone has the right to be secure against unreasonable search or seizure. 9. Everyone has the right not to be arbitrarily detained or imprisoned. 10. Everyone has the right on arrest or detention (a) to be informed promptly of the reasons therefor; (b) to retain and instruct counsel without delay and to be informed of that right; and (c) to have the validity of the detention determined by way of *habeas corpus* and to be released if the detention is not lawful. 11. Any person charged with an offence has the right (a) to be informed without unreasonable delay of the specific offence; (b) to be tried within a reasonable time; (c) not to be compelled to be a witness in proceedings against that person in respect of the offence; (d) to be presumed innocent until proven guilty according to law in a fair and public hearing by an independent and impartial tribunal; (e) not to be denied reasonable bail without just cause; (f) except in the case of an offence under military law tried before a military tribunal, to the benefit of trial by jury where the maximum punishment for the offence is imprisonment for five years or a more severe punishment; (g) not to be found guilty on account of any act or omission unless, at the time of the act or omission, it constituted an offence under Canadian or international law or was criminal according to the general principles of law recognized by the



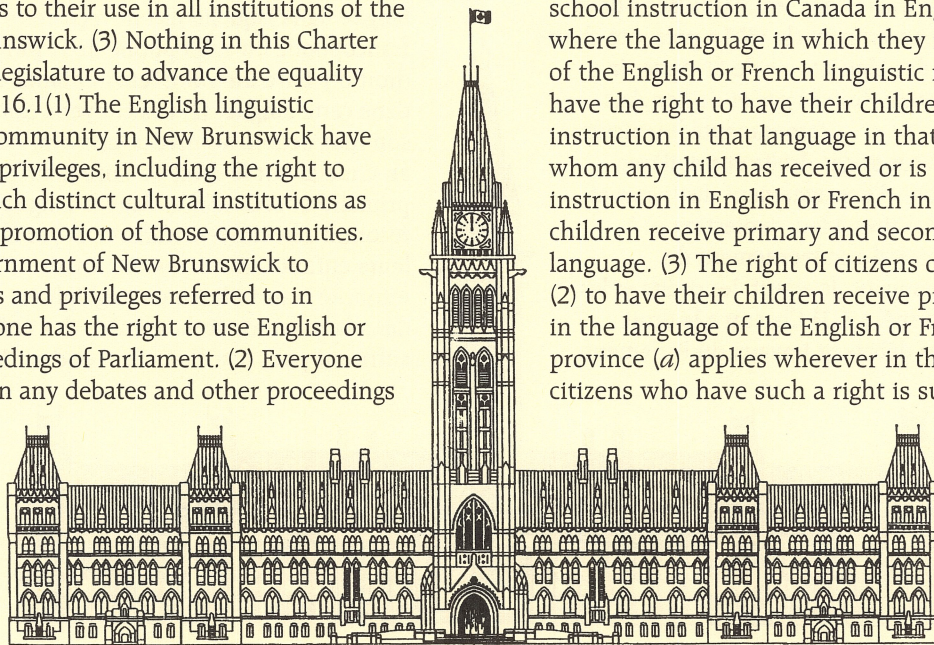
community of nations; (b) if finally acquitted of the offence, not to be tried for it again and, if finally found guilty and punished for the offence, not to be tried or punished for it again; and (d) if found guilty of the offence and if the punishment for the offence has been varied between the time of commission and the time of sentencing, to the benefit of the lesser punishment. 12. Everyone has the right not to be subjected to any cruel and unusual treatment or punishment. 13. A witness who testifies in any proceedings has the right not to have any incriminating evidence so given used to incriminate that witness in any other proceedings, except in a prosecution for perjury or for the giving of contradictory evidence. 14. A party or witness in any proceedings who does not understand or speak the language in which the proceedings are conducted or who is deaf has the right to the assistance of an interpreter.

Equality Rights

15.(1) Every individual is equal before and under the law and has the right to the equal protection and equal benefit of the law without discrimination and, in particular, without discrimination based on race, national or ethnic origin, colour, religion, sex, age or mental or physical disability. (2) Subsection (1) does not preclude any law, program or activity that has as its object the amelioration of conditions of disadvantaged individuals or groups including those that are disadvantaged because of race, national or ethnic origin, colour, religion, sex, age or mental or physical disability.

Official Languages of Canada

16.(1) English and French are the official languages of Canada and have equality of status and equal rights and privileges as to their use in all institutions of the Parliament and government of Canada. (2) English and French are the official languages of New Brunswick and have equality of status and equal rights and privileges as to their use in all institutions of the legislature and government of New Brunswick. (3) Nothing in this Charter limits the authority of Parliament or a legislature to advance the equality of status or use of English and French. 16.1(1) The English linguistic community and the French linguistic community in New Brunswick have equality of status and equal rights and privileges, including the right to distinct educational institutions and such distinct cultural institutions as are necessary for the preservation and promotion of those communities. (2) The role of the legislature and government of New Brunswick to preserve and promote the status, rights and privileges referred to in subsection (1) is affirmed. 17.(1) Everyone has the right to use English or French in any debates and other proceedings of Parliament. (2) Everyone has the right to use English or French in any debates and other proceedings of the legislature of New Brunswick. 18.(1) The statutes, records and journals of Parliament shall be printed and published in English and French and both language versions are equally authoritative. (2) The statutes, records and journals of



the legislature of New Brunswick shall be printed and published in English and French and both language versions are equally authoritative. 19.(1) Either English or French may be used by any person in, or in any pleading in or process issuing from, any court established by Parliament. (2) Either English or French may be used by any person in, or in any pleading in or process issuing from, any court of New Brunswick. 20.(1) Any member of the public in Canada has the right to communicate with, and to receive available services from, any head or central office of an institution of the Parliament or government of Canada in English or French, and has the same right with respect to any other office of any such institution where (a) there is a significant demand for communications with and services from that office in such language; or (b) due to the nature of the office, it is reasonable that communications with and services from that office be available in both English and French. (2) Any member of the public in New Brunswick has the right to communicate with, and to receive available services from, any office of an institution of the legislature or government of New Brunswick in English or French. 21. Nothing in sections 16 to 20 abrogates or derogates from any right, privilege or obligation with respect to the English and French languages, or either of them, that exists or is continued by virtue of any other provision of the Constitution of Canada. 22. Nothing in sections 16 to 20 abrogates or derogates from any legal or customary right or privilege acquired or enjoyed either before or after the coming into force of this Charter with respect to any language that is not English or French.

Minority Language Educational Rights

23.(1) Citizens of Canada (a) whose first language learned and still understood is that of the English or French linguistic minority population of the province in which they reside, or (b) who have received their primary school instruction in Canada in English or French and reside in a province where the language in which they received that instruction is the language of the English or French linguistic minority population of the province, have the right to have their children receive primary and secondary school instruction in that language in that province. (2) Citizens of Canada of whom any child has received or is receiving primary or secondary school instruction in English or French in Canada, have the right to have all their children receive primary and secondary school instruction in the same language. (3) The right of citizens of Canada under subsections (1) and (2) to have their children receive primary and secondary school instruction in the language of the English or French linguistic minority population of a province (a) applies wherever in the province the number of children of citizens who have such a right is sufficient to warrant the provision to them out of public funds of minority language instruction; and (b) includes, where the number of those children so warrants, the right to have them receive that instruction in minority language educational facilities provided out of public funds.

Enforcement

24.(1) Anyone whose rights or freedoms, as guaranteed by this Charter, have been infringed or denied may apply to a court of competent jurisdiction to obtain such remedy as the court considers appropriate and just in the circumstances. (2) Where, in proceedings under subsection (1), a court concludes that evidence was obtained in a manner that infringed or denied any rights or freedoms guaranteed by this Charter, the evidence shall be excluded if it is established that, having regard to all the circumstances, the admission of it in the proceedings would bring the administration of justice into disrepute.

General

25. The guarantee in this Charter of certain rights and freedoms shall not be construed so as to abrogate or derogate from any aboriginal, treaty or other rights or freedoms that pertain to the aboriginal peoples of Canada including (a) any rights or freedoms that have been recognized by the Royal Proclamation of October 7, 1763; and (b) any rights or freedoms that now exist by way of land claims agreements or may be so acquired. 26. The guarantee in this Charter of certain rights and freedoms shall not be construed as denying the existence of any other rights or freedoms that exist in Canada. 27. This Charter shall be interpreted in a manner consistent with the preservation and enhancement of the multicultural heritage of Canadians. 28. Notwithstanding anything in this Charter, the rights and freedoms referred to in it are guaranteed equally to male and female persons. 29. Nothing in this Charter abrogates or derogates from any rights or privileges guaranteed by or under the Constitution of Canada in respect of denominational, separate or dissentient schools. 30. A reference in this Charter to a province or to the legislative assembly or legislature of a province shall be deemed to include a reference to the Yukon Territory and the Northwest Territories, or to the appropriate legislative authority thereof, as the case may be. 31. Nothing in this Charter extends the legislative powers of any body or authority.

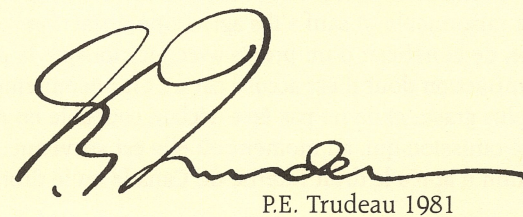
Application of Charter

32.(1) This Charter applies (a) to the Parliament and government of Canada in respect of all matters within the authority of Parliament including all matters relating to the Yukon Territory and Northwest Territories; and (b) to the legislature and government of each province in respect of all matters within the authority of the legislature of each province. (2) Notwithstanding subsection (1), section 15 shall not have effect until three years after this section comes into force. 33.(1) Parliament or the legislature of a province may expressly declare in an Act of Parliament or of the legislature, as the case may be, that the Act or a provision thereof shall operate notwithstanding a provision included in section 2 or sections 7 to 15 of this Charter. (2) An Act or a provision of an Act in respect of which a declaration made under this section is in effect shall have such operation as it would have but for the provision of this Charter referred to in the declaration. (3) A declaration made under subsection (1) shall cease to have effect five years after it comes into force or on such earlier date as may be specified in the declaration. (4) Parliament or the legislature of a province may re-enact a declaration made under subsection (1). (5) Subsection (3) applies in respect of a re-enactment made under subsection (4).

Citation

34. This Part may be cited as the *Canadian Charter of Rights and Freedoms*.

"We must now establish the basic principles, the basic values and beliefs which hold us together as Canadians so that beyond our regional loyalties there is a way of life and a system of values which make us proud of the country that has given us such freedom and such immeasurable joy."



P.E. Trudeau 1981



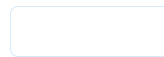
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QUESTION

How can I know if I am hearing God, hearing Satan, or hearing my own thoughts?



ANSWER

Life is full of decisions that do not have absolute, specific-by-name, how-to directions in the Bible. How many hours a day should my kids spend on screens? Is it okay to play certain video games? Am I allowed to go on a date with a coworker? Is it okay to miss work because I stayed up too late the night before? We all have notions about the truth, but how do we know for sure that these ideas are coming from God? Am I hearing God? Or am I only hearing myself? Worse yet, am I hearing the temptations of Satan disguised as the leading of the Holy Spirit? Sometimes distinguishing our own ideas from God's leading is difficult. And what if our urges are actually coming from the enemy of our souls and not from God? How do we "take every thought captive" ([2 Corinthians 10:5](#)) when we aren't sure where the thoughts are coming from?

Month Day

Most commonly, God communicates through the Bible, His inspired Word, preserved through the centuries for us today. It is through the Word that we are sanctified ([John 17:17](#)), and the Word is the light for our path ([Psalm 119:105](#)). God can also guide us through circumstances ([2 Corinthians 2:12](#)), the promptings of the Spirit ([Galatians 5:16](#)), and godly mentors providing wise counsel ([Proverbs 12:15](#)). If God wants to speak to us, nothing can stop Him. Here are some ways to discern the source of our thoughts:

Pray

If we are confused about whether or not we are hearing God, it is good to pray for wisdom ([James 1:5](#)). (It's good to pray for wisdom even when we don't think we're confused!) We should ask God to make His will known to us clearly. When we pray, we "must believe and not doubt, because the one who doubts is like a wave of the sea, blown and tossed by the wind" ([James 1:6](#)). If we have no faith, we "should not expect to receive anything from the Lord" ([James 1:7](#)).

Talk to God in prayer and earnestly wait for His answer. However, keep in mind that God doesn't give us everything we desire, and sometimes His answer is, "No." He knows what we need at any given time, and He will show us what is best. If God says, "No," then we can thank Him for the clarity of His direction and move on from there.

Study the Word

The Bible is called "God's Word" for a reason—it is the primary way God speaks to us. It is also the way we learn about God's character and His dealings with people throughout history. All Scripture is "breathed out by God" and is the guide for a righteous life ([2 Timothy 3:16–17](#)). While we speak to God in prayer, He speaks to us through His Word. As we read, we must consider the words of the Bible to be the very words of God.

Any thought, desire, inclination, or urge we may have must be brought to the Word of God for comparison and approval. Let the Bible be the judge of every thought. "For the word of God is alive and active. Sharper than any double-edged sword, it penetrates even to dividing soul and spirit, joints and marrow; it judges the thoughts and attitudes of the heart" ([Hebrews 4:12](#)). No matter how urgent the urge, if it goes against what Scripture says, then it is not of God and must be rejected.

Follow the Holy Spirit's Leading

The Holy Spirit is God—a divine Being with a mind, emotions, and will. He is always with us ([Psalm 139:7–8](#)). His purposes include interceding for us ([Romans 8:26–27](#)) and giving gifts to benefit the church ([1 Corinthians 12:7–11](#)).

The Holy Spirit wills to fill us ([Ephesians 5:18](#)) and produce in us His fruit ([Galatians 5:22–25](#)). No matter what decisions we're making day to day, we can't go wrong when we exhibit love, joy, peace, etc., to the glory of God. When we have a random thought pop into our heads, we must learn to "test the spirits" ([1 John 4:1](#)). Will following this inclination lead to more Christlikeness? Will dwelling on this thought produce more of the fruit of the Spirit in me? The Holy Spirit will never lead us to gratify the sinful desires of the flesh ([Galatians 5:16](#)); He will always lead us toward sanctification ([1 Peter 1:2](#)). Life on earth is a spiritual battle. The enemy is eager to supply diversions to distract us from God's will ([1 Peter 5:8](#)). We must be vigilant to ensure that what we heed is more than a feeling



but is truly from God Himself.

Remember, God wants to show us the right path to take. He’s not in the business of hiding His will from those who seek Him.

Here are some good questions to ask as we examine whether or not we are hearing God: Are the promptings confusing or vague? God is not the author of confusion; He is the bringer of peace ([1 Corinthians 14:33](#)). Do the thoughts go against God’s Word? God will not contradict Himself. Will following these promptings lead to sin? Those who “keep in step with the Spirit” have “crucified the flesh with its passions and desires” ([Galatians 5:24–25](#)).

In addition, it is good to seek counsel from a Christian friend, family member, or pastor ([Proverbs 15:22](#)). Our pastors are there to help shepherd us: “Have confidence in your leaders and submit to their authority, because they keep watch over you as those who must give an account” ([Hebrews 13:17](#)).

God does not want us to fail. The more we listen to God, the better we will be at distinguishing His voice from the other noises in our heads. Jesus, the Good Shepherd, gives His promise: “He goes on ahead of them, and his sheep follow him because they know his voice” ([John 10:4](#)). Others may speak, “but the sheep [do] not listen to them” (verse 8). The better we know our Shepherd, the less we have to worry about heeding the wrong voice.

FOR FURTHER STUDY

- [Just Do Something: A Liberating Approach to Finding God’s Will](#) by Kevin DeYoung
- [More insights from your Bible study - Get Started with Logos Bible Software for Free!](#)

RELATED ARTICLES

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QUESTION

What is *pharmakeia* in the Bible?

ANSWER

The Greek word *pharmakeia* appears in [Galatians 5:20](#) and [Revelation 18:23](#). Terms from the same root word appear in [Revelation 9:21](#), [Revelation 21:8](#), and [Revelation 22:15](#). These are typically translated into English as “sorcery,” “witchcraft,” or “sorcerer.” Ancient Greek uses of *pharmakeia* closely mirror the generic modern English word *drugs*; the same Greek root word produced English terms such as *pharmacy* and *pharmacist*.

Modern use of the word [sorcery](#) evokes images of supernatural power and spells; biblical use of *pharmakeia* doesn't fit well with such ideas. Rather, the term suggests various forms of drug abuse. Those might include drug use in pagan worship, as an addiction, or as a poison used to manipulate and control others.

In modern English, separate terms distinguish medicines, chemicals, and illicit [drugs](#). As used in most contexts, a “pharmacist” and a “drug dealer” both distribute chemicals, but of different kinds and for drastically different reasons. Because English vernacular uses entirely different words, phrases like *selling drugs* evoke something illicit while the phrase *taking meds* or *prescription drugs* doesn't imply anything nefarious. Ancient Greeks used words like *pharmakeia* to refer to that entire spectrum: from medicines to psychoactives to poisons. This makes cultural and biblical context crucial when interpreting terms related to *pharmakeia*.

Ancient societies were no stranger to mind-altering chemicals. Archaeologists note the presence of opium, [hemp](#), and many other substances in Bible-era cultures. These compounds were not as potent as modern options but still capable of powerful effects. For example, synthetic drugs like carfentanyl are a hundred thousand times as powerful as an equivalent dose of natural opium—this is what allows a small dart to tranquilize an elephant. But opium itself is still a strong drug.

Mood-altering substances were also used in connection to ancient religious practices. Temples such as those in Greece sometimes used mind-altering drugs in fortune-telling and oracles. These may have included natural vapors and deliberately concocted mixtures. When Paul wrote Galatians and John recorded Revelation, these practices would have been part of pagan idolatry.

Substances that alter a person's perceptions can be used as legitimate medicines ([1 Timothy 4:4](#)). They can also be abused for recreation. Even worse, they can be used in a predatory manner, influencing others and taking advantage of their skewed awareness. The biblical concept of “sorcery” seems to lean toward the latter end of this spectrum. A biblical “sorcerer” could be thought of as the equivalent of a modern “drug dealer.” Or as the type of person who slips chemicals into a woman's drink to take advantage of her.

[Galatians 5:20](#) is part of Paul's list of contrasts to the fruit of the Spirit ([Galatians 5:22–23](#)). That list of works of the flesh ([Galatians 5:19–21](#)) does not appear to be random. The references are collected into groups of similar offenses. Paul begins by mentioning sexual sin, then idolatry, then “sorcery”—*pharmakeia*—and then division, before moving on to drunkenness and debauchery. His reference to *pharmakeia* is placed more closely to idolatry and sexuality than to drunkenness. The word order hints that Paul associated *pharmakeia* with the use of illicit drugs in ungodly spiritual practices.

John's references might also be connected to pagan worship; [Revelation 9:21](#) comes immediately after a condemnation of idolatry. Yet this reference also sits between mentions of murder and sexual sin. [Revelation 18:23](#) is part of a condemnation of Babylon, referring to its “deception.” The phrasing closely echoes the statement of [Nahum 3:4](#), which refers to “charms.” The Hebrew root word used in Nahum is *kesheph*. That is used in reference to idolatry and often translated as “sorcery,” and is seen in [2 Kings 9:22](#), [Isaiah 47:9](#), [12](#), and [Micah 5:12](#).

Combining these contexts, the exact meaning of *pharmakeia* isn't crystal clear, but neither is it completely obscure. There's no sense that Scripture uses terms such as *pharmakeia* in reference to supernatural powers. Instead, biblical “sorcery” seems to be about abusing drugs for idolatry, recreation, and/or oppression of others.

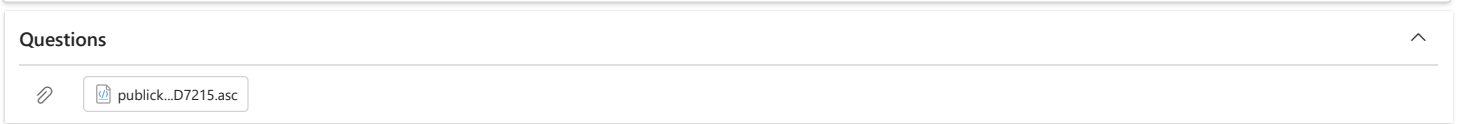


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