

Pandemic and Panopticon: The Rise of the Biomedical Security State

Janet Levy writes in the [American Thinker](#):

The pandemic of 2020 saw the imposition of shocking restrictions. For the first time, *healthy* people were confined to their homes. Vaccines cleared for emergency use – meaning not rigorously tested – were forced on all citizens. Debate, even by scientists, was censored. Refusal to obey these arbitrary impositions could mean arrest, legal action, or, as Dr. Aaron Kheriaty found out, losing one's job.

A psychiatry professor in good standing at the University of California at Irvine (UCI), Dr. Kheriaty became *persona non grata* when he demurred to the mandatory vaccine policy, claiming natural immunity as a Covid-recovered individual. Not caring for scientific debate, the university declared him a "threat to the health and safety of the community," suspended him without pay, barred him from campus, and eventually fired him.

✘ It did not matter that his psychiatry clerkship was the highest rated clinical course at UCI's medical school; that he'd been chosen keynote speaker to address incoming medical students; and that when the pandemic broke out, he had risked his life to work long hours at the hospital, often uncompensated, while many colleagues stayed home in safety.

Uncowed, Dr. Kheriaty sued the university. In a more far-reaching action, he authored [The New Abnormal: The Rise of the Biomedical Security State](#), a sober analysis and exposure of the tyranny of pandemic policies and the devastation they wrought. The book traces the roots of state interference in, and control of, the biomedical aspects of citizens' lives to

utilitarian ideas that began with Galton and Darwin, and trickled into eugenics, which he says is falsely viewed as entirely a creation of the Nazis when in fact American states were [enforcing sterilization](#) from the 1900s to the 1960s.

The core idea, he says, is this: the freedom of a citizen to make health and life decisions can be annulled by the state for the greater good, especially during emergencies. The questions it raises are: *Who makes these decisions and on what basis? Who decides what is the greater good? Who is to be held responsible for errors of judgement? What checks and balances do we have, then, against the dictatorial inclinations of the powerful?* Ancillary to the idea, he says, is the dangerous circular logic of the state of exception: those who declare an emergency in which citizens' rights – including the right to question the declaration – stand suspended will believe that in that instance it is morally and politically justified!

We saw all that playing out during the pandemic. Kheriaty observes that the global elite and other political entities, in unbridled collaboration with intelligence and police powers, promoted the acceptance of biomedical surveillance. None of the extreme measures – lockdown, school closure, mandatory masking, vaccine mandates and passports – were subject to debate. No benchmarks were set to justify the emergency or identify when it would end. In fact, America [continues to remain in a state of emergency](#) (until May 11th).

Compliance was achieved through propaganda, policing, and surveillance. Guilt – *Don't Kill Granny* – and Mao-style rousing – *15 Days to Stop the Spread* – were deployed. Six-foot social distancing and curtailment of gatherings to no more than 10 people were imposed with no explanation of where these magic numbers came from. Human contact was redefined as a source of contagion. Exposure could build natural immunity, but this wasn't acknowledged, for it would have potentially halved the profits of the \$100 billion Covid vaccine industry.

Kheriaty identifies the characteristics of the biosecurity paradigm:

1. a hypothetical risk, magnified to worst-case scenario to adduce grounds for maximum behavioral control;
2. systematic imposition of control on the entire citizenry, instead of vulnerable subsets;
3. catastrophizing, in order to justify intrusive surveillance and the use of police and military action; and
4. a merging of public health and the military-intelligence-industrial complex in developing and implementing tracking and data-mining capabilities.

Surveillance is the backbone of dictatorial regimes, and it was no different during the pandemic. In 2021, evidence emerged that the CIA had used digital surveillance to gather information on Americans sans judicial oversight or congressional approval. There were no safeguards to protect civil liberties. Such scenarios have long been envisioned – as far back as 1999, [a possible smallpox outbreak was studied](#). Exercises such as Dark Winter, Atlantic Storm, Clade X, and Event 201 followed. They simulated imposition of martial law, detention of citizens, control of messaging, censoring dissent, enforcing mandates, and surveillance during public health crises. Recommendations to increase state power and use police or military intervention were subsequently embodied in the 2002 U.S. Public Health Security & Bioterrorism Preparedness & Response Act.

The religion of [scientism](#) took hold as Dr. Anthony Fauci, former chief medical advisor to the President, reframed the narrative on Covid, shifting the focus from the virus to viewing humanity as a vector. Fauci and a set of scientists and technocrats with broad powers arrogated to themselves a monopoly on knowledge and expertise. Lacking rational

explanation, they used force, defamation of critics, and dubious promises of future outcomes to obtain public conformity to the security and surveillance measures.

The vast influence of Big Pharma over governments, the research establishment, and media, says Kheriaty, cannot be understated. Pfizer and Johnson & Johnson are wealthier than most countries, with vast sums available for lobbying. In 2020, 72 senators and 302 congressional representatives cashed campaign checks from the pharmaceutical industry. Biomedical researchers and medical journal editors receive payments from pharma. In a nine-year-period, two-thirds of all FDA reviewers took positions in the industry they regulated. The National Institute of Health, which owns half of the Moderna vaccine patent, chose to conduct internal testing of the vaccine rather than leave it to independent university-based researchers. Media acquiescence was achieved through \$1 billion-worth of vaccine advertisements, paid for in taxpayer dollars!

Kheriaty goes so far as to assert that the lockdown was driven by an economic agenda disguised as public health protocol. It helped Big Pharma, multinationals, and the global elite who control them achieve the largest transfer of wealth in history by eliminating competition and spelling doom for small business.

The ultimate plan, devised by the global elite, is for a new world order, shifting government authority from sovereign states to powerful NGOs like the World Economic Forum (WEF), the International Monetary Fund (IMF), and the World Health Organization (WHO). Plans are afoot for a WHO-driven international pandemic treaty tied to a digital ID system, while IMF is promoting central bank digital currency (CBDC), which will allow complete tracking of monetary transactions. WEF chairman Klaus Schwab nurses transhumanist dreams, saying "we will not change what we do" but "who we are," through gene- and bio-engineering.

The concluding chapter suggests ways of avoiding totalitarian emergencies and the abyss of the biomedical security state. He suggests strict limits on the declaration and control of emergencies, incorporating more checks and balances if necessary. He calls for substantive institutional reform that will eliminate the revolving door between Big Pharma and federal agencies. Besides, he says, the NIH monopoly must be broken, perhaps by distributing research grants to 50 state institutes of health that will focus on issues of local concern. Other ideas include provision of accurate, comprehensive information to allow people to give informed consent; allowing doctors to prescribe off-label or repurposed drugs and provide individualized care; holding Big Pharma accountable by bringing back product liability.

Freedom is at stake, as we discovered during the pandemic. Dr. Kheriaty lost his job, without a chance to defend himself, for daring to dissent. This – or much worse – can happen to any of us if we allow America to become the biomedical security state the global elite want to transform the world into.