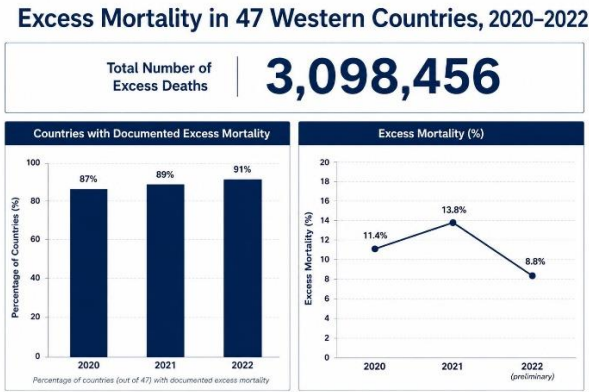


My name is Dr. Saskia Mostert. I worked as research coordinator of global health and pediatric oncology outreach programs in Indonesia and Kenya.

Publication

In 2024, our team published a study in *BMJ Public Health* examining all-cause mortality data across Western countries between 2020 and 2022.¹ These were government-reported mortality records routinely used throughout mainstream public health research. The peer review process had taken more than nine months.¹

Our study showed that excess mortality remained elevated across 47 Western countries, totaling more than 3 million excess deaths. Excess mortality persisted across the overwhelming majority of countries studied, after the acute phase of the pandemic.¹



We did not claim certainty regarding the causes of excess mortality. Rather, we asked attention for three major events that were non-existent before the pandemic: COVID-infection, containment measures, and COVID-vaccines. In addition, we acknowledged other overlooked factors. We urged governments and public health leaders to investigate the underlying causes and evaluate their policies.¹

During the pandemic, extraordinary measures were justified in the name of protecting human life. Public officials and media emphasized that every COVID-death mattered and every life deserved protection.¹ I believed the discovery of more than 3 million excess deaths would prompt the same urgency in investigating their causes.

Instead, what followed often resembled what I could only describe as “blind fury.”

What could explain this massive outrage?

Psychological Manipulation and Fear Propaganda

During the pandemic, health-policies were combined with psychological tactics to influence public behavior. Governments and media implemented psychological manipulation and fear propaganda (without our awareness/consent) that increases group conformity and reduces tolerance for reason and dissenting voices:²⁻⁴¹

Tunnel Vision	Focusing on single aspect of reality and disregarding the context
Emotional Messaging	To evoke strong feelings (fear/anger) and block critical thinking
Repetition	Constantly repeating an idea, even without evidence, can turn it into a widely held belief as it penetrates the unconscious
Visual Symbols or Slogans	Block critical thinking/ more effectively remembered than complex ideas
Gaslighting	Using contradictory/unpredictable/changing information and rules to create confusion/disorientation/doubts about own memory/perceptions/sanity, and enforce submission
Isolation	Restricting social contacts limits outside perspectives/increases fear/fosters dependency/enhances manipulators' dominance/control
Worthy versus Unworthy Victims	Distinguishing between important victims who deserve extensive attention or support, and other victims who can be ignored
Polarization	Emphasizing differences between groups to create division ('us versus them')
Dehumanization	Perceiving individuals or groups as fundamentally different (inferior/threatening), having less human qualities (empathy/dignity), justifying mistreatment (discrimination/cruelty/disregarding their rights) without feeling guilt/empathy

Censorship and Suppression-Tactics

Censorship and suppression-tactics have been used against doctors and scientists questioning the official COVID-narrative:⁴²⁻⁴⁷

Devaluation Tactics	Discrediting critics and criticism (using 'labelling')
Cover-Up Tactics	Hiding censorship (using proxies/fact-checkers/shadow-banning/deplatforming)
Reinterpretation Tactics	Favorably framing censorship ('protection of public'/'follow the science')
Official Channel Tactics	Gives censorship appearance of legitimacy/justice, and hides political/economic conflicts of interests
Intimidation Tactics ⁴²	Using fear/threats/coercion to silence critics and others

The encountered blind and irrational fury after our publication can thus be explained by 'tunnel vision' disruption. Not only 'worthy victims' (COVID-patients), but also 'unworthy victims' (lockdown victims/vaccine-injured) were described. Polarization in society, between those who followed the official COVID narrative and those who questioned it, became visible. Despite a supportive statement from REUTERS, media outlets used their 'devaluation'-tactics and labelled the publication as "anti-vax", "conspiracy-theory," and "misinformation."⁴⁸

Scientific Integrity Investigation

One affiliated hospital publicly distanced itself from the study and announced a scientific integrity investigation.^{49,50} Institutional responses are increasingly used as ‘official channel’-tactics to discredit, intimidate, isolate and silence those raising unwelcome scientific questions.

I resigned.

Scientific integrity investigations can be evaluated according to confidentiality, transparency, presumption of innocence, and fairness principles.⁵⁰ To my opinion, all these principles have been trampled on. The institutional confidential report about my co-authors was leaked to a national newspaper and resulted in a hit piece. This example speaks volumes.

To be clear: I lost my position after publishing official government mortality data and calling for further scientific investigation into persistent excess deaths.

Science cannot function when legitimate questions become professionally dangerous to ask.

When scientists fear professional destruction, the public loses access to honest scientific inquiry.

Outcome of Scientific Integrity Investigation

The institute concluded that scientific integrity was not violated in our study. No plagiarism, fabrication or falsification took place. Nevertheless, the institute persists on retraction of the paper for containing misinformation about possible causes of excess mortality.

Ironically, the text on containment measures and vaccines was much shorter in the original version of the paper. The reviewers selected by the journal had asked us to either delete the text or provide more evidence. As there is evidence available, we included it. All added references concerned peer-reviewed publications from well-known institutes indexed on PubMed.

My proposed post-publication revision that included a section on vaccine effectiveness in reducing mortality was ignored by the journal.

Right from the start, it was an unequal battle. Our call for investigation of underlying causes had to be censored and erased one way or another. The ‘tunnel vision’ leaves no room for ‘unworthy victims.’

Yet, the persistent excess mortality remains unexplained.

Not an Isolated Case

Our case is not isolated. Books have documented the suppression of more than 80 Dutch doctors and scientists, as well as the removal of 60 professors across Germany, Austria, and Switzerland.^{50,51} In recent years, the number of removals for ‘ideological insubordination’ has increased significantly in German-speaking countries. Similar patterns emerge across institutions. After a media scandal on a dissenting professor, the university distances itself by a press release and starts disciplinary proceedings. The reason given for dismissal is scientific integrity violation, whereas the real reason appears to be dissent.⁵⁰

Their stories closely resemble my own. Although scientific integrity and Hippocratic principles were not violated, receptiveness to reason disappeared and careers were damaged or destroyed.

Recently, we established a *Taskforce on Academic Freedom* in the Netherlands to investigate censorship, suppression, and systematic attacks on doctors and scientists questioning aspects of the official COVID-narrative.

Censorship and Academic Freedom

Censorship undermines academic freedom by discouraging legitimate scientific inquiry. It narrows the range of perspectives permitted within public debate and stimulates self-censorship among academics. The subsequent false scientific consensus can lead to dysfunctional policies.
14,16,42-47,51,52

If we want to restore public trust, we must once again protect academic freedom and the right of scientists and doctors to question prevailing assumptions without fear of professional destruction.

It is time to return to Voltaire’s Enlightenment commitment to academic freedom: “*I disapprove of what you say, but I will defend to death your right to say it.*”⁵³

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