

GLITTER RESIST

Website: glitterresist.org

Report to the ICC alleging that the UK is
committing crimes against humanity against
autistic people



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For Uncle David and Elaine.

Executive Summary

Medicine is doing science wrong and autistic people are in the part of medicine that is wrong, leading to us being medically harmed and killed, which the British State knows but recklessly does not care. These amount to medical experimentation without consent, which are crimes against humanity in the form of medical torture and medical extermination through recklessness. The Judiciary is also complicit in these crimes.

The British State is also alleged to be deliberately persecuting and otherwise deliberately exterminating autistic people in the form of denying access to essential services like healthcare, or providing a worse quality service and/or discouraging use of the service, leading to our harms or deaths including by suicide. Persecutions also include dishonesty in records for the purposes of harming us in the future and thus further discouraging use. I also allege that these amount to the de facto crime of apartheid. The Judiciary is also complicit in these crimes.

In the case of the police, persecution and extermination also takes the form of deliberately treating autistic people as subhuman with all the abuses that that entails, with police protection denied and/or use discouraged as before. These actions are a deliberate attempt to allow autistic people to be harmed, to cause autistic people to become mentally unwell, to have us sectioned where the NHS then medically harms or kills us, to drive autistic people to suicide, or to provoke autistic people to the point they react and are then harmed or murdered by the police legally. I also allege that these crimes also amount to the de facto crime of apartheid.

The British State is not alleged to be committing genocide, but rather as the British State is harming and killing autistic people, and as some of these atrocities are deliberate, then the case for genocide should also be investigated.

In support of these allegations and given that autistic neurology is sufficiently different to produce differences in cognition, behaviours, and the validity of medical knowledge, then inference to the best explanation posits that autistic people are a separate subspecies of humans from Homo Sapiens, a hybrid species probably neurologically descended from Neanderthals. This means that autistic people are a group to which crimes against humanity including genocide may apply.

This report is derived from the first hand experiences of a 49 year old white diagnosed autistic man living in the United Kingdom of Great Britain and Northern Ireland, and principally covers a 14 year period from 2011 to present. The crimes are alleged to have been committed in UK territory by UK citizens, and the crimes were reported to the police and others but they were not investigated. The ICC therefore has jurisdiction to investigate and prosecute these crimes and is thus urged to do so.



Signature

I confirm that I, Mr David Paul Scott of GLITTER RESIST, am the author of this document, and that the contents therein are true or true to the best of my knowledge, and where opinions including scientific opinions are made, that these are my authentic opinions:

Signed:

A handwritten signature in blue ink, appearing to be 'DPS'.

Date: 4th April 2025

Mr David Paul Scott
GLITTER RESIST

Revision History

Issue 1	First Issue
Issue 2	Correction of typos and other minor wording errors only.
Issue 3	Clarified nonlinear systems.
Issue 4	Dates of events corrected from 30 th /31 st to 27 th /28 th January 2024.

Distribution

International Criminal Court (hard copy)
UK Prime Minister's Office (hard copy)
UK Cabinet Office
UK Equality and Human Rights Commission
First Minister of Scotland
First Minister of Northern Ireland
First Minister of Wales
Taoiseach of Ireland
EU President
UN Office on Genocide Prevention and the Responsibility to Protect
UN Committee against Torture
UN Office of the High Commissioner for Human Rights
UN Convention of the Rights of Persons with Disabilities
World Health Organisation
Media

Table of Contents

Executive Summary	3
Signature	4
Distribution	6
Section 1 - Introduction	9
Section 2 – Allegations and Law	11
Section 3 - Jurisdiction	14
Section 4 – Suspects	15
Section 5 – Victims	16
Section 6 - The United Kingdom	17
Section 6.1 The National Health Service	17
Section 6.2 - The Department for Work and Pensions	18
Section 6.3 - The Judiciary	19
Section 6.4 - South Yorkshire Police	20
Section 6.5 - Crown Prosecution Service	22
Section 7 - Why Medicine is Doing Science Wrong	23
Section 8 – Why Autistic People Are a Separate Subspecies of Human	23
Section 9 - Witness Statement (DS01)	30
Section 10 - Victim Impact Statement	68
Section 11 - Aggravating Factors	69
Section 12 - Summary and Conclusions	70
Glossary of Terms	72
List of Suspects	73
List of Exhibits	77

“If the truth shall kill them, let them die”
Ayn Rand paraphrasing Immanuel Kant

Section 1 - Introduction

1. In this report to the International Criminal Court (ICC), I allege that the UK is medically torturing and medically exterminating autistic people through recklessness. The reason for this is that medicine is doing science wrong, and autistic people are in the part of medicine that is wrong, which the British State knows but recklessly does not care. I also allege that the UK is deliberately persecuting and deliberately exterminating autistic people in the form of denying access to essential services like healthcare, or providing a worse quality service and/or discouraging use of the service, leading to our harms or deaths including by suicide. Persecutions also include dishonesty in records for the purposes of harming us in the future and thus further discouraging use.
2. In the case of the police, persecution and extermination also takes the form of deliberately treating autistic people as subhuman with all the abuses that that entails, with police protection denied and/or use discouraged as before. These actions are a deliberate attempt to allow autistic people to come to harm, to cause autistic people to become mentally unwell, to have us sectioned where the NHS then medically harms or kills us, to drive autistic people to suicide, or to provoke autistic people to the point they react and are then harmed or murdered by the police legally.
3. I also allege that the above amount to the de facto crime of apartheid. I do not allege that the British State is committing genocide, but rather that as the British State is harming and killing autistic people, and as some of these atrocities are deliberate, then the case for genocide should also be investigated.
4. I am an English/Irish man ordinarily resident in Sheffield, South Yorkshire in England. I was born in Gravesend, Kent in England in 1976, and thus I am 49 years old. My parents were both born in England but my grandfather was born in Northern Ireland, which makes my father Irish, and thus means that I can seek Irish Nationality and re-seek EU citizenship. The alleged crimes took place on UK territory and are being carried out by UK citizens. These mean that I am entitled to report crimes to the ICC, and the ICC has jurisdiction.
5. This report is derived from my first hand experiences as an autistic man living in the United Kingdom of Great Britain and Northern Ireland (UK) and principally covers a 14 year period from 2011 to present, which is when I first began to become unwell with ME/CFS¹. I believe the issues in relation to interactions between me and the British State worsened during that period because ME/CFS affects your cognition and thus I appeared

¹ ME/CFS or Myalgic Encephalomyelitis/Chronic Fatigue Syndrome and is a chronic disability with a neurological basis.

“more autistic”, although I felt the same inside. I sought diagnosis for autism in 2006 but I was only diagnosed in April 2019, principally to protect me from the British State but in fact this only made the situation worse, particularly with the police. I have now completely recovered from ME/CFS, having worked out the cure; ME/CFS also being in the part of medicine that is wrong.

6. The report, excluding this introduction and the summary/conclusions, is divided into six parts. The first part consists of Sections 2-5 and covers the allegations and law, suspects and victims. The second part consists of Section 6, which provides a brief description of the UK and the relevant organisations. The third part consists of Section 7, which explains why medicine is doing science wrong and why this is harming and killing autistic people. The fourth part consists of Section 8, which explains why autistic people are a separate subspecies of human from Homo Sapiens. The fifth part consists of Sections 9-11, which contains my witness statement and related matters. Finally, the sixth part includes the ‘List of Suspects’ in full and ‘List of Exhibits’ referenced in the witness statement. Note that the exhibits themselves are available via a weblink provided separately.

Section 2 – Allegations and Law

7. The UK is a signatory to the Rome Statute and ratified the ICC by passing the International Criminal Court Act 2001 on 4th October 2001, which states at Section 51:

51 Genocide, crimes against humanity and war crimes

- (1) *It is an offence against the law of England and Wales for a person to commit genocide, a crime against humanity or a war crime.*
- (2) *This section applies to acts committed—*
- (a) *in England or Wales, or*
 - (b) *outside the United Kingdom by a United Kingdom national, a United Kingdom resident or a person subject to UK service jurisdiction.*

8. The definition of a crime against humanity is from Article 7 of the Rome Statute, which states (abridged):

Article 7

Crimes Against Humanity

- 1 *For the purpose of this Statute, “crime against humanity” means any of the following acts when committed as part of a widespread or systematic attack directed against any civilian population, with knowledge of the attack:*
- ...
- (b) *Extermination;*
- ...
- (f) *Torture;*
- ...
- (h) *Persecution against any identifiable group or collectivity on political, racial, national, ethnic, cultural, religious, gender as defined in paragraph 3, or other grounds that are universally recognized as impermissible under international law, in connection with any act referred to in this paragraph or any crime within the jurisdiction of the Court;*
- ...
- (j) *The crime of apartheid;*
- ..

2 *For the purpose of paragraph 1:*

...

(b)“Extermination” includes the intentional infliction of conditions of life, inter alia the deprivation of access to food and medicine, calculated to bring about the destruction of part of a population;

...

(e)“Torture” means the intentional infliction of severe pain or suffering, whether physical or mental, upon a person in the custody or under the control of the accused; except that torture shall not include pain or suffering arising only from, inherent in or incidental to, lawful sanctions;

...

(g)“Persecution” means the intentional and severe deprivation of fundamental rights contrary to international law by reason of the identity of the group or collectivity;

...

(h)“The crime of apartheid” means inhumane acts of a character similar to those referred to in paragraph 1, committed in the context of an institutionalized regime of systematic oppression and domination by one racial group over any other racial group or groups and committed with the intention of maintaining that regime;

9. In this report I therefore allege that:

- i) The National Health Service (NHS) is through recklessness harming and killing autistic people. The reasons for this are because medicine is doing science wrong and because autistic people are in the part of medicine that is wrong. These thus amount to human experimentation without consent. As the British State is aware of these issues but has recklessly chosen to do nothing, then these actions amount to crimes against humanity in the form of medical torture and medical extermination through recklessness.
- ii) The NHS is also deliberately persecuting autistic people for the purposes of denying or discouraging use of the health service, leading to our harms or deaths. Persecutions also take the form of dishonest records for the purposes of harming us in the future and thus further discouraging use. I allege that these also amount to the de facto crime of apartheid.
- iii) I allege also that the Judiciary is complicit in the atrocities committed by the NHS, whilst also deliberately committing crimes of persecution and de facto apartheid of their own.
- iv) The Department for Work and Pensions (DWP) is also deliberately persecuting autistic people by denying or discouraging use of the service, and for the purposes of

causing us to become mentally unwell and/or to drive us to suicide. Persecutions also take the form of dishonest records for the purposes of harming autistic people in the future like the NHS. I allege that these also amount to the de facto crime of apartheid.

- v) The police are also deliberately persecuting autistic people either by denying or discouraging use of the service for the purposes of allowing harms to come to autistic people, to cause us to become mentally unwell and/or to cause us to be sectioned where the NHS then harms or kills us medically, to drive us to suicide, or even more perniciously, provoking autistic people until we react, which then gives the police an excuse to harm and murder us legally. I allege that the persecutions take the form of deliberately treating autistic people as subhuman with all the abuses that that entails. I allege that these also amount to the crimes of deliberate torture and deliberate and/or reckless extermination, and de facto apartheid.
 - vi) The Crown Prosecution Service (CPS) are complicit in the actions of the police, whilst also deliberately persecuting autistic people in the form of malicious prosecutions. This also amounts to the de facto crime of apartheid.
 - vii) I do not allege that the British State is committing genocide, but rather that as the British State is harming and killing autistic people, and as some of these atrocities are deliberate, then the case for genocide should also be investigated.
10. The UK is also a signatory to (non-exhaustive) the UN Convention on the Prevention and Punishment of the Crime of Genocide, the UN Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, the UN Convention on the Rights of Persons with Disabilities, the European Convention on the Prohibition of Torture, and the European Convention on Human Rights.

Section 3 - Jurisdiction

11. The ICC has jurisdiction over these allegations as the UK is a signatory to the Rome Statute, ratifying the treaty through the International Criminal Court Act 2001 on 4th October 2001, as the crimes were committed by UK nationals on UK territory, and as the crimes have been reported to the police and others and the British State is refusing to investigate them.

Section 4 – Suspects

12. The principle suspects include:

- a) Sir Keir Starmer as UK Prime Minister.
- b) Rt Hon Wes Streeting MP as the UK Secretary for Health and Social Care.
- c) Ms Amanda Pritchard as former head of NHS England.
- d) Mrs Kristen Major as Chief Executive of Sheffield Teaching Hospitals NHS Foundation Trust.
- e) Mr Peter Reading as Chief Executive of Yorkshire Ambulance Service.
- f) Rt Hon Shabana Mahmood MP as the UK Lord Chancellor and Secretary of State for Justice.
- g) Liz Kendall MP as the UK Secretary of State for Work and Pensions.
- h) Rt Hon Yvette Cooper MP as the UK Secretary of State for the Home Department.
- i) Mrs Lauren Poultney as Chief Constable of South Yorkshire Police.
- j) Mr Stephen Parkinson as the Director for Public Prosecutions as head of the Crown Prosecution Service.
- k) Honourable Mr Justice Pushpinder Saini of the High Court.
- l) District Judge Preston of Sheffield County Court.
- m) District Judge Brown of Sheffield County Court.
- n) Deputy District Judge White of Dartford County Court.
- o) Deputy District Judge Chambers of Dartford County Court.

13. Other suspects include those named or unnamed in the witness statement provided as Section 9. A full list of suspects is provided in the 'List of Suspects' after the witness statement.

Section 5 – Victims

14. I allege that all autistic people in the UK including myself are potentially victims, are victims, or were victims having been killed by the state. The number of alive diagnosed autistic people is currently estimated as being approximately 700,000. However, for every diagnosed autistic person, I know several times more who are undiagnosed or are suspected as autistic. I estimate that the real figure is closer to 2 million people and perhaps more, meaning that by far the greater amount of autistic people are not or are minimally disabled like me.
15. Although I only present my own experiences, the medical issues applies to all autistic people, and otherwise there is no reason to suspect that other autistic people's experiences are any different than mine. This is supported by a survey² on healthcare received by autistic people from the NHS, where 74% (n=497) of respondents report autistic people receiving worse or much worse healthcare than others. Autistic people also die much younger³, and are nine times more likely to commit suicide⁴.

² "A Spectrum of Obstacles: An Inquiry into the Access of Healthcare by Autistic People" by The Westminster Commission on Autism (2016).

³ "Personal tragedies, public crisis: The urgent need for a national response to early death in autism" by Autistica (2016).

⁴ "Recent Research Points to a Clear Conclusion: Autistic People are Thinking About, and Dying by, Suicide at High Rates" by C Conner et al Pa J Posit Approaches (2023).

Section 6 - The United Kingdom

16. The United Kingdom of Great Britain and Northern Ireland (or the United Kingdom (UK) for short) is a group of islands off the coast of Northwest Europe, with Great Britain being by far the largest. The UK is comprised of England, Scotland, Wales, and Northern Ireland, and a number of small islands within the British Isles. The former are located on Great Britain whilst Northern Ireland is located on the northeastern part of the island of Ireland, sharing a land border with the Irish Republic, otherwise the UK is surrounded by the Atlantic Ocean and other smaller seas and channels. The capital city of the UK is London and the country as a whole has a population of approximately 68 million people.
17. The UK is a constitutional monarchy and parliamentary democracy with three distinct jurisdictions consisting of England and Wales, Scotland, and Northern Ireland. The UK Parliament consists of the elected House of Commons, the appointed House of Lords, and the Crown (i.e. the monarch). The head of state of the UK is the monarch who is currently King Charles III, whilst the current head of government is Prime Minister Sir Keir Starmer, who is the leader of the Labour Party. Labour currently has 403 MPs and thus a large majority, with the remaining 236 MPs being opposition MPs of which the majority are Conservative.
18. The government of the UK also consists of a number of departments and ministries, and a number of legally distinct government organisations and quangos (quasi-autonomous non-governmental organisations). The organisations of direct relevance to this report are the NHS, the DWP, the Judiciary, the police and the CPS.

Section 6.1 The National Health Service

19. The NHS was founded in 1948 on three core principles, that it meet the needs of everyone, that it be free at the point of delivery, and that it be based on clinical need, not ability to pay. The NHS is consequently the main provider of healthcare to most residents in the UK, and thus provides mostly free healthcare services, primarily in the form of a GP and access to emergency and routine treatments. The head of NHS England was Ms Amanda Pritchard until she resigned recently. Current forecasts are that the NHS will need a budget of £235.4bn per year (up from £194bn in 2024) by 2030 and need to employ 2.4mn staff (up from 1.3mn in 2024) by 2036. The budget and workforce of the NHS thus continues to rise exponentially, whilst waiting times and patient outcomes continue to worsen. No amount of money or reforms has ever fundamentally improved the efficiency and performance of the NHS.
20. The NHS has otherwise demonstrated time and time again that it is more interested in protecting its own reputation than ensuring the safety of its patients. Complaints to the NHS are an exercise in futility as the organisation evades, gaslights, insults, outright lies, and otherwise abuses their power to avoid being held to account for their own prejudice,

bias, and incompetence, and to avoid learning any lessons, except on how to better cover up their mistakes. The NHS has consequently been beset by scandal after scandal, with the most recent seemingly being that of scapegoating the poor innocent Lucy Letby to hide corporate gross negligence.

21. In terms of healthcare provided to autistic people, the NHS is funded by the taxpayer and thus NHS staff are mindful of not wasting taxpayers money. However, what this means in practice is that NHS staff take it on themselves to decide who and who is not worthy of healthcare. This means that two-tier healthcare or de facto apartheid by the NHS is designed into the system, and means that autistic people receive no or low quality healthcare because the NHS believes we are subhuman not worthy of taxpayers money, and thus not worthy of healthcare. The NHS were also told that medicine is doing science wrong for which I received no or no meaningful response, and that is because harming and killing autistic aligns with the NHS's agenda as already discussed.
22. The NHS therefore is not '*free at the point of delivery*', rather patients must pay with social capital, a far more unjust and prejudiced system than any financial transaction. The NHS thus is incentivised to harm and kill autistic people medically, to deny or discourage its use, causing harms to autistic people from lack of healthcare and/or from driving us to suicide, or from us otherwise dying early from not having our healthcare needs met. As previously stated, this is supported by a survey⁵ where 74% (n=497) of respondents report autistic people receiving worse or much worse healthcare than others, as autistic people also die much younger⁶, and as we are nine times more likely to commit suicide⁷. The reason for this is of course because the NHS is killing us medically, driving us to suicide, and otherwise allowing us to die.

Section 6.2 - The Department for Work and Pensions

23. The DWP is a ministerial department of the UK government. It is responsible for benefits, pensions, and child maintenance. The budget of the DWP is £275.8bn (2024) of which £48bn (2024) is towards sickness and disability benefits. The Labour Party introduced Work Capability Assessments whereby claimants are assessed by private contractors as to whether they are fit to work. These assessments were initially carried out by the French company Atos and then the American company Maximus. The process has been beset by scandals from dishonesty, inaccuracies, perverse decisions, and other misconducts. DWP conditionality and sanctions on the sick and disabled (and others) have also shown

⁵ "A Spectrum of Obstacles: An Inquiry into the Access of Healthcare by Autistic People" by The Westminster Commission on Autism (2016).

⁶ "Personal tragedies, public crisis: The urgent need for a national response to early death in autism" by Autistica (2016).

⁷ "Recent Research Points to a Clear Conclusion: Autistic People are Thinking About, and Dying by, Suicide at High Rates" by C Conner et al Pa J Posit Approaches (2023).

to be harmful and counterproductive. Thousands of claimants are known to have died after being declared fit to work, many of whom from suicide. The DWP is known to have “lost” and destroyed evidence, and withheld internal documents following FoI (Freedom of Information) requests or otherwise, and shown itself to be malevolent, fundamentally dishonest, corrupt, and incompetent.

24. Similarly to the NHS, the DWP are not assessing fitness to work but rather assessing whether claimants are worthy to receive taxpayers money, and inevitably because of beliefs by the DWP that autistic people are subhuman, assess autistic people as unworthy and then consequently attempt to deny them their benefits, even if it means committing fraud, and/or making the claimant mentally unwell and/or driving them to suicide to achieve it. This means that two-tier benefits or de facto apartheid are also designed into the system, and it means that persecution exists for the DWP also. The DWP were also told that medicine is doing science wrong and thus their health assessments on autistic people are criminal for which I also received no or no meaningful response because again harming and killing autistic people aligns with the DWP’s agenda.

Section 6.3 - The Judiciary

25. The County Courts and High Courts of England and Wales are the principle civil courts of the UK, supported administratively by His Majesty’s Courts and Tribunals Service, which is an executive agency of the Ministry of Justice. The civil courts consist of the County Court, which hear lower value less complex claims, and the High Court, which hear higher value and more complex ones or for other specified reasons. Appeals to judgments are heard in the first instance at the initial court, but may be escalated with permission to the Court of Appeal and then onto the Supreme Court. Judges are appointed by the independent Judicial Appointments Commission.
26. Contrary to popular belief, British judges do not determine facts at trial and then from those facts decide whether there has been any civil wrong and thus whether a claim will succeed, but rather determine who is right or wrong prior to trial based on the judges prejudiced and biased view as to which party is the most worthy of succeeding. Judges then decide the facts and interpret the law at trial in such a way as to support their previously determined prejudiced decision, even if it means violating the Judiciary’s Equal Treatment Bench Book⁸, statutory and common law, case law, the Court’s own rules, and abusing power and being dishonest to achieve it.

⁸ *Equal Treatment Bench Book*

<https://www.judiciary.uk/wp-content/uploads/2022/09/Equal-Treatment-Bench-Book.pdf>

27. These all mean that rights are given or taken away based on the whims of the Judiciary. This of course therefore means that as the Judiciary views autistic people as subhuman and thus as worthless, that ordinary autistic people will almost never receive justice in the Courts, that is the Judiciary is simply allowing other parts of the British State to harm and kill autistic people because it aligns with the Judiciary's agenda, whilst also maintaining and enforcing de facto apartheid against autistic people by the rest of the British State. There's no reason to believe the criminal justice system is any different.

Section 6.4 - South Yorkshire Police

28. SYP is the territorial police force responsible for policing South Yorkshire, whose principle municipalities include Sheffield and Rotherham, Sheffield being the largest city by far in the region. The current Chief Constable is Ms Lauren Poultney with oversight by the region's Labour Mayor Mr Oliver Coppard. The force was founded in 1974 following the merger of other police forces. The force has a budget of £358.4mn (2024-2025) with 3087 police officers (2024). The police force has been responsible for some of the most notorious police misconducts known in the UK. These include the "Battle of Orgreave", the Hillsborough Disaster, and the Rotherham Child Sexual Exploitation Scandal.
29. The Battle of Orgreave was a response by the force to the 1984 Miners' Strike, which was one of the most violent industrial confrontations in the UK. The force was found to have assaulted striking miners and then arrested and prosecuted 95 on the charges of rioting based on fabricated evidence and perjury to the point all trials collapsed. The widely held belief supported by the known evidence is that Margaret Thatcher, the Conservative Prime Minister at the time, and the wider British Establishment gave their tacit (and perhaps more) consent to these violent criminal actions by the state against its citizens. There is also a widely held belief that this permission for impunity was responsible for notorious events that followed and still affects policing in the region today. No police officer has ever been disciplined or accepted responsibility for their actions from this scandal, and no inquiry including full disclosure of all the evidence has ever been carried out.
30. The Hillsborough Disaster occurred at Hillsborough Stadium, which currently is the football or soccer stadium of Sheffield Wednesday. The disaster began at the start of a football match between Liverpool and Nottingham Forest, and occurred due to poor crowd control by the police leading to the deaths of 97 people and 766 injuries due to crowd crushing injuries, and is the worst sports disaster in UK history. In the aftermath, SYP claimed football hooliganism and drunkenness by Liverpool fans including reporting that Liverpool fans were seen pissing on others. These were all completely untrue. Despite multiple inquests and inquiries, no SYP officer has ever been prosecuted for any of their crimes. The events after these despicable actions are partly believed to be related to the culture of impunity that existed and still exists because of Orgreave.

31. The Rotherham Child Sexual Abuse scandal was where over almost two decades SYP had failed to protect mostly young white and working class children from sexual abuse by British-Pakistani men. The abuse included gang rape and is believed to have affected over 1400 young girls. These are part of the grooming scandals that have occurred in multiple towns and cities all over the UK. The failures were believed to be due to the police and CPS lack of priority in protecting white working class children and the fear of raising racial tensions in the community. No police officer or anyone else has ever been disciplined or prosecuted over these failures.
32. SYP like the rest of the British State is more interested in protecting its own power, existence, and reputation and in closing ranks to protect its own staff, rather than in serving and protecting the public. Like other police forces in the UK, SYP refuses to log crimes committed by its officers, nor investigate and prosecute those misconducts as crimes. By my estimation, these crimes being committed by SYP or that arise from SYP actions amount to at least 25% of the actual total, making SYP by far the largest criminal enterprise in the region.
33. In terms of autistic people and similarly to the civil judiciary, a decision whether to investigate and prosecute is not based on whether the facts and law supports an investigation or a successful prosecution at trial, but rather is based on an assessment as to the worth of the individual and to what extent individuals would be able to defend themselves, including whether (either way) it would cause issues with society or community relations, or otherwise cause an uproar. These mean that decisions are based on the whims of the police. This of course therefore means that as the police view autistic people as subhuman and thus as worthless and weak, that ordinary autistic people will almost always be investigated and prosecuted no matter the evidence, credibility, or provable guilt, and will also never be protected by the police, that is the police are simply harming and killing, and allowing society to harm and kill autistic people because these align with the police's agenda, whilst also maintaining and enforcing de facto apartheid against autistic people.
34. Complaints to SYP are an exercise in futility as the organisation attempts to evade accountability (with strategies used similar to the that of the NHS only worse) and include ignoring difficult aspects of the complaint and only responding to those aspects that make them look favourable and the complainant not, responding to a different made up complaint, victim blaming, minimising, gaslighting, insulting, outright lying, and otherwise abusing their power to avoid being held to account for their own prejudice, bias, and incompetence, and to avoid learning any lessons, except on how to better cover up their mistakes. Crimes against humanity including the issues with medicine were reported to SYP but no action has ever been taken because this aligns with SYP's agenda.

Section 6.5 - Crown Prosecution Service

35. The Crown Prosecution Service is the principle public agency for conducting prosecutions in England and Wales, and is headed by the Director of Public Prosecutions, who currently is Mr Stephen Parkinson. The CPS as an organisation was formed in 1986 and has a budget of £1.1bn (2025 - 2026) and employs over 7000 staff (2023).
36. In terms of autistic people and similarly to the civil judiciary and the police, a decision whether to prosecute is not based on whether the facts and law would indicate a successful prosecution at trial but rather based on an assessment as to the worth of the individual and to what extent individuals would be able to defend themselves, including whether (either way) it would cause issues with society or community relations, or otherwise cause an uproar. This explains why the CPS is known to favour prosecuting the white working class over others. The CPS (like the police) are strong believers in the ends justifying the means, so if prosecuted do not expect the CPS to act ethically.
37. These mean that the decision to prosecute is based on the whims of the CPS. This of course therefore means that as the CPS views autistic people as subhuman and thus as worthless and weak, that ordinary autistic people will almost always be prosecuted no matter the provable guilt, that is the CPS is simply maintaining and enforcing de facto apartheid against autistic people. The CPS was also informed of crimes against humanity including the issues with medicine but nobody took any action because this aligns with the CPS' agenda.

Section 7 - Why Medicine is Doing Science Wrong

38. Medicine assumes that diseases are always caused by some identifiable biological malfunction, i.e. system failures are always caused by component failures. Despite any protestations to the contrary, this is an assertion of Cartesian Reductionism⁹, namely that any system can be divided into its component parts and the sum of those parts thus explains the whole. Further, methods that medicine prioritises and/or considers epistemologically valid to investigate diseases, also assume Cartesian Reductionism. These mean that medicine is practicing a limited form of the scientific method, which by definition requires systems to be assumed philosophically and epistemologically to be linear; medicine therefore assumes philosophically and epistemologically that patients are linear systems in all circumstances. Linear systems in this context being ones to which the superposition principle applies^{10,11}, whilst nonlinear systems are those that do not.
39. This implicit assumption has never been stated in any study and is not always true; patients in a substantial minority of cases must be considered philosophically and epistemologically as nonlinear systems¹². This philosophical and epistemological mistake was identified and corrected in engineering decades ago, largely following Three Mile Island. This was the worst nuclear accident in North America and forced engineers to identify and fix their discipline's philosophical and epistemological problems¹³. This report therefore can be considered medicine's Three Mile Island moment.
40. Of principle relevance to medicine philosophically is that nonlinear systems may have emergent failures for which there are no identifiable biological malfunctions, rather system failures may emerge from components interacting adversely and dynamically. Of secondary relevance is that nonlinear systems can be counterintuitive, which means that what someone thinks is the right thing to do is in fact the opposite of the right thing, that is if the system is assumed to be a linear but is in fact nonlinear, then attempts to correct failures in the system can result in making the problem worse.
41. Of principle relevance epistemologically is that nonlinear systems may not be deterministic and/or may be oscillating abnormally as emergent failure modes and self-

⁹ "Discourse on the Method of Rightly Conducting One's Reason and of Seeking Truth in the Sciences" by René Descartes (1637).

¹⁰ "Penguin Dictionary of Physics" by J Cullerne (2009).

¹¹ "Penguin Dictionary of Mathematics" by D Nelson (2008).

¹² Medicine uses the phrase 'nonlinear system' to refer to any system with nonlinear behaviour (which is not the definition in engineering) but then makes assumptions about the system that only always apply to linear systems.

¹³ "Normal Accidents" by Charles Perrow (1984).

reinforcing pathological dynamical steady-states. These mean that when investigating such systems using linear methods, then results obtained may appear random but are in fact ordered nonlinearly, meaning that statistics cannot always be easily applied to these results or at all. Failure to assert in studies that the patient can be assumed philosophically and epistemologically to be a linear system has rendered all quantitative medical studies as scientifically invalid, and where the assumption is not true, rendered studies both invalid and wrong. Multiple other obvious ordinary mistakes have also been identified.

42. As the differences between autistic people and neurotypicals are due to the former having higher neuronal densities¹⁴ than the latter, as higher neuronal density results in qualitative or nonlinear differences in responses to stimuli both external and internal, normal or pathological, and as medicine has failed to account for these qualitative or nonlinear differences because patients are wrongly assumed to be linear systems; medical knowledge for diagnostics and treatments is consequently dangerously wrong for autistic people, leading to our harms and deaths. Nonlinear differences between groups of people were of course the root cause of the thalidomide defects (the between groups being men and pregnant women in this case), and it's disappointing that the wider lessons of this scandal were not learnt.
43. The philosophical, epistemological, and other mistakes that directly affect autistic people include:
 - a) Failure to recognise that patients cannot always be assumed philosophically and epistemologically to be a linear system and thus consequent failure to assert in studies that this assumption is valid or to amend operationalisations when not.
 - b) Failure to recognise the existence of emergent failure modes, which are unique to nonlinear systems. Unlike every other similar scientific discipline like engineering, there is no concept of emergent failure modes or emergent pathologies in medicine, only linear pathologies.
 - c) Failure to recognise that nonlinear systems can be counterintuitive.
 - d) Failure to account for nonlinear confounders or even recognise their existence.
 - e) Failure to recognise that nonlinear systems may not be deterministic and/or may be oscillating periodically (occurring in cycles) or chaotically (occurring in episodes) as emergent failure modes, and thus that ordinary scientific and statistical methods as only used in medicine may give meaningless results.

¹⁴ “Autism spectrum disorders pathogenesis: Toward a comprehensive model based on neuroanatomic and neurodevelopment considerations” by A Beopoulos *et al* in *Frontiers in Neuroscience* (2022).

- f) Failure to recognise that increased neuronal density in autistic people is the reason for our differences in cognition and behaviours, pursuant to Information Theory and Network Theory.
- g) Failure to recognise that these differences are qualitative or nonlinear compared to neurotypicals and that thus medical knowledge is dangerously wrong for autistic people. This includes diagnostics and treatments, particularly medications' side effects which may be atypical and/or dangerously worse.
- h) Failure to recognise that consequently there are unique pathophysiologies for autistic people.
- i) Failure to recognise that drugs' effects may be nonlinear and that these effects may increase not decrease over time. This is more likely to be true for autistic people and can be fatal.
- j) Failure to recognise that side effects may be nonlinear and thus may be somewhat unpredictable with new side effects appearing and existing ones worsening over periods of time. This is more likely to be true for autistic people and can be fatal.
- k) Failure to recognise that the liver enzyme CYP2D6¹⁵ is also present in the brain in most people where it deactivates dopamine. Autistic people are more likely to be high or ultra-high metabolisers leading to dangerously nonlinear effects from drugs that affect this enzyme.
- l) Failure to recognise that because of this most antidepressants are little more than modern day cocaine as almost all inhibit CYP2D6, with associated effects on most people. These effects will be worse on autistic people.
- m) Failure to recognise that most antipsychotics induce CYP2D6 thus in most people such drugs would be dysphoric, and with some painfully so. The latter would be more likely autistic.
- n) Failure to recognise that the effects on CYP2D6 may cause akathisia in some people, and these people are more likely to be autistic.
- o) Failure to recognise that abruptly stopping most antidepressants may cause catatonia or neuroleptic malignant syndrome (which can be fatal) on some people, and these people are more likely to be autistic.
- p) Failure to recognise that antipsychotics that induce CYP2D6 may cause catatonia or neuroleptic malignant syndrome on some people, and these people are more likely to be autistic.
- q) Similar failures for a host of non-psychiatric drugs that inhibit or induce CYP2D6.
- r) Failure to recognise that normal and abnormal blood chemistry levels and vitals are not the same for autistic people because of nonlinear differences compared to neurotypicals pursuant to Network Theory, and because autistic people have on average larger brains with consequent greater metabolic and other related needs.

¹⁵ "The neuroprotective enzyme CYP2D6 increases in the brain with age and is lower in Parkinson's disease patients" by A Mann *et al* in *Neurobiology of Aging* (2012).

- s) Failure to recognise the existence of post-partem ME/CFS, an illness autistic women are more likely to suffer from.
- t) Failure to recognise that even mild kidney damage has the potential to harm and kill autistic people because our blood chemistry needs to be controlled more precisely for neurological reasons pursuant to Network Theory. No medication that may harm the kidneys states that such should be avoided by autistic people and/or only taken under medical supervision where kidneys can then be closely monitored.
- u) Failure to recognise that fortifying foods with calcium may kill autistic people who have only mild kidney damage, because increases in blood calcium may cause an autistic brain to overexcite leading to seizures, heart attacks, strokes, or death.
- v) Failure to recognise a similar problem for calcium containing supplements or medications with no warning that autistic people should avoid these or only take them under medical supervision.
- w) Failure to recognise that triage as practiced by medicine is dangerous for autistic people because of potentially fatal rapid neurological transients including seizures that are more likely to occur on autistic people, leading to inappropriate prioritisation and consequent autistic harms and deaths.
- x) Failure to recognise nutrition advice that resistant starches are healthy has doomed autistic people to pain and suffering because such starches are not very tolerable by us. Medicine is aware that some people cannot tolerate resistant starches, but those people are mostly autistic.
- y) Failure to recognise that statutory requirements for medical treatment authorisation are woefully inadequate because they fail to account for nonlinear treatment effects and side effects, fail to account for interactions with nonlinear diseases like ME/CFS and epilepsy, fail to account for other nonlinear differences like autism, fail to consider whether the treatment in improving symptoms worsens the underlying pathology, and fails to attempt to explain the biological reason for most side effects, consequently failing to make (obvious) predictions of potentially harmful effects on large groups of people, including autistic people.
- z) Failure to recognise that in using statistics to attempt to provide treatments that are safe and effective on most people, medicine is harming or killing or allowing to die those at genetic extremes (which includes autistic people). This is a form of eugenics and could eventually lead to humanities extinction.

viii) The four problem areas that I have identified leading to autistic harms and deaths by medicine include the following:

- i) Autistic people have different pathophysiologies to diseases that may affect the brain, either directly or indirectly, leading to different signs, symptoms, and risks.

- ii) Medication that is known or suspected to affect the brain, either as treatment or side effect, may have an atypical and/or exaggerated effect or side effect on autistic people.
- iii) Vitals and blood chemistry that are considered normal and abnormal are different for autistic people. These include (non-exhaustive) minimum and normal BP, body temperature, O₂, CO₂, blood glucose, sodium, potassium, calcium, magnesium, bicarbonates, and blood pH.
- iv) Signs and symptoms for diseases otherwise are different for autistic because of differences in sensory processing.

Section 8 – Why Autistic People Are a Separate Subspecies of Human

44. The facts do not support the conclusion that autistic people like me are ‘defective’ because the characteristics of autism arise because autistic people have increased neuronal density (which is not a defect), and consequently from the mathematical constraints on information processing pursuant to Information Theory, and from nonlinear mathematical differences between higher and lower neuronal densities pursuant to Network Theory. Ignoring the social model of disability, the reason why medically disabled autistic people exist is because they lack the necessary genes to prevent disability. These genes are related to (likely non-exhaustive):
- a) Brain adaptability or other protective genes to prevent the development of epilepsy.
 - b) Higher intelligence genes to allow enhanced learning to compensate for the requirements of a larger neural network to prevent any neurodevelopmental delay.
 - c) Genes associated with raising dopamine to prevent ADHD, most likely lower active MAO and COMT genes combined with increased testosterone/oestrogen.
 - d) High or ultra-high CYP2D6 metaboliser genes to lower the increased risk of Parkinson’s from the increased dopamine above, and the increased dopamine from the increased concentration and number of dopamine neurons.
 - e) Enhanced repair mechanisms genes because of the need for more tightly control vitals and blood chemistry.
 - f) Longevity genes so that the benefits of autism are achieved as the payoff usually only arises in later life.
45. There’s limited or no evolutionary pressures on neurotypicals to have these genes as not having them would not make a person disabled or limit their life or potential, which is not true for autistic people; thus most neurotypicals would not have these genes or not have all of them. This therefore means that the autistic genome is not entirely compatible with the neurotypical genome for neurological reasons, leading to non-viable or less viable offspring, i.e. disabled offspring, if the two groups procreate.
46. If two groups of humans cannot procreate without creating less viable offspring then that’s the definition of two separate species. As Homo Sapiens have not existed long enough for speciation then that therefore means that the only remaining plausible answer is that when Homo Sapiens interbred with Neanderthals, two neurologically distinct and not entirely genetically compatible hybrid subspecies of humans were created, with neurotypicals neurologically closer to ancient humans, and autistic people to Neanderthals.

47. This explains why medical knowledge is often dangerously wrong for autistic people but also means that autistic people are a group to which crimes against humanity may apply.

Section 9 - Witness Statement (DS01)

Part 1 - Introduction

48. I am David Paul Scott of [REDACTED], Sheffield, South Yorkshire, England, UK. I am a British Citizen from birth and I have always resided in the UK. The crimes reported occurred on UK territory and were committed by UK residents or nationals. I reported these crimes on multiple occasions to the police, my MP, the Prime Minister, and others, but the UK has chosen not to investigate them. These mean that the ICC has jurisdiction to investigate and prosecute these crimes.
49. Where matters referred to in this witness statement are derived from my own knowledge, they are true. Where derived from documents or other information from others, they are true to the best of my knowledge.
50. Where exhibits are referred to then the exhibit reference consists of the Witness Statement number which is DS01 followed by the exhibit number; thus Exhibit 1 to this Witness Statement DS01 is DS01-001 and so on.

Part 2 – Background

51. I was born in 1976 in Gravesend, Kent, England. My mother is English but my father holds English-Irish nationality, as his father was born in Northern Ireland. This means that I can obtain Irish Nationality and thus again become an EU citizen. My father is probably undiagnosed autistic and my mother probably has undiagnosed ADHD.
52. My grandfather on my father's side did not achieve much, dying early of alcohol-related diseases, but his father (my great grandfather) was a doctor. My grandfather on my mother's side was a soldier but died in a car crash abroad in 1958. His wife (my grandmother on my mother's side who I believe was autistic) was in the diplomatic service and spoke many languages. My Uncle David (who I believe was also autistic) on my mother's side also spoke many languages, but after being mistreated by the police in Botswana in the 1970s, he was never the same and developed schizophrenia. He died in May 2024. My Uncle Peter on my father's side died in 2007, and was probably also autistic.
53. I had a relatively ordinary childhood until I was around the age of 10 at which point my father started going away a lot for work as he was an engineer for Ford, and my brother, who I assume had undiagnosed ADHD, proceeded to terrorise me, which obviously affected me severely at the time and for some time afterwards.

54. Despite all this, I was reasonably successful academically going to the selective Gravesend Grammar School for Boys, and was the first family member in recent history to go to university, studying physics at the University of Kent in Canterbury, England, and graduating in 1998. During the period considered in this witness statement, I also studied the equivalent of a psychology degree, and I started a maths degree recently.
55. I started a PhD in Laser Confinement Fusion in 1998 but dropped out in 2000, instead getting a job as a reactor physics engineer at Bradwell Nuclear Power Station in Essex in 2000, before moving to Dungeness B in 2002 as a fuel route systems engineer, then nuclear safety engineer, then operations instructor, then to the Atomic Weapons Establishment in 2007 in Berkshire as a licensed safety case engineer, then working as a consultant in 2009, where I worked principally for Sellafield, before becoming a self-employed contractor in 2011 where I worked at first Oldbury Site, then Berkeley Site, and finally Harwell Site at which point I had to completely give up work with ME/CFS in June 2014. I first began to become sick in 2011. I was earning approximately £100k/yr when I had to stop work completely.
56. During this period I had various so-called medically unexplained symptoms, which included first IBS, then MCS¹⁶, then a brief spell of ME/CFS in 2007, which I recovered from, before developing ME/CFS again in 2011 from which I have only recovered recently. Even ignoring that doctor's treat people with these types of illnesses badly, particularly in the past, it always seemed to me like I could never access adequate or any healthcare, and suspected someone had written "hypochondriac" somewhere in my medical records. However, this was not the case and I now know that I was being treated poorly because I am autistic. I refer to my early medical records from 1976 to 2007 as **Exhibit DS01-001**.
57. I first learnt about autism whilst studying for the equivalent to a psychology degree in 2006 and sought a diagnosis soon afterwards. The referral letter from my GP at the time, Dr I Sutherland, wrote that he was concerned that I was paranoid that I felt that I was autistic, and the referral was consequently rejected. I was later diagnosed as autistic in April 2019 (somewhat ironically a short walk from Dr Sutherland's old practice in Canterbury). I refer to the letter I wrote to my doctor about me being autistic, the referral letter, the rejection letter, and my autism diagnosis report from April 2019 as **Exhibits DS01-002, DS01-003, DS01-004, and DS01-005** respectively. The first three of course meant that it was in my medical records that I believed I am autistic since 2006.
58. As a gay man, I have tended to be in long term relationships, with that only stopping once I stopped meeting people to attempt to recover from ME/CFS. All my long term partners

¹⁶ Multiple Chemical Sensitivity

were either autistic or had ADHD (diagnosed or undiagnosed). I am not attracted to neurotypicals.

59. I am an experienced nuclear safety engineer as demonstrated above, which makes me an expert in complex and nonlinear systems. This experience and knowledge only broadened and increased as I thought more about the philosophy and epistemology of nonlinear systems, and learnt more about neurobiology. I refer to various draft papers and other documents as **Exhibits DS01-006 to DS01-010**.
60. Later 2020/early 2021, I wrote a simple Python¹⁷ model of a noradrenaline axon and this demonstrated behaviours I was not expecting and was not how I thought the system worked. These behaviours demonstrated that following a system disturbance, the system probabilistically (as I had included random variations in the pre-synaptic vesicles' quanta of noradrenaline) had 3 scenarios: (1) the system goes straight back to normal; (2) the system oscillates but those oscillations damp down; and (3) the system oscillates but those oscillations do not damp down. I refer to Figures 9A-9C of **Exhibit DS01-011**. The last is the self-reinforcing oscillations and pathological dynamical steady-states discussed in the main part of the report, and completely changed how I viewed my and other neurological illnesses. This unplanned discovery is what eventually led to my full recovery from ME/CFS.
61. I knew from when I first got sick with ME/CFS that if I triggered my symptoms then I got worse, believing that if I did not trigger my symptoms for long enough then I would eventually recover. I could improve my symptoms somewhat, but I could never fully recover, eventually triggering my symptoms and making myself worse again. I now know that proteins/genes as control systems had entered stable orbits about each other (as pathological dynamical steady-states) thus the oscillations would never damp down, and I therefore in fact needed to trigger my symptoms in the right way at the right time of the year to recover, in order to forcibly eject the control systems out of each other's orbits, decoupling the oscillations which then damp down, allowing the brain to return completely to normal: an important discovery that I have only known for certain very recently. The irony that I, a professed expert in nonlinear systems, who understands such systems may be counterintuitive, but then wastes my time trying to recover linearly, I hope is not lost on the Court; but I also hope that this demonstrates how difficult it is to think nonlinearly.

¹⁷ A computer programming language

Figure 9B – Type 1b Response – Axon-terminal Self-Resonance

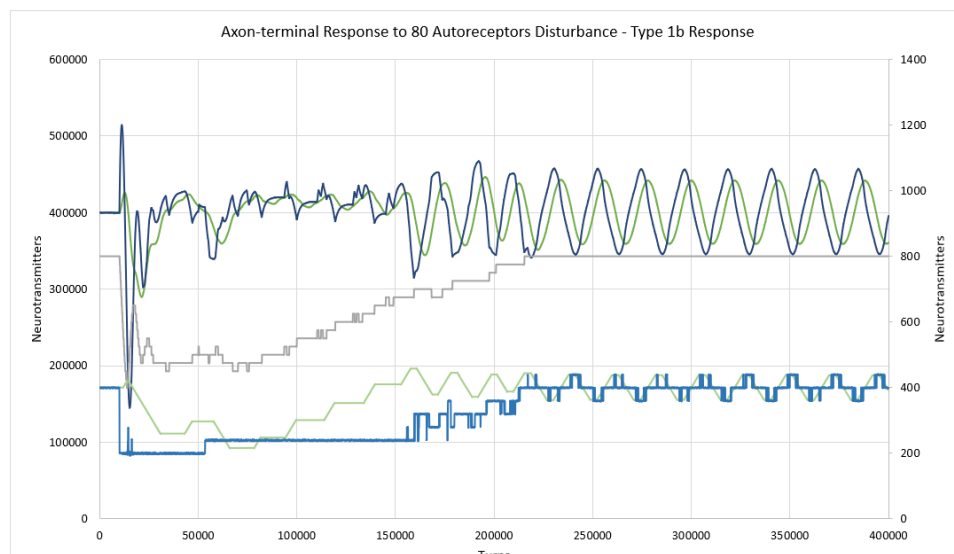
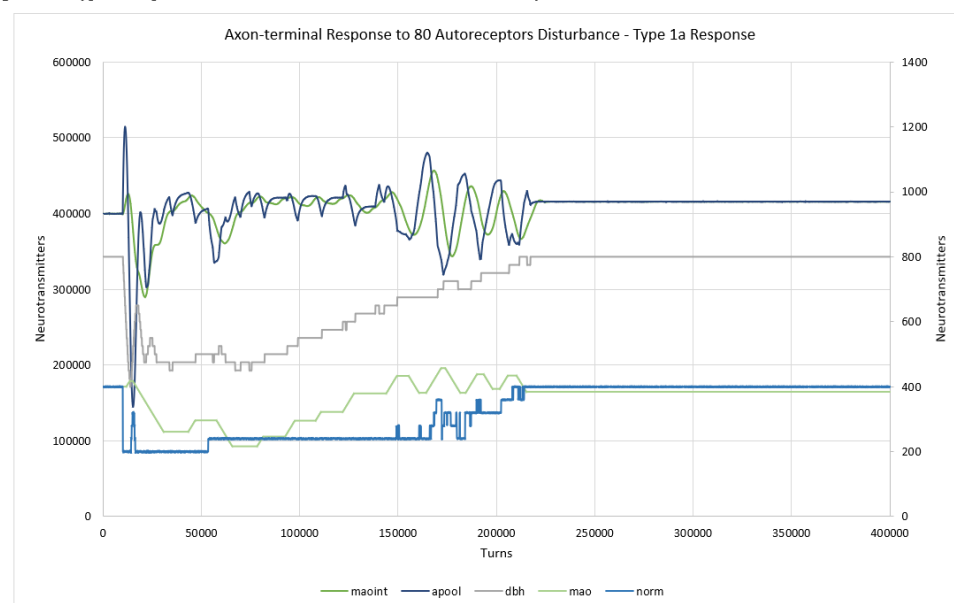


Figure 9A – Type 1a Response – Axon-terminal Self-Resonance - Oscillations Decay



62. In the terms of how I previously described this phenomena, I turned a Type 1b response into a Type 1a response. I refer to Figures 9B and 9A respectively of exhibit **DS01-011** (above). I last did this on 22nd February 2025 and largely recovered the next day (the time of year being highly favourable). I can now work 14 hour days without any consequences (as I have been doing writing this report), and the only symptoms I still have as of the time of writing is tinnitus, which I assume will also be gone in a few weeks and at which point I will have made a complete recovery. The same or similar phenomena exists for almost all other common neurological diseases, which includes all the common so-called medically-unexplained symptoms like fibromyalgia and hEDS, the common psychiatric illnesses, and epilepsy, and means that I can almost certainly cure approximately 1bn chronically unwell globally. The same or similar nonlinear approaches to other diseases means I can probably also cure or improve asthma and Type II diabetes, and cure or

improve most chronic organ diseases. I refer to my draft paper entitled "*Why Medicine is Doing Science Wrong: Emergent Pathology and the Pathophysiological Bottleneck Hypothesis*" as **Exhibit DS01-012**.

63. The problem in terms of the crimes reported in this report is that ME/CFS affects your cognition, and that it therefore had a synergistic effect on me being autistic, that is I appeared "more autistic". This can also happen if I am tired, hungry, stressed, or otherwise unwell. I generally find that people treat me better than others but when I am like that people treat me shockingly bad. This was to the point that this was the reason I sought a diagnosis in April 2019 to protect me from the British State, and although it protected me in some ways; it also introduced a host of problems, particularly with the police.
64. From 2015 to present (and as you will see), it has felt like different parts of the British State have taken turns to try to kill me, to drive me to suicide, or otherwise prevent me from recovering. This has been in the form of the NHS prescribing medications that have interfered with my recovery or otherwise harmed and often nearly killed me, in the form of the DWP repeatedly and fraudulently lying about me to deny me benefits and/or abusing me, and in the form of SYP (supported by the CPS) treating me as subhuman, with all the abuses against me that that entails. The fact that I am still alive and have now cured myself such that I can write this report and later bring my scientific discoveries to the world is a testimony to my physical and mental robustness, my genetics, and to what I can only assume to God who has guided and caused me to suffer to learn about these discoveries, to guide and caused me to suffer to learn about these atrocities, but always stepping in to protect me when I really needed him.
65. With all that in mind, then as the witness statement covers over a decade then I have divided the evidence by organisations to prevent too much confusion, rather than simply presenting my evidence in chronological order. This means some of the 'pass the parcel' by the British State is lost, but I feel this approach improves the overall clarity.
66. The witness statement excluding the introduction and this background therefore consists of five remaining parts. Part 3 provides the evidence in support of the allegations against the NHS, Part 4 provides the evidence in support of the allegations against the DWP, Part 5 provides the evidence in support of the allegations against the Judiciary, and Part 6 provides the evidence in support of the allegations against SYP and the CPS, and finally, Part 7 provides a summary and conclusion to this witness statement.

Part 3 - NHS

67. This part covers the events with the NHS from 2011 to present. Where clinics are mentioned then these are therefore all NHS clinics.

68. In 2011 whilst living in Bristol, I started to develop what I now know is ME/CFS. This turned into ME/CFS completely in August 2011. The symptoms initially included extremely loud tinnitus, headaches, feeling dizzy and unwell, and were worsened after various activities.
69. On or around 4th November 2011, I tried taking ginkgo biloba, having read that the herbal medication (which is the most well-known widely available herbal medication after St John's Wort) is good for the brain (as I correctly believed at the time that ME/CFS is a neurological disease). However, as the medication made me feel 'manic' and irritable, most probably because I am autistic, I stopped taking it. I refer to a Facebook entry stating my intention to try ginkgo biloba as **Exhibit DS01-013**.
70. On 2nd May 2012, I attended a GP appointment with Dr An Andries at Bishopston Medical Practice. I explained my symptoms, but also mentioned taking ginkgo biloba a few months ago and the symptoms that it had caused as an aside. Although Dr Andries wrote down some of the symptoms correctly, she also wrote down that I had complained of *"ongoing episodes of 'attacks' of getting irritable, feeling manic"*, which was not true, as these were related to the ginkgo biloba not to my illness. My partner [REDACTED] at the time was present in the consultation and has provided a witness statement previously that confirms I was not experiencing nor reporting any manic-related symptoms. I refer to my 2012 medical records as Exhibit **DS01-014**, and my ex-partners witness statement as **Exhibit DS01-015**.
71. I moved to Birmingham in November 2012 and in April 2013 I was diagnosed as HIV+.
72. On 29th May 2014, I visited Hockley Medical Practice where I saw Dr Emma Papworth. I explained the same symptoms as previously but instead she wrote *"...triggered recurrent 'attacks'. These attacks involve labile mood (including periods of depression, anxiety, and mania)"*, something I never said 2 years ago in a different city, and remained untrue as discussed above. I refer to my 2014 medical records as **Exhibit DS01-016**.
73. From April 2015 onwards, I was prescribed the HIV medication Eviplera by various at Queen Elizabeth Hospital in Birmingham. These drugs can cause insomnia and depression as side effects. I later found out that Eviplera includes the drug Tenofovir DF, which as well as being an antiretroviral is also an adenosine agonist as a side effect. This side effect mechanism (as an agonist) is nonlinear and thus has never been proven safe for anyone, but certainly is not safe for someone with a nonlinear illness like ME/CFS and a nonlinear difference like autism. If this drug had not been prescribed to me then I would have recovered in 2015 or soon after. I did not realise that this drug was preventing me from recovering from ME/CFS until 2021, some 6 years later. I considered these unnecessary 6 years of symptoms of ME/CFS and otherwise as torture. The symptoms whilst taking Eviplera included mild depression, but after stopping taking the drug included actual depression plus migraines, symptoms that I had never experienced

before. I also considered these symptoms as akin to torture. I refer to various logs of symptoms as **Exhibits DS01-017 to 021**.

74. On or around 5th September 2015, I was assaulted which led to my arm being broken. A week later whilst on the above Eviplera that causes (I now know comparatively mild) depression and my arm in a temporary cast, I attended City Hospital A&E in Birmingham feeling suicidal, having not cut my arm but slightly scratched it with a knife. I later found out that the triage nurse had written on some unknown central NHS database that I had a drink problem, which was not possible at the time because my symptoms were dominated by ME/CFS (so you cannot drink regularly because of the intensely unpleasant after effects) and has caused me and is still causing me a host of problems with both the NHS and the police. A level of sociopathy that can only be born of hatred of me because I am autistic.
75. On 30th September 2015, I had a consultation with Dr Kristen Widdowson, another GP at the same practice in Birmingham. I later was offered a contract role and wrongly thinking I had recovered sufficiently, re-applied for my security clearances. Dr Widdowson wrote back to the vetting agency that I was abusing methadone, a heroin substitute, a word that appears nowhere in my medical records and she simply made up. A number of other statements she made were also untrue. This statement alone could have destroyed my career and my life, and the letter still remains in my medical records (although it obviously does not matter now). I refer to this letter as **Exhibit DS01-022**.
76. On 24th May 2016 I saw a new GP Dr Ester Anderson at Langworthy Medical Practice. I spoke about the same symptoms. However, Dr Anderson wrote that *“he describes anxiety and low mood followed by periods of feeling very happy”*. I have never described periods of feeling very happy. She also stated that I agreed of the possibility of suffering from the after effects of drug induced psychosis, which also was not true. For the avoidance of doubt, it’s not genetically possible for me to develop psychosis, that’s why I had ME/CFS. I refer to my 2016 medical records as **Exhibit DS01-023**.
77. On 30th August 2016, I attended a consultation with Sister Rebecca Martin at the same practice. She asserted that I had been attending the practice for several years with depression and anxiety, which was not true because I had only moved to Salford in 2016. She also stated that I was dismissed from my job because of use of an ‘illegal high’. I was neither dismissed nor took any ‘illegal high’. She further asserts that I have a history of suicidal thoughts and self-harm when that refers to one incident in August 2015 after I had been assaulted where my arm was broken whilst on medication that causes depression (as stated above). I refer to a letter she wrote as **Exhibit DS01-024**.
78. On 7th February 2017 on realising that I had run out of money and I could not work thus needing to claim sickness benefits, I again had an appointment with Dr Anderson. She

refers to “pressure of speech” and “flight of ideas”. I refer to my first 2017 medical records as **Exhibit DS01-025**. She wrote this because she was colluding with other GPs to make me look mentally unwell when I was not.

79. In a letter dated 2nd May 2017 and in a neuropsychiatrist referral, Dr Anderson asserted that she believed I was suffering from “*mania*”, colluding with others to make it appear like I had symptoms I did not, have never had, and never said I had at the time nor some 5 years earlier. I refer to this letter as **Exhibit DS01-026**.
80. Around May 2017, I saw a consult neuropsychiatrist Dr Rachel Thomasson at Salford Royal Hospital. I never complained of mood issues yet she said I had unstable moods and recommended antipsychotics, which would have killed me because I am autistic. I stated, which she wrote down, that I cannot take drugs because they trigger my symptoms (as I had ME/CFS). I cannot seem to locate this letter.
81. On 14th July 2017 in another consultation with Dr Anderson, I discussed actions I was taking in terms of attempting to downregulate noradrenaline receptors (the actions were correct but for the wrong reasons as I now know). She asserts that I had “*very little insight*” and “*very fixed ideas*”. The irony that she was ignoring all the signs of ME/CFS and then literally making stuff up to try and have me diagnosed as bipolar, whilst asserting that I have “*very little insight*” and “*very fixed ideas*” I hope is not lost on the Court. I refer to my second 2017 medical records as **Exhibit DS01-027**.
82. On 22nd August 2017 I had a consultation with Dr Vincent Lee at the Hathersage Centre, which is part of the Manchester Royal Infirmary, my raltegravir dose was wrongly changed from one in the morning and one in the evening to three in the morning. Raltegravir is an antiretroviral has a side effect as a TRPV1 or capsaicin agonist. This means its side effect mechanism is nonlinear and thus has never been proven safe for anyone, and particularly not for those with nonlinear illnesses or differences like ME/CFS and autism respectively. I refer to the consultation record send to my GP as **Exhibit DS01-028**.
83. On 13th September 2017, I again saw Dr Anderson. I asserted at the start of the consultation that I was unhappy with our consultations because she had failed to help me understand that I had been triggering my symptoms by making music on my computer (a classic symptom of ME/CFS which she had failed to identify). In response, she asserted passive aggressively in my medical records, that I am “*grandiose, patronising, talking down to me*” and then mocks an aspect of my autism referring to “*sinithesia [sic] he tastes feelings*”; thus making it clear that her actions where she sought to harm me at every opportunity are and were because I am autistic. I again refer to my second 2017 medical records **Exhibit DS01-029**.

84. In an urgent referral letter to a psychiatrist dated 13th September 2017, Dr Anderson repeats much of what she had already said in my medical records above but adds that he has *“some very unusual beliefs”* and *“He has always presented with somewhat outlandish theories with regards to his mental health.”* Dr Anderson here is now more clearly labelling me as mentally unwell for what I now know I was doing which was pointing out that medicine is doing science wrong. Dr Anderson is invited to see if she still feels these are the case by the end of the year. She also says that I reported experiencing low mood from concentrating too much, which again is not true and is never true for anyone – concentrating lifts mood but in my case it was triggering my ME/CFS symptoms, which she would have realised if she had not had *“very little insight”* and *“very fixed ideas”*. I refer to this letter (which I had to fight tooth and nail to obtain) as **Exhibit DS01-030**.
85. On 20th September 2017, and having been taking the new raltegravir dose regime, I developed a severe adverse event to the drug that was only terminated by taking more. This was because a TRPV1 agonist suppresses long-term potentiation, which on withdrawals caused my brain to overexcite. My heart rate and BP went up to the point I called an ambulance and my brain adapted to avoid a seizure, but in doing so caused 6 years of prescribed harm. These prescribed harm symptoms included visual hallucinations (but not psychosis – I knew they were hallucinations) for 6 months, and more longer lasting, central and obstructive sleep apnoea, mild asthma, heart palpitations and ectopic beats, and random non-diabetic hypoglycaemia. I consider the adverse event and the symptoms as I tried to recover as akin to torture. I refer to the 999 triage return call on that date as **Exhibit DS01-031**.
86. The NHS has never admitted formally that these drugs are unsafe for autistic people nor even admitted that they were unsafe for me, and they have never apologised. The contempt that the NHS shows towards patients and particularly autistic patients can be seen in the correspondence where the NHS insults and abuses whilst evading accountability at every opportunity. I also complained to the Parliamentary and Health Service Ombudsman (PHSO) and also received an empty-headed response. However, these mean that the NHS and Parliament knew there was something wrong with medicine for autistic people, perhaps since 2017, and thus supports the allegation of recklessness. I refer to the correspondence as **Exhibits DS01-32 to 38**.
87. On 25th September 2017, I had an appointment with Dr O Mathurine, a consultant psychiatrist, and a social worker. The meeting at my home was terminated because I was unlawfully prevented from recording the consultation, so I asked them to leave. No diagnostic assessment was thus carried out and asking them to leave meant I withdrew consent. Despite this, Dr Mathurine unlawfully wrote to my GP saying I had *“likely bipolar affective disorder”* based partly on how I always look (i.e. prejudice against me because I am autistic) and partly on me reporting having severe insomnia from my change in HIV

medications, which he did not note down but the social worker did (whose records I also had to fight tooth and nail over to get). He did this in order to label me as mentally unwell so that the NHS could later harm me more because I am autistic. For the avoidance of doubt, I can currently explain and definitely cure ME/CFS (because that is what I had and thus what I cured), I can also explain bipolar disorder but any cure I am less sure about. I refer to the letter he wrote as **Exhibit DS01-039**

88. The issues raised above, particularly in relation to my severe adverse reaction to raltegravir and the atrocious responses to the related complaints, led me to establishing GLITTER RESIST, and thus directly led to this report. My style of activism consists of being polite and reasonable initially, but when I then get an inevitable bad faith response, I then switch to being flamboyant, rude, insulting, and provocative. The purpose is for organisations to not take me seriously and then revealing their true selves, or alternatively to be provoked, and for them to then do or say something stupid thus again revealing their true selves. The approach is an attempt to create a “double-bind” (i.e. whichever choice is taken, your opponent loses) and is fairly conventional tactic in activism. The approach is related to a ‘game’ described in *“Games People Play”* by Dr Eric Berne (the father of transactional analysis) and is of course NIGYSOB (Now I’ve Got You, You Son Of a Bitch). I refer to two unfinished documents started in 2018 that are related to the issues raised in this report as **Exhibits DS01-040** and **DS01-041**.
89. On 2nd October 2018, I had a HIV consultation with two specialist HIV nurses. One of the nurses admitted that raltegravir is not safe for autistic people, meaning that the NHS definitely knew in 2018 about the issues in this report but recklessly did not care. I refer to the audio recording of this consultation as **Exhibit DS01-042**.
90. On 1st January 2019, I attended A&E at the Manchester Royal Infirmary because I had felt suicidal, but felt better by the time I had walked there. I felt like this because the DWP was also committing crimes against humanity against me similarly as discussed later. The triage nurse, Nurse Katrina Ray, was shockingly rude to me at the start and then refused to give me her name, so I started filming her and asked to speak to the Charge Nurse, at which point I stopped filming.
91. In conversation with Charge Nurse Nigel Gillen, he then proceeded to provoke me multiple times to try to get me to leave, when that did not work he instead lied about me assaulting him, and when I started holding him to account referring to treating people with dignity and respect and his professional code of conduct, he then had me escorted off the premises. I had said on multiple occasions that he could simply ask me to leave at any point. The conversation had been acrimonious from the hospitals side from the start, but when Charge Nurse Gillen lied about me assaulting him, I then understood that I was never going to receive any help from this or any other hospital because I am autistic. At that point I stopped trying to get help from him and simply chose to try to waste his time

as much as possible and to otherwise be difficult to get him to ask me to leave (NIGYSOB). The conversation was audio recorded. I refer to the audio recording and transcript as **Exhibits DS01-043 and DS01-044**.

92. The matter could have ended there, but instead, the two individuals and the hospital proceeded to repeatedly fraudulently lie about me to seek to harm me in the future and to discourage me from using the NHS, that is to deliberately commit the crimes of extermination and persecution, and the de facto crime of apartheid against me because I am autistic. These included:
- a) Telling the police that I had been ejected for being abusive and grabbing nurses passes, and that I had been filming patients and staff.
 - b) Writing in my medical records that I had attempted to assault Katrina Ray, that I had actually assaulted Nigel Gillen, that I had been verbally abusive and aggressive, and that I was of *“high risk of harm to others”*.
 - c) On complaining, confirming and berating me for being aggressive, before asserting that they had made a note on their records that I was an aggressive patient.
93. None of these were true of course and they were simply using the stereotypes of autism against me, which is also deliberate persecution. Greater Manchester Police accepted the NHS version of events (but with again different “facts”), despite me asserting that I had an audio recording; thus becoming complicit in the crimes of the NHS. I refer to the relevant available records and complaint letters as **Exhibits DS01-045 to DS01-051**.
94. In January 2019, having been broken by both the NHS and the DWP (the DWP is discussed in the following section as discussed) I had to call my parents and ask them to come and rescue me. I thus moved back to Gravesend in Kent.
95. In March 2019, I was again prescribed raltegravir on my HIV consultants insistence, but at the previous lower dose at the Riverside Clinic in Gravesham Community Hospital. This yet again caused havoc to my brain and body, with many of the previous symptoms returning (except the hallucinations), along with some new ones. The new symptoms only appeared when I realised raltegravir was severely interrupting my recovery from ME/CFS and I then stopped the medication. The prescribed harm symptoms included racing heart and other palpitations, brain zaps, a feeling of spinning when trying to fall asleep, and gastric problems. I remember lying in bed saying repeatedly to myself, over and over that the NHS has finally killed me. I attended Darent Valley Hospital A&E in Dartford in Kent on one occasion on or around 6th July 2019, but walked off when the hospital refused to accept the symptoms were being caused by prescribed harm. I also considered these symptoms as akin to torture. The NHS again was demonstrated that medicine is dangerously wrong for autistic people but took no action, further demonstrating recklessness. I refer to an email sent to the clinic at the time as **Exhibit DS01-052**.

96. In July 2019, I then asked specifically for HIV medication that does not affect the brain, and I was prescribed darunavir and Truvada. I started taking this medication in April 2021, but the medication started to cause akathisia, and when I stopped caused catatonia and what I think was the edges of neuroleptic malignant syndrome, which can be fatal. The principle reason for this is that darunavir is a CYP2D6 inhibitor, which is a liver enzyme also present in the brain where it deactivates dopamine. A fact unknown to most of medicine for reasons only known to them. After the initial depression-related symptoms disappeared, other prescribed harm symptoms that had disappeared re-appeared and my asthma became more severe, asthma that I never had before the prescribed harms. I also considered all of these symptoms as akin to torture. This CYP2D6 side effect is also nonlinear and thus has never been proven safe for anyone, but particularly for anyone with a nonlinear illness or difference as before. And of course I was told the medication does not affect the brain, which was obviously not true.
97. During this period I had taken the medication esomeprazole (EMP) on and off, which is a proton pump inhibitor type indigestion medication, and the only alternative after ranitidine was withdrawn due to manufacturing problems. This medication has the potential to (usually reversibly) damage the kidneys.
98. On 6th October 2020, I developed symptoms of anxiety and racing heart rate. I took some calcium-based indigestion tablets suspecting acidosis but my symptoms then turned into high heart rate, a different type of anxiety, and 'feeling high'. I now know that the EMP had mildly damaged my kidneys causing a type of Fanconi syndrome. This took the form of my blood pH not being controlled leading to acidosis, and if I took calcium indigestion tablets to stop the acidosis then my blood calcium went too high. The presentation of both of these for autistic people is not the same as neurotypicals as I later found out, and the reason for this is because of autistic people's increased neuronal density, meaning small changes in blood chemistry will have an exaggerated effect because of Network Theory, with symptoms tending towards central nervous system (CNS) overexcitation.
99. I called 999 and a Yorkshire Ambulance Service ambulance arrived. I told them that I believed I had acidosis from medication-induced kidney damage, but the paramedic said I had dehydration and anxiety, and that I was wasting their time, only taking me to hospital reluctantly. I consequently put on and switched on my covert audio recording device. I refer to the medical record and complaint for the ambulance visit as **Exhibits DS01-053** and **DS01-054**.
100. I was then taken to Northern General Hospital A&E by ambulance but entered as a walk in as the symptoms were subsiding. The triage Nurse Jeremy Tym also seemed to not believe that I had medication-induced kidney damage nor acidosis and nor the later symptoms caused by the indigestion tablets, despite me bringing all medications to the hospital. Given these experiences of what at the time felt like ordinary autism disability

discrimination, I just wanted to go home, so I left and everything returned to normal walking home as my kidneys woke and caught up. My kidneys then rapidly recovered on stopping taking EMP. However, I later found out in a tediously predictable turn of events, that Nurse Tym had written a host of untrue and unpleasant statements about me in my medical records, which included:

“fixated that he has something wrong with his kidneys secondary to usingesomeprazole”
“that he knows more than any Doctor as a result of what he has read on Google”
“delusional behaviours ideas”

101. Nurse Tym appears to be another health professional insisting on labelling me as mentally unwell because I am autistic and because I keep proving that medicine is doing science wrong simply by existing. Nurse Tym knew that I am autistic. The statements he made were demonstrably untrue or misrepresentations when compared to the audio recording. I complained, but again in a tediously predictable turn of events, had a worthless response. However, this provided further evidence that the NHS has and is acting recklessly towards autistic people. I refer to my medical records for this visit, the covert audio recording, the complaint email as **Exhibits DS01-055 to DS01-058**.
102. Shortly afterwards on or around 16th July 2020, I noticed a poster in A&E that stated that it was (laughably given the recent events) unlawful to audio record staff, which is not true as it constitutes note taking. The sign also goes against NHS guidance and violates UK Equality Act 2010. I raised these issues with the hospital and they stated that the sign had already been removed and was in the process of being replaced. However, the sign remains on display some 4 years later if you wish to understand the level of petty dishonesty within the NHS. I refer to a picture of the poster in 2021 and the hospitals response to my complaint as **Exhibits DS01-059 and DS01-060**.
103. After having been harmed by darunavir prescribed at Gravesham Community Hospital as discussed above, I wrote an email complaining, about amongst other things, the repeated harms done to me by the NHS because I am autistic, but nobody responded to the points made. I later wrote a similar and more detailed letter to Dr Julia Grieg who was my HIV consultant at the time but to which I also had no response. This means that the NHS were provided further warnings that the NHS is dangerous for autistic people but recklessly choosing to do nothing. I refer to this email and letter as **Exhibits DS01-061 and DS01-062**. respectively.
104. On 21st March 2022 and with hindsight, I had developed cyclical sensitivity to caffeine. This culminated on one occasion driving to the hospital concerned about a raised heart rate but driving back home soon afterwards without attending, but this occasion calling an ambulance because my heart was racing a lot more. I ended up having to wait in the ambulance and be brought in by bed because my heart rate was 168 BPM and I had supraventricular tachycardia. The reason for these symptoms was because I had taken

Truvada in 2021 and Truvada includes the drug Tenofovir DF, an adenosine agonist and thus an anti-caffeine pill, and because my brain was oscillating leading to very slow recovery from neuronal adaptations. This of course means that this event was yet more prescribed harm. Although I recovered unharmed, I considered the event as frightening and akin to torture.

105. In February 2023 and not understanding that once someone is allergic to a medication then the allergy gets worse not better, I took EMP again. This time the damage to my kidneys was still mild but with more severe symptoms. I developed atypical symptoms to abnormal blood chemistry deviations as before but effecting more parameters namely: acidosis, alkalosis, excess calcium, excess potassium, excess sodium, and excess magnesium, This was mostly from mistakes I made not understanding the feelings and the rules were at the time.
106. The symptoms I experienced were atypical compared to neurotypicals with acidosis, excess calcium, excess potassium tending towards agitation/anxiety and increased HR/BP, but with alkalosis, excess sodium, and magnesium tending towards nausea/tiredness and decreased HR/BP. The most dangerous combination was excess calcium with excess sodium and neurologically is equivalent to taking an upper and a downer, with the downer having a shorter half-life resulting in somewhat extreme CNS overstimulation. As an illustration, I refer to a video of me experiencing acidosis where I measure my HR and BP which resolves when I take some sodium bicarbonate that raises blood pH and where I demonstrate atypical symptoms dated 4th June 2024 as **Exhibit DS01-063**.
107. During this period, I called ambulances from Yorkshire Ambulance Service on two occasions but on both occasions was treated as though I was mentally unwell. I attended Northern General Hospital on multiple occasions and was also treated as though I was mentally unwell, this included on three occasions when I was in hypertensive crisis.
108. The last occasion on 24th May 2023 was the worst, because I had consumed foods containing calcium and sodium together, and then gone to sleep feeling unwell, but in doing so made the situation worse (because vasopressin is released when you are asleep reducing kidney function) leading to the effects described above.
109. In triage at the hospital, I was surround by a doctor and a number of nurses, and tried to convince them that I needed urgent care but I was mocked. I ended up leaving and walking outside in a circle around the hospital drinking water to try to restore my blood chemistry. I later realised that in fact this specific combination of blood chemistry (excess calcium and sodium) had messed up my neurobiology causing the symptoms, meaning that drinking water would have no effect. I thought I was going to die and from what I have experienced previously, the symptoms felt like serotonin syndrome. As if to

demonstrate the level of sociopathy within the NHS against autistic people, the Emergency Doctor later wrote to my GP to state that I had an anxiety disorder (something the hospital later attempted to retract). I eventually completely recovered from the kidney damage after avoiding EMP and for reasons that cannot be disclosed as they amount to trade secrets. I refer to the relevant medical records and emails from this period, and the hospitals complaint response as **Exhibits DS01-064 to DS01-073**.

110. The rest of 2023 was otherwise extremely distressing for me because I now realised that medical knowledge is dangerously wrong for autistic people, which combined with the constant discriminations, rendered the NHS almost completely unusable for me, and I naturally then began to be overly concerned about my health. I ended up making plans should I be killed by the NHS, which included sending information detailing the scientific discoveries I had made detailed in this report to the Coroner so that they would not be lost.
111. As I was getting no answer from the NHS about these issues, I sent Letter Before Actions to the principal trusts that had harmed me, namely Sheffield Teaching Hospitals NHS Foundation Trust and Maidstone and Tonbridge NHS Trust, indicating my intention to sue the trusts. In the response from the latter, the Trust stated, *“even if it were true that the NHS's approach to the treatment of autistic people is incorrect in the way that you allege...that would not give rise to any legal liability on the part of the Trust. In other words, even if you were able to prove that the NHS's guidance was wrong as a matter of science, it would not have been wrong as a matter of law for the Trust to follow it.”*, that is the NHS believes that it is lawful to harm and kill an entire group of people, i.e. the NHS believes genocide against autistic people is lawful, providing the NHS is doing it. This was the same defence made by doctors in the Nuremberg Trials as these crimes were lawful under German law; this defence was of course roundly rejected. I refer to the correspondence as **Exhibits DS01-074 to DS01-076**.
112. On 25th August 2024, for reasons I still do not know, I decided to eat a wild black raspberry. The raspberry bush was in the garden of someone's home and the house had a German flag hung from the window, and I am learning German and I am still somewhat obsessed with Germany, so I am guessing that's what attracted me. However, in the next door garden there were also wild grasses growing, which I later found out were contaminated with ergot, a hallucinogen and poison. It seems that the raspberry I ate and did not wash beforehand, had been contaminated with a small amount of ergot either carried by the wind or by insects.
113. This resulted in effects on ingestion almost immediately, at which point I went home to sleep but kept feeling worse and worse, so extremely reluctantly I walked to Northern General Hospital A&E. I initially thought my drink or food I had bought had been spiked but I then almost immediately suspected it was the raspberry and semi-forced myself to

throw up repeatedly, an action that probably saved my life. By the time I got to the hospital I was high as a kite and all over the place.

114. Despite me repeatedly stating correctly what the problem was, the hospital initially started treating the problem as mental illness, but I then proceeded to get too high and having waves of nausea and vomiting. I did not feel anxious, and but for the vomiting and nausea (and being in a hospital), it would otherwise have been pleasant. I kept insisting I was high as a kite and they proceeded to treat me as though I had an infection, instead of having been poisoned. This was because I was demonstrating atypical symptoms from ergot poisoning, which but for me throwing up and my otherwise physical robustness, would have resulted in my (preventable) death through recklessly negligent care by the NHS because I am autistic.
115. I complained providing photo of the raspberry bush, the grasses, and the ergot contamination, but the response asserted that it was not ergot poisoning because I had tachycardia not bradycardia, completely ignoring every communication previously where I explained that pathologies in autistic people tend towards CNS stimulation not inhibition pursuant to Network Theory. The NHS now cannot say at all that they had not been warned multiple times that medical knowledge is dangerously wrong for autistic people thus transparently demonstrating recklessness. I refer to the complaint email, the two photos, and response letter as Exhibits **DS01-077** to **DS01-080**.
116. Given the above and from October 2023 onwards until present, I wrote/emailed various about these issues. These included every NHS Trust, most local GP practices including my own GP, the National Autistic Society, the head of NHS England at that time Ms Amanda Pritchard and the DWP. I also wrote to my MP (Mrs Gill Furniss MP), the wider Labour Party, the Secretary of State for Health and Care Wes Streeting MP, and of course Prime Minister Sir Keir Starmer via email and by post multiple times, but I had no or no meaningful response. I refer to these emails and letters as **Exhibits DS01-081** to **DS01-090**.
117. I even attempted to sue my own GP practice, but this failed because the Judiciary abused their own processes whilst violating multiple statutory legislation both civil and criminal, including the International Criminal Court Act 2001, to prevent me from even attending the Hearing, making the Judiciary also complicit in these atrocities. These events are discussed in 'The Judiciary' section later. I refer the Letter Before Action sent to my GP's practice, the response to my original letter that was only provided after legal action had been commenced, and the judgment to strike-out my Claim as **Exhibits DS01-091** to **Exhibits DS01-094**.
118. At various times during this period, I also complained to the GMC and the NMC about the specific doctors and nurses discussed above, but they refused to accept their actions

were discrimination; thus making both organisations complicit in the crimes committed by the NHS. I refer to the combined report sent to both as **Exhibit DS01-095**.

Part 4 – DWP

119. This part covers the events with the DWP from 2018 until present.

120. On 12th October 2018 I had a health assessment from the DWP to continue receiving my sickness benefits. I remained too sick to work being unable to do anything that involved concentration or being in any environment for which there was too much stimulation, that is I continued to have ME/CFS. In what was an obvious stitch up, the assessment was with a nurse, Ms Eileen Bell, and another member of staff as witness. However, I was covertly audio recording the assessment. I did not think the assessment went too bad, but my sickness benefits were completely stopped on 26th November 2018.

121. I requested the health assessment report and identified that much of what I had said about my illness symptoms had been omitted and the rest misrepresented. The audio recording demonstrates Ms Bell acknowledging what I was saying but then not writing that down in her report. A transcript of part of the audio recording with the evidence that was not documented is provided below to demonstrate that under no circumstances were the omissions made by mistake. I also refer to the report and complete audio recording as **Exhibits DS01-96** and **DS01-97**.

“Ms Bell *You kind of have to Pace yourself?*

Me *I have to do pacing yeah. That's exactly the word yeah. So I can't play computer games. I don't go out with friends.*

Ms Bell *And you do that to avoid your chronic fatigue symptoms?*

Me *I do it to avoid the symptoms of ME.*

Ms Bell *Ok.*

Me *Um. And there's a delay of 24 hours. So I don't really know if I've set it off until 24 hours later. That's the post exertional malaise is what they call it. And that's the key feature of ME...*

Ms Bell *So you get that following bouts of increased activity?*

Me *It's not. It's just. It's just mental activity for me. Um. Or if I go out into a highly. Um. What's the word. Something with lots of stimuli.....*

Ms Bell *So say if you wrote a report for an hour. How, what would happen?*

Me *I would be ok. If I did two hours I would probably be ok. If I went for a bit longer than 2 hours then I would feel oo have I gone a bit to longer and I'd feel a little bit panicky like I don;t know have I gone too far I'm not sure. And then I wouldn't really know until about 24 hours later. And then I'd feel really tired. Pains in my head, tinnitus getting louder and just feel really really unwell. Err. Sometimes having brain fog as well. Um.*

Ms Bell *And how long does that last?*

Me *It's like the first 5 days I am really unwell. I really can't do anything.*

Ms Bell *It lasts for that long?*

Me *No it lasts longer than that.*

Ms Bell *Right.*

Me *The first 5 days I'm really unwell and then I'm ok for another 5 days and then I'm unwell again for another 10 days.*

Ms Bell *Oh right ok.*

Me *If I keep setting it off it gets longer. I'm on day 41 now since I last set it off and I'm still not back to how I was before."*

122. The inaccurate assessment was therefore a fraudulent and deliberate attempt to deny me benefits because I am autistic. I told her that I believed I am autistic in the assessment. I complained and provided the audio recording and Maximus (who run these assessments), having been caught committing these criminal offences, agreed that that the assessment was inadequate. I refer to this letter as **Exhibit DS01-098**.

123. The actions above therefore all amount to deliberate persecution and de facto apartheid because I am autistic (which reversed when they got caught). During this period, I was so distressed, I stopped taking my HIV medications, which then caused

depression/migraines (as discussed earlier) and I became suicidal with on one occasion, orderings drugs off the internet to kill myself, which did not arrive. My sickness benefits were then restored in January 2019, but after all the events with the NHS, this broke me, and I had to move back home to my parents in Gravesend in Kent. I refer to a tweet about these events as **Exhibit DS01-99**.

124. On 5th April 2018, I had a new assessment with Mr Regis Kare in Chatham in Kent . Given the events at the last health assessment, I told him in no uncertain terms, either produce an accurate assessment or be sued, but he then cancelled the assessment. The Court is asked to note the suspiciousness in Mr Kare refusing to carry out a health assessment when asked for it to be accurate on threat of legal sanctions. Mr Kare in fact wrote in his incident report that he had been abandoned the assessment because I threatened to sue him for discrimination; thus admitting he was victimising me, which is unlawful under the UK Equality Act 2010.
125. Mr Kare's supervisor Mr Adam Kelly supported Mr Kare's decision, that is asserted that his actions were lawful when they were not, this is a criminal offence under the same act. Mr Regis Kare then documented the incident as one of me shouting at him, which was not true, and was an attempt by him, Maximus, and the DWP to harm me further in the future. Later a Dr VP Abbot reviewed the audio of the assessment and he also supported Mr Regis Kare decision; thus making him civilly and criminally liable under the same act also. These actions all amount to deliberate persecution and de facto apartheid because I am autistic. I refer to my audio recording, Mr Kare's incident report, and the letter from Dr Abbot as Exhibits **DS01-100** to **DS01-103**.
126. On 23rd September 2019, I had a third and final assessment with Mr Irene Illoh. Ms Illoh again failed to document the assessment accurately. On one occasion asking me how often I feel unwell and I say 3 weeks out of 4, and she then repeatedly asks how many times, and I repeat exactly the same. She then writes down three times a month, a gross misrepresentation and a further obvious attempt to fraudulently deny me benefits. A transcript of this part of the conversation is included below. Ms Illoh was also frequently shockingly and insultingly rude to the point at home afterwards I broke down. I unfortunately cannot find the report but I refer to my audio of the assessment and the video of me breaking down at home as Exhibits **DS01-104** to **DS01-105**.
127. My benefits were of course then reduced but not stopped completely. I requested a "Mandatory Reconsideration" (MR) to review the decision but I never heard back from the DWP. I later found out that the DWP had "lost" the MR, which was only conveniently found a year later when the abuse below made specialist disability media.
128. On 28th September 2020, and expecting to be able to fully recover soon, I attended a Work Coach interview at Hillsborough Jobcentre. The work coach was antagonistic throughout

and felt like she was attempting to bully me (a senior nuclear safety professional). I was assertive back and she backed down completely. She then at the end of the conversation proceeded to joke about sticking pins and a Biro in my eye before disclosing that she used to teach and assault autistic children.

129. I complained, and the DWP said that she had told me not to worry about the security guards as it is not like I am going to stick a Biro in your eye or something, which was not true. The DWP were then provided the covert audio recording and having been caught thus then apologised profusely. I refer to the audio recording, the responses from the DWP, and the article about me that made specialist disability media as **Exhibits DS01-106 to DS01-107**.
130. In December 2023 and still not be able to fully recover for reasons I did not understand at that time. I then had notification that I needed to attend a health assessment by phone. At the time if I triggered my symptoms I was experiencing life-threatening body temperature transients going from hypothermia to hyperthermia as my body overshoot normality. I had attended A&E on one occasion, walking to the hospital at night with freezing temperatures in only a T-Shirt to stop me from dying. I believe these were the after effects of having issues with my kidneys and the excess calcium in my blood causing adverse neurological changes. I therefore believed that any health assessment may trigger my symptoms putting my life at risk, even at best it risked triggering my symptoms and forcing me to experience several weeks of unpleasant symptoms whilst also setting back my recovery. I also knew at that time that medicine was dangerously wrong for autistic people.
131. I wrote all of the above to Maximus and later to the DWP, providing my symptoms logs that showed years of distressing symptoms, but neither would listen and insisted the assessment went ahead. As it was Christmas and thus I could not get urgent legal advice and as the assessment was on 2nd January 2024, I consequently was forced to write a Letter Before Action and to produce a video detailing all the issues, the law, and my justifiable concerns. I sent both to Maximus, DWP, and the Coroner. The assessment was then consequently cancelled, but I had no response to the issues with medical knowledge being wrong for autistic people. I again refer to my symptoms log and also to letters and videos as **Exhibits DS01-017 to DS01-021**, and **DS01-108** and **DS01-110**.
132. As of 23rd February 2025, all the symptoms that were making me unwell and particularly including the triggering my symptoms have now gone or fading away. With the only real remaining symptom being some tinnitus that is slowly fading away. I expect to have made a full recovery by the end of May 2025 at the latest and thus to close my claim soon afterwards (if it has not been closed before). Actions that would have happened a lot soon but for the DWP and the NHS.

Part 5 – The Judiciary

133. This part covers the events with the Judiciary from 2019 until present.
134. On 8th August 2019, in a hearing in relation to a Claim brought against the Manchester Royal Infirmary proceeded over by Deputy District Judge (DDJ) White. DDJ White ruled against me whilst red in the face, bouncing up and down on his seat, and making increasingly bizarre threats in relation to the Claim, all of which would violate the Civil Procedure Rules. This was my first ever hearing and my first experience of persecution and de facto apartheid that exists within the Judiciary. I appealed the ruling but the appeal was “lost” in the system.
135. On 18th November 2019, I had my second ever hearing. This was in relation to when I sought legal aid from Stephenson Solicitors to sue Manchester Royal Infirmary for discrimination. I spoke to a Ms Abigail Martland who discriminated against me on multiple occasions including: (1) refusing to accept that I was not aggressive or perceived as aggressive and the NHS was simply lying despite me stating I had audio recorded the events; (2) that saying I was denied service for being aggressive when that was not true was not discrimination; and (3) that the mismatch otherwise between what actually happened and what they said happened in my medical records was not discrimination.
136. I kept point out the inconsistencies in her legal advice and she kept shifting her position with every flaw I pointed out in her arguments, meaning she had made up her mind at the start not to provide me legal aid because I am autistic. I attempted to obtain the audio recording of the phone call in the Courts, but her supervisor Ms Maria Chadwick also of Stephenson Solicitors and their solicitors Ms Wanda Karow of Mills & Reeves ludicrously asserted in witness statements that the audio could not be disclosed because legally privileged information of other clients could be heard in the background, and sought to strike out the claim I had brought on that basis.
137. DDJ Adam Chambers accepted this preposterous position whilst also demonstrating multiple instances of bias. These included: (1) when asked to explain some jargon staring at me as though he wanted me to burst into flames before simply saying no, in violation of the judicial Equal Treatment Bench Book¹⁸; (2) when I complained that legally privileged information had been disclosed to the Court without my consent, he asserted that I lose that right on suing your solicitors which is not true – common law confidentiality can only be breached with permission or with a court order – the Defendant had neither; (3) saying that the fact the claim was brought for a discrimination claim is not relevant to the public

¹⁸ *Equal Treatment Bench Book*

<https://www.judiciary.uk/wp-content/uploads/2022/09/Equal-Treatment-Bench-Book.pdf>

interest in the Claim going to trial which is also not true, and (4) admonishing me for bringing a claim against a legal aid firm of solicitors; thus more clearly demonstrating that the Judiciary is persecuting and enforcing de facto apartheid on autistic people including access to legal aid.

138. On 25th February 2020, I had my third ever hearing and my first one at the High Court in relation to a claim against the LGBT Foundation, a gay charity that provides support to gay people (but seemingly not gay autistic people). I had brought the Claim because the Defendant had disclosed sensitive personal data to my GP without my consent. Prior to the appointment, I had completed a form, which in relation to contact with my GP stated:

“Contact with your GP:

We routinely inform GPs when one of their patients has applied to access our Talking Therapies. This is to keep them informed of the support their patients are seeking to ensure that we effectively coordinate services and provide you with the best possible care. If you give your consent for us to do so, we will send a standardised letter after the Intake and Triage meeting telling your GP that you have applied for our Talking Therapies service and another letter after you have finished therapy.

If you do not wish for us to contact your GP please tick this box”

139. I did not tick the box on the basis that I was only giving permission for a standard letter to be sent to my GP not the host of information that was disclosed, most of which was not true. This means the Defendant clearly violated common law confidentiality. They also did not comply with Pre Action Protocols in providing only an almost one sentence email reply to my Letter Before Action. However, the Defendant applied for strike out/summary judgment which was overseen by “Honourable” Mr Justice Sanai and was successful.
140. The application succeeded on the basis that I had given permission to contact my GP, which was clearly not true. He also asserted preposterously that it was permitted because it was in my vital interests (I had expressed feeling suicidal) when such can only be used if the person is incapacitated or otherwise not able to consent thus was also wrong. These could be seen as being down to Mr Justice Sanai’s incompetence, what with him being a diversity hire, but he then went on to assert that my submission that the Defendant had not complied with Pre Action Protocols in failing to provide a “full and substantive” response to my Letter Before Action had “no substance”, which is demonstrably untrue and thus Mr Justice Sanai lied.
141. These actions again were simply the Judiciary conspiring with others to harm autistic people medically, and persecuting and enforcing de facto apartheid on autistic people, so that the NHS can harm us in the future. The Information Commissioner’s Office had also been previously contacted, but they also asserted vital interests was a legal basis for disclosure, contradicting their own website in case you are wondering how deep

persecution and apartheid against autistic people exists in the UK. I refer to the form sent to LGBT Foundation, the Judgement for Hearing on 25th February 2020, the email from the ICO, and a copy of their website on vital interests as **Exhibits DS01-111 to DS01-114**.

142. As discussed earlier, I also attempted to bring a claim against my GP practice Grenoside Surgery because their response to me raising the issues that the NHS is too dangerous for me to use because I am autistic. The Claim directly stated “autistic people are being routinely harmed and killed” by the NHS. Despite discrimination claims almost never being dismissed at the summary process stage, Grenoside and their legal representative Gordons Solicitors applied to have the Claim struck out on the basis that it was vexatious. For claims to be vexatious they need to lack merit, and for discrimination claims the facts always need to be determined at trial, and in any case I referred to expert witness reports that had not yet been obtained; thus the Claim’s merit could not yet be determined. I refer to my Particulars of Claim and the Defendant’s witness statement associated with their strike out application as **Exhibits DS01-115 and DS01-116** respectively.
143. District Judge (DJ) Preston then ordered an in-person hearing failing to account for my disabilities in violation of the judicial Equal Treatment Bench Book¹⁹, when I requested via email for a telephone hearing, this was rejected unless I made an application which requires a fee, whilst fees are prohibited under UK Equality Act 2010 for requests for reasonable adjustments. These mean DJ Preston violated UK Equality Act 2010 and Human Rights Act 1998 multiple times, and him requiring staff at the Court to carry out these unlawful orders meant he also committed multiple criminal offences under UK Equality Act 2010, but also meant he got what he wanted in that I was unable to attend the Hearing on 29th July 2024. Despite the Claim being a discrimination Claim and me filing/serving written evidence, the Claim was struck out by DJ Brown. At which point both DJ Preston and DJ Brown lost their judicial immunity and became accessories to the crimes being committed against autistic people by the NHS. I appealed the judgment but again my appeal was “lost” in the system. I again refer to my Particulars of Claim and DJ Preston’s Orders, and also DJ Brown’s Orders as Exhibits **DS01-115, DS01-94, and DS01-117**.
144. If the Court feels perhaps DJ Preston is just simply perhaps grossly incompetent, he then went on to interfere with another of my discrimination claim, making orders that violated Civil Procedure Rules (i.e. committing contempt against himself), before “losing” the Claim within the system along with the appeal against DJ Brown’s previous criminal

¹⁹ *Equal Treatment Bench Book*

<https://www.judiciary.uk/wp-content/uploads/2022/09/Equal-Treatment-Bench-Book.pdf>

orders to strike out. This further demonstrates that the Judiciary is persecuting autistic people and enforcing de facto apartheid.

145. Gordons Solicitors also lost any immunity because they demonstrated repeated dishonesty in their application (they referred to contents of my medical records which only I have not any GP due to past misconducts by GP practices) and violated common law confidentiality in otherwise using my medical records in their application without my permission or a Court Order. The application also demonstrates that the NHS and the Judiciary know that autistic people are being killed but recklessly do not care, i.e. recklessness is further demonstrated. I again refer to their witness statement in support of their strike out as **Exhibit DS01-116**.

Part 6 - SYP and CPS

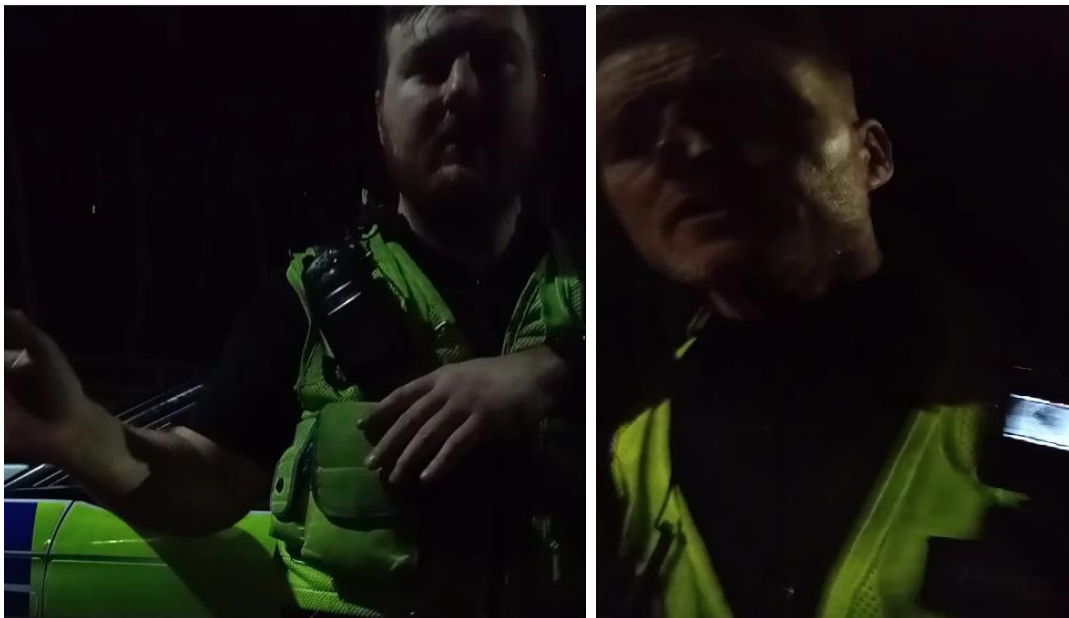
146. This part covers the events with SYP from 2020 until present.
147. On 11th August 2020, I was arrested for assault of a neighbour when I was in fact the victim and where I was not read my rights. The perpetrator Mr Dean McDonald had charged down stairs at me, sending me flying and causing a sprain to my right hand that has not fully healed some 4 years later. The nonsensical events as described by Mr McDonald could never have been true given the narrow space and geometry of where the assault happened, and given my injuries. There were no independent witnesses or CCTV. SYP simply chose to believe the other person and arrest me because I am autistic and they are not. I later successfully sued Mr McDonald in the civil courts (judgment in default). Despite all of these and despite later me attempting to report this event as an assault of me, SYP never investigated this crime. This is therefore the first time SYP has colluded with a member of the public to attempt to prosecute me for a crime I did not commit: this is persecution and apartheid.
148. In custody, and despite SYP knowing I am claustrophobic, I was forced into a confined space at which point I started having panic attacks. I consider these actions as torture. In the cell, I was deprived of water exacerbating a medical emergency where I had medication-induced kidney damage resulting in acidosis. I was also deprived of toilet paper, being forced to use my clothes to clean myself. When I tried to rectify these, the custody sergeant spoke too fast for me to understand on the cell intercom because I am autistic and the bad line. I pressed the buzzer to ask him to repeat what he said but more slowly, and he then disconnected the intercom. I later passed out on the floor of the cell from acidosis and I was left to die. This is because SYP assumed my agitated behaviour was because I am autistic when in fact I was experiencing a life-threatening medical emergency.
149. In the interview, the first of many times, I was required to have an “appropriate adult”, despite my little finger being smarted than SYP combined. They did this to humiliate me and because SYP believes autistic people are subhuman and thus mentally incapable. For

the avoidance of doubt, I previously held developed vetting security clearance, and thus still know government top secret information relating to the UK's nuclear deterrent and otherwise. As I was tortured and otherwise mistreated in custody any evidence obtained was inadmissible because it was obtained under duress. I refer to relevant documents for all of the above as **Exhibit DS01-118 to DS01-120**.

150. Following these events, I sought my personal data including the body and CCTV from these events, but as of the filing of this report, the subject access request has not been fully complied with some 5 years later. SYP has also withheld the arresting officers name in my complaint response.
151. On 23rd September 2020, I was walking on Boyland Street in Neepsend in Sheffield, and SYP stopped to harass me on the street stating that I was acting erratically, when I was in fact on the phone using my Bluetooth headphones. I raised a complaint about this to which I had no response.
152. In 22nd October 2021, SYP attended my property for a welfare check but waited until they saw me leave my flat taking my cat to my vets so that they could smash in my door, and then search and ransack my property. I sought the body cam and other video evidence in relation to these events, but these have also unlawfully never been disclosed.
153. On 29th June 2021, and despite the assertions made by the witnesses not being possible due to the laws of physics and otherwise being nonsensical, despite there not being two independent witness or CCTV, and despite SYP knowing that I had successfully sued the "victim" in the civil courts as discussed, SYP and the CPS decided to prosecute me for this "assault" where I was the victim. I considered this as a malicious prosecution and victimisation because of how much I had complained about my mistreatment during the arrest and at the interview. The Trial was in January 2022, but no evidence was presented and nor did the witnesses turn up. The SYP and CPS therefore knew the prosecution was not going to be successful, but continued anyway thus more clearly demonstrating the prosecution was malicious.
154. On 15th August 2023, SYP attended my property accusing me of harassing Mrs Gill Furness MP (my MP) from replying to an email her office sent to me. The correspondence related to harms being done to autistic people by the NHS and thus the contents of this report. SYP admitted that my response was not unlawful. This means that when I raised issues of crimes against humanity being committed by the British State, police turned up my door because I said mean things to my MP when she refused to help stop it. However, this confirms that Mrs Gull Furness MP read my email and thus confirms recklessness by the British State. During this encounter, the officers unlawfully covertly and otherwise surveilled my home when I invited them inside.
155. On 6th November 2023, I reported crimes against humanity being committed by the NHS and the DWP against autistic people online but this incident report was simply ignored.

This failure to respond demonstrates recklessness yet again. The incident report number is SYP-20231106-0672.

156. On 27th January 2024, I was stopped on Herries Road in Sheffield, not too far from Cookson Park, by two police officers who wanted to know my name. I started filming the encounter and they then got out of the car. They demanded my name again. I asked if I was suspected of committing a crime but they both refused to answer this simple question, meaning that I was not. They then stated that not giving them my name is suspicious and then proceeded to be aggressive and intimidate me, and when I got afraid and told them to step back, they both grabbed my arms. The officer on the left grabbed my hand with my phone, which stopped recording, and the one on the right grabbed my right arm forcing it back until it caused severe pain, and at which point I gave them my name. I believe these meet the definition of torture.
157. I was of course not the person I was looking for and they only did this because they thought I was acting suspiciously when in fact I was just existing as someone who is autistic. They then lied to deflect their misconducts, and said the person they were looking for had a machete in an attempt to appeal to my emotions. They never searched my bag. I reported the incident as a crime of torture but no criminal investigation has ever been carried out and their sergeant lied as well and again said the person they were looking for had a machete. SYP has never disclosed to me the body cam or other records relating to these events, and the name of the officers has also never been disclosed. I refer to my video of the events, stills from these videos (below) and my complaint which has never been responded to as **Exhibits DS01-121 to DS01-125**.



158. I believe this incident gave me PTSD, and I thus turned my NIGYSOB strategy and the full attention of GLITTER RESIST to SYP. A high risk strategy (as the later pictures of my injuries at the hands of SYP including on one occasion a black eye show), that I hope has

succeeded in proving the level of corruption that exists in the British police, and of course the level of human rights violations that SYP and other police forces are happy to inflict on autistic people.

159. On 28th January 2024, I was then assaulted twice in a road rage and disability hate crime incident with me as a pedestrian, where my back was severely injured for three months and still has not fully healed over a year later. Despite me videoing the assault, SYP not only refused to investigate but instead attempted to prosecute me following false allegations made by the perpetrator, that I had damaged his car. He had asserted that I had gestured at him then tried to steal his car and I had walked 10 meters away then stood there for him to then assault me twice, which was believed by SYP but obviously makes no sense. SYP again refused to do the most basic of logical thinking as it was I who called the police. Everything I say to the police is disbelieved or misrepresented, even if I have extensive video or audio evidence, whilst everything everyone else says is accepted as fact. This is now however the second time SYP has colluded with a member of the public to attempt to prosecute me for a crime I did not commit: this is persecution and apartheid. I said to the officers who attended that they are discriminating against me, but this did not change their attitude, and I also told them SYP had tortured me yesterday but they did nothing. The perpetrators name is Joshua Ball and is also listed as a suspect (picture below). I refer to the two videos of him assaulting me, a still of him, a video of me telling SYP they are discriminating against me again, and a still of the three officers (also below) as **Exhibits DS01-126 and DS01-130.**



160. On 27th April 2024, the police attended my home to ask me to attend an interview for two crimes and the interview then occurred on 28th April 2024. These two alleged crimes are discussed separately below. I did not believe that they had reasonable suspicions for either so insisted that they arrest me, which they then did but, then unarrested me when I said I would come to the interview “voluntarily”.
161. The first crime I was told was a public order offence from someone alleging I sent an anonymous note raising issues about the welfare of their cats, which is not a public order offence. On the next day I found out that I was actually being accused of harassment. The first incidence was damage to property for which there were no witnesses, whilst the second was the letter but for which I was simply seen outside my own front door. These mean that there was not sufficient evidence to arrest me and force me to an interview. This now being the third time SYP have colluded with members of the public to harass me and to attempt to prosecute me for crimes I did not commit: this is persecution and apartheid. The neighbour who lied about me and I have also listed as a suspect is Mr Gavin Morrison, who I understand works as an Amazon delivery driver.
162. For the second crime, I was accused of “making threats” to SYP, but despite repeated direct requests, SYP fraudulently refused to tell me what law had been broken. At the interview I was then told I was being accused of harassment for saying mean things in emails to the police complaints communal email, that is I was being accused of harassing the police as an organisation when responding to emails they sent to me. The emails being responded to of course relating to complaints about not opening criminal investigations into the crimes against humanity detailed in this report including the incidence of torture by the police themselves above.
163. In the emails I had previously asserted as empty bombast of my intention to establish “*Special Star Tribunals*” for the purposes of trying and publicly executing sworn police officers who had committed crimes against humanity against autistic people. And the emails that SYP were unhappy about continued the theme and the empty bombast, asserting that I want to withdraw the complaint and I will instead concentrate on amassing enough power to have them [sworn police officers] tortured and executed (referring back to the email I had sent earlier). These assertions were empty bombast and/or protected political speech, and although (deliberately) unpleasant, are not criminal.
164. More importantly, the alleged “victims” are not sworn police officers, SYP waited 7 weeks to contact me thus they did not really believe what I said was threatening, I remain unblocked from the same email address where I continue to say similar or the same, and the police were happy with a simple apology instead of a prosecution. The Court is invited to note that the British State believes that joking about torture is more of a crime than actual torture. This is now the fourth time SYP has attempted to prosecute me for crimes I did not commit, these not being crimes in this case: this is persecution and apartheid. As I stated to my solicitor before the interview, ‘being mean’ in emails is part of my activism,

and arguably this overreaction is what I wanted. I refer to the covert audio recording of this interview which includes me explaining what my form of activism is as **Exhibit DS01-131**.

165. These all mean that either I was wrongfully arrested because what I was accused of doing was not a crime, or I was lied to about what crime I was actually being investigated about, which is fraud, or also was not a crime, or there was insufficient evidence. These thus mean anything I said in the interview is inadmissible because I attended under improper duress or false pretences. SYP again required an “appropriate adult” to humiliate me and because they believe autistic people are subhuman and mentally incapable.
166. The police and CPS then deciding that someone can in fact not harass the police, then pivoted to a communications offence. An offence they cannot possibly have believed I was committing at the time of the arrest or alternatively knew but fraudulently hid that fact. In case you are still thinking that SYP should be taken seriously, then I am also being prosecuted for saying the common British idiom “Fuck off and die”, which means “go away and don’t come back” and was featured at one point in the British-American dramedy series “Ted Lasso”. Case law has demonstrated that the above, when the context is taken into account, are not crimes, and was simply an attempt by SYP to harass me to stop my autism activism. This is now of course the second time SYP and the CPS have maliciously prosecuted me [now confirmed as the CPS has failed to disclose any evidence].
167. On 4th July 2024, PC Fitzpatrick attended my home because of the same neighbour, Mr Gavin Morrison, who again lied and said I had damaged his property previously, now said I had threatened to damage his property again, which was not true and was simply his response to me threatening legal action over his cats constantly coming into my home to eat my cats’ food because his were not being fed properly. When I pointed out how preposterous this was, the officer then threatened to arrest and “process” me if I did not come to an interview, which I took to mean a threat to torture me in custody yet again. This being now the fifth time SYP have colluded with members of the public to harass me and to attempt to prosecute me for crimes I did not commit: this is persecution and apartheid. I also explained to the officer that I had been tortured by SYP, but she took no action.
168. From when I moved into my home in 2019 to present, neighbours have been causing nuisance and other anti-social behaviour (ASB), which included noise nuisance or day and all night, dog nuisance including dogs chasing my and neighbours cats, and some harassment which later worsened. This is still ongoing and I have now given my landlord The Guinness Partnership, an ultimatum. The ASB was principally being caused by four women called Ms Laura Morden, Ms Nicole Carr, Ms Eve Marples, and a fourth unnamed woman. I refer to a picture of these four women (also shown overleaf) and the later letters of complaint sent to my landlord detailing the ASB and copied to the police with access to all the media dated 28th July 2024 as **Exhibits DS01-132 to DS01-136**.



169. On 6th July 2024 and having lost my patience with the nuisance, I went down to talk to some of the women to ask them to stop. However, a number of people came out and I felt surrounded and so I walked up the steep hill to my home but I was then pushed from behind by the unnamed fourth woman, injuring my right wrist. Despite there being CCTV and the police attending, SYP took no action.
170. The next day on 7th July 2024, the group of people including the woman who assaulted me proceeded to shout abuse across at me when I left my flat, and despite the police attending no action was taken against them. The officers who attended again attempted to covertly surveill my home, and when I refused entry one of the officers became angry and abusive.
171. Later on 7th July 2024 and given the lack of action by the police, I went down to talk to the group again whilst covertly wearing an audio recording device. In the conversation, I talked about the nuisance and the shouting abuse down at me, the latter of which they agreed to stop. However, during the conversation one of the woman admitting assaulting me, I was threatened with assault, and my cat was assaulted and threatened. I refer to the audio recording and short video I took when my cat was being threatened as **Exhibits DS01-137** and **DS01-138**.
172. On or around the 29th July 2024, I reported DDJ Preston (see The Judiciary section above) to the police twice for criminal violations of UK Equality Act 2010 but I was again ignored. I later around the same time attempted to report crimes against humanity by the British State but SYP refused to log these as crimes, again demonstrating recklessness. I refer to these letters as **Exhibits DS01-139** and **DS01-140**.

173. On 21st August 2024, having been traumatised by the events and the police, and thus keeping myself to myself, a neighbour came up to my property whilst I was feeding my cats outside. She then threatened to set her dogs on my cats and I went around to shout at her. She later called the police and lied, stating that I had assaulted her. This is the same woman who is part of the group who I complained about nuisance to my landlord, which SYP knew because they had been provided the evidence as asserted above. My understanding is that the woman's name is Ms Nicole Carr and is one of the four woman who have been harassing me because I complained of nuisance and because I am autistic.
174. The next day the police came to speak to me about this incident. I later found out that the police had asserted in a police witness statement all sorts that was either directly not true or misrepresenting the facts. The dishonest statements included:
- a. Walking around with my shoes half on amounting to "erratic and unpredictable" behaviour.
 - b. Doing the "don't be suspicious dance" from Parks and Recreation amounting to "erratic and unpredictable" behaviour.
 - c. Me trying to give my cats treats and them running away from me amounting to "erratic and unpredictable" behaviour
 - d. Walking around my flat feeding my cats knowing I was going to be arrested is me "pacing back and forth between the bedroom and the kitchen".
 - e. Going to the bathroom to put my covert audio recording device on is me "pacing back and forth between the bedroom and the kitchen".
 - f. Magic eyes in managing to see whisky in a glass of coke on my coffee table.
175. They had done this to make me appear mentally unwell and/or an alcoholic to further encourage and justify violent actions and other mistreatments against me in the future. They did this in the hope that following all this abuse that I would commit suicide or under the pressure be provoked so that they would have an excuse to harm and kill me because I am autistic. I had put on and switched on my covert audio recording device as discussed. I refer to PC Bejarano witness statement **Exhibit DS01-141**.
176. During the arrest, which I did not resist, I was assaulted and manhandled causing severe bruising to my wrists and arms, leading me to lose sensation in my right hand for three months. This is now the sixth time SYP have colluded with a member of the public to harass and attempt prosecute me for a crime I did not commit: this is persecution and apartheid. I refer to photos of the bruises on my arms (also shown overleaf) as **Exhibits DS01-142 and DS01-143**.

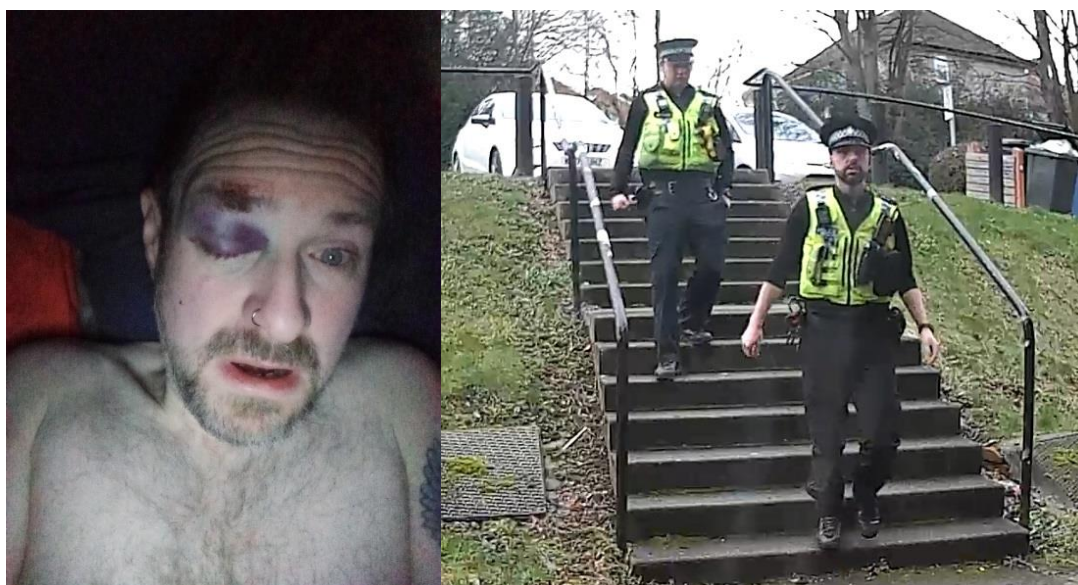


177. In custody, I was again tortured by being forced into a confined space whilst being claustrophobic, and then further manhandled. The custody sergeant also refused to let me stand close enough to understand what he was saying which I needed to do because I am autistic and I was not wearing my glasses. I asserted in the interview with PC Dinnage as I had asserted above. I was again required an “appropriate adult” to humiliate me and because SYP believes autistic people are subhuman and mentally incapable. As I was again tortured and otherwise mistreated in custody any evidence obtained would again be inadmissible.
178. On 27th October 2024, the fourth unnamed woman who had assaulted me came up to my home and damaged my property. As the damage was repairable and I felt I could not call the police, I instead installed CCTV to use the information to report to my landlord. The following day or so someone stole my cat’s food bowl so I installed CCTV at the front too. My CCTV showed that it was Ms Nicole Carr who had stolen my cat food bowl, the woman who had lied about me assaulting her. As she had stolen my property, I reported her to the police, who in a tediously predictable turn of events, proceeded to accuse me, a gay man, of stalking her with my CCTV and otherwise. The two officers who attended were PC Ledger and PC Dinnage. Again, everything I say is disbelieved and everything everyone else says is accepted as fact and meant yet again I cannot ever be treated as a victim by SYP and so I asked them to leave: this is persecution and apartheid. I refer to the video of the woman damaging my property, the CCTV of Ms Nicole Carr stealing my property, and the covert audio recording of the officers accusing me of stalking her as **Exhibits DS01-144 to DS01-146**.

179. A week or so later, SYP then attended my home and arrested me for assault and harassment of Ms Nicole Carr, the woman who had lied about the assault. The officers principally present were PC Ledger and PC Dinnage. During the drive to custody, I outlined the issues in this report but to which neither officers responded nor recklessly took any action. In custody, I was again tortured by being forced into a confined space meaning any evidence obtained in the interview is inadmissible.
180. In the interview, I was told that Ms Nicole Carr had said I had assaulted her and that I was also harassing her. She said that on 7th July 2024 I had said all sorts of nonsense along the lines of me being gay means I can do whatever I want to her. A copy of relevant passages from her witness statement is provided below. These assertions were corroborated by two other witnesses Ms Eve Marples and Ms Laura Morden (the three being part of the same group causing nuisance and harassing me for complaining to my landlord and for being autistic). None of this was true as is evidenced by the covert audio recording I had taken on that day as already discussed.
- “SCOTT stated that he could threaten us because he was Gay [sic] and he was going to ‘FUCK US UP’”*
- “SCOTT was stating ‘I CAN DO ANYTHING TO YOU AND YOU WON’T BE ABLE TO DO ANYTHING ABOUT IT’*
- “SCOTT came right up to my face and I feared he may assault me.”*
- “SCOTT went onto say that he was going to take it upon himself to stop us from being able to sit outside to make our lives more miserable.”*
181. I was also shown an edited video covering a small part of the conversation where it was alleged I was harassing Ms Nicole Carr with her stating that she had taken the video. However, that was also not true, rather this was taken by Ms Laura Morden, and she could be heard as the one responding to me in the video, with Ms Nicole Carr not present at that or almost any of the time of the whole conversation. This means Ms Nicole Carr has attempted to pervert the course of justice and that PC Ledger and PC Dinnage knew this, not only because of this obvious lie but also because of the evidence, including the audio recording, on that day of the events already provided to SYP as a copy of the complaint I sent to my landlord dated 27th July 2024 (see earlier and **Exhibits DS01-132 to DS01-136**). This means again even when I have extensive video, audio, and other evidences, the police simply choose to believe other people over me: this is persecution and apartheid. I refer to Nicola Carr’s witness statement, and the audio recording from the events on 7th July 2024 respectively as **Exhibits DS01-147 and DS01-137**.
182. In the interview, I was also shown CCTV that showed someone who looked like me assaulting Ms Nicole Carr. This video did not exist previously and cannot have existed because such CCTV is not permitted to be retained for longer than 1 month, and it was obtained 3 months later. The only conclusion to be drawn is that the CCTV was fabricated by SYP. I was then charged with common assault. These mean of course that this is the seventh time SYP has colluded with a member of the public to harass and attempt to prosecute me for a crime I did not commit: this is persecution and apartheid

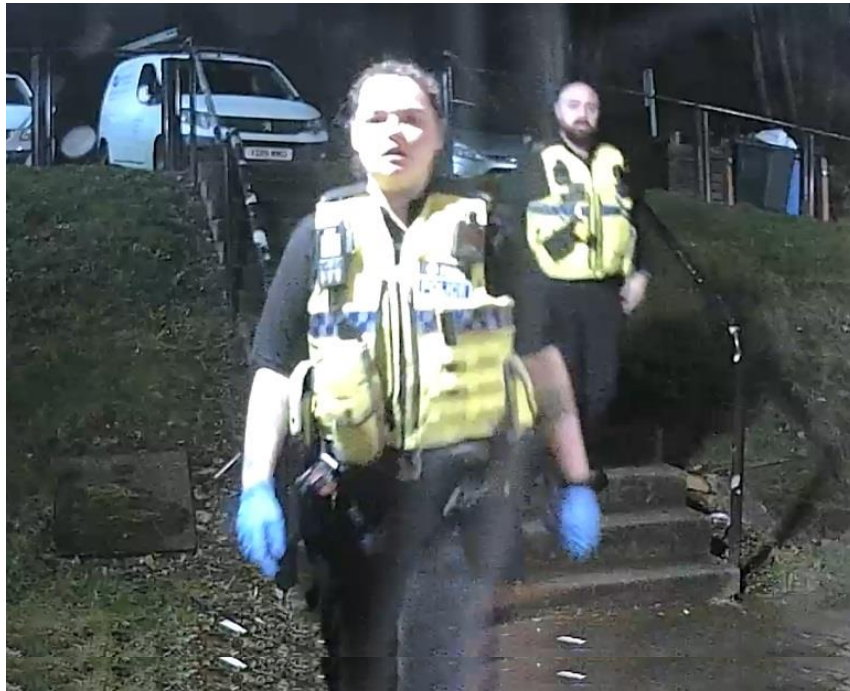
183. On return home, and on checking my phone and covert audio recording device, I saw from my Google timeline that my phone had gone home whilst I was in custody, which can only have been to use my location settings to access my device. I also noticed that my covert audio recording device, which is not password protected, had also been accessed. These mean SYP unlawfully accessed (and probably copied) my data, which can only be because they knew I am writing this report.
184. The next day and having checked my files, I attempted to report the attempts to pervert the course of justice by the three women based on the evidence I had and previously provided to SYP, and was told that I should have raised them in the interview and he refused to log this as a crime. When I said I was advised not to by my solicitor, he then proceeded to interrogate me about what my solicitor said, that is attempted to obtain legally privileged information to which SYP are not entitled.
185. In November 2024, and having been told by my landlord that the video evidence of my assault had been obtained by the police (meaning they had the CCTV but took no action), I contacted the police to report the crime of my damaged property, which was committed by the same woman who assaulted me. The officer who attended refused to accept that I had been assaulted despite me showing her the letter from my landlord confirming the police had obtained the video, and said that damage to property that was repaired is not a crime; thus demonstrating yet again that I am not allowed to be a victim.
186. During 2023 and 2024, I was reported multiple times by SYP to the NHS and Adult Social Care including for welfare checks. This was despite me repeatedly asking them not to confuse my activism with mental illness. These organisations then stopped contacting me after I asserted these points to them directly. At that point SYP then proceeded to directly carry out multiple unwanted and unnecessary welfare checks. All these were for the purpose of harassing me, not to check my welfare, whilst also demonstrating that SYP believe I lack agency because I am autistic, confirming that SYP believe autistic people are subhuman. The purpose therefore was to cause me stress to attempt drive me to suicide and otherwise as detailed before.
187. Early January 2025 and in a tediously predictable turn of events, SYP again carried out a welfare check. In extreme irritation, I then attempted to report these welfare checks as harassment, but SYP refused to log and investigate their actions as crimes, and they refused to get them to stop; thus confirming my views above. I also contacted the regions Labour Mayor Oliver Coppard who also refused to get SYP to stop.
188. On 16th Feb 2024, I received notification that SYP and CPS were refusing to disclose the above video that would demonstrate that Ms Nicole Carr had lied in her witness statement. I then wrote back via email and included a draft letter to be sent to the UK Prime Minister associated with this report. I had no response to this email thus again demonstrating recklessness. I refer to this email as **Exhibit DS-148**.

189. On or around 17th February 2025, close to my home and in the middle of the night, a police car pulled up beside me, lowered their window, and said something I did not hear because I was wearing headphones. In any case, I told them to fuck off, so they raised their window and I leant down closer to the window and again told them to fuck off, at which point the officer opened his door into my face. Other cars started to drive past, and so the police shut the car door and drove off. I was too stunned to get my phone out and I was not wearing my glasses (probably fortunately) so could not take the car registration. The car door struck my face but it did not hurt that much at the time. However, I found out much later that it had given me a black eye. I believe the officers stopped to talk to me because they recognised me and because SYP now knew that I was not joking about writing this report. I refer to a picture of my black eye (below) as **Exhibit DS01-149**.



190. The same week and in a lot of distress because of my black eye, I sent a number of distressed emails to my MP including a draft copy of the same letter. SYP then attended on 20th February 2025 at 14:13 for another “welfare check”, and I told them to fuck off too. The purpose of the visit was to harass me but also again demonstrates that SYP believes autistic people lack agency and thus further confirms SYP’s belief that autistic people are subhuman. I refer to the CCTV of the two officers approaching my home and a still of this CCTV (above) as **Exhibit DS01-150** and **Exhibit DS01-151**.
191. Later the same day at night 22:11, and whilst I was asleep, two officers came to my home with one wearing gloves where they disconnected my front camera (later disconnecting the other camera too) to avoid leaving fingerprints so that they could commit crimes unrecorded. The officers were aggressive and I was assaulted in the front communal areas deliberately out of sight of both cameras (I did not know the front camera had been disconnected). This assault including me being thrown up against the wall whilst the other officer seized my phone. I can be heard being assaulted in the audio of my videos and pleading with the officer to stop, including asserting “*you are only doing this because I am white*”. The officer then asked for my phone passcode, which I refused. They continued to

manhandle me throughout again causing bruising on my arms. I thought they had come to kill me. I believe these actions meet the definition of torture and occurred because SYP believes I am subhuman. In my home, they later also unlawfully searched for devices without any password protection. This means the purpose of the visit was to make up reasons to obtain my phone in order to find out information about this report. I refer to the CCTV of the officers and a still of this CCTV (below), CCTVs of the officer assaulting me including slamming me against the wall, and a CCTV with audio where you can hear police officers talking about password unprotected devices as **Exhibits DS01-152 to DS01-157**.



192. In custody I was again tortured by being forced into a confined space whilst being claustrophobic, at which point the officer shut the door. I then panicked and hit my head, partly losing consciousness. I was then dragged by the police officer to the custody sergeant. In the cell I was denied water and the water from both the sink and toilet were switched off. I then had a dehydration induced medical event and woke up on the floor. Nobody attended to my medical needs. I otherwise experienced serious distress thinking I was going to be killed and no-one would know where I am and my cats would die. This mistreatment means that anything obtained in the interview would be inadmissible.
193. In the interview I was told that I had been accused of flashing neighbours from my own flat on 4th February 2025 at 11:00am. The neighbours who made this accusation are Ms Laura Morden and the unnamed fourth woman who had assaulted me and damaged my property, who are two of the women who have been harassing me because I complained of their nuisance and because I am autistic, and who have lied to SYP repeatedly about me. The window I was accused of flashing from is a south to south-east facing window and she said she was about 50 metres away, meaning that on 4th February 2025 at 11:00am the sun would be directly shining on my window; thus her assertion was not possible according to

the laws of physics due to reflections from my window during daylight. I refer to a picture taken from my flat showing a sunrise to the left and thus the window is to the south as **Exhibit DS01-158**.

194. The police therefore claimed they seized my phone to obtain my CCTV footage, CCTV cameras that are directed to the outside not inside of my property, and which is in any case stored on the cloud not my phone. All these mean is that the seizure was unlawful, and was for the improper purposes of obtaining my data relating to this report, which was also stored on the cloud not my phone. The above real motive was confirmed later as they improperly questioned me about the report and also improperly questioned me about expressed considerations to seek political asylum in an EU country.
195. In the interview, and unsurprisingly, I had no idea what I was doing at the time of the alleged incident. However, I later found out that at the exact same date and time, I had a vet appointment; thus I had an alibi. This could have been cleared up if I was allowed to view my own CCTV, which shows me leaving my home at 10:38 with my cat and returning at 11:58. I also had an invoice from the vets dated 4th February 2025 with a debit card receipt timed at 11:43. This is now the eighth time SYP colluded with a member of the public to attempt to prosecute me for a crime I did not commit: this is persecution and apartheid. I refer to these two CCTV videos and the invoice/receipt from my vets as **Exhibits DS01-159 to DS01-161**.
196. In the interview, I was also accused of harassing my MP by sending her emails about SYP's assault of me and including a draft of a letter outlining this report, to ask her to get SYP to stop. These are not crimes. This is now the ninth time SYP has attempted to prosecute me for crimes I did not commit, these not being crimes in this case: this is persecution and apartheid. I was again required an "appropriate adult" to humiliate me and because SYP believes autistic people are subhuman and mentally incapable. The line of questioning was also dehumanising and fairly ironic given I was being asked if I know right from wrong in an interview where I had earlier been assaulted, tortured twice, and deprived of water and medical attention.
197. Any evidence obtained in the interview would of course again be inadmissible for both of these alleged crimes because I was tortured and otherwise mistreated in custody and on arrest. I view all of the above from when I was assaulted as witness intimidation because I am writing this report.
198. During this period, I also wrote to both the Chief Constable Lauren Poultney and at the CPS Mrs Jan Lamping and Mr Stephen Parkinson, the latter being head of the CPS, about some of the issues in this report but to which I had no responses beyond acknowledgements; thus further demonstrating recklessness by the British State. I refer to these letters as **Exhibits DS01-162 to DS01-165**.

Part 7 - Summary and Conclusions

199. The witness statement shows above that the British state were told on multiple occasion over the last 8 years or so that medicine is doing science wrong, leading to the harms and deaths of autistic people, which amounts to medical torture and medical extermination as crimes against humanity against autistic people. As they recklessly chose to do nothing at all about this, then recklessness has been demonstrated.
200. The witness statement also otherwise shows multiple mistreatments of me because I am autistic, by the NHS, the DWP, the Judiciary, SYP, and the CPS. These mistreatments amount to deliberate persecution and de facto apartheid, and for the police, deliberate torture and extermination.
201. I believe therefore on the evidence presented, that the ICC has sufficient evidence to open an investigation into these crimes alleged to be being committed by the UK against autistic people, to investigate whether medicine is doing science wrong and harming and killing autistic people, and to see if the abuses experienced by me from the British State, are representative of the experiences of other autistic people.

Section 10 - Victim Impact Statement

202. The last 10 years or so has taught me that nobody who works for the British State is to be trusted, and the police are not to be trusted under any circumstances. If I have a choice then I always use my covert audio recording device to provide some level of protection. All the essential services in the UK are unusable for me because I am autistic. I cannot access healthcare, access the DWP, or obtain protection from the police. As far as I am concerned, the greatest risk to my life is from the British State. I avoid main streets or areas where the police might be and tend to go out very late at night or early in the morning. On the last arrest, and the behaviour of the officers, I thought that they were going to kill me. I believe I have PTSD both because of the NHS and the police. I have two main nightmares: (1) somebody is trying to harm me in a crowd, but the crowd are laughing not helping; and (2) having a medical emergency surrounded by people and again they are just laughing not helping. I feel extreme anger and a need for revenge. I want the suspects to feel like I felt and feel. I also feel sad, disappointed, and betrayed. I very much doubt that I can ever have any kind of normal connection or relationship with anyone ever again because of my mistreatment.

Section 11 - Aggravating Factors

203. The aggravating factors include:

- The constant lies told by the NHS and SYP, particularly in their records and in their complaint responses.
- The NHS and SYP weaponising mental illness.
- The NHS and SYP weaponising my autism against me.
- The NHS treating me as mentally unwell for making assertions that are heresy to medicine but orthodox everywhere else.
- SYP treating me as mentally unwell for seeking to have crimes against humanity by the British State investigated.
- SYP constant attempts to suppress my free speech.
- SYP abusive and controlling behaviour, constantly and unlawfully attempting to limit my rights because I am autistic.
- The constant humiliations by SYP in custody and line of questioning indicating that they believe autistic people are subhuman.
- SYP attempting to prosecute me for harassment for raising the issues in this report.
- SYP on learning that I am in fact writing a report to the ICC and I was not joking or delusional then assaulting me, and then later wrongfully arresting me, assaulting me, torturing me, and denying me water, whilst also unlawfully seizing my phone to attempt to find out information about this report.
- SYP searching my home and their attempts to find an unlocked device to find out information about this report.
- SYP torturing me to try and get me to give them the code for my phone to find out information about this report.

Section 12 - Summary and Conclusions

204. In this report to the ICC, I allege that the UK is medically torturing and medically exterminating autistic people through recklessness. The reason for this is that medicine is doing science wrong, and autistic people are in the part of medicine that is wrong, which the British State knows but recklessly does not care. The witness statement demonstrates that all parts of the British State including the NHS, the DWP, the police, the CPS, the Judiciary, and the government including the Prime Minister have been repeatedly warned or told about these issues, starting 8 years or so ago, yet not only did they do nothing but they have sought to suppress my free speech through criminal prosecutions and by labelling me as mentally unwell, which are aggravating factors. However, these actions also all demonstrate recklessness, and thus medical torture and medical extermination as crimes against humanity against autistic people needs to be investigated further.
205. I also allege that the UK is deliberately persecuting and exterminating autistic people in the form of denying access to essential services like healthcare, or providing a worse quality service and/or discouraging use of the service, leading to our harms or deaths including by suicide. Persecutions also include dishonesty in records for the purposes of harming us in the future and thus further discouraging use. I also allege that these amount to the de facto crime of apartheid. In the witness statement, these behaviours are demonstrated in spades, and it is for the ICC now to investigate whether my personal experiences are representative of other autistic people, and thus whether persecution and apartheid against autistic people is in fact occurring in the UK.
206. In the case of the police, persecution and extermination also takes the form of deliberately treating autistic people as subhuman, which has the effect that we receive no police protection and are repeatedly arbitrarily investigated, wrongfully arrested, maliciously prosecuted, assaulted, tortured, harassed, abused and controlled, humiliated in custody or otherwise, and false records documented to seek to harm us further in the future. These actions are a deliberate attempt to allow autistic people to come to harm, to cause autistic people to become mentally unwell, to have us sectioned where the NHS then medically harms or kills us, to drive autistic people to suicide, or to provoke autistic people to the point they react and are then harmed or murdered by the police legally. I also allege that these amount to the de facto crime of apartheid. In the witness statement, these behaviours are also demonstrated in spades, and it is also now for the ICC to investigate whether my personal experiences are representative of other autistic people, and thus whether persecution and apartheid against autistic people by the police is in fact occurring in the UK.

207. I do not allege that the British State is committing genocide, but rather that as the British State is harming and killing autistic people, and as some of these atrocities are deliberate, then the case for genocide should also be investigated.

Glossary of Terms

A&E	Accident & Emergency Department
ADHD	Attention Deficit Hyperactivity Disorder
ASB	Anti-Social Behaviour
BP	Blood Pressure
CCTV	Closed Circuit Television
CNS	Central Nervous System
COMT	Catechol-O-Methyltransferase
CPS	Crown Prosecution Service
DF	(Tenofovir) Disoproxyl Fumerate
DJ	District Judge
DDJ	Deputy District Judge
DWP	Department for Work and Pensions
EMP	Esomeprazole
EU	European Union
GP	General Practitioner
hEDS	hypermobility Ehler-Danlos Syndrome
HIV	Human Immunodeficiency Virus
ICC	International Criminal Court
IBS	Irritable Bowel Syndrome
LGBT	Lesbian, Gay, Bisexual, and Trans
MAO	Monoamine Oxidase
ME/CFS	Myalgic Encephalomyelitis/Chronic Fatigue Syndrome
MP	Member of (UK) Parliament
NHS	National Health Service
NIGYSOB	Now I've Got You, You Son of a Bitch (from " <i>Games People Play</i> " by Dr Eric Berne)
PHSO	Parliamentary and Health Service Ombudsman.
PC	Police Constable
PTSD	Post Traumatic Stress Disorder
SYP	South Yorkshire Police
TRPV1	Transient Receptor Potential Vanilloid 1
UK	United Kingdom (of Great Britain and Northern Ireland)
UN	(The) United Nations
USB	Universal Serial Bus

List of Suspects

The suspects in government include:

- Sir Keir Starmer as Prime Minister
- Rt Hon Wes Streeting MP as the UK Secretary for Health and Social Care.
- Rt Hon Shabana Mahmood MP as the UK Lord Chancellor and Secretary of State for Justice.
- Liz Kendall MP as the UK Secretary of State for Work and Pensions.
- Rt Hon Yvette Cooper MP as the UK Secretary of State for the Home Department.
- Gill Furness MP as MP for Hillsborough and Brightside.
- Mr Oliver Coppard as Mayor for South Yorkshire.

The suspects in the NHS include:

- Ms Amanda Pritchard as former head of NHS England. Other senior staff within NHS England and within the Department for Health and Social Care.
- The Chief Executives and remains of the boards of all NHS Trusts and their PALS teams.

The suspects at Sheffield Teaching Hospitals NHS Foundation Trust include

- Mrs Kristen Major as Chief Executive.
- The remains of the board and their PALS teams.
- Elaine Coghill Chief Nurse.
- Mr Rob Ghosh as Deputy Medical Director.
- Dr John Griffiths as ED consultant.
- Dr M Gossiel as ED consultant.
- Nurse Jeremy Tym of Northern General Hospital in Sheffield.
- Unnamed A&E staff at Northern General Hospital in Sheffield during 2020, 2023 and 2024.
- Dr Julia Grieg and other HIV clinic staff at Stonegrove Centre in Sheffield.
- Other unnamed staff.

The suspects at Yorkshire Ambulance Service NHS Foundation Trusts include:

- Mr Peter Reading as Chief Executive of Yorkshire Ambulance Service.
- The remains of the board and their PALS team.
- Yorkshire Ambulance Service ambulance crews in 2020 and 2023.
- Other unnamed staff.

The suspects at Manchester University NHS Foundation Trust:

- Sir Michael Deegan as former Chief Executive.
- Mrs Gill Heaten as former Chief Executive of Manchester Royal Infirmary.
- Ms Venessa Garner as current Chief Executive of Manchester Royal Infirmary.

- Mr Mark Duggan as current Chief Executive.
- The remains of the board past and present, and their PALS team.
- Nurse Katrina Ray.
- Nurse Nigel Gillen.
- Unnamed A&E staff at Manchester Royal Infirmary on 1st January 2019.
- Mr Colin Owen.
- Dr Vincent Lee of Hathersage Centre.
- Other HIV consultants at Hathersage Centre.
- Dr Ashish Sukthankar of Hathersage Centre.
- Ms Harriet Baker as pharmacist.
- Mr Dobson.
- Dr Andrew Tompkins.
- Other unnamed staff.

The suspects in other clinics:

- Unknown triage nurse City Hospital in Birmingham.
- Dr An Andries formerly of Bishopston Medical Practice in Bristol.
- Dr Kristen Widdowson of Hockley Medical Practice in Birmingham.
- Dr Emma Papworth of Hockley Medical Practice in Birmingham.
- Dr Ester Anderson formerly of Langworthy Medical Practice in Salford.
- Sister Rebecca Martin of Langworthy Medical Practice in Salford.
- Dr Rachel Thomasson of Salford Royal Hospital.
- Dr O Mathurine of Greater Manchester Mental Health Trust.
- Dr KJ Porter of Grenoside Surgery in Sheffield.
- All other Grenoside Surgery staff.
- Other Sheffield GPs.
- Other unnamed staff.

The suspects' representatives that lost immunity through dishonesty or otherwise:

- Mr Matthew Butler of DAC Beachcroft.
- Mr William Swift of DAC Beachcroft.
- Other DAC Beachcroft staff.
- Suzanne Linda McCluney of Gordons Solicitors.
- Other Gordons Solicitors staff.

The suspects in the PHSO:

- Mr Glenn Fairhall of the PHSO.
- Senior Staff at the PHSO.
- Other staff at the PHSO.

The suspects in the DWP include:

- Ms Eileen Bell of Maximus.
- Mr Regis Kare of Maximus.
- Mr Adam Kelly of Maximus.
- Ms Irene Iloh of Maximus.
- Dr VP Abbot as a contractor for Maximus.
- Dr S Kenward as a contractor for Maximus.
- Ms Alison Colins of the DWP.
- Unknown DWP Hillsborough Jobcentre Plus staff.
- Customer service staff for Maximus.
- Senior staff at the DWP.
- Maximus UK senior staff and Maximus Inc board.
- Atos UK senior staff and French board.
- Other unnamed staff.

The suspects in the Judiciary include:

- Deputy District Judge White of Dartford County Court.
- Deputy District Judge Adam Chambers of Dartford County Court.
- Honourable Mr Justice Pushpinder Saini of the High Court.
- District Judge Preston of Sheffield County Court.
- District Judge Brown of Sheffield County Court.
- Head Judge of Sheffield County Court.
- Court Manager of Sheffield County Court.
- Other admin staff and judges of Sheffield County Court.

The suspects in SYP and GMP include:

- Mrs Lauren Poultney as Chief Constable .
- Inspector Nelmes.
- Inspector Holland.
- Sergeant Connor.
- Sergeant Heyes.
- Sergeant Hargate.
- Sergeant Dunn.
- Sergeant Cook.
- PC Atwal.
- PC Crawford.
- PC Shirt.
- PC Fisher.
- PC Pejarano.
- PC Hartley.

- PC Magalhaes.
- PC Larkin.
- PC Fitzpatrick.
- PC Dinnage.
- PC Ledger.
- PC Iorio.
- PC Phillips.
- PC Dhiman.
- PC Liles.
- PC Crawford.
- PC Colman.
- Mr Ray Fowell and
- Mr R Redmond.
- Any other “appropriate adult”.
- Undisclosed third officer on 11th August 2020.
- Two undisclosed officers who tortured me on 30th January 2024.
- Any other undisclosed PCs or sergeants.
- SYP complaints and discipline team.
- Other relevant civilian staff at SYP
- Mr Ian Hopkins as Chief Constable of Greater Manchester Police.
- Unknown police officer of GMP on 1st January 2019.

The suspects in the CPS include:

- Mr Stephen Parkinson as the Director for Public Prosecutions as head of the Crown Prosecution Service.
- Ms Jan Lamping.
- Mr Joshua Gott.
- Ms Michelle Flaga.
- Staff involved in the malicious prosecution related to Mr Dean McDonald.
- Staff involved in the malicious prosecution related to SYP.
- Staff involved in the malicious prosecution related to Ms Nicole Carr.

The members of the public who colluded with the police include:

- Mr Gavin Morrison of Sheffield.
- Mr Joshua Ball of Sheffield.
- Ms Nicole Carr of Sheffield.
- Ms Laura Morden of Sheffield.
- Ms Eve Marples of Sheffield.
- Unnamed fourth woman of Sheffield.

List of Exhibits

1. Medical records from 1976 to 2007.
2. Autism letter written dated on or around 4th September 2006.
3. Referral for paranoia not autism dated 4th September 2006.
4. Rejection of referral for paranoia dated 15th September 2006.
5. Autism diagnosis report dated 4th April 2019.
6. Addressing EBMs Shortfalls: The Interface Model for Systemic Dysfunctions by David Scott (draft) dated 21st December 2017.
7. Emergent Symptoms Theory PowerPoint dated 26th August 2018 (draft).
8. Emergent Symptoms Theory: A Personal Narrative dated 4th April 2019 (draft).
9. Addressing EBMs Shortfalls: The Interface Model for Systemic Dysfunctions by David Scott dated 10th April 2021 (draft).
10. Emergent Symptoms Hypothesis by David Scott dated 10th April 2021 (draft).
11. Emergent Pathology Hypothesis by David Scott dated 21st January 2021 (draft).
12. Why Medicine is Doing Science Wrong: Emergent Pathology and the Pathophysiological Bottleneck Hypothesis dated 2nd July 2024 (draft).
13. Facebook entry re: ginkgo biloba dated 4th November 2011.
14. Bishopston medical records 2012.
15. Witness statement of [REDACTED] dated 20th March 2019.
16. Hockley medical records 2014.
17. Symptoms log 1 2021/2022.
18. Symptoms log 2 2022.
19. Symptoms log 3 2022/2023.
20. Symptoms log 4 2022/2023.
21. Symptoms log 5 2023/2024.
22. Letter from Dr Widdowson to Vetting Agency dated September 2015.
23. Langworthy medical records - Dr Anderson (1) May 2016.
24. Letter from Sister Rebecca Martin dated 15th September 2016.
25. Langworthy medical records – Dr Anderson (2) Feb 2017.
26. Letter from Dr Anderson (3) May 2017.
27. Langworthy medical records – Dr Anderson (3) July 2017.
28. Letter from Dr Vincent Lee to GP August 2017.
29. Langworthy medical records – Dr Anderson (4) Sept 2017.
30. Letter from Dr Anderson (5) Sept 2017.
31. 999 triage return call Sept 2017.
32. First Raltegravir complaint Oct 2017.
33. MRI first response Nov 2017.
34. Second Raltegravir complaint Nov 2017.
35. MRI second response Nov 2017.
36. Third Raltegravir complaint Nov 2017.
37. Raltegravir PHSO email May 2018.
38. Final MRI response 2018.

39. Letter from Dr Mathurine Oct 2017.
40. Cognitive and System Failures in the NHS by David Scott Oct 2018 (draft).
41. Institutional Betrayal - Cognitive and System Failures, Prejudice, Victimisation and Persecution in the NHS by David Scott Nov 2018.
42. HIV specialist nurses re: raltegravir and autistic people Oct 2018.
43. Audio recording of MRI incident Jan 2019.
44. Transcript of the audio recording of MRI incident Jan 2019.
45. Police records of the MRI incident Jan 2019.
46. MRI medical record sent to my GP Jan 2019.
47. Complaint to MRI (1) Jan 2019.
48. Letter Before Claim re: inaccurate records February 2019.
49. Letter Before Claim re: discrimination March 2019.
50. MRI response June 2019.
51. MRI Table 1 – demonstrating dishonesty 2019.
52. Email to Riverside HIV clinic May 2019.
53. Paramedic records Oct 2020.
54. Complaint to YAS June 2023.
55. Northern General medical records re: Nurse Tym Oct 2020.
56. Covert audio recording of Nurse Tym Oct 2020.
57. Esomeprazole patient leaflet.
58. Complaint to Northern General re: Oct 2020 visit dated Jan 2021.
59. Letter from Northern General re: lying about posted July 2021.
60. Post unlawfully stating no audio recording of staff (still displayed).
61. Email to Dr Greig re: detailing harms from medicine Oct 2022.
62. Letter to Dr Greig re: detailing harms from medicine formally June 2023.
63. Atypical acidosis video dated 4th June 2023.
64. Ambulance medical records March 2023.
65. Ambulance medical records March 2023.
66. Northern general medical records various 2023.
67. Complaint letter to Yorkshire Ambulance Service March 2023.
68. Complaint letter 1 to Yorkshire Ambulance Service May 2023.
69. Complaint letter 2 to Yorkshire Ambulance Service May 2023.
70. Complaint letter 3 to Yorkshire Ambulance Service May 2023.
71. Complaint letter 4 to Yorkshire Ambulance Service June 2023.
72. Complaint to Northern General May 2023.
73. Northern General response August 2023.
74. Letter Before Action to Northern General September 2023.
75. Letter of Response from Northern General January 2024.
76. Letter of Response from Maidstone and Tunbridge Wells NHS Trust March 2024.
77. Complaint about failures re: ergot poisoning August 2024.
78. Photo of raspberry bush and grasses September 2024.
79. Photo showing ergot on the grasses September 2024.
80. NG response to complaint November 2024.
81. NG medical knowledge wrong for autistic people letter May 2023.
82. NG further similar letter June 2023.

83. NG crimes against humanity letter August 2023.
84. YAS medical knowledge wrong for autistic people letter May 2023.
85. MRI crimes against humanity letter May 2023.
86. Email to all NHS Trusts re: crimes against humanity Oct 2023.
87. Letter to all NHS Trusts re: crimes against humanity Oct 2023.
88. Letter to MP medical knowledge wrong for autistic people September 2023.
89. Letter to MP crimes against humanity copied to Wes Streeting and Sir Keir Starmer December 2023.
90. Email to various including Prime Minister Sir Keir Starmer January 2024.
91. Letter to GP medical knowledge wrong for autistic people June 2023.
92. Letter Before Action to GP July 2024.
93. GP response to original letter Oct 2023.
94. Strike Order of Claim against GP alleging crimes against humanity from District Judge Brown August 2024.
95. Report to GMC and NMC re: autistic persecution June 2021.
96. DWP health assessment report Oct 2018.
97. Covert audio recording of health assessment Oct 2018.
98. Maximus response to complaint March 2019.
99. Death tweet December 2018.
100. Audio recording of health assessment April 2019.
101. Regis Kare incident report April 2019.
102. Dr Abbot review May 2019.
103. Audio recording of health assessment Sept 2019.
104. Distress video Sept 2019.
105. Audio recording of jobcentre appointment Sept 2021.
106. News article re: jobcentre appointment Oct 2021.
107. DWP complaint letter Nov 2023.
108. DWP Letter Before Action Dec 2023.
109. DWP re: crimes against humanity Dec 2023.
110. Video to DWP (and Coroner) Dec 2023.
111. LGBT confidentiality form May 2016.
112. LGBT judgment February 2020.
113. Letter from ICO July 2019.
114. Vital interests from ICO website from July 2019.
115. DS v Grenoside Particulars of Claim Sept 2023.
116. Witness Statement of Suzanne Linda McCluney for Grenoside Nov 2023.
117. DJ Preston Orders July 2024.
118. Report re: Dean McDonald events August 2020.
119. Police records re: Dean McDonald events 2020-2021.
120. Default Judgment against Dean McDonald Jan 2021.
121. Two police officers torture video 1 Jan 2024.
122. Two police officers torture video 2 Jan 2024.
123. Still of first officer torture Jan 2024.
124. Still of second officer torture Jan 2024.
125. Complaint to SYP re: torture Feb 2024.

126. Video complaining of autism discrimination Jan 2024.
127. Still of three officers Jan 2024.
128. Joshua Ball assaulting me video 1 Jan 2024.
129. Josh Ball assaulting me video 2 Jan 2024.
130. Still of Joshua Ball Jan 2024.
131. Audio recording of interview re: harassments April 2024.
132. Photo of the four women July 2024.
133. Complaint 1 to landlord about the four women July 2024.
134. Police cover letter for complaint 1 July 2024.
135. Complaint 2 to landlord about the four women Oct 2024.
136. Police cover letter for complaint 2 Oct 2024.
137. Audio of the conversation with the four woman on 7th July 2024.
138. Video of the four woman interfering with my cat 7th July 2024.
139. Police report 1 re: DJ Preston July 2024.
140. Police report 2 re: DJ Preston August 2024.
141. BPC Bejarano witness statement 22nd August 2024.
142. Left arm bruise by police Sept 2024.
143. Right arm bruise by police Sept 2024.
144. Fourth woman damaging property Oct 2024.
145. Nicole Carr stealing my property Oct 2024.
146. PC Ledger and PC Dinnage falsely accusing me of stalking Nicole Carr 15th November 2024.
147. Nicole Carr witness statement 26th November 2024.
148. Email to SYP re: disclosure refusal 16th February 2025.
149. Black eye photo Feb 2025.
150. CCTV of two officers attending re: welfare check 20th February 2025 14:13.
151. Still of two officers 20th February 2025 14:13.
152. CCTV of two officers 20th February 2025 22:11.
153. Still of two officers 20th February 2025 22:11.
154. CCTV 1 of officer assaulting me 20th February 2025 22:28.
155. CCTV 2 of officer assaulting me 20th February 2025 22:28.
156. CCTV 3 of officer assaulting me 20th February 2025 22:30.
157. CCTV of two officers searching for an unpassword protected device 20th February 2025 02:50.
158. Photo re: sunrise south south-ease of flat on 6th March 2023 06:19.
159. CCTV of me leaving my home with my cat at 4th February 2025 10:38.
160. CCTV of me returning home with my cat at 4th February 2025 11:58.
161. Vets appointment at 4th February 2025 11:00 am receipt 4th February 2025 11:43.
162. Letter to DPP Stephen Parkinson re: this report 30th April 2024.
163. Letter to CPS Jan Lamping re: this report 30th April 2024.
164. Letter to SYP Lauren Poultney re: this report 30th April 2024.
165. Acknowledgement letter from SYP re: this report dated 8th May 2024.