



Prime Minister's Office
10 Downing Street
London
SW1A 2AA

7th March 2025

Dear Prime Minister Sir Keir Starmer,

Re: Report to the ICC alleging that the UK is crimes against humanity including apartheid against autistic people

TL;DR

Medicine is doing science wrong resulting in autistic people being medically harmed and killed, which the NHS knows but recklessly does not care. These amount to crimes against humanity in the form of medical torture and medical extermination through recklessness. The British State including the NHS is otherwise deliberately persecuting autistic people, and otherwise deliberately denying our access to essential services or providing worse quality services, which are crimes against humanity in the form of deliberate extermination. These also amount to the de facto crime of apartheid.

A new political and economic theory termed hecologism is proposed to prevent future harms to autistic people, that will also make the state more effective and efficient. Hecologist Principles are derived and a review of institutions against these Principles is carried out, and recommendations are then made. Free speech to hecologism for example is paramount. As Prime Minister Sir Keir Starmer and others are aware of these crimes but have chosen to do nothing, their prosecutions are sought.

“'But he hasn't got anything on,' a little child said.”

Hans Christian Andersen

Introduction

I am writing as cover to the above report filed at the International Criminal Court (ICC) at The Hague. The report alleges that the British State is crimes against humanity including apartheid against autistic people. As the security situation for me is becoming intolerable, principally because of persecutions by South Yorkshire Police (SYP), and should making this letter and report public not get them to stop, then I shall also use these as evidence in support of me seeking political asylum in an EU country.

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In the report, I allege that:

1. 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. 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.
2. 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.
3. 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.
4. 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.
5. 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 against that that entails. I allege that these also amount to the crimes of deliberate torture, deliberate extermination, and the de facto crime of apartheid.
6. 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.
7. 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.

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.

My name is Mr David Paul Scott and I am a 49 year old white English/Irish autistic man. I am a British citizen by birth but my father is (Northern) Irish, and thus I am able to obtain Irish and EU Citizenship. I am the person who is making these allegations, and the report includes a witness statement by me and refers to my extensive exhibits throughout.

In terms of my background, I have degrees in physics and an equivalent in psychology, and I was studying for a third degree in maths but had to abandon these studies to write this letter and report. I became chronically unwell with ME/CFS in 2011 at which point I started to be treated extremely badly because I am autistic. I assume this is because ME/CFS affects your cognition and I thus then appeared “more autistic”. I had to completely give up work in 2014 but I have now completely recovered, having worked out how to cure my ME/CFS after identifying that medicine is doing science wrong; ME/CFS also being in the part of medicine that is wrong.

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Before I became sick, I was a nuclear safety engineer and have worked throughout the nuclear industry, including supporting work maintaining our nuclear deterrent where I held Developed Vetting security clearance (the highest classification), and consequently routinely accessed top secret UK government nuclear secrets and otherwise. As an experienced nuclear safety engineer, I am an expert in nonlinear/complex systems, and this is what has enabled me to solve ME/CFS and many other illnesses where others have not. The research and analysis conducted over the last decade, I believe now makes me an expert in nonlinear systems generally, particularly on failures on nonlinear systems (perhaps one of the world's experts). This means that I can explain and cure the illnesses of perhaps the 1bn+ globally chronically unwell. I have thus established my startup Loxley Medical Research with the view to realising my scientific discoveries. I estimate that the eventual value to the UK economy of my future IP is worth billions if not trillions. IP that will not be realised if I am dead.

In addition to trying to cure myself of ME/CFS, I took the opportunity whilst sick to carry out an ethnographic study into the British State, cosplaying as Prince Hal if you will. This ethnographic study was focused on my experiences of interacting with the British State whilst being autistic. (I was diagnosed as autistic in 2019 but I knew as far back as 2006.) I was intending to use my first-hand experiences of how the British State works (or not) in practice, to later inform future policy. This study was initially started because of repeated misconducts by the NHS arising initially from nearly fatal prescribed harm in 2016, at which point I established GLITTER RESIST.

Since then I have been repeatedly harmed and nearly killed by the NHS, and I now know this is because I am autistic and because medicine is doing science wrong as discussed. These thus meant that my two projects merged. When combined with the security situation becoming untenable for me because of actions by SYP born partly from a culture of impunity in policing within the UK but mostly from false stereotypical assumptions about autistic people, cognitive biases, prejudices including beliefs by the police that autistic people are subhuman, combined with the fact nobody was listening to me about these issues including yourself, I thus had no choice but to write and make public this letter and complete the report in order to try to prevent my death at the hands of the British State.

In terms of the study generally, the British State has otherwise shown itself to me to be malevolent, willing to abuse its power when given sufficient opportunity and motive, high handed and oppressive, ignorant whilst lacking in curiosity, unable to see the bigger picture and wider consequences of their actions, evasive of accountability, incapable of learning, fundamentally dishonest, and otherwise corrupt and incompetent. Evidence for this is also included within the report and this letter. The principle outcome from this study is that I have developed a new political and economic theory that will improve the UK whilst preventing future misconducts against autistic people (and anyone else) as discussed later.

Principle suspects for crimes against humanity by the British State include organisations and specific staff from the NHS including the former head of NHS England Ms Amanda Pritchard, the Department for Work and Pensions (DWP), the criminal and civil judiciary including the Magistrates Court, the County Court and the High Court, SYP including its Chief Constable Ms Lauren Poultney, the CPS (Crown Prosecution Service) including its head Mr Stephen Parkinson, and many others. Other autistic people are likely to have their own evidence, and there is no reason to believe that these atrocities are not endemic in the UK.

Other suspects naturally comprise your government including you as head of government, and also the wider Labour Party. This is because I have written to you, my Labour MP Gill Furness, my Labour Mayor Oliver Coppard, and other Labour MPs on numerous occasions about these issues but to which I had no or worse than no response. And because everywhere I look, the problems can all be traced back to Labour; whether through organisations established by your party like the NHS and the DWP, through policies enacted by your party such as the work capability assessment, or whether from organisations like SYP or Sheffield County Court that operate within areas dominated by Labour, i.e. with Labour councillors, Labour MPs, and/or a Labour Mayor.

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The purpose therefore of this letter is to provide a summary of the issues detailed in the report whilst looking in more detail at the wider issues and problems within the UK including the stagnating economy and then proposing a new political and economic theory, which I have termed hecologism (a port-manteau of ‘human’ and ‘ecologism’: a cybernetic and nonlinear theory of government) to fix all these problems. Note that hecologism applies ecologism to human society and is not an environmental theory per se. Although hecologism is inchoate (I will eventually write the book and later its manifesto, provisionally entitled “*Hecologism: A Cybernetic Theory of Government*” and “*The Hecologist Manifesto: UK Edition*” respectively), there are a number of basic principles derived from various existing theories, principally Control Theory (part of cybernetics). Recommendations across much of the British State including the economy are then made based on these ‘Hecologist Principles’.

The first part of this letter discusses the mistakes in medicine’s philosophy and epistemology and otherwise identifies multiple other, in what could be described as ordinary mistakes. These mistakes mean that medical knowledge is not only dangerously wrong for autistic people but is also harming everybody else. The second part of this letter summarises the arguments that autistic people are a separate sub-species of human and thus (unsurprisingly) medical knowledge for neurotypicals is not always valid for us, whilst also demonstrating that we are a group to which crimes against humanity may apply. The third part of this letter summarises hecologism and then lists the Hecologist Principles. The fourth part of this letter discusses similar mistakes made in economics and makes recommendations based on these Hecologist Principles and otherwise. The fifth part of this letter discusses the events along with a critique, which covers the NHS, the DWP, the judiciary, SYP, and the CPS. Recommendations based on Hecologist Principles and otherwise are then also again made. Finally, the sixth part of this letter provides a summary and conclusion.

Before the letter proper starts, I need to introduce you to a German word that you may be unfamiliar with. The word is (*die*) *Verschlimmbesserung*, which means ‘the act of trying to make something better but instead making it worse’. This letter covers multiple problems within the UK where this is the case, but also more importantly explains why.

Why Medicine is Doing Science Wrong

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 Reductionism, 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 to be linear; medicine therefore assumes that patients are linear systems in all circumstances. Linear systems in this context being ones to which the superposition principle applies, whilst nonlinear systems are those that do not. 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 as nonlinear systems. This philosophical and epistemological mistake was identified and corrected in engineering a few 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 problems¹. This letter and associated ICC report can be considered medicine’s Three Mile Island moment.

Of principle relevance to medicine philosophically, and as discussed, 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

¹ e.g. “*Normal Accidents*” by Charles Perrow (1984).

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: *verschlimmbesserung*. These mistakes are the reason why sickness and disability in the UK are increasing (and the reason why Labour has tanked the British economy for the second time in my lifetime as I show later).

Of principle relevance epistemologically is that nonlinear systems may not be deterministic and/or may be oscillating abnormally as emergent failure modes and self-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 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 are also identified. Emergent failure modes as a philosophical and epistemological failures are illustrated with the first and second Johnny and Susie examples respectively below.

Johnny and Susie Example 1 - Emergent Pathology

Johnny and Susie go for a drive in freezing conditions to buy some sweets. Johnny travels at below the speed limit but hits black ice and starts to spin. He tries to correct repeatedly but keeps making the situation worse. The car spins off the road and hits a tree. Thankfully both Johnny and Susie are unhurt, if a little shaken. A police investigation finds nothing wrong with the car and nothing wrong with Johnny, either physically or psychologically. Cold does not cause accidents otherwise everyone would have an accident when they drove in the cold. The police therefore accepted the accident was not Johnny's fault.

The accident occurred because Johnny interacted with his car, which interacted with the environment adversely. The accident is a type of control system instability and occurred because of limitations in responses and response times of Johnny and his car due to real-world physical constraints, sometimes referred to as bottlenecks. It could not have been avoided except if Johnny and Susie had stayed at home. There was no direct or identifiable failure that caused the accident, rather it emerged from the system.

Johnny and Susie Example 2 - Nonlinear Systems and Statistics

Johnny is given 7 sweets every Sunday and eats 1 sweet every day until he has no sweets at the end of Saturday. Susie is given 4 sweets every day and eats all the sweets before the end of the same day. On average at the beginning of any day of the week, both Johnny ($(7+6+5+4+3+2+1)/7 = 4$) and Susie have 4 sweets, but this gives the misleading impression that the amount of sweets Johnny has is static when it goes up to 7 and then down to 0, and the misleading impression that there are no differences between Johnny and Susie.

If the data is oscillating either periodically as above or chaotically, then applying statistics to the data may hide this nonlinear phenomena, order will be disguised as randomness.

Self-reinforcing oscillations as abnormal or pathological dynamical steady-states (and many other types of emergent failure modes) occur because of bottlenecks in the system, which in the case of oscillations, occur either due to insufficient or asymmetric gain, or insufficient latency. These along with why medicine is doing science wrong with an explanation of many common neurological diseases are to be detailed in my paper called "*Why medicine is doing science wrong: emergent pathology and the pathophysiological bottleneck hypothesis*" (Scott, 2025 (preprint)). The associated book that details these issues mathematically is being written and is provisionally entitled "*Emergent Pathology: A Mathematical Theory of Common Diseases*" with its associated popular science book "*Emergent*

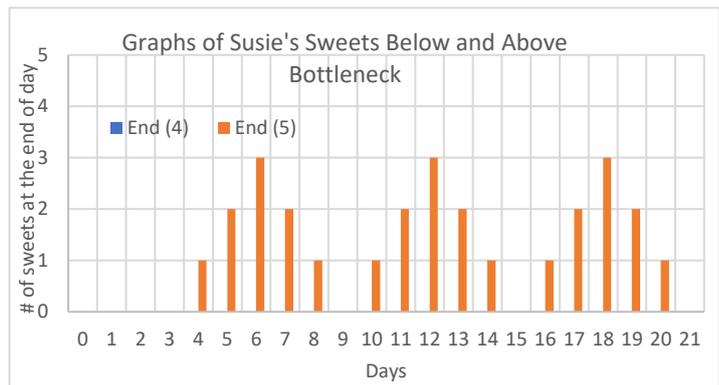
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Pathology". Emergent failures modes as a self-reinforcing oscillation or abnormal or pathological dynamical steady-state from a bottleneck is illustrated with the third Johnny and Susie example below.

Johnny and Susie Example 3 - Pathophysiological Bottlenecks (The Susie System)

Johnny is given sweets every day, as Johnny really loves sweets then it does not matter how many sweets he is given per day, he always eats all the sweets by the end of the day. Susie likes sweets, but nowhere near as much as Johnny. She would normally only eat 4 sweets per day but if she is given more then she will eat up to 6 sweets a day for 3 days in a row before going back to 4 sweets a day for at least 3 days in a row. If Susie is given 4 sweets a day then just like Johnny she has no sweets left at the end of the day. However, if she is given 5 or more sweets a day then at the end of the day the amount of sweets she has left begins to oscillate.



If Johnny is given 4 sweets a day like Susie before then he will end up with no sweets by the end of the day, whilst if he is given 562 sweets per day then he will again end up with no sweets. Similarly for Susie, if she is only given 4 sweets or less a day then the amount of sweets she has left at the end of the day would be the same as Johnny. However, when her sweets exceed 4 sweets a day, the amount of sweets she has left oscillates, and the system response then differs from Johnny. There is no malfunction thus the oscillatory behaviour is emergent and the system nonlinear.

As the differences between autistic people and neurotypicals are due to the former having higher neuronal densities² 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. These qualitative or nonlinear differences for autistic people are illustrated with the fourth Johnny and Susie example overleaf.

² e.g. "Autism spectrum disorders pathogenesis: Toward a comprehensive model based on neuroanatomic and neurodevelopment considerations" by A Beopoulos *et al* in *Frontiers in Neuroscience* (2022).

Johnny and Susie Example 4— Networks' Nonlinearity

Johnny has 500 followers on X and posts "I love sweets!": 10 people like his post. Susie has 5000 followers on X and posts the same but 200 people like her post. Susie has 10× more followers than Johnny but receives 20× more likes for her same post.

The reason is because X is a social network and networks behave nonlinearly. Autistic people have increased neuronal densities and thus autistic brains are more likely to overexcite (analogous to having more likes) given the same set of internal or external stimuli, normal or pathological. So any medications or disease-states that affect the brain, either directly or indirectly, will have an exaggerated effect on autistic people; thus signs, symptoms, medication effects and side effects, and even pathophysiology may be much worse and/or completely different compared to others.

Philosophical, Epistemological, and Related Mistakes

The philosophical, epistemological, and other mistakes that directly affect autistic people include:

- Failure to recognise that patients cannot always be assumed to be a linear system and thus consequent failure to assert in studies that this assumption is valid or to amend operationalisations when not.
- 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.
- Failure to recognise that nonlinear systems can be counterintuitive.
- Failure to account for nonlinear confounders or even recognise their existence.
- 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.
- 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.
- 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.
- Failure to recognise that consequently there are unique pathophysiology for autistic people.
- 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.
- 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.
- Failure to recognise that the liver enzyme CYP2D6³ 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.
- 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.

³ "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).

- 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.
- Failure to recognise that the effects on CYP2D6 may cause akathisia in some people, and these people are more likely to be autistic.
- 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.
- 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.
- Similar failures for a host of non-psychiatric drugs that inhibit or induce CYP2D6.
- 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.
- Failure to recognise the existence of post-partem ME/CFS, an illness autistic women are more likely to suffer from.
- 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.
- 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.
- 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.
- 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.
- 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.
- 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.
- 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 will eventually lead to humanities extinction.

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.

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- iii) Vitals and blood chemistry that are considered normal and abnormal are different for autistic people. These include (non-exhaustive) minimum 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.

The remaining philosophical, epistemological, and related mistakes include the following:

- Failure to appreciate the interconnectivity of neural networks, for example if noradrenaline neurons overexcite then glutamate may downregulate due to homeostasis, with dopamine consequently upregulating (leaving glutamate too low and dopamine too high). There is no direct biological malfunction or ‘fault’ in glutamate or dopamine, rather their (mal)adaptations are simply normal homeostatic responses to noradrenaline overexciting, arising from or resulting in emergent failure modes.
- Failure to recognise control system instabilities as emergent failure modes, including on neuronal axons from neuronal excitation transients and autoreceptor ‘edge’ effects (interfering with neurotransmission destructively or constructively; thus causing brain-fog/cognitive-deficits and/or pain respectively when on noradrenaline neurons, and causing thought-disorders and/or hallucinations/bizarre-thoughts when on glutamate neurons). Such ‘edge’ effects are analogous to the sound distortions of a stereo volume raised too high, and is a recognised phenomenon in electronics and control systems engineering.
- Failure to recognise that these oscillations may become pathological dynamical steady-states (the underlying cause of almost all common neurological disorders including the psychiatric illnesses) due to various system proteins’ synthesis and thermal degradation synching, leading to protein/gene control systems becoming too tightly coupled from lack of ‘diversity’ within degradation half-lives; thus abnormal oscillations become self-reinforcing with control systems entering stable or semi-stable orbits about each other. This is despite dynamical steady-states being a well-known and studied concept in biochemistry and biology.
- Failure to recognise that the depressions and other illnesses are caused by excessive upregulation of reuptake transporters leading to consequent upregulation of monoamine oxidase (MAO) and thus to the pathological oscillations above, driven by circadian rhythm changes in hormones affecting this enzyme nonlinearly.
- Failure to recognise that in antidepressants upregulating reuptake transporters, the underlying pathology for depression is worsened, and in some cases where the patient did not in fact have clinical depression, the drugs may cause the illness they were designed to treat: *verschlimmbesserung*.
- Failure to recognise that the difference between bipolar disorder and clinical depression is due simply to differences in calcium-channel gene activity with the former capable of overcoming excessively high MAO but then leading to mania or similar when MAO degrades back to normal.
- Failure to recognise that lithium works by causing dehydration, consequently increasing blood calcium concentration (a mechanism that can probably be used as a calcium challenge test to objectively identify autistic people) and causing calcium channel genes to preferentially switch off, converting bipolar disorder to ordinary clinical depression. (The overly complex mechanisms by which medicine explains how it thinks lithium works is comical and reminiscent of the overly complex trajectories of the celestial bodies of the solar system proposed by astronomers under geocentrism – a period of time when astronomers were doing science wrong.)
- Failure to recognise that oscillations from all the common neurological disorders including ME/CFS, psychiatric illnesses, and epilepsy can all be ‘triggered’ and that this is what starts (and resets) their pathological dynamical steady-states. Triggering can occur because neuron and/or astrocyte (re)uptake transporters have excessively downregulated (for ME/CFS and epilepsy), whilst for these and everything

else autoreceptors and heteroreceptors have excessively upregulated. These lead to the probability of exosynaptic neurotransmitters interacting pathologically with random receptors becoming too high, consequently and if given the right set of circumstances, triggering the system. These are the ‘kindling mechanisms’ for most of the common neurological diseases.

- Failure to recognise that antidepressants and antipsychotics both upregulate these receptors; thus worsening the underlying pathologies yet further: *verschlimmbesserung*.
- Failure to recognise that any treatment (e.g. ECT) or drug (e.g. ketamine) that triggers symptoms may act as an antidepressant, but only at the expense of worsening the underlying neurobiology and otherwise interfering with recovery: *verschlimmbesserung*.
- 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.
- Failure to recognise that all drugs mechanisms that are agonists are nonlinear and thus are more unpredictable. This is because receptors that agonists activate downregulate but cannot do so indefinitely, leading to downregulation of other less flexible control pathways instead in an attempt to restore homeostasis. This is why nicotine, which is an agonist and thus nonlinear, is much more unpredictably addictive than caffeine, which is an antagonist and thus linear.
- Failure to recognise that gene protein synthesis response to a static compared to a dynamic challenge is not necessarily the same. The latter response may be nonlinear and thus may result in pathologically too low or too high quantities of protein, depending on gene activity.
- Failure to recognise that asthma is caused by cycling of dopamine- β -hydroxylase combined with low gene activity (and some initial lung inflammation), leading to body noradrenaline, which is anti-inflammatory, becoming too low. The opposite of asthma is not no asthma but high blood pressure.
- Failure to recognise that noradrenaline agonist type asthma medications may cycle dopamine- β -hydroxylase further, preventing recovery or even causing asthma. This is the reason why asthma is so prevalent in high-income countries compared to middle-income countries; medicine is again keeping and making us sick: *verschlimmbesserung*.
- Failure to recognise that hypermobility (and a host of other illnesses such as IBS) is caused by similar because noradrenaline is involved in muscle tension, which if too low may cause the collagen degradations of hypermobility.
- Failure to recognise that ME/CFS and related illnesses have similar symptoms to hereditary dopamine- β -hydroxylase deficiency and thus recognise that many of the symptoms are caused by an acquired dopamine- β -hydroxylase deficiency from effects similar to asthma and others above.
- Failure to recognise that Type II diabetes is caused by a tolerance to insulin (which is an agonist) not resistance. Tolerance occurs due to saturation of insulin receptors for too long periods, which over time causes the less flexible control pathways to downregulate as discussed. The cure is keeping insulin not blood glucose low until these pathways upregulate to normal. This means that insulin if prescribed for Type II diabetes makes the underlying pathology worse: *verschlimmbesserung*.
- Failure to recognise that ADHD is not a deficit of attention but rather from increased neuronal density leading to a surplus of uncertainty pursuant to Information Theory; thus people with increased neuronal densities need enhanced attention abilities to have similar attention as neurotypicals.
- Failure to recognise that dyslexia arises from increased neuronal density leading to increased uncertainty on reading letters, pursuant to Information Theory. If the ability to resolve this uncertainty is insufficient then dyslexia occurs.
- Failure to recognise that borderline personality disorder is caused by increased neuronal density but insufficient to be autistic and with required genes to protect against ADHD (i.e. “subclinical” autism and subclinical ADHD). (BPD is ADHD without the AD, similar to a person like me who is autistic but does

not have ADHD). Any pathological symptoms are simply due to the trauma of being neurologically different or otherwise; thus is medically simply cPTSD.

- Failure to recognise that there are two neurobiologically distinct forms of schizophrenia; one with the same underlying cause as clinical depression and the other the same as bipolar disorder. The differences between these last two illnesses and schizophrenia are almost exactly the same neurobiologically as the difference between a focal and generalised seizure.
- Failure to recognise that a seizure occurs when glutamate neurotransmitter levels cross a dynamical phase transition threshold due to their concentration becoming too high. This leads to a loss of concentration gradient and thus loss of glutamate diffusion, with transport away from neurons relying on biochemical processes only. This can be quite clearly and obviously seen from an EEG for a focal seizure and is analogous to a traffic jam or water hammer.
- Failure to recognise that forcing patients with ME/CFS (or with related illnesses) patients' to not pace is analogous to repeatedly causing a seizure, except occurring on the noradrenaline system instead of glutamate, with consequent worsening of the underlying pathology.
- Failure to recognise that post-partem depression or psychosis is caused by post-pregnancy hormones decreasing too quickly leading to underexcitation or overexcitation of the brain respectively (because oestrogen is excitatory whilst progesterone is inhibitory and both decrease significantly from very high levels following pregnancy).
- Failure to recognise that of all of the biosciences, nutrition science is the most nonlinear. This means that apart from the most basic and obvious of scientific advice, nutrition science is mostly wrong; thus explaining why society is getting fatter not thinner: *verschlimmbesserung*.
- Failure to recognise that the neurons of the brain are sitting in a 'soup' of its own nutrients, metabolites, wastes, and exosynaptic neurotransmitters.
- Failure to recognise that these exosynaptic neurotransmitters require a concentration gradient for diffusion away from neurons.
- Failure to recognise that these exosynaptic neurotransmitters may interact pathologically with receptors of the brain; this thus being the mechanism for an epileptic seizure, panic attack, dissociation, and/or triggering of symptoms of neurological illnesses such as ME/CFS or migraines.
- Failure to recognise that the amygdala is not detecting threats but rather detecting prediction errors. This then activates the "fight or flight", which then increases brain processing power to lower these prediction error whilst also giving warning in the form of unease through to impending sense of doom.
- Failures to recognise that a disturbance in the brain or otherwise in the body may cause these prediction errors, and that these will also raise the alarm, progressively worsening as the prediction error worsens; thus explaining why a host of diseases may cause anxiety. Anxiety is thus an extremely important symptom, and particularly for autistic people whose perceptions (if not understandings) of their body's inner processes is greater than others.
- Failure to recognise the emotion of 'impel', which is what I call the emotion that drives people forward that all humans should normally have but is lost in depression. The feeling in the extreme is unpleasant and is what the feeling of 'cabin fever' is (and probably what is disrupted in akathisia).
- Failure to recognise that many drugs affect the endocrine system (like the contraceptive pill), particularly noradrenaline. These effects may cause changes in appetite leading to weight-gain, obesity, and Type II diabetes (they may also cause asthma and other diseases). The epidemics of these are thus also likely mostly being caused by medicine: *verschlimmbesserung*.

Root Cause Analysis of the Reasons for these Failures in Medicine

The reasons why I believe these mistakes have all occurred I feel are mostly to do with the poor culture within medicine, and includes:

1. Hubris and false beliefs in the superiority of medical science, and consequent lack of curiosity in the activities of other sciences and other non-scientific disciplines, e.g. engineering corrected the philosophical and epistemological mistakes decades ago.
2. A culture of scientism and consequent lack of interest in the philosophy of science/medicine and in science and technology studies (STS).
3. Dogmatic and false beliefs about what constitutes the scientific method.
4. Failures to understand the limitations of the scientific method, namely that experiments and other quantitative studies are linear and deterministic; thus must be used with caution when investigating nonlinear systems.
5. Failure to understand the limitations of statistics similarly.
6. The dominance of EBM (evidence-based medicine) leading to prioritisation of RCTs (randomised controlled trials) and meta-analyses when it comes to research interests, funding, and what medical journals consider to be high impact and thus want to publish. This has come at the expense of philosophy of science/medicine, computational and mathematical modelling, and bench studies. All of which are needed to solve problems relating to nonlinear systems.
7. A culture of ‘handle turning’⁴ where medical scientists fail to think critically in relation to methods/processes, rather just blindly following protocols rendering most if not all studies arguably worthless.
8. Power relations in attempting to maintain fading authority over patients.
9. A tendency to work in ‘silos’, for example Parkinson’s researchers know CYP2D6 deactivates dopamine in the brain but psychiatrists do not, that ME/CFS is conceptually similar to schizophrenia, and that schizophrenia and epilepsy are closely related neurobiologically.
10. A culture of denying the realities that some medications simply do not work and denying the realities of prescribed harms.
11. Hostility towards patients, journalists, and sometimes other academics who criticise medical studies (displaying the worse behaviours of the British State), which is particularly prevalent in British medical academia.
12. An inability to admit when medicine has got things wrong and consequent failure to learn any or fully lessons from mistakes, which is again particularly prevalent in British medical academia.
13. A culture of epistemological violence against autistic people and others, particularly those who have illnesses in the part of medicine that is wrong.
14. Groupthink and defence mechanisms, particularly denial, preventing medical scientists and medical professionals from perceiving reality.

Why Autistic People Are a Separate Sub-Species of Human

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

⁴ Handle turners were unskilled non-unionised projection operators in Great Britain from the early 20th century who replaced the unionised and skilled operators. All the former knew how to do is to turn the projector handle and thus the quality of the cinema experience diminished.

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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 Parkinsons'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.

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.

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.

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.

Hecologism and the Hecologist Principles

Hecologism is a new political and economic theory. The name hecologism is a port-manteau of human and ecologism. Hecologism is supposed to evoke the idea that human society is an ecology just like any other. This ecology is part-evolved and part-engineered, but human society can be anything that we want or imagine it to be. Hecologism is principally concerned with self-governing systems and is thus a cybernetic theory of government. This makes the theory (to the best of my knowledge) the world's first nonlinear political and economic theory.

Hecologism will take theories and approaches from engineering, social psychology, ecologism, and many others to develop the Hecologist Principles. Compliance with these Principles (or not) suggests whether a system will be successful (or not), that is to what extent the system will be self-regulating, requiring minimal intervention, whilst responding appropriately to shocks and minimising oscillations and other transients. The proposition being that self-regulating systems are more effective because they react more promptly to correct any problems, consequently requiring no or less top-down intervention, and thus also being more efficient. An analogy being that if you cut your finger, then you do not then have to remember every day to heal your finger, because your body healing cuts is a self-governing system. This I assert is where much of the problems are occurring with the British State because

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organisations require constant intervention leading to poor performance and inefficiencies, leaving central government too busy ‘fire-fighting’; thus having little time left for strategic thinking. Hecologism will solve these problems.

The theory supports localism over centralisation but is otherwise more a meta-theory and thus non-ideological and compatible with most political and economic systems. However, it is culturally specific – so what works here might not work elsewhere. In the UK for example, the theory tends towards social democracy, localism and decentralisation, a small state and pragmatic libertarianism/anarchism, revered free speech, and a minimally regulated mixed economy.

In order to derive the principles then we first need to understand how a control system works. The blood glucose control system simplified as an example is thus shown as Figure 1 below.

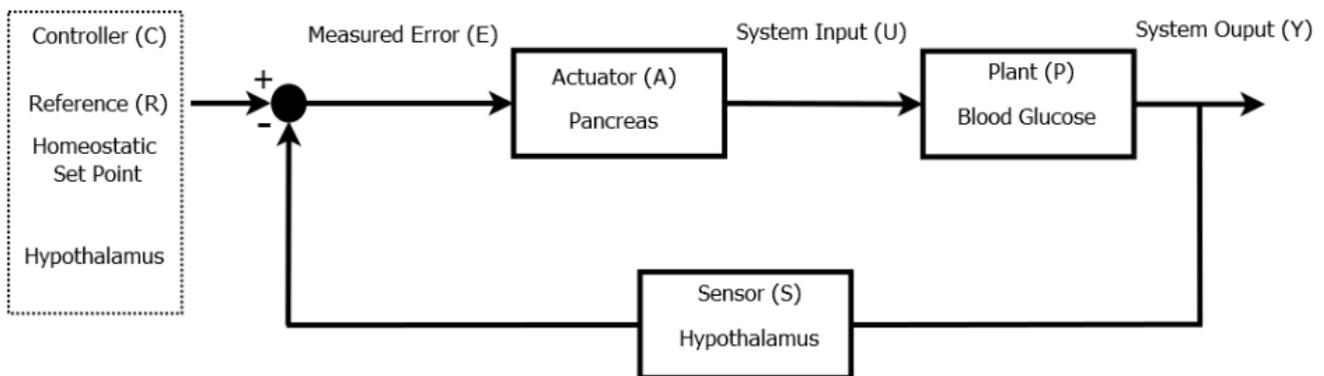


Figure 1 of the blood glucose control system

This control system maintains homeostasis by taking measurements of blood glucose via sensors at the hypothalamus, comparing these measurements to a reference homeostatic set point at the hypothalamus as controller, and then sending signals to release or stop the release of insulin from the pancreas as actuator; thus the system when working properly is self-regulating as it constantly attempts to return blood glucose to its homeostatic set point. Almost all control systems are conceptually similar to this system.

The problems that engineering (and evolution above) is attempting to solve is that reality is a nonlinear system but nonlinear control systems are largely too complicated; thus control systems tend to be linear. Linear Control Theory (part of cybernetics) asserts that this does not matter providing a number of conditions are met:

1. The sensors monitor plant with sufficient accuracy.
2. The controller takes the right actions to return plant to the set point.
3. The gain of the actuator is sufficiently high in both directions.
4. The actuator acts linearly in both directions.
5. The latency of the system is such that the gain can act sufficiently promptly either by the control system working sufficiently fast or by the plant changing sufficiently slowly that deviations from the set point can be controlled.
6. Alternatively, the system is damped or ‘slowed down’ such that the de facto latency is sufficiently high.
7. The system responds acceptably to shocks and thus minimises oscillations and other transients.

Abnormal, undesired, or pathological behaviour may thus occur when the above conditions are not met and thus from a mismatch between the nonlinear system that the control system is attempting to control and the linear control system’s inability to do so.

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The above from Linear Control Theory are modified for hecologism to:

Hecologist Principles (draft)	
H1	The sensors monitor the ‘plant’ with sufficient accuracy.
H2	The ‘controller’ compares data to a reference set point and takes appropriate action to restore ‘plant’ to this set point.
H3	The ‘actuator’ has sufficient gain in both directions.
H4	The ‘actuator’ acts linearly in both directions.
H5	The ‘actuator’ acts sufficiently promptly and/or ‘plant’ moves sufficiently slowly.
H6	Components within the ‘plant’ are sufficiently diverse to damp down the system (thus increasing de facto latency) to prevent components becoming tightly coupled thus minimising oscillations, whilst avoiding self-reinforcing oscillations and abnormal or ‘pathological’ dynamical steady-states.

Hecologism therefore proposes Hecologist Principles that if not met, the system may at best behave sub-optimally and at worse demonstrate exponential or oscillatory behaviour, including self-reinforcing oscillations as abnormal or pathological dynamical steady-states. The Hecologist Principles listed overleaf are applied to two systems as examples in the following two sections below. The first example being on noradrenaline neuron axons to show some of the medical mistakes identified earlier and to demonstrate that hecologism is relevant to all control systems. The second example is more apposite as it enters the arena of politics and economics in considering the UK economy in the 1970s, particularly the high inflation and wage-price spirals.

Neuronal Pathological Dynamic Steady States and the Hecologist Principles

The systems considered are that of the noradrenaline neuron reuptake transporter proteins (NET) and its gene, and of MAO in the noradrenaline neuron axons and its gene as shown in Figure 2 below. (The system is more complicated than described as the calcium channels and other components are excluded, but is simplified as illustration.)

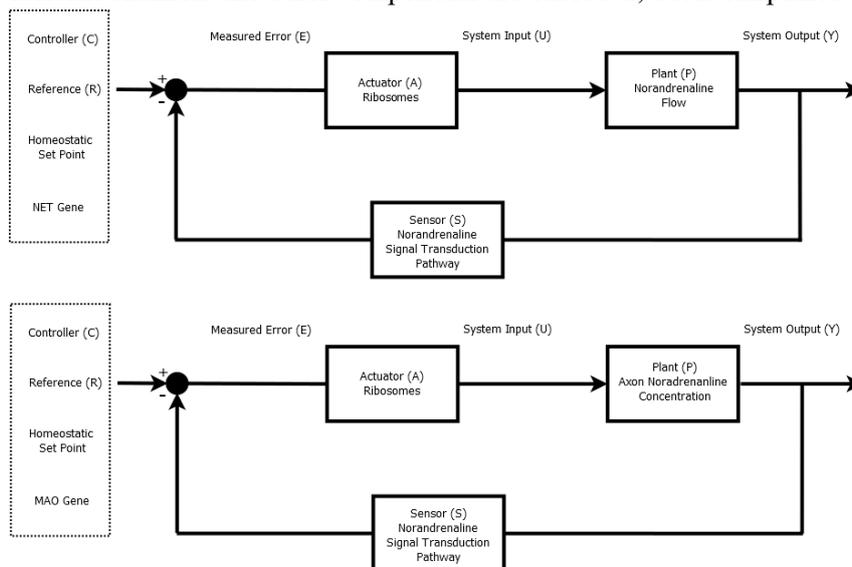


Figure 2 of NET and MAO control systems.

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The first system operates to ensure NET density homeostasis such that sufficient noradrenaline is reabsorbed on the one hand and allowed to escape to interact with autoreceptors on the other (an important sensor in another noradrenaline neuronal control system). The feedback for this system is negative, that is when the ‘flow’ is too high the gene switches on to increase the NET density and when too low the gene switches off. The second system operates to ensure that the quantity of noradrenaline in the axoplasm does not become too high by increasing MAO which deactivates noradrenaline. The feedback for this system is also negative, that is when noradrenaline is too high then the gene switches on increasing MAO and thus the noradrenaline deactivation rate, and when too low switches off.

The problem is that these two systems may interact with each other as follows (and as shown in Figure 3 below):

1. Noradrenaline flow too high saturating NET density and causing gene to switch on, increasing NET density and consequently noradrenaline reabsorption; thus also increasing noradrenaline in the axoplasm.
2. MAO gene switches on increasing MAO, consequently decreasing noradrenaline in the axoplasm, decreasing noradrenaline re-released and thus re-absorption via flow through the NET density.
3. Noradrenaline NET density flow then becomes too low causing the gene to switch off and NET density to consequently decrease thus decreasing noradrenaline in the axoplasm.
4. MAO gene then switches off decreasing MAO and increasing noradrenaline in the axoplasm, and thus increasing re-release and consequent re-absorption NET density flow, consequently saturating NET density. (return to 1.)

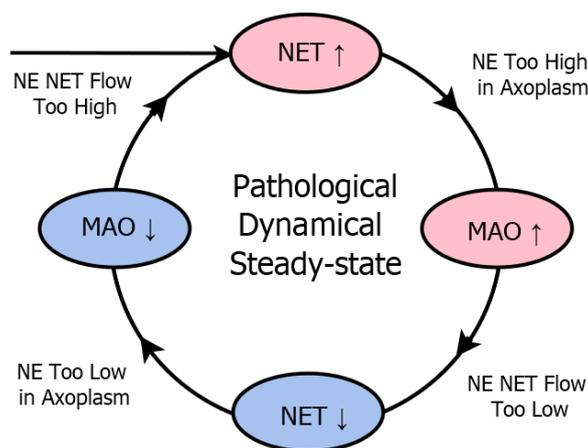


Figure 3 of MAO/NET Pathological Dynamical Steady-State.

These two systems if decoupled and thus acting independently are stable, and normally and non-pathologically this would be the case. However, under certain conditions the systems may become coupled leading to self-reinforcing oscillations and pathological dynamical steady-states (the underlying pathology for almost all the common neurological diseases including the psychiatric disorders). Hecologism can also predict these conditions as illustration. If we apply the Hecologist Principles to these control systems:

1. The sensors on both monitor noradrenaline levels accurately.
2. The set points are noradrenaline ‘flow’ for NET density and noradrenaline axon concentration for MAO. The controllers for each system are working normally and correctly.
3. The gain of the actuator is asymmetric because when the gene switches on the gain is determined by protein synthesis rate and thus gene activity, whilst when the gene switches off the gain is fixed, being determined by protein thermal degradation half-lives (4 days for NET density and 10 days for MAO). This could lead to inability to control a transient from a sufficiently large system disturbance.

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4. The actuator acts linearly except the number of proteins cannot be less than zero. This again could lead to inability to control a transient from a sufficiently large system disturbance.
5. The latency potentially is insufficient because the latency may be asymmetric (proteins could be synthesised quicker than they degrade or vice versa). This could lead to inability to control a transient from a sufficiently large system disturbance.
6. The proteins should normally be sufficiently diverse, in the sense that their synthesis and degradation should be randomly distributed in time. However, a system disturbance on noradrenaline neurons (e.g. strong activation of the fight or flight) may cause both genes to activate together for periods of time longer than normal, causing their synthesis/degradation to no longer be randomly distributed but rather to be in synch. This may cause a self-reinforcing oscillation and thus pathological dynamical steady-state.

As can be seen above, ‘diversity’ of proteins in terms of their synthesis/degradation times ensures that pathological oscillations would not usually occur. The problem is if the system is subjected to repeated system disturbances then these proteins synch and pathological oscillations can be established, which then need medical intervention to damp down. Hecologism therefore predicts the existence of the underlying cause of a host of neurological diseases as already discussed.

UK Economy of the 1970s and the Wage-Price Spirals

In the 1970s, the UK economy was dominated by manufacturing with a comparatively high proportion of nationalised industries. The workforce was also heavily unionised with union membership of around 50% (compared to around 22% now), all mostly in manufacturing. These unions were also much more active and stronger than present, and with less anti-union laws. The economy of the 1970s was characterised by high inflation as the government of the day was refusing to raise interest rates sufficiently high to control inflation, relying instead on non-monetary policies, which were not successful. Spikes in inflation were caused by economic mismanagement combined with commodity price shocks, particularly oil, low unemployment, and collective bargain by overly powerful unions.

In terms of hecologism, prices can be considered as a control system as companies seek to maintain profits by increasing prices as costs increase, whilst wages can also be considered as a control system as workers seek to maintain living standards by seeking increased wages. This can lead to a ‘pathological’ or abnormal dynamic steady-state, conceptually similar to the neuron above, and is called a wage-price spiral in economics. Some of the inflation spikes in 1970s are believed to be these wage-price spirals (see figure 4 below).



Figure 4 of the Wage-Price Spiral

The Hecologist Principles can again be applied to the system:

1. The government collected and published wage and price inflation data thus the sensor was accurate.
2. The set point could have been inflation and/or economic growth. Interest rates could have been raised but the decision was made to attempt to control inflation with non-monetary policies. The control may have been adequate but the government chose not to use it.
3. The gain of interest rates is asymmetric because interest rates cannot (ordinarily) be lowered below zero.
4. Interest rates do not act linearly in both directions as the rates cannot (ordinarily) be lowered below zero and increasing them has a decreasing effect. The effects of these rates may also be reversed, i.e. lowering interest rates may lower inflation and growth.
5. The economy at the time was dominated by manufacturing with a comparatively high proportion of nationalised industries with strong unions, high membership, and weak anti-union laws. These factors meant that the economy lacked diversity, whilst wages and prices were too tightly coupled due to the power of the unions. Shocks to the economy, such as from poor management of the economy, high commodity prices, and low unemployment provided the potential for self-reinforcing oscillations such as wage-price spirals.

The UK economy of the 1970s consequently did not meet Hecologist Principles because the economy lacked diversity in terms of too high proportion of manufacturing and in terms of those industries being too dominated by the unions. This means (and this pains me to say) that Thatcher was right. Interest rates needed to be high to control inflation and to lower the proportion of manufacturing jobs in the UK, and the unions needed to be weakened. This caused significant pain to the manufacturing regions of the country, mostly in the north, to the point that some areas of Northern England have never fully recovered. However, it was necessary to control inflation and to diversify the economy; thus more closely meeting the Hecologist Principles. (There really needs to be a related German word, (*die*) *Verbessschlimmerung* perhaps: the act of having to make something worse in order to make it better.)

The Hecologist Principles can therefore be applied to any system in order to identify where these principles are not met. Recommendations can then be made to meet these principles, and if followed, the system should become more self-governing and thus more effective and efficient, and less likely to experience “pathological” oscillations.

Why Economics is Doing Science Wrong

Following on from Labour and the inflation of the 1970s, Baroness Margaret Thatcher was elected as Conservative Prime Minister in 1979 with a mandate to bring inflation and the unions under control. The reforms were largely successful resulting in diversification of the economy and a period of growth throughout the 1980s. However, she also deregulated the City of London and introduced Right to Buy⁵, and was therefore in power during a period of rapid increase in house prices (and rents) causing a housing bubble, which later crashed.

After a number of political and economic mistakes, combined with a recession mostly caused by external factors, she was replaced by Conservative Sir John Major in 1990, who was then replaced in 1997 by Labour Tony Blair, who continued to support Right to Buy. Labour then went on to make the Bank of England independent (who kept interest rates much lower than previously) and to deregulate the city further, later leading to extensive financialisation including subprime mortgages. These caused a further rapid increase in house prices (and rents), which crashed following the 2008 financial crisis, when rampant fraud and other misconducts were uncovered throughout the financial sector. The country then went into a recession and the Bank of England, supported by Labour, lowered interest rates to record lows whilst Labour also raised SDLT (Stamp Duty Land Tax⁶) threshold first in 2008 then again in 2010; reinflating the housing bubble. Labour then later in 2010 switched the measure of inflation from RPI

⁵ Right to Buy is a current policy introduced by Thatcher allowing many in social housing to buy their rented home at a significant discount, and has reduced available social housing significantly.

⁶ Stamp Duty Land Tax is the tax paid on a property as a percentage of its value above a threshold when purchased.

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(Retail Price Index) which included mortgages, to CPI (Consumer Price Index) which does not, so that interest rates could be kept lower than otherwise would have been the case. When it came into effect a year later, the housing bubble inflated further. Consequently, the housing market recovered but the economy did not.

Following this crisis, Labour were ousted and replaced by a coalition of Conservatives and Liberal Democrats in 2010, with David Cameron as Prime Minister who proceeded with austerity; that is to lower demand more during a recession and thus lowering growth further: *verschlimmbesserung*. Interest rates remained at record lows and house prices continued to rise exponentially. As house prices were now unaffordable, the Coalition introduced Help to Buy in 2013, which raised house prices (and rents) further. In 2015, the Coalition then again tinkered with SDLT thresholds, which raised house prices (and rents) even further still.

David Cameron was re-elected as Conservative Prime Minister in 2015 with a majority this time, but due to internal Conservative political reasons, committed to a referendum on membership of the EU, which he then lost triggering his resignation. Two Conservative Prime Minister's later, Brexit then occurred on 31st January 2020, with the Pandemic following thereafter. Interest rates during the Pandemic were then decreased to their lowest on record, with the Pandemic ending in 2021. During the Pandemic, reduced SDLT rates were temporarily introduced, which were then made permanent in 2022. House prices and rents consequently continued their exponential rise.

Pent-up demand following the Pandemic, combined with external factors like the war in Ukraine, led to high inflation and consequently modest raising of interest rates. However, house prices and rents in any case continued to rise. A further change of Conservative Prime Minister followed who ended Help to Buy in 2023, but the Conservatives were then ousted by Labour in July 2024. Interest rates are now modestly lowering and house prices and rents continue their ever upwards exponential rise. Labour continues to support Right to Buy, and have discussed relaxing rules on mortgage lending and other deregulations of the financial sector. No political party has ever considered introducing a Land Property Tax that taxes property and land annually based on a percentage of its value and exists in all other western countries.

Hecologist Principles Applied to the Economy including the Housing Market

The economy including the housing market can be considered a collection of control systems. An important point is that people have to live somewhere. The main control systems and parameters considered are:

1. Interest rate changes.
2. Wage rises from interest rate increases.
3. Wage rises from increased productivity.
4. House price and rents changes due to market demand
5. Social housing rent changes due to inflation.
6. Choice between buying a home, renting privately, or renting in social housing.
7. External factors.

Hecologism can again be applied to this system:

1. The Office for National Statistics collects and publishes economics data, principally relating to inflation and growth. The measure of inflation used is CPI, which includes neither house prices nor mortgage costs. The measure does incorporate rents but ineffectively because social housing rents are included, and these are independent of the private rental market, being related to inflation only.
2. The set point is inflation and to a lesser extent economic growth. The Bank of England consequently raises interest rates when inflation is too high and lowers interest rates when inflation is too low, whilst being mindful of economic growth. The assumption is that raising interest rates decreases inflation but worsens economic growth, whilst lowering interest rates increases inflation but improves economic growth. These

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assumptions are not always true as can be seen from the scenarios below. Neither house prices nor mortgage costs are included within the inflation calculation and neither are these considered qualitatively when setting interest rates.

3. The gain of interest rates is asymmetric because interest rates cannot (ordinarily) be lowered below zero.
4. Interest rates do not act linearly in both directions as interest rates cannot (ordinarily) be lowered below zero and increasing interest rates will have a decreasing effect. The effects of interest rates may also be reversed, i.e. lowering interest rates may lower inflation and growth as demonstrated below.
5. Housing in the UK is dominated by privately owned homes, mostly mortgaged or privately rented. These are tightly coupled to wages because wage rises increase demand for housing, which drives up housing costs, and because private housing in lacking diversity, acts as a de fact monopoly. Social housing is uncoupled to wages but is unavailable in most areas.

On the basis of the above, control of inflation and the economy via interest rates in the UK does not meet Hecologist Principles because:

1. House prices and mortgage costs are wrongly excluded from the measure of inflation and social housing is wrongly included; thus the sensor is inaccurate.
2. The Bank of England therefore does not include house prices or mortgage costs when considering interest rates, neither quantitatively nor qualitatively.
3. The Bank of England assumes raising interest rates harms the economy whilst lowering interest helps it. This may not always be true as demonstrated below, and the possibility has not even ever been considered.
4. The housing market lacks sufficient diversity thus leading to housing costs becoming too tightly coupled to wages, meaning there's a potential for self-reinforcing oscillations and abnormal dynamical steady-states. Diversity can mean not only more social housing in the conventional sense, but also co-operatives or mutuals or non-social housing non-profits or not for high profits.

Three scenarios are therefore considered as below (also see Figure 5).

Scenario 1

1. Inflation and/or growth is too low
2. Interest rates are lowered by the Bank of England.
3. Low interest rates make homes more affordable.
4. Housing demand increases.
5. Increased demand raises house prices and rents.
6. Higher housing costs leads to less disposable income, lowering inflation but also lowering growth (return to 1).

Scenario 2

1. Inflation too high from external factors (e.g. high commodity prices) so interest rates are raised.
2. Higher interest rates leads to cost of living increases in wages.
3. Increased wages makes homes more affordable.
4. Housing demand increases.
5. Increased demand raises house prices and rents.
6. Higher housing costs leads to less disposable income, lowering inflation but also lowering growth (return to scenario 1).

Scenario 3

1. Productivity gains leads to increased wages.
2. Increased wages makes mortgages and rents more affordable.
3. Housing demand increases.

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4. Increased demand raises house prices and rents.
5. Higher housing costs leads to less disposable income, lowering inflation but also lowering growth (return to scenario 1).

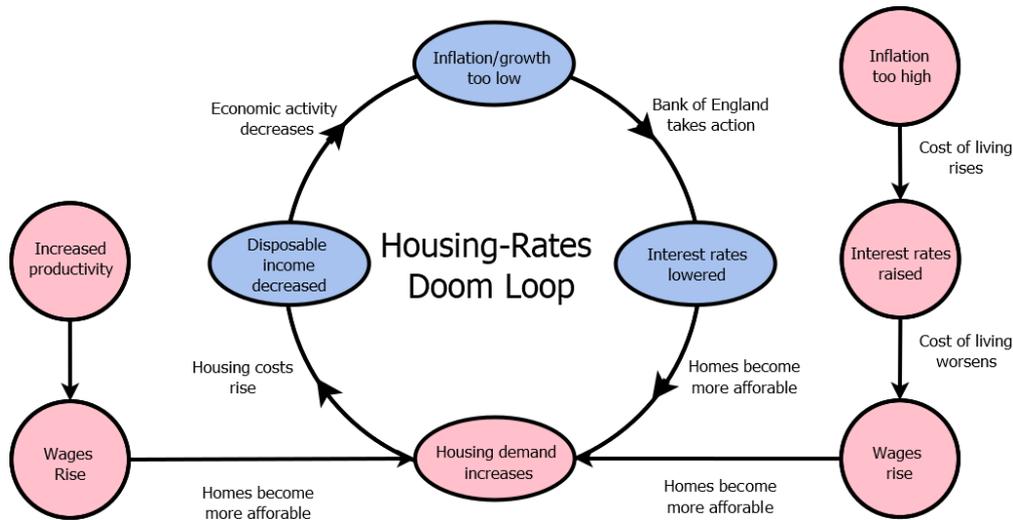


Figure 5 of the Housing-Rates Doom Loop.

All scenarios where house price and rent inflation are not properly controlled, where housing costs are too tightly coupled to wages, and where the housing market lacks diversity, lead to a doom loop of low, no, or decreasing growth, stagnating or decreasing disposable incomes, and stagnating or decreasing productivity. The fact that I, who is not in government and not an economist, is having to tell you that allowing housing costs to increase exponentially indefinitely will tank the economy is mind-blowing but these factors created the environment that made persecution of autistic people more likely. These issues with the UK economy over the last few decades have thus been self-inflicted, caused by Labour but contributed to by both the Conservatives and the Liberal Democrats: *verschlimmbesserung*.

If action is not taken to: (1) reduce house prices and rents; (2) control house price and rent inflation; and (3) diversify the housing market by increasing the proportion of social housing (in the existing sense or otherwise); then the UK economy will continue its downwards spiral. A spiral caused by decreasing real-terms disposable incomes from ever increasing housing costs, and resulting in ever decreasing real-terms tax receipts and consequent cut back of services to the point that the UK will no longer be a functioning state (if it is already). If no actions are taken to prevent these events then this will inevitably lead to the rise of the real far right (Reform Party is not “far right”), rioting and civil unrest, perhaps even civil war.

Root Cause Analysis of the Reasons for these Failures in Economics

The mistakes made on the economy therefore are as follows:

1. Failure to control house price inflation either by including house prices within the calculation of inflation (or qualitatively) for dogmatic statistical reasons, ‘head in the sand’ technical reasons, and political reasons.
2. Excessive Right to Buy for political reasons turning social housing, which are almost completely decoupled from wages, into privately owned or rented homes, which are not. This reduced housing diversity such that housing costs became too tightly coupled to wages across too much of the housing market.
3. Making the Bank of England independent whilst failing to require them to control house price inflation.
4. The Bank of England keeping interest rates too low in the 2000s leading to the housing bubble.
5. Financial deregulation and financialisation in response to house prices being too high, some of the latter of

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which was fraudulent and/or negligent, contributing to the financial crash.

6. Following the financial crash, lowering interest rates when they should have been raised to control house price inflation: *verschlimmbesserung*.
7. Changing the measure of inflation from RPI, which indirectly and weakly included house prices through mortgage costs, to CPI which has almost no relationship to house prices at all.
8. Lowering SDLT (both by raising thresholds and lowering rates) when it should have been raised, fuelling the house price bubble yet further: *verschlimmbesserung*.
9. Introducing Help to Buy to provide loans and other financial means to help people buy their homes, fuelling the house price bubble yet further still: *verschlimmbesserung*.
10. Failing to tax land and property and thus failing to help pierce the housing bubble.
11. Allowing foreign investors and landlords to buy homes to keep empty or rent.
12. Not prohibiting short term leases of homes through companies like AirBnB.
13. Not learning from these mistakes and doing the exact same wrong thing throughout the last decade or so.
14. Putting party before country.
15. Groupthink and defence mechanisms, particularly denial, preventing economists and governments from perceiving reality.

Recommendations to Escape the Housing-Rates Doom Loop

The recommendations to escape this housing-rates doom loop are as follows:

1. Bank of England to lose independence and their recommended interest rate changes to become advisory only.
2. House price inflation to be included in the inflation calculation or alternatively considered qualitatively when deciding whether to raise or lower interest rates.
3. Social housing rents to be removed from the inflation calculation.
4. Raise interest rates to lower house prices to normal levels.
5. SDLT to be raised.
6. Introduce Land Property Tax at around 2% in line with other western countries. Underdeveloped land or empty properties to be taxed higher with rate escalated.
7. House prices to be capped temporarily.
8. Prohibit more than 4x multiplier mortgages and with less than 25% deposit temporarily.
9. Exercise emergency powers under Civil Contingency Act 2004.
10. Repeal Human Rights Act 1998 and withdraw from the European Convention on Human Rights either permanently or temporarily.
11. Requisition empty properties at the value of the land only and rent out at significantly below market value.
12. Requisition at below market value of sufficient already rented properties and lower rents also to significantly below market value.
13. Command and control of the housing sector to force residential property developers and others to build the required homes at cost.
14. All suitable current new build to be bought by the state at cost and rented out significantly below market value.
15. Freeze ordinarily residential rents and lower them towards normal until the rental market is working again.
16. 'No fault' evictions prohibited.
17. Prohibit foreign ownership of empty or rental homes as an investment.
18. Ban most short term home rentals.
19. Force banks to allow negative equity to be portable.
20. Force banks to write off negative equity due to this housing crisis only.
21. Bankruptcy rules to be changed to allow individuals for this housing crisis only to declare bankruptcy on any negative equity, for the time for bankruptcy to be discharged to be reduced to 3 months, and for this type of bankruptcy to be prohibited to be included in any credit files.
22. Legislation to nationalise the entire retail banking sector once the markets realise that UK housing assets are an illusion due to the house price bubble, and thus all British retail banks are in reality paper insolvent soon

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- to be zombie banks.
23. Reverse employer's recent NI raises.
 24. Reduce employee NI rate to 0% temporarily.
 25. Increase benefits to all claimants by at least £100 a month temporarily.
 26. Reduce VAT even if only temporarily.
 27. Spend on infrastructure projects.
 28. Make no cuts to budgets.
 29. Establish the Office for Nonlinear Systems and Government Oversight, staffed by experts in nonlinear and complex systems, to ensure government and others make no such damaging painfully obvious and foolish mistakes in the future.

Crimes Against Humanity Committed by the British State

The National Health Service

The NHS was founded by Labour 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 of the UK and some others, and thus provides mostly free healthcare services, primarily in the form of a GP and access to emergency and routine treatments.

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 recklessness.

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 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 therefore is not *'free at the point of delivery'*, rather patients must pay with social capital, a far more unjust and prejudiced system than with financial transactions. The NHS thus is incentivised to deny or discourage its use causing autistic people become mentally unwell and/or drive us to suicide or to otherwise die early from not having our healthcare needs met, which is extermination through persecution. This is supported by a survey⁷ on healthcare received by autistic people from the NHS, where 78% of respondents report autistic people receiving worse or much worse healthcare than others. Autistic people also die much younger⁸, and are nine times more likely to commit suicide⁹. The reason for this is of course because the NHS is killing us, driving us to suicide, and otherwise allowing us to die. Even ignoring the failures in medicine generally, crimes against humanity against autistic people are otherwise designed into the NHS.

In terms of my own experiences, from 2011 to 2018, I repeatedly visited my GP to attempt to get help with what I now know to be ME/CFS. I never received any help, with every health professional seeking to harm me at every opportunity. These harms included repeatedly making dishonest and harmful statements about me in my medical records, trying to prescribe me antipsychotics that at best would have triggered my ME/CFS and at worst would have

⁷ *"A Spectrum of Obstacles: An Inquiry into the Access of Healthcare by Autistic People"* by The Westminster Commission on Autism (2016).

⁸ *"Personal tragedies, public crisis: The urgent need for a national response to early death in autism"* by Autistica (2016).

⁹ *"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).

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killed me because I am autistic, and on one occasion a GP attempted to get me sectioned out of spite (an action that would have likely led to my death medically).

Further, from 2015 until 2021, I was prescribed HIV medications, all of which have harmed and/or nearly killed me because I am autistic or otherwise. The drugs included Tenofovir, Raltegravir, and Darunavir, and all of these have non-linear side effects (i.e. in the part of medicine that is wrong). These mean that these drugs have not been proven safe for anyone and interacted with me being autistic and/or my ME/CFS) adversely. Tenofovir interfered with my recovery from ME/CFS, whilst the other drugs directly nearly killed me and left me with severe prescribed harm that lasted in some cases 6 years. Human experimentation without consent amounts to torture under international law. I assert that the symptoms from this prescribed harm were akin to torture. Complaints to the NHS were met with denials and often insults, and no attempt to prevent harms to me or other autistic people has ever been made.

Lastly, from 2020 to 2024, I had episodes of medication-induced kidney damage whereby I developed symptoms related to my blood chemistry not being properly controlled. These symptoms tended towards Central Nervous System (CNS) overstimulation and were completely different to symptoms that would occur on somebody who is neurotypical, if indeed any symptoms would be apparent at all. Atypical symptoms were experienced for acidosis, elevated calcium, sodium, and magnesium. During this period, I also once ate a wild black raspberry that must have been contaminated with ergot. The amount ingested must have been trivial, but despite me vomiting the berry up almost immediately, I experienced symptoms similar to having taken far too much bad drugs, symptoms that would not occur on somebody who is not autistic.

In all of these occasions my correct explanation as to the cause of my symptoms was rejected, and I was denied adequate healthcare, with insulting, rude, harmful, fraudulent, and otherwise dishonest statements made about me in my medical records. It rather seems to me that if staff working for the NHS had to choose between breathing and telling the truth, then they would all suffocate; a culture of dishonesty that can only come from the top. I estimate that over the last decade, the NHS has nearly killed me eight times because I'm autistic, either directly, through negligence/neglect, or through causing such distressing prescribed harm symptoms that I came close to suicide.

From perhaps 2020, I realised that medicine is doing science wrong, but it was only until 2024 that I understood that this was also the reason why I kept being harmed by the NHS, that is being autistic is in the part of medicine that is wrong. I consequently raised these issues with my local NHS Trusts and both Sheffield Teaching Hospitals NHS Foundation Trust and Yorkshire Ambulance Service Trust refused to respond to the issues. On being threatened with legal action another NHS Trust responded *“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 of autistic people is lawful. This was the same defence made by doctors in the Nuremberg Trials as genocide was lawful under German law; this defence was of course rejected.

I also had responses from Sheffield Health and Social Care NHS Foundation Trust and my GP but these responses did not respond to the issues raised and otherwise contained no real substance. Legal action against my GP practice also failed due to dishonesty and other misconducts by the practice and from crimes committed by the judiciary as is discussed later. Every other NHS Trust refused to answer, even ones that had directly harmed me, as did most other GP practices that I contacted, and the one's that did reply again refused to respond to the issues raised. The GMC and NMC were also contacted but took no action to prevent the harms and deaths of autistic people.

On the basis of the above and the report:

1. The NHS is medically harming and killing autistic people.
2. The NHS knows that they are medically harming and killing autistic people.
3. The NHS believes medically harming and killing autistic people is lawful.

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4. The NHS is persecuting autistic people.
5. The NHS believes what they are doing is wrong because of the dishonesty and other misconducts in an attempt to cover up their crimes.
6. The NHS has otherwise sort to harm me at all and every opportunity because I am autistic.

The above means that the NHS is medically torturing and medically exterminating autistic people through recklessness, and is otherwise deliberately persecuting and exterminating autistic people. These also amount to the de facto crime of apartheid.

The Hecologist Principles

1. The sensors are reviews, press, word of mouth, and personal experiences. Laws on defamation in the UK prevent criticising individual health professionals; the information is therefore incomplete and thus inaccurate. Other illiberal laws otherwise seek to suppress free speech.
2. The set point should be quality of service, but the NHS is using service quality as a means to control demand as they have no other option because the service is free as the following sentences explain. If quality of service declines, then as the NHS is a de facto state monopoly, most people cannot simply switch to private healthcare. However, where people have switched, then this reduces demand on the NHS thus improving services but reducing efficiency. The NHS is therefore incentivised to discourage people from using their services and thus incentivised to provide a low quality service, particularly to those it views as worthless like autistic people (who then simply stop seeking healthcare). This means that the NHS is receiving disproportionately higher funding and thus this has the effect of incentivising inefficiencies and consequently incentivising exponential rises in budgets and staff. No actions patients take can improve efficiency of the service. These mean that the controller at patient level has at best no effect and at worst the opposite of the desired effect.
3. The actuator would not act linearly in the extremes because either the service would be shut down because it is unsafe or the service would become too popular and thus overloaded and rationing would be introduced.
4. If everyone could change healthcare service provider and doing so effected change, then the actuator would have sufficient latency. Instead the system relies on bad press, commissions, panels, inquests, special measures, reforms, and direct instructions from central government to improve quality and efficiency, but these are inefficient and time-consuming, and thus lack latency. They also do not work because the NHS is incentivised for them to not work.
5. Choices are therefore really only between different parts of the NHS, which all have the same culture and motivations to provide a similar low quality inefficient service.

The NHS does not meet Hecologist Principles because it is a de facto state monopoly; healthcare in the UK thus lacks diversity. This means that most people cannot choose a different healthcare provider and those that can create perverse incentives for the NHS to provide a low quality service to lower demand; thus consequent perverse incentives to be inefficient.

Root Cause Analysis of the Reasons for these Failures by the NHS

1. Medical knowledge is dangerously wrong for autistic people.
2. Lack of curiosity when patients are harmed by diagnostics or medications.
3. Lack of consequences from NHS staff misconducts.
4. Lack of patient choice with NHS staff asserting that if you do not like the services the NHS provide than do not use the service.
5. The legal framework for healthcare in terms of patient safety is woefully inadequate, relying on the completely discredited Bad Apple Theory. Patients are harmed by failures in systems not by individual 'bad apples'.
6. Training and fitness to practice needs to be brought within organisations and not outsourced to external and

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out of touch quangos.

7. Current framework does not promote a blame-free culture.
8. Current framework promotes closing ranks against patients.
9. Lack of proper investigations when patients are harmed or nearly harmed (near misses).
10. Not learning from investigations or from patient complaints resulting in repeat incidents.
11. Culture of covering up and dishonesty promoted by hospital and practice managers.
12. Hospital managers have no professional body to which they must maintain membership.
13. Unwillingness of police to investigate crimes when committed by NHS staff.

Recommendations

1. Defamation law needs to be changed such that there needs to be an element of maliciousness with the burden of proof on claimants.
2. Abolish and/or pare-back censorship laws including but not limited to the malicious communications offences including the Online Safety Act 2023 and harassment relating to written communications (or otherwise) under Protection from Harassment Act 1997. Criminal offences should be limited to that which would be criminal if said in person only and to direct and credible threats or direct incitements for violence, and/or where the contact has been frequent to the extreme.
3. An organisation that believes crimes against humanity of an entire group of people is lawful cannot be allowed to continue to exist thus the NHS must be abolished and replaced with insurance-based healthcare similar to that which exists in The Netherlands. Any replacement system must meet Hecologist Principles, particularly with respect to diversity.
4. Fund research to make healthcare safe for autistic people.
5. In the interim, autistic people are to be warned that diagnostics and treatments are not proven safe and effective for us.
6. Appropriate warnings to be placed on foods fortified with calcium, calcium containing supplements and medications, and on medications that may harm the kidneys.
7. Antidepressants not to be prescribed to new patients.
8. Antipsychotics not to be prescribed to new patients except in exceptional circumstances and where the risks are properly detailed to the patient to ensure informed consent.
9. Existing patients of antidepressants and antipsychotics to be told that the medications have worsened their underlying condition to ensure informed consent.
10. Discrimination against members of the public by the state or their agents to be made a criminal offence.
11. Audit hospital patient safety event reporting systems and associated investigations.
12. Audit PALS responses to patient complaints.
14. Healthcare legal framework needs to change to be more in line with the Health and Safety At Work etc Act 1974 so that organisations have a duty to reduce harms to patients to as low as reasonably practicable (and to prevent the NHS blaming individual staff). This framework needs to make hospital and practice managers legally and criminally responsible for patient harms not individual healthcare professionals who often have no or limited influence on the system, e.g. infrastructure and resourcing.
13. Abolish the GMC and NMC¹⁰ with the setting of standards being brought in-house and fitness to practice authorisation provided by the organisation. GMC and NMC staff to be dismissed for gross misconduct and denied their pensions.
14. Introduce a stronger healthcare regulator more similar to the Office for Nuclear Regulation or the Health and Safety Executive.
15. Introduce an Ombudsman that can resolve complaints and legal disputes, with the ability to award compensation.
16. Dismiss senior staff in the NHS and the Department for Health and Social Care including ministers for gross misconduct, and deny them their pensions.

¹⁰ The General Medical Council and the Nursing and Midwifery Council are the regulators for doctors, and nurses and midwives respectively.

17. Dismiss the boards and PALS teams from every NHS Trust for gross misconduct and deny them their pensions.
18. Cancel NHS contracts of the GP practices mentioned in the report and deny them their pensions.
19. Individuals directly mentioned in the report (whether named or not) also need to be dismissed for gross misconduct and denied their pensions.
20. Establish Special Star Tribunals with appointed judges and no juries to try the suspects from the report.
21. Blacklist the above staff from government including the NHS.

The Department for Work and Pensions

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 (WCA) whereby claimants are assessed by private contractors as to whether they are fit to work. These assessments were initially carried out by Atos and then 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 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.

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 commit suicide to achieve it. This means that two-tier benefits or apartheid are also designed into the system, and it means that extermination through persecution exists for the DWP also. The DWP (and Maximus) 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.

In terms of my own experiences, every contact with the DWP has resulted in harms and most contact in fraud and abuse. These include two health assessments in 2018 and 2019 that were fraudulent, one assessment between these two that was ended on the basis that I had shouted at the assessor when in fact I had simply asked that the assessment not be discriminatory and fraudulent, the jobcentre coach in 2020 who joked about sticking pins and a Biro in my eyes before disclosing that she used to teach and assault autistic children, and lastly requiring a new health assessment in 2024 when I was clearly too sick to work and remained the same as I had been since the first assessment, despite such putting my life at directly risk whilst being almost fully recovered. The assessment was only cancelled after I sent a letter and video to the coroner asserting that the actions of the DWP were criminal and were risking my life.

On the basis of the above and the report:

1. The DWP is deliberately persecuting people by the process harming and killing us, and by fraudulently denying us benefits.
2. The DWP is harming autistic people by carrying out health assessments with no scientific basis or otherwise, and are thus unlawful
3. The DWP knows that they are harming autistic people from these unlawful health assessments.
4. The DWP believes what they are doing is wrong because of the dishonesty and other misconducts in an attempt to cover up their crimes.
5. The DWP has otherwise sort to harm me at all and every opportunity because I am autistic.

The above means that the DWP is deliberately persecuting and exterminating autistic people. These also amount to the de facto crime of apartheid.

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The Hecologist Principles

1. The sensors are reviews, press, word of mouth, and personal experiences.
2. The set point is quality of service. Similarly, to the NHS, the DWP is even more of a de facto monopoly, and also similar to the NHS, the DWP makes the task of claiming benefits so distressing and unpleasant that it discourages claimants. This is not how a grown-up society behaves. The DWP is thus incentivised to provide a poor quality service. No actions claimants take can improve the quality or efficiency of the service. These mean that the controller at the claimant level has no effect.
3. The actuator has no effect and the DWP is otherwise incentivised to provide a poor quality service to discourage use by claimants. Only legal action has any effect at all.
4. The actuator linearity is not relevant to the DWP.
5. The system relies on bad press, commissions, panels, inquests, special measures, reforms, legal action, and direct instructions from central government to improve quality and efficiency but these are inefficient and time-consuming, and thus lack latency whilst rarely effecting meaningful and lasting change because the DWP is incentivised not to change as per the NHS.
6. The choices are really only to claim benefits or not to claim benefits. (The latter incentivises the DWP to provide a poor quality service.) Unemployment and sickness claims sector therefore lacks diversity.

The DWP does not meet Hecologist Principles because it is a de facto state monopoly; unemployment and sickness support in the UK thus lacks diversity. These mean that most people cannot simply choose a different service provider. The DWP is incentivised to provide a low quality service by discouraging claimants; a strategy that has been demonstrated as harmful and counterproductive.

Root Cause Analysis of the Reasons for these Failures by the DWP

1. Medical knowledge is dangerously wrong for autistic people.
2. Lack of curiosity when claimants are harmed or killed by the WCA process.
3. Lack of consequences from DWP staff misconducts.
4. Lack of claimant choice.
5. Lack of proper investigations when claimants are nearly harmed, harmed, or killed (near misses).
6. Not learning from investigations or from claimants complaints resulting in repeat incidents.
7. Culture of covering up and dishonesty promoted by the DWP.
8. Unwillingness of police to investigate crimes when committed by DWP staff.

Recommendations

1. An organisation that is committing crimes against humanity against an entire group of people cannot be allowed to continue to exist thus the DWP must be abolished and replaced (so far as reasonably practicable) with insurance-based employment and sickness benefits similar to that for healthcare proposed above, with the rest hived off into a new department. Any replacement systems must meet Hecologist Principles, particularly with respect to diversity.
2. Fund research to make healthcare including health assessments safe for autistic people.
3. In the interim, prohibit health assessments being carried out on autistic people.
4. Discrimination against members of the public by the state or their agents to be made a criminal offence.
5. Audit DWP claimant safety event reporting systems and associated investigations (or set one up if there is not one).
6. Audit DWP responses to claimant complaints.
7. Dismiss senior staff at the DWP including ministers for gross misconduct and deny them their pensions.
8. Dismiss the DWP sickness and disability benefits staff in their entirety for gross misconduct and deny them their pensions.
9. Dismiss staff at Hillingdon Jobcentre Plus in their entirety for gross misconduct and deny them their pensions.

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10. Cancel all Atos and Maximus contracts and seek to recover all costs paid due to rampant fraud and crimes against humanity.
11. Extradite boards of Atos from France and Maximus from the USA and try them for crimes against humanity.
12. Other individuals directly mentioned in the report (whether named or not) also need to be dismissed for gross misconduct and denied their pensions.
13. Establish Special Star Tribunals with appointed judges and no juries to try the suspects from the report.
14. Blacklist the above staff from government including the NHS.

Judiciary

The County Courts and High Courts of England and Wales are the principle civil courts of the UK, supported administratively by HMCTS (His Majesty's Courts and Tribunals Service), which is an executive agency of the Ministry of Justice (MoJ). 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.

Contrary to popular belief, 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 Book, statutory and common law, case law, the Court's own rules, and abusing power and being dishonest to achieve it. Judges have shown themselves to me to be otherwise grossly incompetent usually relying on chance to achieve the correct judgment; law being the only discipline where credit is given for being right by accident.

These all mean that rights are given or taken away based on the whims of the judiciary and thus the whims of the British Establishment. 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 maintaining and enforcing apartheid against autistic people by the rest of the British State. This also of course means that the UK is an entirely lawless society, as demonstrated repeatedly in the report. Independence of the judiciary is thus simply a plea to allow judges to continue to be prejudiced and biased, to allow them to continue to enforce apartheid, allow them to continue abuse their power and to be grossly incompetent. Expecting judicial reforms to succeed where there is no consequences for judicial misconduct and incompetence is simply delusional magical thinking. States which neither comply with nor uphold their own laws soon become to be seen as illegitimate, and when states are seen as illegitimate then civil unrest and civil war soon follows.

I have personal experiences of every judge I have interacted with acting exactly as described as demonstrated in the report, from the County Court to the High Court. Judges have otherwise shown themselves to behave like they are above the law, happy to abuse their power when given sufficient opportunity and motive, which includes "losing" claims and appeals within the system on subject matter or from claimants they do not like, and in the case of many judges, to conspire with other parts of the British State to crimes against humanity against autistic people to continue. There's no reason to believe the criminal justice system staffed by the same or similar type of people is any different.

On the basis of the above and report:

1. The judiciary is deliberately maintaining and enforcing de facto apartheid on autistic people.
2. The judiciary is deliberately allowing other parts of the British State to harm and kill autistic people.
3. The judiciary know that autistic people are being harmed and killed but have taken no action to stop it.
4. The Ministry of Justice knows that autistic people are being harmed and killed, and that the judiciary is enforcing apartheid against autistic people, but have taken no action to stop these.
5. The judiciary knows what they are doing is wrong because of the dishonesty and other misconducts in an

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attempt to cover up their crimes.

The above means that the Judiciary are complicit in the crimes of the NHS and others, and are themselves deliberately persecuting autistic people. These also amount to the de facto crime of apartheid.

The Hecologist Principles

1. The sensors are personal experiences and bad press. On many occasions County Court judges refuse to allow observers to watch proceedings, and audio, video, or transcripts are not ordinarily available. This means the sensor is inaccurate.
2. The set point is quality of judgments. The County Court system is a monopoly. There is no means of plaintiffs using a different system other than choosing not to go to court and/or to use some form of Alternative Dispute Resolution (ADR) or mediation.
3. Plaintiffs have no means to effect quality of judgments. There is otherwise no meaningful structural means to improve quality of judgments due to disingenuous pleas of judicial independence.
4. The actuator linearity is not relevant to the judiciary.
5. Judicial decisions may be overturned on appeal but there's no consequences for judges making incompetent, prejudiced, or biased judgments whilst the Appeal Court (and Supreme Court) lack latency. There is no other real means to improve judgment quality. Public criticisms and bad press may remotely improve quality but these also lacks latency.
6. There is no real choice but to use the civil courts; the system thus lacks diversity.

The judiciary does not meet Hecologist Principles because it is a state monopoly; resolving civil legal disputes thus lacks diversity. The judiciary are not incentivised to provide a high quality service nor to not commit misconducts because there are no consequences for failing to do so.

Root Cause Analysis of the Reasons for these Failures by the Judiciary

1. Independence of the judiciary is simply a plea from the judiciary to allow them to continue to be grossly incompetent, prejudiced, and biased, whilst abusing their powers to protect the British State and the British Establishment, even if it means committing and/or becoming an accessory to crimes against humanity to achieve it.
2. Lack of open justice.
3. Judicial culture of dishonesty, abuses of power, prejudice, and bias.
4. Lack of consequence for judicial incompetence.
5. Lack of consequence for judicial misconduct including abuse of powers, and prejudice and bias against certain types of claims or plaintiffs.
6. Judges are not appointed on merit but on how favourable their judgments will be towards the British Establishment and towards those the British Establishment supports; the judiciary themselves thus lacks diversity.
7. The courts otherwise lacks diversity as there's no choice for claimants but to use the corrupt and otherwise failing system.
8. Unwillingness of police to investigate crimes when committed by the judiciary.

Recommendations

1. Prohibit judges from closing courts to observers except where parties or witnesses have the right to anonymity, in the interests of national security, or other limited reasons.
2. High Court to be televised.
3. County Court audio to be broadcast and archives to be available online.
4. The concept of constitutional crimes needs to be introduced and must include discrimination (which in their extreme would include crimes against humanity) against plaintiffs, and to which the judiciary would not have

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- immunity from prosecution. Prosecutions would not overturn adverse judgments.
5. Privatised lower courts of the first instance, allowing private companies to deliver and administer justice. Trials and hearings would be held in existing courts rented out. Appeals would follow the normal process. Penalties for decisions being overturned on appeal where due to incompetence or bias or other avoidable reason.
 6. Judicial Appointments Commission to be abolished.
 7. County Court judges and other lower court judges to be approved for appointment by the Minister for the MoJ. High Court and Supreme Court justices to be appointed by the Prime Minister. Supreme Court justices to be confirmed by Parliament.
 8. Judges of the lower courts need not be barristers or solicitors, or perhaps even with law degrees. I am certain laypersons are as capable at being grossly incompetent, prejudiced, and biased as lawyers but for a much lower cost.
 9. Allow solicitors to have a right of audience at the High Court.
 10. Otherwise remove the distinction between barristers and solicitors.
 11. The 'cab rank rule' to be applied on lawyers more generally and particularly for those that accept payment by legal aid to prevent picking and choosing, which inevitably is based on prejudice and bias.
 12. Expand ADRs and make them mandatory if available.
 13. Civil Procedure Rule compliance to be made more strict to stop lawyers gaming the system.
 14. Ordering costs process should be changed to prevent judges using costs as punishment on plaintiffs they do not like. Standard maximum fees schedule with annual changes would be one means of making the system fairer (these could be exceeded on plaintiff misconducts).
 15. Dismiss senior staff at the MoJ including ministers for gross misconduct and deny them their pensions.
 16. Dismiss judges named in the report including one High Court judge and their staff for gross misconduct (the High Court judge dismissal will require primary legislation) and deny them their pensions.
 17. Dismiss staff at Sheffield County Court and Dartford County Court in their entirety, both judges and administrative staff, for gross misconduct and deny them their pensions.
 18. Establish Special Star Tribunals with appointed judges and no juries to try the suspects from the report.
 19. Blacklist the above staff from government.

South Yorkshire Police

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.

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.

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

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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 peeing 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.

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 South Asian 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 British Establishment and the British State being largely protective of paedophiles, and a period of time in which you, Sir Keir Starmer, as Director of Public Prosecutions, were head of the CPS. The failures were believed to be due to the police and CPS lack of priority in protecting white working class children from said paedophiles 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.

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 misdeeds 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. No policing is better than bad policing: *verschlimmbesserung*.

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. This explains why the police are known to favour investigating and prosecuting the white working class like those in the 2024 riots, but South Asian paedophiles (Rochdale and Rotherham) or British Establishment paedophiles (Sir Jimmy Saville) not so much.

These mean that the decision to prosecute is based on the whims of the police and thus the whims of the British Establishment. 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 maintaining and enforcing apartheid against autistic people. This also of course means that again the UK is an entirely lawless society, as demonstrated repeatedly in the report. Expecting police reforms to succeed where there is no consequences for police misconduct and incompetence is simply delusional magical thinking. States which subject citizens to arbitrary investigations and prosecutions soon become to be seen as illegitimate, and when states are seen as illegitimate then civil unrest and civil war soon follows as stated previously.

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. These strategies are ironically (or perhaps not so ironically) the same psychologically abusive strategies paedophiles and other abusers use to minimise and cover up their misdeeds. This culture of impunity at SYP must surely partly be arising because of past history of rampant abuses of power including criminal and civil violations, and lack of consequences arising from these gross misdeeds. However, although I am sure issues are unique to each UK police force, there is no reason to believe that any other force is any better, and particularly no reason to believe any police force is treating autistic people any better.

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The abuses by SYP are extensive and are far too many and detailed to repeat here, but essentially the police treat autistic people as subhuman with all the abuse that that entails. The modus operandi of SYP therefore is to persecute autistic people to the point we become mentally unwell and are driven to suicide, and/or to falsely and fraudulently label us as mentally ill so that we are mistreated further in the future, and/or until we are sectioned and the NHS then kills us medically, and/or even more perniciously, provoking autistic people until we react, which then gives the police an excuse to murder us legally. They have repeatedly used me being autistic against me and seek to alternatively label me as mentally unfit, mentally unwell, and an alcoholic to try to discredit me. And on one childish and comical act of spite left all my lights on and turned my heating up to max to waste my electricity and gas after my arrest. There's no reason to believe that other police forces in other parts of the country behave any different.

On the basis of the above and the report:

1. The police are persecuting autistic people.
2. The police are maintaining and enforcing de facto apartheid on autistic people.
3. The police know that autistic people are being harmed and killed but have taken no action to stop it.
4. The police know what they are doing is wrong because of the dishonesty and other misconducts in an attempt to cover up their crimes.

The above means that the police are complicit in the crimes of the NHS and is otherwise deliberately persecuting and exterminating autistic people. These also amount to the de facto crime of apartheid.

The Hecologist Principles

1. The sensors are personal experiences and bad press. The lack of funding for local and national news, which would investigate police misconduct, is hampering the sensor. Laws on defamation in the UK make it difficult to criticise individual police officers; the information is therefore incomplete and thus inaccurate. Other illiberal laws otherwise seek to suppress free speech.
2. The set point is quality of policing, which includes preventing and solving crimes but also preventing police misconducts, and having the support of the entire community. Citizens have no means to directly affect quality of policing with their only choice being to complain to the police, the Independent Office for Police Conduct or local and central government, or take legal action.
3. There's almost no consequences for police misconduct and no consequences for incompetence. This means that the actuator has insufficient gain.
4. The actuator linearity is not relevant to the police.
5. The actuator relies on complaints, bad press, commissions, panels, inquests, special measures, reforms, legal action, and direct instructions from local and central government to improve quality and efficiency, but these are inefficient and time-consuming, and thus lack latency.
6. Policing is a monopoly in the UK unlike the USA which has other agencies such as the FBI. The system therefore lacks diversity.

Policing does not meet Hecologist Principles because it is a state monopoly; preventing, detecting, and investigating crimes thus lacks diversity. The police are not incentivised to provide a high quality service nor to not commit misconducts because there are no consequences for failing to do so.

Root Cause Analysis of the Reasons for these Failures by the Police

1. Operational independence of the police is simply a plea to allow them to continue to be grossly incompetent, prejudiced, and biased, whilst allowing them to abuse their powers to protect the British State and the British Establishment, even if it means committing and/or becoming an accessory to crimes against humanity to achieve it.
2. Loss of advertising income for local and national newspapers to investigate police corruption and other

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misconducts.

3. Police culture of impunity, dishonesty, abuses of power, prejudice, and bias.
4. Lack of consequence for police incompetence.
5. Lack of consequence for police misconduct including abuse of powers, and prejudice and bias against certain types of people.
6. The police otherwise lacks diversity as there is no choice other than for citizens to use corrupt police forces.
7. Unwillingness of police to investigate crimes when committed by themselves.

Recommendations

1. Defamation law needs to be changed such that there needs to be an element of maliciousness with the burden of proof on claimants.
2. Abolish and/or pare-back censorship laws including but not limited to the malicious communications offences including the Online Safety Act 2023 and harassment relating to written communications (or otherwise) under Protection from Harassment Act 1997. Criminal offences should be limited to that which would be criminal if said in person only and to direct and credible threats or direct incitements for violence, and/or where the contact has been frequent to the extreme.
3. Provide public funding to local and national newspapers to investigate criminal justice system misconducts.
4. Discrimination against members of the public by the state or their agents to be made a criminal offence.
5. Logging of crimes and decision to investigate should be carried out by separate organisations,
6. Entirely new force independent of the police to be established with a completely different ethos. The lower force is to deal with low level crimes and have some powers but not power of arrest. The higher force is to the police the police and can intervene at the time of a police crime, and has the power to arrest the police only. The police therefore police the lower force and investigate serious crimes whilst the higher force only investigates police crime (and perhaps other constitutional crimes).
7. CPS to be allowed to direct police investigators.
8. Dismiss senior staff at the Home Office including ministers for gross misconduct and deny them their pensions.
9. Dismiss staff at SYP in their entirety, both police and administrative staff, for gross misconduct and deny them their pensions.
10. Disband SYP as a force and have another force take over policing of the region.
11. Establish Special Star Tribunals with appointed judges and no juries to try the suspects from the report.
12. Blacklist the above staff from government.

Crown Prosecution Service

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 (DPP). The current DPP 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).

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 South Asian paedophiles (Rochdale and Rotherham) or British Establishment paedophiles (Sir Jimmy Saville) as discussed. You, Sir Keir Starmer, were DPP from 2008 - 2013 which covered the period of time of all three. My understanding is that you were not involved in decisions not to prosecute, a level a buck passing given what I know about you otherwise that surprises even me. 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.

These mean that the decision to prosecute is based on the whims of the CPS and thus the whims of the British

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Establishment. 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 apartheid against autistic people. This also of course means that again the UK is an entirely lawless society, as demonstrated repeatedly in the report. Expecting CPS reforms to succeed where there is no consequences for CPS misconduct and incompetence is simply delusional magical thinking. States which subject citizens to arbitrary prosecutions soon become to be seen as illegitimate, and when states are seen as illegitimate then civil unrest and civil war soon follows as previously discussed.

I have personal experiences with the CPS as discussed in the police section above. I was maliciously prosecuted in 2021 and I am currently being maliciously prosecuted this year twice. The first is for a non-crime and the second the police fabricated the evidence. The CPS are known to simply go along with the police wishes, turning a blind eye to police corruption, even when the prosecution is obviously going to fail or actions amount to crimes against humanity; providing it furthers the British Establishment's agenda.

On the basis of the report:

1. The CPS are persecuting autistic people.
2. The CPS are maintaining and enforcing de facto apartheid on autistic people.
3. The CPS know that autistic people are being harmed and killed but have taken no action to stop it.

The above means that the CPS are complicit in the crimes of the NHS and is otherwise deliberately persecuting and exterminating autistic people. These also amount to the de facto crime of apartheid.

The Hecologist Principles

1. The sensors are personal experiences and bad press. The lack of funding for local and national news, which would investigate CPS misconduct, is hampering the sensor. Laws on defamation in the UK make it difficult to criticise individual police officers; the information is therefore incomplete and thus inaccurate. Other illiberal laws otherwise seek to suppress free speech.
2. The set point is quality of CPS decisions, which includes making the correct decision to prosecute, making the correct decision not to prosecute, stopping prosecutions that later are found out to fail, and of course not maliciously prosecuting citizens. Citizens have no means to directly affect quality of policing with their only choice being to complain to the CPS or take legal action.
3. There's almost no consequences for CPS misconduct and no consequences for incompetence. This means that the actuator has insufficient gain.
4. The actuator linearity is not relevant to the CPS.
5. The actuator relies on complaints, bad press, commissions, panels, inquests, special measures, reforms, legal action, and direct instructions from local and central government to improve quality and efficiency, but these are inefficient and time-consuming, and thus lack latency.
6. The CPS is a near monopoly, except that private prosecutions are permitted in the UK.

Root Cause Analysis of the Reasons for these Failures by the CPS

1. Independence of the CPS is simply a plea to allow them to continue to be grossly incompetent, prejudiced, and biased, whilst allowing them to abuse their powers to protect the British State and the British Establishment, even if it means committing and/or becoming an accessory to crimes against humanity to achieve it.
2. Loss of advertising income for local and national newspapers to investigate CPS corruption and misconducts.
3. CPS culture of abuses of power, prejudice, and bias.
4. Lack of consequence for CPS incompetence.
5. Lack of consequence for CPS misconduct including abuse of powers, and prejudice and bias against certain types of people.

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6. The CPS otherwise lacks diversity as they are the only such organisation.
7. Unwillingness of police to investigate crimes when committed by the CPS.

Recommendations

1. Defamation law needs to be changed such that there needs to be an element of maliciousness with the burden of proof on claimants.
2. Abolish and/or pare-back censorship laws including but not limited to the malicious communications offences including the Online Safety Act 2023 and harassment relating to written communications (or otherwise) under Protection from Harassment Act 1997. Criminal offences should be limited to that which would be criminal if said in person only and to direct and credible threats or direct incitements for violence, and/or where the contact has been frequent to the extreme.
3. Provide public funding to local and national newspapers to investigate criminal justice system misconducts.
4. Discrimination against members of the public by the state or their agents to be made a criminal offence.
5. CPS to be “policed” by the new constitutional force.
6. Dismiss senior staff at the CPS.
7. Dismiss staff at CPS in South Yorkshire in their entirety for gross misconduct and deny them their pensions.
8. Establish Special Star Tribunals with appointed judges and no juries to try the suspects from the report.
9. Blacklist the above staff from government.

Summary and Conclusions

Medicine is doing science wrong resulting in autistic people being medically harmed and killed, which the NHS knows but recklessly does not care. These amount to crimes against humanity in the form of medical torture and medical extermination through recklessness. The British State including the NHS is otherwise deliberately persecuting autistic people, and deliberately deny our access to essential services or providing worse quality services, which are crimes against humanity in the form of deliberate extermination. These also amount to the de facto crime of apartheid. A new political and economic theory termed hecologism is proposed to prevent future harms to autistic people, that will also make the state more effective and efficient. Hecologist Principles are derived and a review of institutions against these Principles is carried out, and recommendations are then made. Free speech to hecologism for example is paramount.

As you and others are aware of these crimes by the British State are being carried out then I shall be seeking resignations of you, all Labour MPs, and relevant others in government, and for a general election to be called. I shall also be seeking your prosecutions, and for the Labour Party, as complicit in crimes against humanity against its own people, proscribed as a terrorist organisation and thus struck of the Electoral Commission register of political parties. I would also like to advise that if you or anyone else seeks to harm other disabled people, including financially, when many of those are only disabled because of the NHS, then they should expect to suffer the same fate as anyone who has harmed autistic people.

I shall also be seeking diplomatic and economic pressure including economic sanctions from the global community until a new non-Labour government has been formed. I shall continue to seek the same until the recommendations have been carried out or harms and deaths of autistic people by the British State otherwise stops. Other countries should advise their autistic citizens not to travel to the UK and if they must to not disclose that they are autistic.

I will not enter into correspondence over this report and any other unsolicited contact by anyone from the British State is also unwelcome and I will consider as witness intimidation and an attempt to pervert the course of justice. I have asked the ICC to use all means at their disposal to protect me from the British State, particularly South Yorkshire Police. I will happily work with your replacement.

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Yours sincerely,

A handwritten signature in blue ink, appearing to read 'DPS', enclosed in a light blue rectangular border.

Mr David Scott BSc CPhys
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