

# Mask-erade

## Introduction

The unprecedented demand, sanctioned by fines, for citizens to wear a facemask, despite zero medical reasons, necessitates examination, ridicule and objection.

For background data on Covid-19 and the lockdown see my papers: *The Evils of the Lockdown* and *The Truth About the Lockdown*. For data on Covid-19 see my papers: *Covid-19 A summary of facts*, *Covid-19: Another pandemic panic* and *Serious Questions About the Lockdown*.

### **The demand**

The government demanded in July 2020 that everyone must wear a facemask in shops or face police action and a fine of £100. It had previously demanded facemasks on public transport and by medical staff.

### *Contradictions*

The police and armed forces are exempt from this demand. [Just as they were for social distancing demands.]

The government has rejected the idea of mandatory facemasks in offices, schools and workplaces. Since there is a greater risk of infection in such places due to the prolonged time present, why are masks required in shops.

### **The reason**

The actual reason is uncertain and government advice in recent months has been contradictory about facemasks; first they were unnecessary then they were mandatory.

The claim is: a) that Covid-19 is a serious pandemic and b) that infection is spread through the air by asymptomatic people, c) that facemasks inhibit the spread of Covid-19 and that it is unsociable to endanger other people by selfishly ignoring a mask. All these are fallacies.

### **Contradictions in government policy**

March: The official line was that the science affirmed that masks don't work. Various newspaper articles explained that they were counter-productive.

3 April: Medical Officer Jonathan Van-Tam in Downing Street said, '*There is no evidence that general wearing of the facemasks by the public who are well affects the spread of the disease*'.

11 May: Government guidance changed to advise the public to wear face coverings in enclosed public spaces.

15 June: Facemasks mandated for public transport.

10 July: Official government advice was to wear a face covering (they avoided saying facemask because they did not want to disrupt PPE supplies to the NHS). Yet Boris Johnson and most of his Cabinet, plus Keir Starmer, had not been seen wearing a facemask at this time. On BBC Radio 4, DCMS Minister Caroline Dinenage couldn't answer why the PM, Chancellor, or any senior Cabinet minister had not been pictured wearing a covering (except Matt Hancock once).

12 July: Michael Gove tells Andrew Marr that facemasks should not be mandatory.

14 July: Matt Hancock tells the Commons that masks will be mandatory in shops with enforcement by the police.

16 July: The Health Secretary said masks must be worn to buy a coffee. Downing Street said they did not need to be worn to buy a coffee.

24 July: Masks mandatory in shops. Refusal to comply results in police action and a fine of £100.

24 July: The chairman of the London Metropolitan Police Force immediately stated that this law would be totally unenforceable.

24 July: The facemasks mandated by the government has packaging where it specifically states that the masks do not protect against coronavirus. It says, '*WARNING: This product is an ear loop mask. This product is not a respirator and will not provide any protection against COVID-19 (coronavirus) or other viruses or contaminants.*'

## Covid-19

I have fully explained Covid-19 in other papers so here I will be brief.

Covid-19 is not a pandemic or anything like one.<sup>1</sup> It is the claimed resulting disease of the SARS-Cov-2 virus, which is a type of coronavirus. Thus it is similar to the common cold and influenza.

No one has yet proved that Covid-19 actually exists or that it has directly killed anyone at all. SARS-Cov-2 seems to trigger existing morbidities, which then kill the patient, and also triggers gamma retroviruses injected into people from the flu vaccine, which cause the worst symptoms.

Neither has anyone yet isolated a Covid-19 antibody – thus all the tests are pointless. A positive test merely proves that you have previously had a coronavirus such as a cold.

The Covid-19 statistics are vastly inflated, as proved by whistleblower doctors. But even these inflated death statistics show that Covid-19 is less deadly than a bad flu season. The Covid-19 pandemic pandemonium has been a gigantic hoax to fulfil a political programme.

### Infection

Covid-19 is officially not a serious disease. I repeat; the official public health England policy is that Covid-19 is not a serious infectious disease. It was formally downgraded on 19 March 2020.

Regarding catching Covid-19 here are the proven facts:<sup>2</sup>

---

<sup>1</sup> For pedants: a pandemic is not simply a disease that occurs in all places. That is a technical and outdated use of the term. If that was what it meant then there are hundreds of pandemic diseases occurring every year. Malaria occurs in multiple countries and kills 4 million every year. TB, pneumonia and Hepatitis B occur globally; Hepatitis B kills 2,430 people every day; Tuberculosis kills 3,014 people every day; Pneumonia kills 2,216 people every day. The Covid-19 death rate was nowhere near such fatalities.

<sup>2</sup> See previous papers for data and sources.

- Children are virtually exempt from the disease, or experience very mild symptoms. [Children that died in the epidemic had other co-morbidities.]
- Most healthy people only experience mild symptoms or barely notice it. 80% of hospital Covid-19 patients recover well.
- You cannot catch the virus from touching surfaces.
- It is not easily transmissible in the open air.
- It is quickly killed off by sunshine and heat.
- Asymptomatic people do not pass on the infection. If you are not showing symptoms (e.g. coughing, fever) you are no danger.
- You are most at risk if you have had a flu vaccine.
- Your risk is increased if you are in hospital. (44% of cases start in a hospital).
- Your risk is increased if you have a suppressed or weakened immune system. Thus many older people are more at risk.
- Covid-19 is mostly spread through prolonged contact indoors. This means that (where masks are mandated) they should principally be worn indoors in offices, soldiers' barracks, schools, pubs, police stations and restaurants – yet these are all exempt from the current regulation. It also means that masks are pointless in outdoor situations or in brief encounters, such as in shops. Yet masks are mandated in shops. The government policy is the reverse of common sense.

This information means that social distancing and facemasks are unnecessary and pointless. The only cases where facemasks are appropriate are those who have virus symptoms and are in public spaces because this would help prevent the spread of sputum droplets from coughs and sneezes. However, symptomatic people should not be in public spaces.

## Viruses

Viruses are submicroscopic and hundreds of times smaller than a bacterium. Consequently, most viruses can only be seen with an electron microscope.

Most viruses vary in diameter from 20 nanometres<sup>3</sup> (nm; 0.0000008 inch) to 250-400 nm.

Encyclopaedia Britannica.

Bacterial cells are ... typically 0.5-5.0 micrometres.<sup>4</sup>

Wikipedia.

Most viruses are, therefore, nearly a thousand times smaller than a bacterium.

This means that masks are completely pointless because they pass through the cotton layers of most masks with ease (see later).

Social distancing is also pointless since virus particles emitted by an infected person would fill the atmosphere of any place when they breathed out. Nothing would stop the spread of the virus particles in the air; not Perspex shields, facemasks or visors. Physical barriers are pointless because viruses are so small.

---

<sup>3</sup> One thousand millionth of a metre.

<sup>4</sup> One millionth of a metre.

SARS-Cov-2 belongs to the family of coronaviruses, like the common cold or influenza.

### **Coronavirus transmission**

Scientists have debated for 100 years how transmissible coronaviruses, like the flu, are in the air. Some preferred the droplet theory: heavy droplets fell to the ground but light droplets travelled several feet and contaminated other people. Some have suggested that coronaviruses can travel 20 feet, so social distancing of one metre is pointless.

However, this theory is outdated and other theories based upon a complex science of aerosols is more fashionable today. But the point is that medics do not really know the answer.

## **Problems with facemasks<sup>5</sup>**

### **Filtration**

People are wearing scarves, bandannas and poor filtration cloth masks which are utterly useless.

One study showed that 20 types of cloth facemask varied in pore size from 80 to 500 nanometres.<sup>6</sup> This is significantly larger than particulate matter with a diameter of 10 nanometres or less and most viruses that can be as small as 20 nanometres. In short, they are of no use in stopping most virus penetration.

Most facemasks are loose-fitting. This allows infected air to get around the mask anyway.

Masks provide no protection from viruses infecting the body through the ears and eyes.

### **Washing**

There are various studies showing that washing cloth facemasks reduces their effectiveness by at least 20%. Stretching the surface also affects pore size and washing reduces the number of microfibrils within the pores.

### **Increased infections**

Studies have shown that wearing facemasks results in an increased rate of infection when used by medics.<sup>7</sup>

### **Weakened immune system**

Many medics have warned that decreasing oxygen, re-breathing CO<sub>2</sub> and increasing secretions will all contribute to damaging the immune system, making a person more at risk of infection.

---

<sup>5</sup> I am indebted to many sources here, including *Mercola.com*, *Technocracy*, *Oxford Medical Dictionary* and others.

<sup>6</sup> *PeerJ*, Bhanu Bakta Neupane et.al., 'Optical microscopic study of surface morphology and filtering efficiency of face masks', 2019, 7, e7142.

<sup>7</sup> *BMJ Open*, Chandini R Macintyre et. al. 'Covid-19, shortages of masks and the use of cloth masks as a last resort', 30 March 2020. 'The study found that cloth mask wearers had higher rates of infection than even the standard practice control group of health workers, and the filtration provided by cloth masks was poor compared to surgical masks'.

## Flow

Masks with an outlet valve are effective but cloth masks with no outlet valve create intense back and downward flow – which creates a health hazard for the wearer from a build up of the virus.

## Headaches

An Asian study found that health care workers using masks were much more likely to complain about headaches than those that did not.<sup>8</sup> Another study<sup>9</sup> showed that of medics who suffered from headaches, 91.3% stated that PPE usage affected the control of their background headaches and their work performance. It is thought that these headaches were brought on by reduced oxygen levels and increased CO<sub>2</sub> intake.

A 2006 study of health care workers using an N95 facemask<sup>10</sup> showed that 37.3% of respondents reported facemask-associated headaches and 32.9% said this happened more than six times a month. 59.5% took analgesics for headache pain. The study recommended reducing the hours that staff wore facemasks.

## Nasal function

Facemasks make it more difficult to breathe after the mask was removed.<sup>11</sup>

## Reduced oxygen saturation

A Turkish study<sup>12</sup> investigating the oxygen saturation of surgeons using a facemask found a decrease in oxygen saturation and an increase in pulse rate. Surgeons over 35 had a worse rate.

## Increased CO<sub>2</sub> intake

It is obvious that facemasks will increase the levels of Carbon Dioxide in the lungs by re-breathing exhaled air.

## Neurological infections via the nose

It is conceivable that wearing a mask reintroduces exhaled viruses deep into the nasal cavity driving the viruses into the upper respiratory tract and increasing the potential to enter the olfactory nerves and travel into the brain.<sup>13</sup>

## Re-use

The re-use of facemasks creates additional risk of disease. Even touching the front of your mask after several hours of use could contaminate the fingers.

People that remove a mask to eat food in a restaurant, drink a pint or smoke a cigarette will be touching a build up of toxins present on the mask surface and then will later touch their face (especially when smoking), their cutlery or their glass. This increases your chances of infection.

Many people, especially children, put their mask into their pocket in order to do something (such as take a selfie) and then put the mask back on their face. This is incredibly stupid as pockets carry a host of infectious things.

---

<sup>8</sup> *American Journal of Infection Control*, 2009; 37 (5).

<sup>9</sup> *Headache*, 2020; doi.org/10.111/head.13811

<sup>10</sup> *Acta Neurologica Scandinavica*, 2006; 11(3):199.

<sup>11</sup> *Journal of Lung, Pulmonary and Respiratory Research*, 2014;1(4).

<sup>12</sup> *Neurocinugia* 2008, 19;121.

<sup>13</sup> *Technocracy*, 11 May 2020. *Virology*, 1989;170(2).

## Quotes

[Facemasks] fail to protect the healthy from getting sick, but they also create serious health risks to the wearer. The bottom line is that if you are not sick, you should not wear a facemask. ... When a person has TB we have them wear a mask, not the entire community of noninfected.

... There is another danger to wearing these masks on a daily basis, especially if worn for several hours. When a person is infected with a respiratory virus, they will expel some of the virus with each breath. If they are wearing a mask, especially an N95 mask or other tightly fitting mask, they will be constantly re-breathing the viruses, raising the concentration of the virus in the lungs and the nasal passages. We know that people who have the worst reactions to the coronavirus have the highest concentrations of the virus early on.

Dr Russell Blaylock<sup>14</sup>

We know that wearing a mask outside health care facilities offers little, if any, protection from infection. Public health authorities define a significant exposure to Covid-19 as face-to-face contact within six feet with a patient with symptomatic Covid-19 that is sustained for at least a few minutes. The chances of catching Covid-19 from a passing interaction in a public space is therefore minimal. In many cases, the desire for widespread masking is a reflexive reaction to anxiety over the pandemic.

New England Journal of Medicine.<sup>15</sup>

Facemasks should be used only by individuals who have symptoms of respiratory infection such as coughing, sneezing, or in some cases, fever. [and by health care workers] ... Facemasks should not be worn by healthy individuals to protect themselves from acquiring respiratory infection because there is no evidence to suggest that face masks worn by healthy individuals are effective in preventing people from becoming ill.

JAMA.<sup>16</sup>

This study is the first RCT of cloth masks, and the results caution against the use of cloth masks. This is an important finding to inform occupational health and safety. Moisture retention, reuse of cloth masks and poor filtration may result in increased risk of infection.<sup>17</sup>

BMJ.

If you do not have any respiratory symptoms such as fever, cough or runny nose, you do not need to wear a mask'.<sup>18</sup>

WHO.

The use of a mask alone is insufficient to provide the adequate level of protection.<sup>19</sup>

WHO.

[A surgical mask] does not provide the wearer with a reliable level of protection from inhaling smaller airborne particles and is not recognised respiratory protection.

CDC.

---

<sup>14</sup> *Technocracy*, 11 May 2020.

<sup>15</sup> *New England Journal of Medicine*, 21 May 2020.

<sup>16</sup> *Journal of the American Medical Association*, Angel N Desai et.al., 'Medical Masks', 4 March 2020.

<sup>17</sup> BMJ, 'A cluster randomised trial of cloth masks compared with medical masks in healthcare workers', (2015).

<sup>18</sup> Dr April Butler, WHO video (March 2020).

<sup>19</sup> WHO, 'Advice on the use of masks ....', 29 January 2020.

A top infectious disease expert and the Ministry of Health have said that the public should not rely on N95 masks [which are better than cloth facemasks PF.] to guard against the Wuhan virus.

National Centre for Infectious Diseases.<sup>20</sup>

Stop buying masks! They are not effective in preventing general public from catching coronavirus.

US Surgeon General, Jerome Adams.<sup>21</sup>

We don't routinely recommend the use of face masks by the public to prevent respiratory illness.<sup>22</sup>

National Centre for Immunisation and Respiratory Diseases.

The evidence from ... laboratory filtration studies suggest that such fabric masks may reduce the transmission of larger respiratory droplets. There is little evidence regarding the transmission of small aerosolised particulates of the size potentially exhaled by a asymptomatic or presymptomatic individuals with Covid-19.<sup>23</sup>

National Academies of Sciences Rapid Expert Consolation.

## The Reaction

### Shops

Lidl have confirmed that they will not be stopping entry or accosting anyone without a facemask.

### Dentists

Yesterday I went to the dentist. I was kept at the door until I was examined, tested for temperature, hand sanitised and told to wear a mask. I refused the mask. The bewildered young receptionist told me to wait and fetched the general manager. When she came I refused and told her the masks were pointless and damaging to her own health (staff have to wear them all day long). I would not wear one and damage my health. She said she agreed with me and let me in.

### The police

The Met police chairman (see earlier) has formally stated that the policy is unenforceable. Local police officers have stated (anecdotally) that they are not going to get involved in policing masks. There are not enough officers and they are overwhelmed with an increase in mental health cases and domestic abuse calls due to the lockdown.

### The Media

Even mainstream media commentators have stated that facemasks are useless:

The only coverings the Government is insisting on are cloth ones, which every man and his dog knows are COMPLETELY USELESS.

Toby Young.<sup>24</sup>

---

<sup>20</sup> NCID, A8 Top of the News, 'Opt for surgical masks over N95 masks for protection: Experts',

<sup>21</sup> Twitter, 29 February 2020.

<sup>22</sup> National Centre for Immunisation and Respiratory Diseases, Dr Nancy Messonnier, 30 January 2020.

<sup>23</sup> National Academies of Sciences Rapid Expert Consolation, NAS 2020. Quoted in University of Minnesota, CIDRAP, 'Commentary: Masks-for-all for Covid-19 not based on sound data', 1 April 2020.

<sup>24</sup> *Lockdown Sceptics*, Latest News, Toby Young, 17 July 2020.

Anything other than tight-fitting, surgical-grade masks are utterly pointless – like trying to stop a bullet with a chain-link fence.

Allison Pearson.<sup>25</sup>

US health officials say Americans shouldn't wear face masks to prevent coronavirus.<sup>26</sup>

Market Watch.

## What is really going on?

The current situation is a long-planned exercise in social control. Bill Gates even ran a simulation of what is going on weeks before the 'pandemic' began last autumn.

The global elite have long term goals for mankind which have been in preparation for hundreds of years. These are coming to fruition and 2020 was designated as a time for a global reset as many commentators warned in recent years. The fulness of this programme will be in the UN's Agenda 2030 sustainable development programme, which incorporates totalitarian control of the whole world.

### Oppression

Demanding facemasks for no scientific reason is a form of totalitarian oppression. This is a fact that cannot be denied and it is an unprecedented leap by a British government that infringes the rights of free citizens. It is astonishing that a Conservative government has brought in this policy.

The excuse for this oppression has been creating mass hysteria and fear about a non-existent pandemic so that the public eagerly obey stupid regulations and embrace their own oppression.

Fear has historically been the most effective way to manipulate a population. Through creating the right scare, the elite can get the public to embrace their own prison by deception.

This deception is satanic in origin and Jesus warned us that the end would be a time of massive deception. That deception is not limited to dogmatic heresies but also political control. Note that shops, pubs and restaurants are now open but churches are still closed. MPs can mingle and drink at the Speaker's Bar but lonely, isolated Christians cannot fellowship together.

### Compliance testing

One of the features of this demand is compliance testing to see how far the elite can push society before an open rebellion begins. So far this year the public has been utterly fooled by scaremongering and has totally complied with every stupid demand of a draconian government. This means that further draconian measures will be introduced until the limit is reached.

### The next step?

This will likely be mandatory vaccines, as implied by recent statements of Matt Hancock (Secretary of State for Health) and as predicted by Bill Gates.

---

<sup>25</sup> *The Telegraph*, Allison Pearson, 'Compulsory face masks are proof the British bulldog has become the scaredy-cat of Europe', 14 July 2020.

<sup>26</sup> *Market Watch*, 2 March 2020.



This has long been a goal of the elite who seek to introduce all sorts of toxins in vaccines to everyone, along with biomarkers for ID and data control purposes (see earlier papers and my paper on Bill Gates).<sup>27</sup>

I have previously explained that a real vaccine for SARS-Cov-2 is likely to be impossible and certainly a safe vaccine could not be developed within ten years. In any case the immune system is the best way to defeat any virus and herd immunity is the best social policy, as proved by Sweden which defeated the virus with no lockdown and no enforced social distancing.

The reason for this push for vaccines is that the elite are eugenicists who wish to cull the world's population by at least 90%.<sup>28</sup> As Gates has openly said, vaccines are a good way to do this.

## Accumulated facts

Covid-19 is officially not a serious infectious disease.

Covid-19 has not been scientifically proven to exist<sup>29</sup> and no one has yet isolated a Covid-19 antibody. Testing is pointless and merely proves a previous coronavirus infection, such as a cold.

SARS-Cov-2 is not transmissible from touching surfaces.

SARS-Cov-2 is not easily transmissible in the outdoors.

SARS-Cov-2 is mostly likely transmissible in prolonged exposure indoors.

SARS-Cov-2 is not inhibited by social distancing or a facemask because it is a virus, which is smaller than the filters of the fabric.

Social distancing and facemasks are pointless.

Healthy people should not wear facemasks. They offer no protection against a virus but they do cause various health problems. Wearing a facemask will increase your risk of ill-health.

## Conclusion

Mandatory facemasks are another step in the draconian implementation of a totalitarian agenda where nations are in lock-step with the perverse demands of the elite, expressed in agents like Bill Gates and Anthony Fauci. It is significant that there are growing calls for both these people to be prosecuted for crimes against humanity.

The government tells us that facemasks are a necessary precaution to be good citizens and help prevent disease. In fact, healthy people wearing facemasks will increase disease and make healthy people suffer and be more at risk of infection.

---

<sup>27</sup> For example Gates' vaccines have killed and injured hundreds of thousands of children in Africa and India and have sterilised many girls without their consent.

<sup>28</sup> See my paper, 'The Depths of Deception'.

<sup>29</sup> SARS-Cov-2 seems to trigger other diseases and gamma retroviruses gained by the flu vaccine.

Just as the lockdown worsened the epidemic and killed people unnecessarily, mandatory facemasks will damage the British people physically and psychologically. Worse, they are another step to deceive people into becoming more slave-like. This is totalitarianism run amok.

I have already, and will continue to refuse to wear a facemask.<sup>30</sup>

By whom a person is overcome, by him also he is brought into bondage. 2 Pt 2:19

Scripture quotations are from The New King James Version  
© Thomas Nelson 1982

**Paul Fahy Copyright © 2020**  
**Understanding Ministries**  
<http://www.understanding-ministries.com>

---

<sup>30</sup> Regarding 1 Pt 2:13, 'submit yourselves to every ordinance of man for the Lord's sake', this does not include laws and customs which deny God's law or bring us into subjection to men based on godless and unrighteous falsities. We are subject to God alone and only give submission to rulers as they are also subject to God. It is our duty to reject laws which contradict God or force us into communion with satanic strategies. Thus we pay our taxes to Caesar but refuse to worship Caesar.