

- 1) Opinion document with
- 2) separately protocol proposal

Corona COVID-19, April 2020

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5

S Sophisticated

H Healthy

I Intelligent

E Ending

10 **L** Limit

D Disease-escalation(s)



See phase 3 in this protocol as measures that the world can best implement today in the current situation of COVID-19 outbreak, April

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Introduction

40 I am Leo Regeer, Dutch nationality and 69 years old. I have worked in healthcare for 20 years with a broad nursing education in all fields of healthcare, management and education. I followed various educations and actually studied my half life in one way or another (part-time). I worked as a nurse in practice, as an (interim) manager of institutions and at national (national) level in all kinds of advisory committees. Then I became a nurse entrepreneur in 1991 and I founded LEO Management Aggression Prevention with specific expertise in the field of safety, aggression and violence prevention. During 45 these entrepreneurial years I have trained many trainers and course participants, it is estimated that about 60,000 students took part in my education and training, which are still taking place today.

All in all, I have almost 50 years of work and practical experience and I am still somewhat active in my training institute. In the 90s I developed the Radar Method Regeer®, a scientifically valid and reliable grand theory, which is still widely and internationally applied today, in parts or in full, with or without 50 the same name (s).

I am known for my own way of forming opinions and critics (including friends and family) often say that "you always think you know better". I care about that and I am the last to deny that nobody is perfect and that I am certainly not infallible. I live "out of the box thinking" and don't walk "the standard tracks", both professionally and personally. Having said that, it has to be said that most of the issues I 55 raise are indeed a source of truth and that many elements of it will usually may come true in the near future.

Somehow, without claiming that I can predict the future, by no means, nevertheless I have a natural gift to think very process-wise and to place events in the right context, and then visualize what may develop.

60 Over the past few months, I have become increasingly aware that I see situations coming that others do not see. Furthermore, I also strongly believe that "the world" and "leaders and experts" are currently making wrong decisions about current situations with all the consequences that entails.

This feeling and the fact that I find it useful to describe my thoughts makes that I have decided to write this recording piece, also resulting in a 2nd document with a proposal protocol SHIELD, the name I came up with for this. Explicitly, this is my opinion and nothing else, the reader can take note of it and form his 65 own opinion and perhaps my "Opinion document" can contribute to a wider discussion. I would also like to expressly state that I am certainly not an expert in the field of virology, politics or economics, nor that I pretend a certain scientific level.

I want to have my opinion contribute modestly in any discussions; my opinion is based on my practical and theoretical knowledge as well as on my work and life experience.

70 I describe my opinion based on the principles Radar Method Regeer®:

Detailed Analysis: Descriptions of

- Underlying philosophy, # current situations and observations, * distinction between internal and external risk factors

- Diagnosis of the situation

75 • Description of the desired - and expected results

- Recommendations for Interventions with regard to risk factors and process

- Future expectations after the situation

The developments of COVID-19

80 The virus epidemic in China became known on December 27, 2019. The world watched, the World Health Organization (WHO) got involved in the situation on January 3, 2020, and the first WHO advice was issued on January 30, 2020: epidemic of unknown virus and large size in China, WHO soon went about to identify the epidemic in the country (China) as a major health risk to the world. The advice meant that the world should cooperate in the fight against the virus, but that China should not be isolated, free movement of persons and trade flows should not be interrupted. China needs help, but
85 China, partly due to its own political situation in the country, initially “kept the boat off”. The world was still watching, but all kinds of China "jokes" and discrimination of Chinese citizens arose all over the world.

90 In January, all countries in the world considered the event a "far from my bed show". Also in my country, the Netherlands, the opinion was officially proclaimed that this COVID 19 virus (virus now has a name) probably could not come in the Netherlands, at least the chance was considered very small.

Although the Corona virus soon appeared in neighbouring Asian countries, the rest of the world remained passive, and more was discussed in January at the most. In this month, passenger transport to and from China will be very carefully limited, scheduled flights will be scrapped, but economic interests still play a major role.

95 **As for my opinion, the world should have start in January already with prevention actions.**

In February comes the turning point, the Corona virus “landed” in the Arab states and in Europe, especially Italy and then the other southern European countries and in the course of March the distribution will follow in many countries on all continents in the world .

100 Where China took giant measures in January this year and restricted half the population, some 750 million Chinese, in their freedom by locking cities with millions of inhabitants, the rest of the world still largely watched and waited until end of February/March with more measures..

105 Then panic in the last weeks and copy all the Chinese measures. Everyone has seen the images in China; face masks on the street, protective clothing, cleaning the streets, etc ... Unreal ... The images people recognize from the terrifying Hollywood movies about people turning into zombies, deadly viruses, conspiracy theories about secret laboratories, end of the world theories, etc, etc. Suddenly, these kinds of movies relived a revival in millions of downloads and streams around the world. Partly due to the inadequate information / poor communication from the respective governments in many countries, Worldwide: **Fear and panic outbreak!!!**

The World Health Organization (WHO) context

110 The WHO is the international policy body that monitors the world health care situation. Similarly, the WHO has given this unknown virus the name COVID-19 and they disseminate information about the developments of all countries.

115 From my own work experiences In the 90s I got to know the WHO. We then worked on nurse diagnostics, a new area with classification systems. To get a classification system internationally approved, you need the WHO. There, matters are internationally coordinated with all kinds of professional groups, such as the DSM (Diagnostic Manual of Mental Disorders), the ICD (International Code of Diseases) and thus also new nursing classifications and much more. My experience in the WHO (local branches) was that many matters are very closely linked to all kinds of political and pharmaceutical industry interests. When a “new” disease / syndrome was called for to be included in a classification, it soon became clear how much money was involved for new medicine, what political considerations had to be made for certain

120 countries, and so on. My personal opinion is based on this, namely that the WHO is not an objective body, but may depend on political and pharmaceutical interests. For example, the term “pandemic” is poorly defined; the times when certain WHO statements such as pandemic proclamations are issued in my opinion are more determined by loudly screaming political “leaders” than by expertise in the WHO itself. Taiwan is rightly complaining about the fact, that Taiwan is not taken seriously but is considered the same country with China. That political choice does not do justice to the country where the epidemic is successfully managed without lock downs and open schools and that data is not released! In my view, communications from the WHO regarding the development of future Corona medicines and vaccines cannot be entirely separated from the financial interests of the pharmaceutical industry. (The Netherlands has a SARS example of that time with an “expert with a double cap”)

Covid - 19 in perspective

130 The WHO is of course a world institution that has certain expertise and also keeps statistics of the total number of victims in the world per year. These figure statistics are determined afterwards, The most recent statistic I can find (WHO published in 2018) is the year 2016 with the top ten diseases:

In the single year 2016, **56.9 million** people worldwide were killed by all kinds of diseases, but also road deaths and so on. So an average of 4.7 million deaths per month in the world

see www.who.int/news-room/fact-sheets Here the reader can find all specific causes of death

140 These numbers are not calculated until years later, but luckily for humans, imagine that we are bombarded daily with these statistics of millions of deaths per month ... people would live entirely on their fears, and fear is a bad advisor and does not make you happy. Every person who dies is a personal drama as well as for the relatives, but..... These shocking annual figures do put the Corona figures of victims in a broader perspective today...

State of COVID-19 on April 6, 2020 worldwide: 1.2 million infections registered

145 (January to March 2020 = 3 months more or less) and 69,000 COVID-19 fatalities

If these figures are correct, then the COVID-19 virus has an average of 6% fatalities in the number of people who actually fall ill, which is about two to three times higher percent rate than with "normal flu" (2 to 4%) . But in the context of the annual figures for how many people die from diseases per year, it is "only" an increase of less than 0.5% with a new disease in the total number of "standard" diseases per year! It is just how one looks at the numbers: the largest numbers of people who get infected with the COVID-19 virus are not tested and are therefore unknown and not included in the total figures. More than 90% of the number of registered COVID-19 infections does not become seriously ill. In other words, there is a great deal of uncertainty regarding all the data as to what the actual situation may be.....

155 It should be noted that there are large regional differences, such as in Northern Italy (high number) and Southern Italy (low number), New York (high) California (low) and so on more areas. The risk factors such as large groups of people too close to each other, the degree of hygiene, the close family living relationships, but also the outside temperatures and the degree of relationship to relative humidity in the relevant period, can play a role here. (statistics Maurice de Hond, NL)

160 Suppose in a worse scenario the numbers rise for the rest of this year ... then COVID-19 will never make as many victims as there are normally millions of victims of "normal" causes of death every month.

Let's face it: every person who becomes seriously ill with COVID-19 virus with 2 to 3 weeks intensive admission in hospital with ventilation, that is serious and drastic. Any person who may or may not die prematurely from the disease is a tragedy for the person and those directly involved, and no one wants that.

165 But looking at the percentages in relation to deaths worldwide from "normal causes of death",

4.7 million deaths per month compared to 25,000 deaths COVID-19 per month worldwide so far, then COVID- 19 virus in itself normally not worth a crisis. The special circumstances, the totally unexpected situation, too late acceptance, no prevention in time, political conflicts of interest, insufficient IC

170 capacity, too massive hospital admission demand, no preparation at all worldwide and finally the massive engendered fear and panic among humanity have led to the proclaiming an (in my opinion) unjustified world crisis.

It is a hard lesson for humanity to be learned.

Philosophy and Acceptance

Let me briefly share my philosophy on life with the reader.

175 In all the education that I provide for years on the theme of aggression, everyone expects that we will resolve aggression after training. That is Utopia!

As long as people exist, people will be in communication / interaction with each other and in that interaction there is always a chance that things will go wrong and aggression will arise.

180 If a Corona virus develops, it is expected that the measures taken will make the virus disappear. That is Utopia!

As long as people exist, people will be in communication / interaction with each other and in that interaction there is always a chance that people will apply measures in their own way, so that it goes wrong and the virus does not disappear.

185 My philosophy comes mainly from my personal view of human behavior and aggression. One of the most important concepts that has always intrigued me from childhood is

"The concept of acceptance".

190 I am a non-religious person, my opinion is that religion has been invented by humans through all ages and its sole purpose is that religion provides power over people. Almost all wars in the past and present usually arise from these motives. Violence and therefore wars are the search for meaning, people are sent to war intentionally, consciously and seriously, and then behave like animals, the right of the strongest. Every war has only losers and causes completely senseless victims.

195 I believe in the power of nature, planet earth. With natural disasters, changes in the planet and much more, we can only experience and accept the forces of nature, after that acceptance we can try to deal with it as well as possible. I therefore also consider this Corona epidemic to be a natural phenomenon. Perhaps we play a role in it: Hygiene is an important aspect, now we humans are not very hygienic about the planet earth. But we must learn to accept this phenomenon!

"Look deep into nature and then you will understand everything better" quote of Albert Einstein

We are a creature from nature, connected to all other creatures, plants and organisms. Human being is still an animal being and differs from animals only in that human can think and learn, develop a

200 conscience. There are only two guarantees in life: you are born and you die. Any other guarantee does not exist in human life! Death makes sense, death gives you meaning to your life. Everyone gives his or her life meaning in his own and unique way. Human lives life from 4 dimensions: Physical, Psychic-Social-Emotional-Spiritual. Everyone fills in their own way, what he / she considers to be physically healthy, psychologically which norms and values are chosen, how socially emotional feelings are expressed and
205 spiritually in which he / she believes in which God or not, which Guru or like me in the force of nature. People have to respect each other for that, which means that you accept the choice of another person and that you let the other live in his human value. The moment humans are threatened on one or more of these dimensions, one becomes out of balance. Then these threats can lead to fear, panic, becoming unbalanced and..... people become more susceptible to illness. I am firmly convinced that diseases,
210 cancer, depression, all sickness etc. have everything to do with the influence of all four of these dimensions. The way people deal with the Corona epidemic NOW causes so much fear and panic, that people become more comprehensible to get sick!

From this philosophy, I consider the emergence of organisms such as a virus as part of nature. That is why I do not panic, because I am (only a small) part of that grotesque nature. The question "why" is a
215 pointless question, but what happens, what are the consequences and how can we best deal with them, those are the most relevant questions. And most importantly, after this event is over, what can we do to learn to deal with it in different and perhaps better way in the future in comparable situations?

Or: WHAT have we learned? LESSONS TO BE LEARNED

220 Accepting situations is the most difficult act for people in life. And yet ... accepting is the best starting point to learn to deal with difficult situations. Even many scientific studies often assume one or more accepted assumption (s), without properly examining that assumption (s) and in particular their acceptability.

In my training and lectures I have always given the following two reflections to people:

- 225 1. Only when the person becomes ill does he / she realize what health means, the moment the person accepts the disease, the way is cleared for recovery to health.....
2. The dying person can only say goodbye to loved ones and die peacefully from the moment he / she can accept death.....

230 In recent months we have experienced exactly what the results are if we do not learn to accept a difficult situation at the right time and too late. Acceptance requires a professional and thorough analysis, but even if this analysis is available, acceptance is not yet taken for granted.

There should be a process to:

- find the correct words of the objective facts based on the analysis (say what you mean)

- - develop objective criteria for the required action
- Based on those criteria make professional communication
- 235 - Based on the same criteria make a professional approach to deal with the situation
- Evaluate the results afterwards based on the objective criteria

In the current situation, this would mean that all countries in the world should follow the same procedure to handle the COVID-19 in the best way and protect as many people as possible.....
UTOPIA? Yes for this time now, impossible, but perhaps it is not too late to make a joint restart at this
240 later stage of the Corona epidemic?

About the political leaders & the media context

The past few months have made it very clear that solidarity of world leaders with all different countries is hard to find. After the population in most countries was not yet scared in January and expressing discriminatory expressions and inappropriate humour towards the Chinese population, panic spread in
245 February and in March several solidarity actions of populations in home isolation per country became visible. Solidarity is still hard to find with various heads of government of the countries of the world. Many, but not all, world leaders contradict themselves (some even daily), blame other countries and each other by "finger pointing", make conflicts with local administrators, make unsubstantiated statements such as "deadly" virus, "Chinese" virus, and in countries where democracy is less developed,
250 leaders abuse the situation to allocate all kinds of absolute powers for more power to themselves. Terrifying war comparisons are made by political leaders and certain media alike: We fight the invisible enemy, we must win this war, we must defeat the deadly virus, etc, etc. It stems from the Medical Model thinking, which I have always been and still oppose. I think you should speak of treating the disease and dealing with the consequences of the disease. The language of war that has been used in
255 the medical world for years makes people even more afraid than they already are for their own illness and brings people even more out of balance. When media and political leaders who start to speak the same nonsense to the entire population, people are panicked and that is what you must prevent as sensible leaders and media. COVID-19 is by no means a "deadly" virus, it is not invisible and it cannot be forcibly eliminated by force or violence. See also page 7 / paragraph 175 and page 5 / paragraph 135.

260 And then all the daily and weekly press conferences of central and local politicians ... to show how much they suddenly do for the population and how good they are? ... To their own glory for the upcoming elections? Communication from the leadership of a country should be systematic, communication experts should be advised which information and how information is provided at what times ... in the same way, press releases can be published in the same way, in short Ladies and gentlemen
265 politicians, it is not necessary to show yourself to the people on a daily basis, to respond to all kinds of topics of the (competing) politicians, it only brings unwanted unrest among your population ... if people

have questions, also politicians lead by example by answering all the questions of the people in peace through working from home and the internet....

270 Real leaders are expected to implement the best possible measures that can protect their people and be a beacon of solid reliability, reassurance and thus peace of mind.

Hazing and aging in the world now becomes painfully extra clear.

275 In the 1980's I was active at national level (NL) in all kinds of committees. I remember my participation in various reports; my favourite was Prof. Dr. Hattinga Verschure. This professor, who introduced the concept of "informal volunteers Care", issued another advisory report to the government:

280 "Choices in Healthcare", in short, it was advised that the aging of the population would in the near future necessitate the right balance between cure and care, or we all want to grow older at all costs or can we also see how we set limits there and can bear the costs of care for an increasingly large group of elderly people? Well, successive governments have little done with that. And now it suddenly becomes very clear, those choices we have to make.

285 The largest number of victims under COVID-19 are in the highest risk group of 70+ year-olds, but this is not special for COVID-19, because more than half of fatal diseases worldwide are also 70 years or older! It goes without saying that the greater the number of older peoples in the world, the greater the risk of dying in old age. In the Italian situation, great respect for the elderly, so everyone was admitted to ICU, until the capacity was no longer available and several younger COVID-19 patients were no longer given a place and became victims. In the Netherlands we do have discussions with the elderly and a number of elderly people indicate, I have led my beautiful life, I don't like to suffer for 2 to 3 weeks in Intensive care, no just leave me at home in home isolation and I prefer to hand over my IC place to a younger person. ... I am pleased to read the recently (on Dutch television) interview with philosopher and doctor 290 Marli Huijter, she follows the same thinking trend.

----- She indicates that you want to save everyone in times like this, but she also asks the question, is it worth it to older people of say 80 years, in their last phase of life and give them another five years? No matter how much it costs? The higher the life expectancy, the higher the mortality rates will be if a virus like corona breaks out. This poses a very difficult moral dilemma: you actually want to save 295 everyone, but you know that it costs so much that the generation below will lose out on quality of life. "

And perhaps in the long run also on quantity, the number of years of life, she says. "That is a problem that is now becoming visible. We cannot solve it now in this crisis, but we really have to think about it in the long term. Would we actually want to be immortal? Nobody wants that in the end." --- ----- says Marli Huyter

300 Please see <https://ourworldindata.org/births-and-deaths>

World birth rate from 1950 - 2015 total 141 million births, Including over 60 million births in the Asian continent.

Projection of expected world birth rate to decline towards the end of the 21st century.

305 **56 million people die each year, more than half of those killed are aged 70 or over, the projection of expected world mortality rate will increase until the end of the 21st century.**

The hazing also becomes painfully clear, what I mean by this is that an ever smaller group of young people have to work to help maintain an increasingly larger group of older people. Hopefully people will now become more aware that choices must also be made here.

310 During this COVID-19 situation you will see the dire shortage of nurses, doctors and other medical personnel, the 'heroes of the front line' all over the western world are clearly overloaded and hands are short, so that even the ex-colleagues must be called to assist.

There are still parts of the world where relatively many more young people are present and are born. So , I've been calling that for years, the Western world really needs young immigrants to help get the job done and keep the world economy running for what's left of it right now!

315 **Which result is desired and what is the expected result?**

The desired result Absolute safety is always an utopia, even in this COVID-19 outbreak.

If a danger for people suddenly appear the desired result is of course simple: take measures that completely eliminate / stop the danger. Well, that is impossible.

320 After the acceptance process, the more meaningful consideration always follows: which best possible result can be expected in this situation? That is why accepting the situation here, now and for the foreseeable future should be the most important elementary process, to avoid wrong, over-committed actions and actions that one will regret! The author is of the opinion that here the world has gone awry with many wrong decisions at wrong moments in the situation.

325 In any situation, it is recommended to determine in advance what the best expected outcome can be and only then to start interventions ---

330 In my opinion, the best course of action is to collect as much data as possible at an early stage in order to assess which are the best criteria for developing an action plan to reduce the hazard. see page 8 and page 9. Reasoning from my Radar Method Regeer®, the best prevention is at green level, namely the danger is not yet present, but there are signs that there may be danger (January outbreak in China). So start in phase green with analysis, which communication and which preparations, light measures such as

no shaking hands and less necessary trips can already be taken. If the first signals come that the danger is now present at level yellow, then based on the analysis and action plan present, further measures will be implemented, alternatives in people's behaviour, such as no physical contact with others and two arm lengths away, etc. If there is a greater danger then, the orange level, contamination and / or many victims (based on figures in already predetermined criteria), limiting measures can be taken.

Here we come to a crucial point.

The area of setting boundaries or, in other words, setting limits, not escalating them and the like, is a special phenomenon. Namely the intervention: "setting limits" listens very closely to the moment when that limit is set to prevent greater risks. What I learned in aggression practice:

If the limit is set at the wrong time and in the wrong situation, then that wrong decision is a great risk for the escalation of the danger!

When we look at the current situation in which many countries have a complete lock down, i.e. locking people in social isolation, usually too late or too early and far too long:

I am strongly against the "full lock down" intervention, which is being published a while beforehand so that people can prepare. The result is panic, massive shopping (without social distance) shopping / hoarding / shortage of supplies, large groups come or travel together, the poor and the deprived suffer from hunger, (see as an extreme example the country INDIA) ... in short, everything happens what a total lockdown should prevent ... In my opinion, calling out a total lockdown in this situation is evoking an increased risk of virus infection, which translates into higher numbers of cases after lockdown!

..... And further disadvantages:

- 1) Social isolation is very dangerous for people, even for a short period of time, but the longer that lasts, the greater the risk that people are affected in their 4 dimensions of existence and can get sick in all kinds of areas, and we are not talking about corona virus infection. In addition, people in social isolation can also escalate earlier in all kinds of domestic violence / sexual assault & bad / criminal behaviour.
- 2) There are many singles and many elderly people who live alone who takes care of them in a total lock down? That creates a big extra problem with all dangers as mentioned in 1) social isolation
- 3) Delaying / limiting the virus can be an additional hazard.

For comparison: Bacteria can become resistant to antibiotics, or bacteria can "outsmart" the antibiotics. I am emphatically not a virologist, but as an example --- suppose I see people running panicky and stressed and acting incompetently, I call Stop! I give them instructions how

to act better, I remove the panic and stress and they can handle the situation in peace, in balance and because of the delay their actions become more professional ---

365 3) My major concern is that if the Corona virus is seriously delayed by the total lock downs, the virus may increase in strength, become more intense and "outsmart" humans in a second cycle. In the current situation at the end of March, the lockdown will be lifted in China after a period of no new cases. However, after a few days, the infections inside and outside Wuhan again becomes minor: are these the after-effects? or does a new circle of the virus start? Time will tell.....

370 In short, leaders in countries need to prepare better and focus more broadly on the whole process in advance and focus broadly on the maximum results that can be expected in which interventions, communication and actions.

375 I think most leaders in this COVID-19 outbreak focus too much on tunnel vision and competing with - and sometimes pointless - copying from other countries!

About risk factors (from Radar method Regeer)

380 The Radar method Regeer® was developed from a nursing vision and not from the medical model. In the medical model, risk factors are always considered to be influencing factors in the disease process. I fundamentally disagree. I make a strict distinction between the internal risk factors that influence the process and the external risk factors that do not influence the process in any way.

External risk factors increase or decrease the chance that a (disease) process will arise, when the process arises the external risk factors have no influence on that process.

385 ***External risk factors are the only indicators for the best possible interventions in order to achieve the maximum possible safety.***

390 More generally, a threat to self-esteem is the primary cause of fear in humans. Fear is a vague, uncomfortable feeling with a source that is usually unclear or unknown to the person. Conflicts over essential values and life goals are another most relevant risk factor that can increase fear in humans.

It is clear that these general external risk factors play a major role in the COVID-19 outbreak. People are frightened, but don't really know what to fear.

The conflicts about essential values are clear, everyone has the anxiety (= fear with a known source) to die. Well, fear and anxiety have caused the panic that has put all people in the

395 current situation. Fear is a special phenomenon, because what I have now described is fear as an external risk factor, because of the fear that has arisen in the environment of humans due to the unknown virus, unclear information, unexpected measures, threats to the existence of humans, all these factors lead to an unhealthy process.

400 In addition to these general external risk factors, a number of specific external risk factors can be identified for COVID-19:

Insufficient hygiene, personal and environment - Facial touches (eyes, nose and mouth) - Insufficient protection when coughing / sneezing (in elbow) - Insufficient distance (1.5 m) from other people - Staying late at home in case of illness - Mixing, moving and travelling in groups - family mode of society - geographic environment? - Outside temperature? - Humidity?

405 **Internal risk factors are the factors that can influence the process in which people find themselves more or less and that differ for each person. .**

410 Here the concept of fear returns, but now of the individual fear. Every person can in his own way be more or less fearful in a tense situation or (illness) process and this will determine how this person responds to all 4 dimensions of existence, namely physical, psychological, social-emotional and spiritual.

Furthermore, for the COVID-19, the degree of more or less serious illness for the individual is determined by the following specific internal risk factors:

Older age - more than half of the victims 70 years or older (but applies to all diseases)
underlying (un) known disease - many COVID-19 victims are already ill

415 Obesity / overweight - many victims with overweight

Male or female - more men than women die from COVID-19

Own constitution / hereditary predisposition - how much physical resistance / immune system strength

420

425 **The detection and measures with Covid-19**

I believe that most countries have acted late or are now too late to detect meaningfully infected persons. There were now so many distributions worldwide that it became increasingly difficult to trace other infections of infected persons. Countries are now too late with smart app methodologies, a technology that we have had available for a number of years and that could
430 actually have been deployed at the beginning of the outbreak. Nevertheless, the smart apps can now also play a useful role in the aftermath period in order to develop a measuring instrument for two purposes: 1) monitor the possible follow-up COVID-19 outbreak 2) gain experience for future new virus variant outbreaks.

The great diversity in Corona test sets Then the problem of the test sets: except that the
435 manufacture of the test sets also started much too late and very hastily and is still taking place or is still underway in many countries I think there is also the problem that it is not clear whether all countries have the same standard test set, the same standard of quality, the same standard of laboratory materials and the same standard of laboratory procedure.

Not to mention whether every country has the same quality of microbiologists and the COVID-
440 19 test requires 50 different materials, not all of which are currently available.

I dare say that there are all kinds of different tests and probably not even real COVID-19 tests
(eg, tests that test flu or lung disease) are performed in all countries. In my humble opinion the test results are not equally reliable in every country and the test results of different countries are certainly not comparable. I challenge the “experts” to actually prove the opposite and
445 ensure worldwide that all tests will be made comparable on the same standard worldwide in the future.

The measures taken (see document: PROTOCOL SHIELD proposal)

The only necessary and correct measures to be taken in case of virus outbreak, epidemic and /
or pandemic I have described in detail in step-by-step plans in the accompanying document
450 Proposal Protocol SHIELD model Regeer®.

Well, most countries have introduced these measures more or less and in different degrees and phases, it is recommended to take note of phase 3 in protocol SHIELD, which contains recommendations on how we can slowly but surely get out of the situation in a normal lifestyle.

455 Here I limit myself to expressing my opinion on the measures which I consider absolutely pointless and which are nevertheless being implemented in many countries.

Senseless mouth masks and alcohol spray

460 When I was on a study trip in Tokyo Japan with two colleagues in 1983, we observed some
people with masks in the subway. We asked our interpreter / supervisor what the reason for
this was and she explained how the group culture was designed in Japan. This means that if you
as an individual feel sick, coughed or flu, you are obliged to protect the group from your bacteria
and thus wear a protective mouth mask in public life, fully accepted in Japanese group culture.
We, Europeans, Dutch, from our individualism society, had to laugh heartily about it and
thought it was strange behaviour. As nurses, we understood the function of the mask, which
465 was worn primarily in the operating room or during medical procedures in combination with
sterile materials and clothing, to prevent bacterial infections.

That is the function of a mouth mask: I protect the other person against my bacteria, and
nothing else...

470 Thus, in January the world looked at China, all facemasks, chemical cleaning of streets and
vehicles, people dressed as aliens..... The rest of the world doesn't realize that this can be a
group culture in various Asian countries, whereupon people go back to their face masks in their
fear and need, not even realizing that this is completely useless for protection against virus. Only
keep your distance and great hygiene with warm water and soap provide protection against
virus infection. And yet.. The mouth masks / face mask so far cannot be dragged into the world
475 ... and cause an unprecedented extra burden for waste processing, all those disposable
materials must also be destroyed after use with again all risks of contamination! ... Where
previously the bank or shop required that the motorcycle helmet be taken off before entering
the branch, now you can no longer enter the bank or shop without a face mask! Plenty of
opportunity for today's criminals...

480 Spraying with alcohol on hands, also completely useless ... kills only bacteria, the bad but
unfortunately also the good bacteria, so excessive cleaning with alcohol disinfectant gives
bacterial infections an increased chance.. People who hang a clear plastic or polycarbonate glass
screen in front of their face ... that is more or less better protection against viruses ... and
people can make this cheap themselves.

485 **The front liners in the hospital**

And the poor fellow nurses and doctors in hospitals, their managers put them in protective
(plastic) clothing, mouth masks, even snorkel face masks were seen .. etc .. they have to work
twice as hard now and then sweating and difficult breathing in the heavy work ... very stressful
... not to mention the increased risk ... you can put on those protective clothing gear by
490 yourself, but remove it safely ... you need two people for that ... human speaking you are
running and flying, with assist of not trained forces from other departments and not to forget
the older ex nurses who have been called up (and sometimes always know better, hehe), you
can imagine that there are a lot of cooperation/communication problems and there does it go

495 wrong ... with contamination as a possible result ... I am pleased that the health workers are finally getting the appreciation they deserve (hopefully that appreciation will continue even after COVID-19). ---Situation in The Netherlands: I am still from the time in the eighties when nursing took to the streets to protest / VVIO the White Anger and without success for appreciation... but I also realize that in the years after that the top layer of nursing managers were cleaned up and replaced by some non-professional but other discipline managers .-----

500 How can the managers make their staff work like this in this turbulent unrelenting patient admission stream? It would be better to isolate the patients using Plexiglass instead of bed curtains, isolation chambers?? Those are for bacterial infections.. invent a new tool as is the example with premature babies in incubator — make mobile Plexiglas working units at human height, and in such a way that you can perform all actions on the patient without physical
505 contact. And can also communicate normally with each other (if possible).. And then people do not have to die alone ... and let staff work in their normal outfit.

Finally a better measure? The Pulse Oximeter

Then as a last detail: I have a PulseOximeter, this digital device measures the blood saturation in a few seconds (how much oxygen is present in the bloodstream), which is normally between 90
510 - 100% for healthy people. In addition, the device measures the pulse rate, which is about 64 - 84 heartbeats per minute for healthy people.

I sincerely and wonderingly wonder why this simple digital device is not widely used instead of extremely pointless temperature measurement in many countries??

515 After all, with saturation in the circulation of less than 90% you can be certain that a person has insufficient oxygen in the bloodstream, caused by, among other things, some or more degree of lung failure, lung disease, pneumonia, severe flu or Corona infection!

If the pulse / heart rate is high, only then does it make sense to determine whether someone actually has a fever and to measure the temperature. These data then provide concrete indications for home isolation or hospitalization.

520 *Advice detection in the Aftermath*

In my opinion, the realistic number of infections with COVID-19 can only be determined after this virus epidemic has ended. This means that scientists can already consider how this statistic can be made. I have already taken note of a possibility, namely measuring the amount
525 of virus substances that end up in the sewage system, many non-western countries are unable to retrieve these data due to the lack of proper sewage systems. But I expect that our science may be able to think of other ways.

And further:

After expiration, it is of course possible to include a number of further details of victims in statistics: the course and duration of treatment per victim, the number and type of treatments that were used,

530 In many countries, at-risk people are vaccinated against the normally expected seasonal flu before the onset of winter. Obviously this does not protect against COVID-19, nevertheless it seems interesting to me to develop statistics on the number of COVID-19 victims with or without flu vaccination. More men than women turn out to be COVID-19 victims, experts say that smoking and alcohol consumption may be the factor here. Well, it seems to me necessary that the experts investigate how many victims are
535 COVID-19 smokers and who drink alcohol daily or periodically. So that there is clear evidence or not of this assumption! (My personal estimate: more non-smokers and less smokers as well as as much alcohol as non-alcohol users will be analyzed among the COVID-19 victims. (To clarify my estimate unfortunately falls outside the context of this document)

About medicines and vaccines

540 Of course, people are calling for a medicine that can make you better if you get sick from COVID-19. Or a vaccine, even better, you can never get sick from the COVID-19 virus.

Unfortunately, that's not going to happen this year. At the end of January, all pharmacies, laboratories and disciplines involved have been working hard to find a solution. The danger lurks, that for financial gain and because of the offered medicines are brought to the market at an early stage, with insufficient
545 guarantees that there has been sufficient testing and that the lower quality is taken for granted, with all harmful (in) effects on the bargain.

Every healthcare professional knows that the production, efficient testing and qualitative production of a vaccine takes at least 1.5 years. Again, if time is gained by the aforementioned factors, the risk is still too great whether the vaccine works and shows no harmful side effects in the longer term. Yes, and if a
550 vaccine is produced then there is a good chance that it is no longer needed because the virus has simply disappeared. That happened in the last SARS epidemic, millions of euros worth of vaccine destroyed. I therefore wonder whether it makes sense to develop a vaccine. Drug development is the same story, production time may be slightly shorter than for vaccine, but thorough long-term testing should not be skipped.

555 And then the existing drugs, can that offer a solution? All kinds of Indian stories about (Russian) miracle viral drugs (which have never been tested), the drug Chloroquin against malaria ... if a drug works against malaria, this drug has existed since the 1930s, then that effect has been proven but only against malaria. I have read that in China with some COVID-19 patients they achieved some results experimentally with chloroquin tablets, the patients seemed to get better earlier. But that is not yet a
560 required quantitative test with large groups. Also the new variant that Trump (USA) has ordered in large numbers, now that variant has been developed lately very hastily in Leuven (B) and as far as I know only tested experimentally with animal experiments.

In short, it is very unwise to put confidence in medicines that

a) Intended and tested for a completely different disease

565 b) Have been produced very recently in the past months.

What amazes me is that we don't hear anything and I don't see anything written about the **Bacteriophages** anywhere. There are some hospitals in the world that work with this, in Georgia there is a hospital with the largest database of bacteriophages in the world. Other than the antibiotics, which usually work broad spectrum, i.e. in addition to the pathogenic bacteria, healthy bacteria are also
570 destroyed. The bacteriophage is being developed targeting a single infectious disease. The bacteriophage only works on the specific disease bacteria, so leaves all healthy bacteria intact and works so powerful that the phage can also break through an existing virus wall. So I think there is an opportunity for specific COVID-19 drug development.

Thus what I know about it in recent years through various publications.

575 The reason that we do not hear much about it, in my opinion, is simple again in the fact of making easy money through the sale of antibiotics from the pharmaceutical industry. The production of a single drug against a single disease is very time-consuming and expensive, so anti-biotics, which work against a number of infectious diseases at the same time, are much cheaper to produce and easier to earn.

580 So In my opinion, there is no other option than to treat the COVID-19 disease symptomatically with usually fever and pain-reducing agents and the normal treatments for serious lung and other disorders.

World relations and socio - economic consequences

I am Dutch, so I first look at the European Union, EU, which clearly shows in this COVID-19 outbreak that it is not a Union. The 1st most affected country in the EU, even the 1st major outbreak, was Italy. Italy,
585 like Spain, has been in conflict with the EU over extremely high government spending for a long time. At the same time, Italy has recently signed a multi-billion dollar contract with China on the so-called "new Silk Road", and to its surprise, aid is coming "from Russia with love", Putin casually sends an entire military genius division as humanitarian aid to EU & NATO country Italy . And the EU / NATO is watching ... Then there is the problem of the immigrant crisis with Turkey, the millions of refugees there are also
590 exposed to a gigantic COVID-19 outbreak, the Eastern European countries that do not want to take in immigrants and partly the current crisis is a very big chance of a hard Brexit with all the adverse consequences. The question is how the EU will face all these political problems in the coming period of extreme tightness in the coming year ... the EU is needed for peace, I am convinced, but I foresee that there is a great risk , that the EU is divided into three parts: North, East and South EU ... let's hope that

595 the EU foreign policy, EU trade policy, EU defense and Immigrant policy in particular will survive as a whole EU. In short, Europe is in heavy weather and the economic consequences are yet to come ...

Do world leaders realize that economic power is changing, and that the shift in power has accelerated in particular due to this crisis?

600 China and Russia have long been rapprochement and large joint projects are being set up ... China and India are the major production countries in the world for a wide range of products.. USA has a protectionist president, history does not teach much good about that course of action and ... the country that starts a trade war usually falls victim to it, anyway, a trade war on both sides is more likely to be losers than winners ... Saudi Arabia at the most unfavourable time starts an oil prices war with neighbour Russia, not even such a wise choice with bizarre results ... immense oil reserves in a world economy that has come to a standstill...

605 It is clear that the situation in the USA is also not rosy with a president who, through his actions, tweets, presentations and communication, divides the American people more hopelessly than unite the people. And that's another understatement; I don't have to go into details...

His dream came true, but a questionable honour and not as Americans expected:

610 America first.. Country with the greatest disorder in the COVID-19 outbreak and the largest epicentre in the world and millions of unemployed.

615 What this crisis also makes visible: the great disadvantage of the poor sections of the population, which is manifested in India by great hunger for the poor, in the USA by great mortality among African Americans in deprived neighbourhoods ... poor social security or no access to health care for groups everything now translates into great openness, all underlying problems are now becoming clear in different countries...

All the central banks in the world including the European Central Bank have been running the money press for years to keep the economy going after 2010 and interest rates are close to 0 percent.

620 And these are precisely the instruments that have now been exhausted, while I expect that the world and European economies will end up in recession with tens of percentages for a longer period. And this story unfortunately applies to the whole world. How can the millions of jobs that are lost, the thousands of companies not making it and the billions that are needed again to remedy this be restored? Yes, again running the money press by central banks, our already very shaky financial system was at 5 for 12, is now at 2 for 12 That the financial system at any moment no longer holds, is already clear to me for a long time, the question is how that process will go ... If the world now realizes that one has to accept this fact, one can now prepare how the transition to another alternative system can be made step by step developed..This man-made crisis period makes all these things painfully clear now more than ever.... you should not be doing it to humanity that the system collapses with a big bang.

Then the misery is really beyond control..

630 **Epilogue**

It should be clear to the reader, in this fully described document I do not hide my opinion, of course you do not have to agree with me in everything. In fact, I hope that you read the description critically and may be able to name a number of additional things or express your own opinion. But, beyond my own view, many of the details I've described are really concrete facts. I really say that, of course, certain
635 measures had to be taken in the COVID-19 outbreak, if only because of the lack of preparation for the situation, the shortage in IC care and the massive numbers. The unexpected of the situation and the Fear and panic really led to the making of the crisis, the crisis that was unnecessary and which will cause much undeserved suffering in the aftermath. Unfortunately, this crisis is also accelerating all kinds of other political, economic and financial pre-existing problems.

640 If we look around the world like that, in the 21st century, too many countries have no real democracy and too many countries are led by 70/80 + year old grandpas and grandmas ... I really sincerely long for a new but then early 60's years of golf in this 21st century, as the 1960s brought about many changes. I believe that there must now also be acceleration for the younger generation who must take matters into their own hands for a new future, their future, the new normal. The positive sides of this crisis are
645 that we have made planet earth (temporarily) cleaner and more hygienic again and that must certainly be continued. The question will arise, should we as humanity want us to grow economically again? Every single percent of economic growth causes 2 percent environmental pollution. Isn't it time for a change from the economic world to sharing communities? Isn't the beginning of more national solidarity between people a positive effect of this COVID-19 crisis? Can we hold on to that?

650 I hope, hope makes life

655

660 **SUMMARY Personal Outlook COVID -19 document**

from Leo Regeer

RN Dipl. N.Adm. Ms.Educ.

with

proposal protocol: the SHIELD method Regeer®

Reactions exclusively to: leo@leo.nl see my blog: www.leo.nl

665 **Humanity is a greater danger to itself than the COVID-19 virus is a danger to humanity. The author describes the COVID-19 outbreak during the entire past period of the COVID-19 outbreak, based on objective observations, data collection, broader insights and based on his own views. According to the author's opinion, the world from all countries has too late accepted the situation, political leaders and their experts have made great mistakes in times**
670 **and measures and in fact humanity has proclaimed itself the doom of socio-economic downturn in the aftermath period. The opinion document also describes the recommendations on how we, as a more inclusive united world, may gradually continue our “new Life” from the current situation. A SHIELD protocol is provided to be better prepared in the future and to take more adequate actions while maintaining respect for people and**
675 **nature**

The hard conclusion is that, on the basis of all the facts, it can be stated that in this situation the fear and panic and the shortage of IC care capacity that can be understood, but should absolutely not have led to the current crisis. Acceptance now must lead to a healthy way back to a new kind of life.

The author proposes a new model, the **SHIELD METHOD REGEER ®**

680 **SHIELD: *S*ophisticated *H*ealthy *I*ntelligent *E*nding and *L*imitation of *D*isease -*e*scalation(s).**

Author is absolutely against total lockdown, which has major social and economic consequences. Social isolation and government-imposed (too) large restrictions of freedom can affect people in all their dimensions and can make people very susceptible to disease, and not only that, but history shows that social unrest, looting and rebellion of the poor and deprived persons in society can be a consequence
685 that should not be underestimated. Human rights, which are now temporarily in restriction of freedom, are also endangered, and it is hoped that the world will ensure that these restrictions of freedom are lifted in time and not become permanent in some countries! The lockdown is destroying the economy

for a long time with tens of percent downward spirals and long-term loss of millions of jobs and makes the already fragile financial system more vulnerable.

690 **The "lock down" remedy can be worse than the disease!**

In a separate document, the author describes the SHIELD model Regeer®, a method that can now be used in clear step-by-step plans with phase 3 as a final measure in the various countries in the further course of the current COVID-19 outbreak in 2020. And in any future the next virus outbreak, **the SHIELD model Regeer®** will be hopefully the maximum measure.

695 Subsequently, in this document the great outbreak of the current COVID-19 is described in many details and placed in a broader context from the concept of **"ACCEPTANCE"**. The author aims to clarify the many misconceptions, wrong timing of measures, wrong security measures, miscommunication, geographical spread, macho politics, money, power, corruption and potential conflicts of interest that can backfire.

700

Accountability

The author, Leo Regeer, states explicitly that he is not an expert in virology, economics or politics, nor does he pretend to be a certain scientific level. He wrote the document from his RADAR Method Regeer®, which he developed in the 1990s.

705 He justifies himself on the basis of his nearly fifty years of practical and theoretical knowledge as well as his (inter) national work and life experience in society and health care. The reader is allowed to distribute this document and literal citations are acknowledged. The author hopes that his opinion will contribute to a broad discussion.

Calling all radio stations and DJs to play the following song three times a day:

710 ***IMAGINE FROM JOHN LENNON***