

BUILDING WEALTH IN CHANGING TIMES



The Solari Report

AUGUST 30, 2012

Inside the Propaganda Matrix
with Jon Rappoport





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Okay. This is Jon Rappoport and the August edition for Solari. Very happy to be here as always. And this month's title is Inside the Propaganda Matrix. As some of you know, in my new collection, the Matrix Revealed, I included a number of interviews, many interviews with a retired propaganda master who goes under the pseudonym of Ellis Metaboy. Ellis, for a long time, worked for, as close as I can give it to you, several major, major nonprofit foundations. And his job was to plant stories in the press and to slant public opinion on major issues in the desired direction of shall we call elite controllers. He concentrated very heavily on the medical area, but not only that.

I learned a great deal from Ellis and it coordinated with some of my own research. And so I want to talk about one element of the propaganda matrix. And bring in the current shootings in Aurora, Colorado and the Sikh temple in Wisconsin. So the focus of the propaganda will be on psychiatry. But psychiatry from the point of view of presenting to the public, the press, the government, everybody, and this is very important, an organizing principle around which disparate data, information, opinion, can be clustered and made more comfortable and secure and cozy and acceptable to people. Of course, the organizing principle in every case is a lie. But that shouldn't bother anybody.

And lies are very easy to use for organizing principles. And nowhere is this more obvious when you do some research than in the field of psychiatry.

Let's see. Where do I start here? There is a psychiatric bible published by the American Psychiatric Association called the DSM. D and S stand for diagnostics statistical. M is for manual. And they update this every once in a while. This lists all of the official mental disorders and defines each one. Now, 297. That's a lot.

So the first question to ask is, well, who decides on these mental disorders. And the answer to that is a committee. A committee of psychiatrists sit around and



they jaw and they talk and they argue and they present their opinions and finally, some sort of a consensus is reached on each one of these mental disorders. And what the committee is working from is basically a menu of human behaviors which are called symptoms. But they're really behaviors. Resists authority. Is distracted frequently. Fidgets. Attention wanders. Is unable to focus or concentrate. These would be typical behaviors that eventually are clustered together under the organizing principle of ADHD, attention deficit hyperactive disorder.

But if you are becoming a little bit uneasy as I'm speaking here, you have a right to, because really, when you get down to it, who are these people to say that a list of behaviors actually refer to something called ADHD which actually exists. You see. I mean that's what they're saying. They're saying it actually exists. That their organizing principle really exists. It's real. It's not just a convenient metaphor or a tool or a way of helping people. No, no, no, no, no. Don't make those mistakes.

This is considered to be a thing. Like a chair. You know it's an entity. And if you were to question one of these psychiatrists they would, of course, refer you to the brain. That's where it's all happening you see. It's a mental disorder based upon something "abnormal" going on in the brain. And then if you were to ask, well, what is that abnormality, they would say, a chemical imbalance. And you would say, well, you mean to say that you would call any chemical imbalance in the brain ADHD? Oh, no, no, no, no. It's a specific imbalance. I see. And you know what this is? Well, we're learning more about it all the time.

And then you might ask, if you were perceptive, well, is there a test, a diagnostic test whereby a person can be tested to see if they have ADHD or not? Mm, well, I mean, the psychiatrist might say, stonewalling you, the test is whether or not the person fits the profile of behaviors. No, no, no, no. That's not what I'm talking about. I'm talking about a physical test. A blood test. A urine test. A saliva test. A brain scan. Something that allows a definitive diagnosis of ADHD. And the answer to that is no. No test. No test. Which means no test.

Now, I captured a very interesting quote from a well-known psychiatrist, major



authority, Russell Barkley, neurologist. Works out of Massachusetts. Who was interviewed for a PBS Frontline episode called, Does ADHD Really Exist? And he was posed this question about a test. And his answer was rather effusive. And he said, “No. But you don’t understand, the people who are demanding a test here don’t understand how science really works. They’re just confused. We don’t really need a test, you see. Because.” He said, “If we did, none of the mental disorders listed in the DSM bible of the American Psychiatric Association would qualify as actual mental disorders because we don’t have a laboratory test for any of them.” Boom. Bang. Pow. Zowie.

And if you clear your thinking enough, you realize that this is just an absolute blockbuster. And Barkley’s not the only one. I mean I have relevant citations for the same conclusion from several sources. It’s well known that none of the 297 so-called mental disorders listed in the DSM, the official Bible, have any diagnostic tests for them at all.

Oh, my, my, my, my, my, my, my. Where does that leave us? And let’s stop trying to be generous and nice and polite and uncritical and so forth in our approach to... Well, they must know what they’re doing. You know this sort of thing. Let’s give them a break here you know. No, no, no. Let’s look at the hard cold facts. If you don’t have a test, you don’t have a disorder that can be defined. In fact, you have nothing. All you have left is the loose collection of behaviors which a committee of psychiatrists argued through to come to their own conclusion for their own reasons that a certain configuration of these behaviors constitutes an entity called a mental disorder. That’s all you have. And that is nothing. That’s like saying we have nothing. That is very much like saying we have propaganda. Which, in fact, is what it is.

All of this is propaganda. Now, I know that for many people it would be hard to swallow. Are you saying that the complete profession of psychiatry, biological psychiatry is nothing more than an exercise in massive propaganda? Is that what you’re trying to say? Yes. And then I would say, in addition to that, yes, that’s what I’m saying. Because you see, psychiatry puts this, tries to put it on the basis of science because that’s what psychiatry is supposed to be all

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about. But it can't. It doesn't have the science. Therefore, it has nothing. It has opinion. And then you might say, well, yes, but it isn't just opinion, it's authoritative opinion. It's educated opinion. It's trained opinion. It's opinion. It's opinion.

Now, I understand this raises many question and I'll answer them. But the reason that I'm attacking from this place here is to show you how significant propaganda can be as organizing principle. That collects and categorizes all sorts of data and ideas and opinions and so forth and tries to focus the mind on its interpretation and its organization of those data. This is big, folks. Very, very big.

So the first question out of the box or the first objection that people usually voice is, well, this is impossible because we know there are people running around who are crazy. We know there are people who are mentally ill. We know there are people who hear voices. We know there are people who hallucinate all the time. We know there are people who are psychotic, that are out of control, that all commit random acts of violence for no apparent reason. And, therefore, there must exist this thing called mental illness. You can't possibly be saying that mental illness does not exist.

Okay. Well, you see I've slightly changed the wording here. From mental disorders to mental illness. Mental illness is a much vaguer term. And also, in many ways, more compelling to people because they are absolutely 100 percent convinced that there is such a thing as mental illness. Because if there weren't, then we would have to assume that you are the person who stands on the roof of a building and believes that he can fly and jumps off and thereby kills himself. And we can't accept that. We can't accept that there is this equal footing. And, therefore, we have to have this category called mental illness where we say, somebody is deranged. They're wacko. They're out of their mind. It's just obvious. They don't connect just in any way to reality.

Okay. All right. So on and so forth. But you see, we aren't really talking about any of that. You can have your opinion on what deranged, wacko, psycho means and so can I. And we use it in speech every day all the time. Well, you know Bob. I mean he's just crazy. Meaning his ideas don't match the reality that we accept. They don't match physical reality. We use this kind of language



all the time.

And what you mean by it and what I mean by it, we would have to engage in a very long conversation to sort out you know the similarities and differences, if we even could, between what you mean by wacko crazy and what I mean by wacko crazy. But, we kind of like to be able to talk in those terms. It seems to be a good idea sometimes to talk that way. Yeah, he's crazy. Can you tell me why he said that? I believe I can. It's because he's crazy. And then we laugh and you say, yeah, he's crazy. And I say, yeah, he's really crazy and that's the end of that. And we're both very, you know we're very pleased about that. We're very happy about that. It's a far cry from talking about 297 distinct mental disorders listed in the official publication of the American Psychiatric Association. None of those are real. None of those exist as entities with any scientific justification whatsoever because there are no tests. Do you see?

It would be kind of like saying, I read this the other day. Somebody made this comparison. It's pretty nice. Let's suppose that you go to your doctor and you say, "You know, Doctor, I've been doing some research and I think I have diabetes." And he says, "Waite, excuse me." And he opens the door to his office and six other doctors walk in and they sit down. And they said, "Well, tell us what you've been experiencing and feeling. And you talk and they make notes and then they sit there and they argue for six hours about whether or not I have diabetes. Or whether I have a tumor. Okay. You would say that's crazy. You would say, "Wait a minute. This isn't science. This is a bunch of lunatics deciding. It's kind of like when the Inquisition gets together in a panel and decides whether or not somebody is a heretic. Well, let's see.

So the same with these mental disorders. Clinical depression. That's a mental disorder. We're not talking about, oh, you know he seems to be sad all the – no. We're not talking about that. We're talking about clinical depression. ADHD. Schizophrenia. Bipolar.

Any of these. ADHD. Oppositional defiant disorder. All of the 297. It's all propaganda. And when I say propaganda, I'm not simply saying unscientific. I'm saying it's there for an agenda ultimately. And the agenda has many heads. And one aspect of this is if you and I were a committee of two and we controlled all the definitions and descriptions of mental disorders and all the labels, you see, we could add a label, remove a label, and we were in charge and



we had tremendous political and economic clout, we could impose a matrix of a kind on the planet give enough time. We could do it. Where eventually you see that everything we're saying is absolutely true. And they would begin to accept diagnoses. And they would say, "Well, I have X, Y, Z." Well, I have ZBD. And I have ABQ. And these labels of mental disorders would begin to regulate how people think about themselves. How they begin to judge their own actions and other people's actions. The ceiling that they place on individual achievement. What's possible for an individual in life. You see. What can an individual do. How far can he go. Well, as it turns out, by our survey, you and I you see, we find out that 60 percent of the planet, at least, has got at least one mental disorder. Well, now we're redefining life on the planet. We're lowering expectations along all sorts of lines here. The best you can hope for is to regain a normal average life, you see. That's what this is going. That's where it's already gone.

Not only that, but it's covert collectivism in the sense of well, my son has ADHD. Well, so does my son and so does her cousin and so does her nephew and so on. You see they all have the same thing. This entity called ADHD. And so everybody buys in. Oh, yes. Oh, ADHD. Oh, yes, of course. Well, this is now pointing out identical conditions in different people you see. It collects them under the same category. If people buy in and if they accept these completely nonexistent mental disorders.

Now I know that there will still be objections. But you see, my sister's son really does have ADHD because he sits in class and he can't concentrate and he can't do this and he fidgets all the time and he has tantrums. I mean you've got to do something about this. And here you come along and you try to pretend that this doesn't exist. This is you know the most frequent objection that I get. Suddenly I'm cast in the light of someone who's heartless and cruel and has no empathy for human problems and so forth and so on, you see.

Well, this refers to a tendency in the human mind to accept organizing principles. I hope you understand that. It's very important, you see. Because if your sister's son has all of these, oh, my god, he's doing this and he's doing that and he's doing this and he's doing that and we had to take him finally to a psychiatrist who said that he has ADHD and then, whew, we felt better. You just bought it. You just bought organized principles. That's what you bought.



And you do experience relief and you do feel better and you do feel assured, you see. It isn't any longer out of your control. It's no longer crazy mystery that you can't figure out. It's not impossible. It's not so troubling and disturbing because now you're in the office of the psychiatrist and he says, "I assure you, Mrs. Jones, your son has ADHD. And I understand everything that you're saying. Yes, we get this all the time."

This is not unusual at all. In fact, there are billions of children, somewhere around 5 million in the United States who have ADHD and are being prescribed Ritalin or Adderall. Yes. This is what it is. And everyone, whew. And they tell their, oh, yes, they tell their friends and relatives. Oh, you know, the kid who was out – okay, well, finally it was diagnosed. Finally the diagnosis came down and we all understand and now we can do something about it. Yeah. You can put the kid on speed is what you can do. Because that's what Ritalin is. It's basically the profile of amphetamine drug. Ditto for Adderall. Speed. It's legal speed. Yes, it does focus the mind for a while. Until or later, depending upon the individual, the speed element takes over and you get deterioration. Not only of behavior, but you get deterioration, and you can read Dr. Peter Breggin on this, B R E G G I N. Now you really do have brain malfunction occurring as you would if you were doing speed for a year.

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But let's get back to the situation. So suppose I, as a layperson, were to intervene with this child who is out of control. You see that we've just been talking about here. And suppose I said, not being a doctor, of course, not offering you any medical advice of any kind whatsoever. But in a fantasy world, let's pose that I brought you a list and I said, "here's 15 or 20 things on this list that have to do with various foods that you kid might be eating, colors and dyes in the foods that he might be eating. Other medical drugs he may be taking. Exposure to environmental chemicals. Possibility of severe nutritional deficits. Eating possibly junk food diet. Problems at school with other specific individuals like teachers. Kids who are beating him up. You know a long list of things that we could call common sense things that could be causing this wild chronic out of control behavior. And you see, we're not applying any label. There's no organizing principle yet. It's just does your kid engage or fit into any



one of these factors here? Well, yes, well, there's this and that. And of course, you know he eats McDonalds all the time. Oh, yeah, and he eats like ten packets of sugar a day. Oh, well, you see, what would happen, imagine if we could curtail some of these things? And if that other kid in his classroom, you know the kid who brings a fork and a knife to school and stabs other kids and has made your kid into a terrified kid in class, suppose we could actually put pressure on the incompetents who run that school to get rid of that kid?

That's just the kinds of things that you would think of that could cause a kid problems. And suppose we actually implemented all of this. And what would happen if by some incredible miracle in the next few months the out of control behavior stopped? Would we have a need to say ADHD or even remember what it means? No, we wouldn't. Would we have a need to buy into the organizing principle? No, we wouldn't. Absolutely not.

I hope that at least begins to answer the most common objection people have when I begin along this line of discourse here. Organizing principle. Now, practically speaking, when you and I control the world by inventing the names and labels and descriptions of 3- or 400 mental disorders and we have people now going to psychiatrists right and left and left and right and right and left all over the place, and getting actually diagnosed with these crazy labels that we invented, XQRY and Z26B and so on. And now we have a whole industry that is created, we're not even talking about the pharmaceutical industry yet. The industry of information about mental disorders and why we all have to join hands in a great circle around the campfire and be extremely tolerant to all of these diagnoses that are going on. And also to the struggle, you see. The collective and individual struggle of people all over the world as they try to regain their normalcy. As if this is really the ceiling on behavior for millions and possibly billions of people.

We've just redefined the limits of individual power and capacity. Wow. That was pretty good, wasn't it? Pretty good trick. To be able to do that. And by continuing to spread pseudo scientific sounding propaganda about all of these mental disorders that we made up and how important it is for people to get treated and how important it is to recognize the signs, even before they are really fully blown, we have now contributed our bit to making a crippled world. A world where suddenly sooner or later everybody is going to be



diagnosed with a mental disorder. And it will be seriously. This is big time stuff, folks. Big time stuff.

Now, let's get to the Aurora shootings and the Sikh temple shooting. Especially the Aurora shooting. Because now, everybody is being told that James Holmes is mentally ill. In fact, it's quite possible that his lawyer is going to file an insanity plea. Oh, yes, well, now we understand why he did what he did. You see that's the first thing people say. Oh, the guy's crazy. And here, look, mentally ill. He's got to be now put in a psych ward on lockdown if the plea is accepted. Where he will be treated for who knows how long. The shooter in Arizona in 2011, Jared Loughner over a year in a lockdown psych ward. Forcibly medicated with the heaviest of the psychiatric drugs called anti-psychotics. Until eventually the psychiatrist said he regained competence and he pleaded guilty the other day. Who knows what actually happened in the psych ward. That's another whole story.

But James Holmes is mentally ill. Now we all understand it. And there will be a diagnosis eventually. Schizophrenia or paranoid schizophrenia. Whatever. And everybody will be like, oh, yeah, sure, okay, great. All right. That's why he did what he did. That's why he dyed his hair red and he put all these bombs in his apartment and he shot up and killed people in this tragic event at the theater in Aurora, Colorado.

And he may suffer the same fate as Loughner, which is he will be considered mentally ill for the rest of his life with a specific diagnosis. You see. And specific drugs that will cause him brain damage and possibly render him incoherent at some point. And he will do that kind of time for the rest of his life. And the actual story in the theater in Aurora will never be told. Because we don't need anything more, you see, once the label is applied. That becomes the organizing principle in this case. Well, paranoid schizophrenic, of course. And let's interview Dr. Zubidizap of the New York Hospital of Zubideebubup. And, Doc, What can you tell us about paranoid schizophrenia? Well, we all know that so and so and bippty bop. And in the case of Holmes, it was quite obvious that he was signs were not being observed by people around him and who knows what might have happened if they had recognized that he was on his way to this kind of an extreme mental disorder and had received treatment in time and bah, bah, zee. You know and we accept that. Yes, of course. Okay.



Well, whatever you say, Doc. Cause we don't know what you're talking about. We will buy the organizing principle.

The doctor, in fact, does not know what he's talking about. Oh, my god. Did Rappoport just say the doctor doesn't know what he's talking about? How could Rappoport absolutely know that? Is he a doctor? No, he's an investigative reporter. To which I would say, well, how did Roman priests in the fourteenth century or the fifteenth century know that somebody is a heretic? And I am equating the two. I am calling psychiatry the equivalent of the Inquisition or some sort of superstitious blather. Propaganda.

And, in fact, I would also assert, aiming for a new height of unpopularity here, I want to give you things to think about, folks. I'm not doing this just to, you know, waste my time here. I want to stimulate your thinking here in realms where, you know it's not necessarily easy to go. But suppose that I could reconstruct the actual story of what happened here. At the Aurora theater. How could I possibly do that? Well, if they would let me in to talk to Holmes, I have a feeling that I could engage the boy in conversation. Oh, we could talk about neuroscience. We could talk about what did he call it? Temporal illusion, which is the conviction that you can change the past. I'm sure I could find something to talk to the young man about sitting in the cell. Off the record. Nothing would be printed. Nothing would be taped. And if I had enough time or if you had enough time, eventually we could get him to talk. Just to start talking about anything. And sooner or later the story would come out about what happened leading up to the shooting. And we might discover some quite unbelievable things, like blanks in his memory, missing time. Was he actually programmed in some way? Was he drugged by somebody in such a severe manner that he went into a stupor and he wasn't actually in the theater at all? Nobody could ID him of course because whoever the shooter or shooters were in the theater actually had gas masks on and they were covered from head to toe in black. So nobody could make a positive ID of him and that wasn't Holmes who stepped outside the theater after the shooting and surrendered. It was nobody. He was actually found in his car in a stupor with weapons by the police. And the professionals who did the shooting and wired his apartment with explosives got away because this was a kind of a covert op that was launched for its own reasons and Holmes turned out to be the patsy.



Or alternatively, we might discover that he was programmed by somebody to kill and maybe he remembers some of that. Or we could find out alternatively, and I'm following all three of these potential scenarios in my work on nomorefakenews.com, he was a psychiatric causality. In other words, the drugs, which are well-known to cause violence, including homicide, drugs such as Paxil, Zoloft, Prozac, Wellbutrin, even Ritalin, yes. That at some point he was being treated and he spun off the rails and he planned a grandiose mass murder and executed it just the way Eric Harris did in Columbine in 1999 in that school shooting episode was on a drug called Luvox, which is another antidepressant, very similar in its action to Prozac, Zoloft and Paxil.

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This violence causing behavior has been well studied and well documented. Hmm. You mean by talking to this guy, he, himself, might eventually begin to offer clues as to what really happened in the theater that night? Is that why the judge has put a gag order on everything having to do with the case? That the media are now challenging in court. Is that why he's being held, Holmes, in isolation? Is that why no reporter can go in and talk to him? Is that why ultimately he's going to be diagnosed with a psychiatric condition that has a name? Like paranoid schizophrenia. At which point all conversation will cease because, number one, we can now discount anything he says as being sane or true or rational because we have accepted the mental disorder label. And two, we don't need to talk to him any further because he's going to be convicted of mass murder and held in either prison or a psychiatric facility for the rest of his life, end of case. We solved it.

The whole thing is explained. The psychiatric label, in this case the organizing principle, has to do with no further exploration of the case. Do you see how that works? Very neat. Very nice. Very clean.

So in this case that is how psychiatry can be used as a tool to cover up crimes and obscure the true perpetrators or the people behind the scene. How it can be used to discredit people and so forth and so on.



There is a longing in the human mind for an organizing principle. And, therefore, humans can be sold organizing principles. Especially when they are faced with enough stress. That's a prime principle of propaganda. PPP. So when the mother is driving herself and is being driven crazy by the kid whose behavior is completely out of control, and her stress level is through the roof on a daily basis, she is much more prone to buy an organizing principle. And if the psychiatrist says ADHD, you can bet your bottom dollar she's going to buy it. And if somebody like me comes along and says to her, "guess what. There is no such thing as ADHD. It's all a fiction. It's made up. It's invented. There is no test for it." She is going to get very testy. Because people don't like having their organizing principles suddenly swept out from under them. They don't like it.

Well, my cousin was on Prozac for six months and he recovered completely from depression and, therefore, Rappoport, you don't know what you're talking about. Yeah, I get that. Sure. I don't mean I understand that. I mean I get people tell me this stuff. And you know how am I going to handle, you know do I want to be nasty about it? Do I want to say, oh, I see, so your cousin or someone, that one case of some personal testimonial, is that what this is? That the person feels better now that they're on Prozac and this now is the reason that we can validate all the psychiatric mental disorder diagnoses? Is that your version of science? Is that what you're saying?

Everybody has a right to choose freely to believe that they are suffering from a mental disorder and they have a right to take a drug if they want to. I like the idea of really possessing good information and informed consent upfront, but freedom is basically okay. And they have a right to say, I feel much better and this is a wonderful drug and fabulous. Do I try to deny anybody that right? Absolutely not. But I also know people who will tell me with the same amount of sincerity that their depression was cured by prayer. They have a crystal in a box in their bedroom and they know what the symbolic power of that crystal is. And when they interact with it, they are no longer depressed. Does as person have a right to say that? You bet. You bet.

That is not what we're talking about here though. Not what we're talking about at all. Now, imagine the scope of this propaganda operation called psychiatry, this organizing principle, when we now swing over into pharmaceutical territory. Because for each one of these mental disorders that



are diagnosed by a psychiatrist there is a drug. Maybe more than one drug. Two hundred ninety-seven disorders, lots of drugs. Lots of money. Billions of dollars. Billions. Multibillions of dollars.

Big business. Big industry. Big power. Big clout. Big influence. About, I'm going to pin it at 40 years ago, the profession of psychiatry was dying, and you can read about it in *Toxic Psychiatry* by Dr. Peter Breggin. And an overt deal was struck between the profession and pharmaceutical industry. Essentially the pharmaceutical industry said, "Look, we will bankroll your profession in a number of ways, not the least of which is through advertising. What we want from you is a much more hard-line attitude and studies that basically show that all of these mental disorders that you are labeling and inventing and so forth, have a firm chemical imbalance basis. We want that cover story to be solid. Because then, we can give you drugs to treat the brain." And the profession said, "You got it, baby." And from that moment on, if you look at the chart, for psychiatry it goes up, up, up, up, up and away.

This is a rigged job, folks. That's what it is. But, I want to point out one thing. Nutritional deficit. You can put a person on a kind of a diet that will eventually destroy any semblance of reasonable behavior on their part. And they will be suffering. I mean suffering. And that could be expressed in a variety of different ways. And the nutritional deficit, I'm not just talking about one vitamin or something. It could be a complex that forms the true deficit. And it also could involve extreme allergies and so forth. Now, when you remedy those deficiencies in a person and you do it right, you can see a real revolutionary change in their behavior and thinking all the way across the line and in their sense of being alive and their mood and so forth. Does that mean that a mental disorder that they may have been diagnosed with by a psychiatrist was, in fact, legitimate? No, it doesn't. And it would be a mistake to make that inference. Just wanted to insert that in there.

I'm staggered myself when I look at the entire propaganda entity called psychiatry. Pretty fantastic to take in all at once. There are many ways in which people get dragged into the system. I've only given you a few of them here. Where they're saying, no, we couldn't be suffering from buying too much propaganda. It's impossible. It would shake me to the very roots to have to admit that the entire profession of psychiatry and everything they stand for is



complete propaganda and is simply nothing more than an organizing principle. I would not be able to accept that. It would be impossible for me to do so. You see. Yeah. That's why propaganda is propaganda, you see. And that's why I chose this for today's episode. Because what good would it do me to come on here and talk about a propaganda operation, you know after which everybody would be sitting around and saying, "Yeah, right now. Yeah, I knew that five years ago. Yeah, he really explained it well. Yeah, very good, Rappoport. Right on, baby."

No. The propaganda that you think about it the propaganda that you don't know is propaganda. That's the one you have to think about, you see. And you have to think about why you don't think it's propaganda. Why you accept it as fact. Why you have bought it. Why – and this is true of you, me and everybody, you see. Because on some level somewhere, somehow, we have bought into an organizing principle. That's what propaganda sells. It sells the organizing principle and then it sells the details. Once it sells the organizing principle, the major effort is done. From then on it's just a matter of filling in the blanks, you see. Over and over and over and over and over and over again. You see. It would be as if you were a painter and you wanted to sell a mural to a client and he had a gigantic wall. And so you did a sketch. It was a drawing, an outline on the wall. And you said, "Look, this is basically what I'm going to give you here." And he looks it over and he says, "All right. All right. I'll buy it." And then the rest of your work is filling in the details, so to speak. From the point of view of fulfilling your commission. I'm not talking about the art of it.

It's the same thing here. Sell an organizing principle. Then sell all the details. So I wanted to come at you, okay, with this noting about psychiatry, which I assume that at least of you will be resistant to. That the whole thing is a complete propaganda operation. Always was. Do you know how Thorazine was discovered? The first so-called anti-psychotic drug. There was a French researcher who was using it on rats. And he discovered that when fed Thorazine the rats could no longer climb ropes. Which, of course, rats can do. And so conclusion, the drug would be ideal for humans. And you say, "What? What? What doesn't make any sense." That's right. It doesn't make any sense. And you have to realize that.

And part of buying propaganda is, you see, somebody tells you something and



you say, “That doesn’t make any sense, therefore, it couldn’t be true, therefore, what they’re telling me must be so.” So if I told that Thorazine story to someone that’s impossible. Could never have happened. Therefore, you’re lying. True. And therefore, I would confirm my belief in the organizing principle called psychiatry.

And still people would come at me and say, “But people act weird. What about people who act weird? What about somebody that’s got six personalities? On Tuesday he’s a shoe salesman and on Wednesday he’s talking about building a spaceship. And on Thursday, he’s a kleptomaniac. I mean that’s gotta be a mental illness. That’s gotta be a mental illness.” Really? Why couldn’t it be something else? A head injury when he was three years old. A severe nutritional deficit that is absolutely destroying his life and his mind. Why do we have to say that this is something called schizophrenia which has a definition but no diagnostic test? Hello. No diagnostic test.

“A severe nutritional deficit that is absolutely destroying his life and his mind. Why do we have to say that this is something called schizophrenia which has a definition but no diagnostic test?”

The organizing principle called psychiatry is simply one example of how deep and convincing propaganda can go. And inside the propaganda matrix you are dealing with experts. Experts who know how to deliver. They know how to deliver the goods. They know how to build an organizing principle. They know how to sell it. And then once it’s bought, they know how to fill in the details. And then, along with the details, of course, we have the interested parties that are economically, financially in terms of power and all sorts of ways politically, from being the managers of the organizing principle. In this case, the American Association, Psychiatric Association. The pharmaceutical companies, etcetera, etcetera, etcetera.

They’re not just going to sit around once they see that they have a stake in the game and that they’re winning. No, they’re looking to cement their victories. They’re going to collaborate with government. They’re going to get legislation passed. They’re going to do all kinds of things. They’re going to have shills in the media. They’re going to plant stories all the time. They’re going to have their list of experts, their go-to people that can write articles and studies and do



research and lie about the research. Oh, indeed. In publications, including the most prestigious in the world.

They're going to really now take this on as a business. You see. Sold the big lie. And so now what we can do is we can cement it all in. So that we dominate the field. We monopolize the field. And everybody else who tries to enter the field of so-called mental health, is automatically a quack. And in fact, we can even get legal action, serious action against them. But the propaganda operation, which is a mind operation, starts with the organizing principle.

It's a wondrous thing to behold. A wondrous thing to behold. I spoke last month about my book AIDS, Inc, which was published in 1988. And I didn't have time, of course, how could I? To describe everything that I wrote in the book that added up to the fact that HIV was never proved to cause anything. But, that was, you might say, my first real acquaintance with a gigantic organizing principle propaganda operation as the reporter, 1986, '87, when it was universally accepted that HIV caused AIDS. And if you were a researcher who insisted on pursuing other causation ideas, you would be blackballed from receiving any funding. And the media had completely swing over to this. And it was a juggernaut, even then.

And I said, "Well, they're all wrong. And I can prove it." And I did. Yes, I'll give myself a pat on the back for that. Point is, I got a firsthand look at how big the organizing principle can be. How ubiquitous, all encompassing. How certain everybody can be and what the arguments are. Well, I had a cousin who died. All of a sudden he got sick and he died. And he had all these inventions, just like what they're talking about. So, therefore, HIV must be the cause of AIDS. No, it doesn't follow. I'm sorry. And you know because of my work as a reporter, I've had to get a little belligerent at times with people. Interviews on radio and so forth and so on.

I'm not what you would call in many respects a timid soul. So if I have to take somebody's head off, that's just the breaks of the game. I mean I'm being frank with you. Somebody comes at me with that, you see, I don't mean they're just sort of bubbling over with it. But if they use that as an attack and they're serious about it, you see, and they're really trying to make a point with it, then they have to experience a little bit of discomfort. No. That doesn't prove that



HIV causes anything. It proves that your brother or cousin or whoever he was got sick and he died all of a sudden. That's all it proves, you see. And it also proves you don't know why. I get that. I understand it. You don't know anything else. That's all. There are ways of finding out if you want to. But listen, if you're satisfied with HIV, go your merry way. That's it. But don't try to use it as a sword with which to attack me. Because I believe in your freedom to say that HIV killed your cousin. I believe in your freedom to say that you're HIV positive. I even believe in your freedom to take a drug that has been proven to cause complete disruption of the reproduction of the cells in your body as a treatment for AIDS if you absolutely insist on it. Although, I will do what I can to provide you with the information on which to base a sound decision.

Propaganda. Organizing principle. What organizing principles do we buy into that we are not aware of? Such that we take action based on it. We conceive of our own future and destiny and ourselves, our individuality, our power, our creativity, our imagination, all of those become affected by the fact that we bought into some organizing principle of propaganda. They are affected negatively by that. You see. It becomes important to us to know, therefore, individually, what organizing principle of propaganda have we bought into. To know. Because your ultimate freedom, your ultimate power, your ultimate imagination, your ultimate capacity to invent realities of your own making, to invent your own destiny, your own future, to understand with a depth, a profound depth of insight, what you most profoundly desire in life and to make it fact in the world for yourself all of that, which is basically why I do the work I do because this is what's the most important thing to me. What I just enunciated here. All of that is affected by what organizing principles, propaganda, we have bought into that we have not yet perceived that we bought. People like to say, well, I know whatever's important to know about anything I already know it. I get that sometimes from people. Very good work, Jon. This is terrific. Of course, I knew this five years ago and I know all of the cons and the apparatus of the elites and this and that, you know to make the world into the kind of place we don't want to live in. I understand all of it. Yes, yes. Good work. Really? Really? I don't think so.

Each one of us has bought something. Bought propaganda completely. That it would be extremely beneficial for us to unearth, look at, understand, get rid of.



That's why I chose this controversial topic today. Because it's not just a candy bar. Oh, well, I'll eat that candy bar and then all propaganda will go away. No. Sometimes you have to challenge yourself to see through the big con.

Jon Rappoport. Thanks for your attention. The website is <http://nomorefakenews.com>. We'll see you next month on the Solari Kingdom. Queendom. In the Solari empire of truth as I like to call it. Because it's such a wonderful place. Thank you, Catherine. See you all next month.

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