

Meningitis B-movie



MIRI AF

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It started in [Club Chemistry](#) near the [Canterbury Campus](#), reports [Cameron Charters](#) - and the vaccine costs [£330](#).

I mean, I could just leave it there. The usual sniggering Masonic signatures are already stamped all over this theatrical production, with the CCs and 33s everywhere - and Canterbury is an especially Masonic location, with a [museum devoted to the craft](#), and a lodge right [inside the university itself](#).

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In case you are lucky enough to live in a blissful news media vacuum and are unaware of the latest Terrifying National Emergency, UK newspapers have been ignited into a high state of excitement this week by reports that several students at the University of Kent in Canterbury have been [infected with meningitis](#), with one reported to have died. The outbreak is also said to have affected local schools, where a sixth-form pupil has reportedly passed away, and a baby from nearby Folkestone is currently [fighting for life in hospital](#). Reports also claim the outbreak has already [spread to France](#).

Who could possibly have predicted such a terrifying, tragic situation?

Well, actually, the UK government. Just months ago, in the last quarter of 2025, the government simulated a pandemic exercise, Exercise Pegasus, involving young people and a meningitis-like illness. Stage one of this event was [in Kent](#).

As The Telegraph [reported in November 2025](#):

“Schools across the UK were locked down this autumn as part of a state drill to tackle the threat of a new deadly virus.

Exercise Pegasus, which concluded last month and involved all major government departments, was the biggest pandemic simulation exercise the country has ever held.

Those participating in the drill were told a novel enterovirus had broken out on a fictional Island in southeast Asia before spreading across the world.

Unlike Covid-19, which disproportionately affected older age groups, the new virus was most lethal in the young. The virus, “EV-D68”, was said to cause respiratory failure, brain swelling and – in rare cases – paralysis in infants, children and teenagers.“

More than 90% of meningitis cases are said to be [caused by enteroviruses](#), and are characterised by [brain swelling](#). The condition most often affects [infants, children, and teenagers](#).

In other words, the latest supposed “meningitis outbreak”, that is allegedly affecting the under 25s, is just a scripted pantomime - Exercise Pegasus gone live. The UK government simulated a meningitis outbreak affecting young people in November 2025, then in March 2026, the government’s propaganda division, the establishment press, tells the population it’s real. Just as happened with “covid”, when a “coronavirus pandemic” was [simulated by researchers](#) three months before one supposedly happened for real.

We don’t need to employ any professional statisticians to determine that the chances of simulating a situation which then promptly occurs exactly as you simulated it, just months later, *twice*, are effectively nil. The “meningitis outbreak” is no more real than the “covid” one was, and both of these situations are equally as real as the respective simulations - [Exercise Pegasus](#) and [Event 201](#) - they were based on. That is to say, not at all.

However, those of us of a conspiratorial disposition have long since predicted a “pandemic” that would disproportionately affect the young, based on then-Prime Minister Boris Johnson’s [declaration in 2022](#), when asked about the possibility of future lockdowns:

“I’ve got to be absolutely frank with you, there could be a new variant more deadly, there could be a variant that affects children, that we really need to contain...”

So we could immediately discern from that statement that there *would* be a “new variant” that *would* affect children - the scriptwriters were giving us a little early [Easter Egg](#) - and here it is.

The social controllers would be unlikely to get away with another “covid” situation, where those most at risk were said to be the elderly and vulnerable, whilst young, healthy people were expected to make enormous sacrifices on their behalf.

But if the situation is switched, if it’s now the young said to be most perilously in danger, then public sympathies will be much easier to manipulate.

We already have a [vibrant blonde young girl](#) succumbing to this latest deadly plague, whilst an [adorable little baby](#) is fighting for her life in hospital.

Do you not care about vibrant blonde young girls and adorable little babies? Are you a monster?

The adorable baby [has a GoFundMe](#), which the media is eagerly promoting, and which has already easily surpassed its target. Of course, we are all in favour of desperately ill children getting the financial support they need - but there are thousands of desperately ill children all over the world, most of them completely ignored by the media, and receiving very little in the way of financial support from strangers, so it’s curious that the media has chosen to promote so heavily this particular child.

The immediate, high-profile, very lucrative GoFundMe is something that often appears in sensationalist media events designed to manipulate the emotions, and it has

been speculated that these high-profile fundraisers are a method of compensating the crisis actors involved.

Now, at this point, sceptics may say - and they have - “but I live in Canterbury. My child goes to a school there. We live near the university. People are genuinely sick.”

I have no doubt that they are. On any given day, thousands of people are genuinely sick, and this is particularly true at universities, where the signature student lifestyle does not exactly resemble the embodiment of good health. Drinking too much, sleeping too little, subsisting on Pot Noodles and Pro Plus, the standard student staggers through university in a bleary daze of headaches and hangovers.

And guess what? The supposed symptoms of the current “meningitis outbreak” just so happen to be nearly [indistinguishable from a hangover](#).

In the same way that “covid” symptoms were indistinguishable from a cold, by equating the “symptoms” of a supposed deadly disease with a benign condition that affects thousands of healthy people every day (especially at a university), you successfully maximise panic and terror in the target population.

And the vigorous creation of such panic is another way we know the “meningitis outbreak” is fake: in a real emergency, the last thing you want is mass panic, as panic causes people to behave irrationally and unpredictably, which will only make the dangerous situation even more hazardous.

In a real emergency, attempts are made to contain the situation, to quell panic, to try and restore normality as quickly as possible in order to minimise unnecessary harm and disruption.

Splashing the whole affair all over the newspapers within a matter of hours and terrorising the populace with reports of dead youngsters - when in fact, only two young people have died, a tiny fraction of the more than [4,500 people](#) aged 10-24 who die around the world daily, with little to no media attention - is not an authentic response to a real emergency. It is, rather, psychological warfare strategically devised to manipulate behaviour.

What behaviour are the social strategists hoping to induce?

Primarily, I believe, this is about reengineering the young to accept an entirely different kind of future. Namely, the one laid out by creepy tech billionaire, [Marc Andreessen](#), and backed up by WEF gremlin, [Yuval Noah Harari](#). These men have informed us that, in the future, ordinary people effectively won't leave their houses. They will learn, work, and socialise entirely online, existing solely as avatars in the metaverse.

We are told that the latest meningitis outbreak has primarily affected university students, who are largely aged 18-21. This means that they were aged between 12 and 15 when "covid" entered the narrative, a fundamental and formative developmental window.

They therefore spent their early adolescence not increasing their independence, making new friends, and enjoying various adolescent rites of passage involving bike sheds, cigarettes, and White Lightning, but instead, sat in their bedrooms on their own, staring at screens.

They did this for two years.

We can only speculate on how profoundly this will have affected them at a developmental, emotional, and neurological level, but if you were an evil social engineer wanting to prime a generation for a future where they never leave their rooms, you would induct them into it at a vital formative stage so it goes on to feel "normal".

As one of the students at the University of Kent [said](#):

"It's like Covid II... A lot of students have left. Three of my housemates have already gone.

*"I think people are less panicked than with Covid, because **we've been through this before**. And **everyone is used to online exams now**. So people are calmer. But **nobody is going out**. It's really, really quiet." (Emphasis mine.)*

For people who were aged over 25 when “covid” entered the narrative, such a situation did not feel normal and never would, because they had substantial, formative life experience beforehand to compare it to. But for those who were still school-aged when covid began, it is “normal”. It’s familiar. Therefore, the “lockdown life” - spending all your time alone inside, embedded in a virtual world - was laid down as a baseline when their brains were in a rapid state of development, creating the neurological architecture that would serve them for the rest of their lives. That’s what the social controllers are capitalising on.

It’s not a secret that the ruling classes want to dismantle bricks and mortar schools and universities and [transfer learning to online home curriculums](#), so making schools and universities appear “too dangerous” to continue, with learning at home a safer, cheaper, and more comfortable alternative, will be an appealing choice to those already used to it.

However, there is another likely goal inherent to the current panto pandemic, as well - these psyops are nothing if not laden with plot twists - in that, although the disease simulated in Exercise Pegasus was viral in nature, the current strain of meningitis said to be circulating - strain B - [is bacterial](#).

This doesn’t surprise me at all, because there’s been a lot of focus in alternative health communities on how viruses aren’t real / aren’t contagious / aren’t the cause of disease (which I believe to be true), and that if we can therefore just prove that to everyone, the whole global conspiracy will be exposed and everyone can live in peaceful harmony forever (which I don’t believe to be true).

I’ve had several arguments with the no-virus zealots who take this position, and said to them, “look, even if we successfully convinced the world viruses aren’t the cause of disease, the ruling classes would just instantly move to some other cause, like bacteria, instead. They already have vaccines for bacterial conditions.”

And lo and behold, here we are.

Bacterial conditions are typically seen as more scary than viral ones, with even official sources admitting “[viral meningitis](#)“ isn’t usually a particularly big deal, but bacterial, that’s the big one, that’s what you’ve got to be really afraid of.

So that’s what they’re claiming is circulating, even though official sources themselves seem to be confused about whether bacterial conditions are actually contagious (“[infectious but not contagious](#)“ one source states). “A bit contagious but not very” seems to be the main, vague, official line - but, conveniently, such conditions are supposedly spread by the two pastimes particularly enthusiastically engaged in by university-aged people - [smoking \(or the trendy modern equivalent, vaping\) and snogging](#).

However, real-world evidence contradicts this mythology, as experiments where healthy volunteers have been directly infected with the bacteria said to cause meningitis have [failed to produce any symptoms of ill health](#) in the volunteers. This is what we normally see in experiments where researchers attempt to prove the contagion model: that there is no evidence it’s real, whether the disease in question is said to be caused by viruses or bacteria.

Therefore, whatever people are ill with in Kent - and yes, I do believe people are ill, as at any given time, thousands of people all over the world are ill - it’s not the result of something they “caught” from another person, because there is no reliable or consistent evidence that bacterial conditions are contagious, nor that bacteria cause the symptoms of disease they are said to.

So how is meningitis B actually diagnosed, in order to sufficiently terrorise people and “prove” we have a deadly outbreak on our hands?

As will surprise absolutely no-one, [the PCR test](#) makes a big appearance: the same useless theatre prop that almost single-handedly propped up the covid nonsense, and about which its own inventor [cautioned](#): *anyone can test positive for anything on the PCR. It doesn’t tell you that you’re sick.*

During “covid”, we did not have an epidemic of unwell people, but we did have an epidemic of “positive cases”, including of people who had absolutely no symptoms of any disease, because all you have to do to get a positive on the PCR, for any given condition, is cycle the result a lot of times. That will give a lot of positives. If you then want to “prove” that an intervention, like a lockdown or a vaccine, has “worked”, you simply dial down the number of cycles. Then you’ll get a lot of negatives. A pretty simple formula for a performative pandemic.

Whilst covid was said to be “viral”, fake bacterial epidemics caused by unreliable PCR testing are also a well-known phenomenon, as the [New York Times reported in 2007](#), when a hospital in New Hampshire in America falsely reported a “whooping cough epidemic” based on PCR testing.

Later, more conclusive testing determined that actually, not only was there not an “epidemic”, but *not a single person* had been infected with the whooping cough bacteria: it was simply that the thoroughly unreliable PCR had given a flurry of false positives and caused mass panic. The New York Times reported:

“For months, nearly everyone involved thought the medical center had had a huge whooping cough outbreak, with extensive ramifications. Nearly 1,000 health care workers at the hospital in Lebanon, N.H., were given a preliminary test and furloughed from work until their results were in; 142 people, including Dr. Herndon, were told they appeared to have the disease; and thousands were given antibiotics and a vaccine for protection.”

Mm, sounds familiar, doesn’t it? Thousands of healthy students in Kent are currently being dosed up with antibiotics (literal translation: anti-life), whilst pharmacists have sold out of the meningitis B vaccine, which UK health secretary Wes Streeting confirmed will be [made available to Kent students from Wednesday afternoon](#) (the current “strain” being one today’s generation of students haven’t been vaccinated for, the vaccine only being made available on the NHS to babies born after 2015).

This seems a rather curious move, when you consider that the meningitis B vaccination programme is a two-dose programme, with the doses spaced at least four

weeks apart, and “protection” said to be [fully active about two weeks after the second dose](#).

However, bacterial meningitis is said to kill within “[a few hours](#)” of symptoms first appearing.

So, giving students the meningitis vaccine in an “outbreak” that is said to be actively spreading right now will ensure seroconversion kicks in about six weeks after they have already died.

It makes as much sense as hospitals giving the tetanus vaccine if people go in with a scratch. The “protection” wouldn’t kick in until long after the patient had already succumbed to the disease.

Obviously, at this site, we don’t believe in the mythology of vaccine “protection” at all, but even if you invest in the official story on these products, the “logic” often doesn’t add up: that is to say, even if meningitis B vaccines worked as advertised, giving them to students in the middle of an active outbreak, where protection doesn’t kick in for six weeks, is going to do little, if anything, to control the disease - it already having supposedly spread to London and France. Indeed, even the [BBC admits](#) that “the MenB vaccine is not great at preventing that transmission of bacteria between people”.

So what might the real purpose of this injection be?

Casting a critical eye on the [meningitis B vaccine package insert](#), we see all the usual horrific potential side effects, but one that particularly stood out was section 13.1, where it is cautioned that:

*BEXSERO has not been evaluated for carcinogenic or mutagenic potential or **impairment of male fertility***

So the vaccine might cause cancer or genetic mutations (almost all vaccines contain this disclaimer), and it also might destroy male fertility. A vaccine that is being targeted at young adults who are at the height of their fertility.

Are all the young men currently lining up for this vaccine giving their fully informed consent, and accepting the injection knowing there is no data on whether it may harm their fertility?

Of course they're not, but to target young men with a sterilant before they're thinking of having children (young women having already been so-targeted with the [sterilant HPV vaccine](#)) makes perfect sense for a depopulation-obsessed ruling class, who not only wants the citizen of the future existing alone at home online, but also wants to ensure they do not reproduce.

So that's what I think the "meningitis outbreak" is: a staged, scripted production, presented as real in order to manipulate behaviour to conform with key agenda items: namely, encouraging young people to accept a future where they exist solely at home online, and where they do not have children. The [stage is already set](#) to suggest that meningitis can harm male fertility: as it often is in these productions, "the disease" is blamed for what the vaccine did (see "long covid").

The good news is that, just like covid and all their other tedious and unoriginal psyops, the ruling classes can't get what they want without our participation. They need millions of us to consent to the deception, by agreeing to appear as unpaid extras in their latest movie production. They need us to act scared, wear masks, post positive PCR test results online like they're pregnancy tests, and all the other rubbish.

And of course, they need us to encourage young people to get vaccinated.

Covid came as a shock. We hadn't seen such a production before and it took a while to figure out what to do.

This one isn't a shock. It's eminently predictable (and predicted). So we simply have to reapply the strategies we successfully used in covid: don't conform, don't co-operate, don't consent. That's how we make sure this derivative little drama gets the dreadful reviews it deserves - and that there's definitely no sequel.

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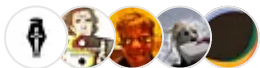
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Was Pegasus, the flying horse, the nearest they could get to the flying pig without totally dobbing themselves in? (Revelation of the method)

Buckle up: it's clown car time again. How quickly it comes round!

Happy Easter Miri and everyone !

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You didn't disappoint, superb as always Miri. [beers emoji]

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