

No human force, or act, or drama, or direction, among others, can override the voice and cry of millions of people, and everything faced when amplifying that.

Whether direct and indirect, simple and sophisticated or new and old, weapons, or dramas, or acts, or directions, or hybrid-strategies, among others, formed against the legit causes of millions of people will neither prosper nor stand the test of time.

If I researched on revolutionizing and innovating software product management to meet the need of millions of afflicted citizens, it is fair enough if I model injustices, or targeted-human-rights-violations, among others, I experienced to enhance not only human-health-centric-value-creation-spheres but also all interactions for value-creation. Right now, it ain't the writings of Voltaire, nor Scottish empiricists, nor the medieval philosophers of Germany, shaping, or that will shape, the world but this book, or work, or testimony, or research, or collection, among others, of a truly lived experience of mine as a man. No wonder, right now, this research, before it even gets published officially, is one of the most impactful and influential work of Doctor of Philosophy which has different countries, executives, politicians, clergies and researchers, among others, talk about and form different levels of opinions against the harmful, unethical, behavioural problems of the different entities deciphered and the corresponding non-violent, professional, intervention method used.

By Michael Mulate Argaw

Towards a CX Report and Service Model Canvas — a Case Study
on Observation of Dozens of Customer Touchpoints in the
Ecosystem of the Finnish Health Industry.

Ongoing work

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Tentative Abstract

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From customer-service, talent-acquisition, marketing, digital-transformation, strategic-renewal, organisational-restructuring, intermediation, expansion-and-down-sizing and cost-cutting-and-saving-measures through operational-misconducts, such as deliberate-mis-framing, or mis-referral for an observation, cases of superstitious and preposterous mis-diagnosis, in-house-criminology and a harmful weaponization of the infrastructure of the health and wellbeing services and inter-and-intra-institutional flow of mis-information to cover up and deflection of scandals, among others, in the ecosystem of the health industry of the state of Finland has passed through massive changes from time memorial. As a result, we operate in a swiftly changing environment where interventions, or frameworks, or service-model-canvases, or solutions, are executed agilely to solve strategic, operational, problems observed and identified in the ecosystem of the Finnish health industry, such as the administrative-regions, private healthcare system, the-justice-system, media, police, government and political parties, among others. While dozens of academic and practical thesis works have been carried out about the ecosystem of the health industry of the state of Finland, seldom did the primary-observers, or users, or customers, of the safety-critical-service-

providers ventured to decompose their conscious, real-time, empirical and rational observations, or research, of customer experience into actionable insights, or recommendations, or technical CX report, or service-model-canvases, among others, to support strategic-decisions, promote accountability and maintain a healthy industrial-ecosystem, among others, as an informal-supervisor, evaluator and judge and formal customer of the services experienced. In this thesis project, the formal author, observer, researcher and customer and informal judge, executive, supervisor, evaluator and manager of the ecosystem of the Finnish health industry, harnesses his conscious, practical and scientific observations and professional, or academic, interpretations and evaluations to unpack, decompose, decipher and shed light on safety-critical-service-business-processes, customer-touchpoints, operational-mis-conducts, problems, acts and actors, and produce a technical CX report and service-model-canvases for the holistic enhancement of the service-business-process, or value-creation-sphere, or customer-touchpoints, among others, experienced in the Finnish health industry in general and the integral satisfaction, safety, security and well-being of each and every customer in particular.

Keywords: Customer Journey, Customer Experience, Customer Engagement, Customer Touchpoints, Value Creation, Value Co-destruction, Value Proposition, Destruction Proposition, Value Co-creation Sphere, Customer-Centricisime, Value Co-destruction Sphere, Pain Alleviation Canvas, Pain Elimination Canvas, Reviewitall.

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Glossary

AVI	Aluehallintovirasto(Regional State Administrative Agency)
B2C	Business to Customer
B2B	Business to Business
CX	Customer Experience
C2E	Customer to Entity
E2C	Entity to Customer or Service Provider to Customer
ECHR	European Court of Human Rights
ENT	Ear, or Nose, or Throat Specialist
GD	General Doctor
GP	General Physician
G2B	Government to Business
G2C	Government to Customers
HUS	Helsingin Yliopistollisen Sairaalan (Helsinki University Hospital)
MD	Medical Doctor
OM	Omalääkäri, Mehilinen or now Terveyskeskus Mehiläinen
Reviewitall	Prescribed Software Product for Powering Users or Customers
Sep	September

SO	Service Offering
SYL	National Union of University Students Finland
TUT	Tampere University of Technology (Now part of Tampere University)
USP	Unique Selling Proposition
Valvira	National Supervisory Authority for Welfare and Health

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1 Introduction

The safety critical service subject, or client, Michael Argaw, has been living with a slight tinnitus on his left ear since 2016. Despite his exposure to different kinds of high-pitched noises, it has been couple of years since he last carried out a hearing-test or audiogram. As a result, on a scheduled appointment with Oma Laakari, Mehilinen, Terveyskeskus Mehiläinen now, a private entity which represents the public health services of the Western Uusimaa Wellbeing Services in the district of Espoontori, he would visit a doctor whom he did not meet before on the 19th of September 2023(Appendix A8; Argaw 2023; Argaw 2024). Nevertheless, before Michael's visit, two incidents would unfold: "a) a false reservation call review which will not be corrected before the 20th of September 2023 would be written on Omakanta, Finland's national health register system, according to Figure 22 and Figure 23, and b) Michael would receive a tacit hint he would be framed on his way to Omalääkäri on the 19th of September 2023, according to the man on a motor cycle who bumped Michael(Appendix A6)." Once Michael arrived at Omalääkäri, he would experience a deviant, or abnormal, customer service: "Maiju Malmberg of Omalääkäri — the young, skin-headed, medical doctor, who was attending Michael then, as opposing to carrying out a basic hearing test and streamlining him to an ENT-specialist, or an audiogram secession, albeit understanding his basic need as a goal oriented customer — would venture on asking unnecessary questions, such as if Michael is involved in politics, and if somebody has ever attempted to attack him, among others." In reply, Michael would tell her there was a time when somebody whom he increasingly suspects of having psychosis, or some sort of premium motivations, among others, would throw deadly items, such as shaving machines, screw drivers and glasses, among others, on him, among others (Appendix A2). The doctor would ask Michael if what he is saying is delusional. Cutting short tangentially, Michael would tell her what he is saying is real, he has witnesses, and the matter is legal as opposed to clinical (Appendix A2). Degenerating further, Malmberg would ask Michael: "What would you do if you get attacked?" "If somebody would attempt to kill me, it is natural I would defend myself," he would reply. At last, she would ask Michael why he would need a referral to an

audiogram or ENT. He would tell her 1) he has tinnitus on his left ear [which gets agitated and aggravated with a persistent exposure to high pitched sounds or nuances], 2) for couple of years, he has been exposed to a persistent nuance of planes detouring through his vicinity though he lives about 30KM away from the Helsinki-Vantaa airport(Appendix A5), 3) and he has been exposed to different types of disgusting, immoral and high pitched nuances in the building he lived in for couple of years[starting in late 2017], the resultant of which might have affected, or harmed, his hearing system, apart from temporary agitation and distress(Appendix A1). In addition, he would tell her he last carried out an audiogram years ago. Nevertheless, the doctor, as opposed to providing a tailored, on demand, service customer-centrally, such as checking [or offering to check] his ear utilizing the basic materials available in the shelf, going above and beyond her mandate, or what she needs to do first, would ask Michael unnecessary legal and political, among others, questions regarding the high-pitched nuances he experienced. However, answering some, Michael would tell her unless she is interested in writing a support letter to Police his report of suspected empirical software engineering crimes discussed in Appendix A1 and A5 get investigated orthogonally, legal and political matters cannot be dealt with her but only medical, such as his pressing need for seeing an ENT specialist, or carrying out an audiogram, among others." Degenerating out further, the doctor would ask Michael if he is involved in politics. He would tell her he has been running popular English language discussion forums [Foreigners and Finns, among others] advocating against racism and the unjust operational conducts of dozens of private, non-gov and public entities of the state of Finland. In addition, he would tell her reaching hundreds of thousands to millions digitally, he is a human rights activist, and opposition politician, advocating against tyranny in Ethiopia, among others, actively (Argaw 2024). Moreover, he would tell her he has been politically active in criticizing BigTech and its partners for the heinous, systematic, cultural and political, among others, crimes they co-created on him innovatively directly and indirectly (Appendix A1). The doctor would ask Michael to wait in another room where he will be met with a nurse who asked him unnecessary, boring, provocative, disrespectful, un-professional, personal questions. Michael has never experimented using drugs. Michael consumes

about 18-20 glasses of beer, or wine, a year and even the tea he takes is decaffeinated. Nor does he have any criminal background. Nevertheless, as opposed to receiving an appropriate service modelled on his need as a safety critical service customer which will not cost him more than 100-200€, and not bring him about a lifetime harm yet to be quantified directly and indirectly, Michael would be swatted to Espoo police, among others, as unconscious, psychotic and pre-disposed to violence, among other fictions (Appendix A7). Having arrived, Espoo police — which neither turned up during Michael's call to 911 immediately after a report of a crime-scene nor bothered to investigate Michael's corresponding detailed report of attempted murder, or assault, by a suspected, violent, psychotic, person, among others (Appendix A2), without substantively validating any of the allegations directed at him, or inviting him to the public court, or presenting a document coming out of a due, impartial, civil, public, process of the justice system — would ask Michael to walk to the ambulance. Confidently putting his hands in his pockets, the safety-critical-service-process-subject would smile and ask for the report from the doctor who, smiling, would tell him he can get it later. Then after, the super-young doctor, from a bit afar, on the other side of the door, smiling, would show a Nazi salute to the safety critical service subject. As a conscious man who is in control of his environment, Michael, except smiling, avoided over-reacting, and making unnecessary statements. Because, according to him, it was obvious he was getting framed unethically. Walking into the ambulance himself consciously, he would seat in the chair and head to Jorvi's acute emergency psychiatric ward where, up on reception, he would be interrogated, "why did you say the planes and etc...", though Jorvi's acute emergency psychiatric ward is not a venue of interrogation of a conscious, rational, collected and normal person about the legitimate, suspected, crime reports made to the police hitherto, he would clarify the context consciously and peacefully: "That he answered to the questions of the doctor though it was out of context and perverted intrinsically: 'That high pitched nuances of aeroplanes detouring through his vicinity repeatedly aggravated his tinnitus, it has been a long time since he last carried out an audiogram and, therefore, he needed to carry out an audiogram or see ENT(Appendix A5).' " Underlining he is conscious, non-psychotic and non-violent apparently, Michael would iterate to the reception

professionals, Heidi and Outi of Jorvi's acute emergency psychiatric center, the false, or perverted, hypothesis, or medical report, by Malmberg, "Making a plausible statement he is involved in politics, among others, Michael is unconscious, psychotic and predisposed to violence, among others," is plausible, preposterous, superstitious, unacceptable and fallacious intrinsically. Nor can be replicated apparently. Therefore, he must be dismissed from the acute, unconscious and psychiatric emergency detention center unconditionally. Without answering his kind, assertive and strategic questions, "tell me about how I am unconscious, or mis-interpreting, the environment here and now, or, if there any, the recorded history of psychotic acts and violence regarding me," citing the vague statements of the referee doctor, Malmberg, [and failing to validate any of the allegations presented premising on the hypothesis of Malmberg in the real-time substantively], another preposterous and fictitious decision would be made the service subject get detained at Jorvi's acute psychiatric ward to pass through a phase of observation lasting 2-3 days despite Michael, unpacking, deconstructing and demolishing allegations of unconsciousness, among others, led an awareness exercise as a conscious person during the reception secession(Appendix A8). While Michael was in Jorvi, with a vegetarian food and bottled water brought to him from outside, he stuck in his room doing what he normally does: "Doing errands on his personal computer and calling up, among others". Nevertheless, there was a moment where a suspected mental patient would approach Michael and act sparing with him. Michael — who was on his way back from seeing off his visitors then — would ignore the act and continue his way into his private detention cell. In one morning at Jorvi, where Michael stayed from the 19th to 21st of September 2023, an anxious, unprofessional and unstable sounding male nurse would walk into Michael's detention cell and insist Michael take a mental medication the likes of which he never used. Nor depended on before. "I am conscious, non-violent and normal. As a result, I don not need to take any medication which I do not need and never depended on. In addition, I have already disputed I am here," Michael would iterate consciously, non-violently, normally and politely. Although the nurse would not be administering any medication, or any liquid chemical substance under the guise of, to Michael — nor will show a Nazi salute expressing insecurity, anger and fear towards

Michael's recording capability of the detention room harshly and unprofessionally — he would attempt to enforce a psychiatric medication, or a liquid chemical substance under the guise of, which could have manipulated how Michael would perform, or exhibit, in his upcoming meeting with Dr Victor, among others, significantly (Argaw 2025; Appendix A8). Dr Victor Volkov — as opposed to focusing on verifying and validating the alleged hypothesis for which the safety critical service subject was directed for an empirical and rational observation, such as suspected unconsciousness, psychosis and predisposition to violence — would interrogate Michael about legal, historical and political, among others, matters which, in the first place, are not in the jurisdiction of the value co-creation sphere of the psychiatrist and the suspected, alleged, unconscious, pre-disposed to violence and psychotic subject, mixing up with perverted, mis-framed and disrespectful statements: “For instance, the scientific observations, or reports of suspected crimes, Michael made to police hitherto, such as reports of suspected attempted assault, or suspected psychosis, in which a suspected mental patient would throw deadly items at him, report of a request for ransom [from Michael] coming from foreign numbers and report of internal and external nuances, among others (Appendix A1; Appendix A2; Appendix A5; Appendix 19A)” In addition, Victor, by quoting what Michael did not say earlier, or though the alleged dispute about what Michael said days ago may not necessarily be relevant there and then, premising on hear says, would allege, make up and laugh at Michael while interrogating and gathering information about off-boundary personal questions: “Are you a politician? Does anybody fund you? Which party do you belong to? Do people recognize you on the streets?” Nevertheless, Michael would tell the psychiatrist, except verifying and validating if he is unconscious, predisposed-to-violence and psychotic, as alleged by the referring doctor, he is not willing to discuss about legal and political, among others, matters on which Victor, among others, do not have legal, academic and professional, among others, domain, insights and expertise, among others, and that [if Victor can not validate the false hypotheses, or allegations, made on Michael in the real-time, dealing only about ear matters] he should be referred to an ear doctor, or audiogram, instead. Nevertheless, Victor would be insisting on interrogating Michael about personal matters disrespectfully (Appendix A8). Iterating his political activity and opinion is

private and the jurisdiction, or value-creation-sphere, of his encounter with the doctor is not permissible for unnecessary interrogations transcending the justified need, or process, of validating the basic normality of his mental state, Michael would refuse to answer some of the disrespectful, unethical and torturous interrogations of the psychiatrist directedly and indirectly. Nevertheless, Victor — continuing with his torchersome interrogations, and mockery, on the personal political activities and legal affairs of Michael with the state of Finland, among others — would humiliate the prisoner of concise, or safety-critical-service-subject, further even when it was clear Michael was very normal and Victor was acting and degenerating out unethically and unprofessionally time and again. At last, the Doctor and nurses at Jorvi — implicitly falsely inferring Michael was in a state, or episode, of psychosis during their interrogation, when he was not apparently, and recommending and referring he should pass through another day of observation by advanced experts at the P7, Töölö, intensive psychiatric center — would finally acknowledge Michael was neither unconscious nor predisposed to violence (Appendix A8). On the 21st of September 2023, the very day the safety critical service subject arrived at the Töölö critical psychiatric detention center, a nurse would come to Michael's room and ask if he would like to get some food though as opposed to individually, food is served in the dining room communally. "No, thanks," Michael would reply. The following day, on the 22nd of September 2023, in an hour long secession with Mika(nurse) and Eeva(the alleged advanced expert though her profile said otherwise then), Michael would be asked about why he is not eating the food from the detention center. He would tell them: "I have my own diet. In addition, I have somebody bringing me food, salad, lentils and etc, among others, from outside. Moreover, as far as my negative and unjust experience to date is concerned, I never consented to any unjustified, or unethical, process in anyways, or by any means, (Appendix A9)" Nevertheless, despite refusing, correcting and clarifying consciously, Michael, yet again, would be interrogated about the suspected crime reports, or scientific observations, he made, his political affiliations and if any entity is funding him, among others. In addition, he would be pressured to change his standing ground, or premises, or experiences, or account, of empirical scientific observations regarding the suspected, empirical-software-engineering, crimes committed on him reported to

police several months ago (Appendix A9). What is tantalizing is that the cold hearted interrogation was happening with a foreground scene of a false review written on Oma Kanta, the Finnish health registration system, "Michael is unconscious, among others. As a result, he is receiving critical treatment under the intensive, unconscious, care unit at the moment," when Michael, in the interrogation and mis-framing phase dubbed, "observation," proved conscious, non-violent, rational and, beyond any shadow of reasonable doubt, not needing any involuntary detention and emergency acute treatment that he consciously, logically, challenged the alleged, qualified, professionals to describe, or ascribe, a real-time, mental, pathological, cause-effect, construct harnessing his conscious, active, analytic, judgment rationally. Despite Michael's repeated, conscious and rational clarifications, and corrections, to their plausible research method, methodology and grounded-theory-building-process, and a kind request for a legit, normative, real-time, tangible, evidence regarding their bogus, purported to be scientific, acted, allegations of mental health problem resulting from a pathological diseases, the designated experts, Eeva and Mika(nurse), would insist on interrogating him about the suspected crime reports, or scientific observations, he made hitherto, his political affiliations and who funds him though they do not have any right to interrogate about politics. In addition, Michael would be pressured to change his customer touchpoints reviews, standing-ground, premises, experiences and empirical and rational scientific observations regarding the suspected crime reports he made to Finnish police several months ago(Appendix A9, among others). However, Michael would iterate legal and political matters, such as Appendix A1, Appendix A2, Appendix A5 and Appendix 19A, among others, can not be handled with health professionals. In addition, he would tell them unless they have a tangible case about how he, for the alleged pathological problem, or diseases of central nervous system, she alleges preposterously and superstitiously, mis-cognises his environment in the real time, legal and political matters, such as interrogation about his political affiliation, or if anybody is funding him, or empirical and rational scientific observations of suspected crimes he reported to the police hitherto, can not be front and centre of any real-time clinical jurisdiction of value-creation aimed at verifying and validating if he is normal enough to be removed from his involuntary state of

isolation in a detention ward where the air, water, food and persons, among others, Michael would be in contact with is controlled by disputing parties. Nevertheless, pondering and mis-interpreting on Michael's historical scientific observations, or the suspected crime reports made to the police [interpreting and ruling on which is not their duty and jurisdiction, if not their expertise, among others, unequivocally] deliberately, and incautiously, purportedly and preposterously alleging Michael mis-interprets his real-time environment due to a pathological diseases resulting from the mis-function of his receptors in the central nervous system deceitfully, Dr Eeva, the alleged expert — mis-diagnosing Michael with a fictitious, diseases-induced, disorder, a delusional psychotic disorder resulting from the pathological disfunction of the receptors in the central nervous system allegedly, purportedly, unethically, unprofessionally, irresponsibly and dark triadly — would decide to officially declare him as a mental patient on the 22nd of September 2023 harshly and swiftly after a secession which lasted an hour belligerently(Appendix A9). Repeatedly asked [for instance] about how Michael mis-interprets his real-time environment due to the mal-functioning, or pathological problem, of his receptors, or how and why she deduced he has a pathological diseases, or, after all, how she examined Michael has a pathological diseases in the central nervous system, Eeva would fail to answer the key, strategic, questions of Michael and a visiting doctor time and again subsequently (Appendix A11). Instead, violating medical ethics and the principle of legal jurisdiction unprofessionally, and without attesting any repeatedly observed fact in the real time, the alleged experts would diagnose Michael with a null and void pathological diseases [solely] based on their fallacious, unscientific, mis-interpretation of the scientific observations and suspected, fact-based, crime reports which Michael made to police several months ago about which let alone carrying out any judgment, they do not have sufficient knowledge, expertise, experience and information, among others. Nor can comment defending the suspected parties. Nor can preside over any legal cases of hear says as a formal and informal judge in anyways or by any means, transcending the real-time value-co-creation sphere. When Michael asked a strategic question, “tell me about how I am mis-interpreting the current environment abnormally, or differently from you, that I need to be diagnosed and detained involuntarily for a very critical delusional

psychosis disorder problem resulting from an alleged, critical, pathological diseases emanating from the disfunction of my receptors in the central nervous system," politely, consciously and confidently, except saying, "it seems to me, it seems to me, you need to be treated, you need to be hospitalized," harshly, Dr Eeva will not provide a logical, scientific, explanation, predicate and case-effect construct empirically and rationally repeatedly as a conscious professional(Appendix A9; Appendix A11). Instead, the doctor will make, or degenerate into, a vague allegation, or statement, premised on her preposterous and superstitious fallacy further without any evidence: "your neurotransmitters are over-interpreting the environment because of the imbalance of some transmitters in the brain." Without establishing whether Michael is mis-interpreting his real-time environment [fallacy 1], and building a fallacy Michael's brain mis-interprets its environment due to a pathological diseases falsely[fallacy 2], Dr Eeva — as if 1) she has established any allegation in the real-time, time and again, beyond any reasonable doubt, 2) she has studied, or substantively decomposed, a case-effect construct about her predicate on the relation between the condition of his receptors, or nervous system, to how [she interprets] Michael interprets his real-time environment at least once, or, repeatedly, beyond any reasonable doubt, making a null and void deduction Michael mis-interprets his real time environment unethically — would reach a swift, dark-triadic, unfounded and purported to be scientific, deceitful, fallacy, conclusion, instantaneously saying, "because of the imbalance of the transmitters in his brain due to a pathological diseases, Michael's neurotransmitters are over-interpreting the environment. As a result, he must take a medicine which helps with normal interpretation," boldly. In addition, the weakening, anti-psychotic, chemical applied to restless, talkative and violent patients prescribed by Eeva to Michael would have not cured, or would have not been the right chemical strategy, if Michael had the alleged, false, mental, pathological, diseases, or problem, for which he was declared a mental patient by Eeva preposterously and superstitiously. Then after, on the same day, on the 22nd of September, a 10 min call would be arranged between Michael and a harsh, impolite, disgruntled, woman who presented herself as a chief doctor who, based on the fabricated reports, or recommendations, of Dr Eeva, would do nothing but only communicate to Michael she has decided to detain and

hospitalize him as a critical mental patient, against his will and, most of all, real-time facts, among others, to receive treatment[torture or severe human and democratic rights violations for Michael] for an alleged mental, pathological, diseases induced from the mal-functioning of receptors without any tangible evidence preposterously and superstitiously. On the very day he received a null, void and abusive mis-diagnoses, Michael would be continuing his normal activity: “carrying out errands on his computer, posting on Twitter and calling up, among others” Nevertheless, due to the lethal air pressured into the thermodynamically-controlled isolated-system, Michael would experience a faster heart rate and near-suffocation-to-death, among others, after sleeping for couple of hours on the 23rd of September 2023(Appendix A10). In the meantime, though his attempt to meet up with a local psychologist in-person, or online, was prevented and suppressed by the false and abusive reviews of Mehilinen, Michael would continue meeting up with friends, families and foreign e-psychologists to impart about his subsequent experiences of abuse (Appendix A7; Appendix A9A). Following the official mis-declaration, or avoidable misdiagnosis, as a critical mental, pathological, diseases patient, Michael was not administered with any med/chemical directly before the 26th of September 2023. Seating still, he was working on his master’s thesis in software engineering (the software product management of Chewata) in the room where he was detained on the 26th of September 2023 when a skin-headed male nurse would turn up, show a nazi salute and shout, “why are you not taking the treatment? It sharpens your brain. You do not want to have a super interpretation,” vehemently. Then after, the nurse will bring a security guard and another employee with him, take Michael to another room and inject him with a debilitating and depressing substance which undermined Michael’s emotional and intellectual, among others, state and wellbeing immediately holistically: “For instance, as a result of the violent injection, Michael was not able to think, write and read as clearly as before, among others” Subsequently, Michael, in front of a visiting doctor, would ask Eeva to clarify on her plausible, unfounded and swift mis-diagnosis. Nevertheless, she could not justify, or answer, directedly time and again(Appendix A11). While in a state of forced detention and mis-treatment, the prisoner of conscience, Michael, would report real-time harms arising from the unknown types of liquid chemical

he was subjected to. Nevertheless, he will not be attended (Appendix A12; Appendix A13). In addition, he would report about a persistent, loud, banging sound happening even after the time of silence which prevented him from sleeping. Nonetheless, he will be abused (or suppressed disrespectfully) by a harsh male nurse who said, "I heard it. I heard it. Go back," showing a Nazi salute (Appendix A14). Details of the effect of two weeks of torture, or forced mistreatment, or abuse, or violation of Michael's human and democratic rights, among others, is listed on Appendix A15, among others. Hoping to find some relief and institutional support from ethical, customer-centric, emphatic and professional psychologists, Michael would sign up for a psychological secession with Inka Westerlund, psychologist and the colic of the suspects of crimes against humanity on Michael, who would refuse to log his account of abuse, among others, on OmaKanta, Finland's national health register system, and, instead, would bring a medical doctor to a Microsoft Team secession [once] in which Michael [again] would impart about his account of abuse, or harms, and the need for logging the information on OmaKanta unabridged. Nevertheless, Telkki, the medical doctor who listened to Michael's online secession while he was imparting his account of abuse once, and a medical doctor by the name Mikael, who has never met Michael online and offline, would write a purported, deceitful, medical review on OmaKanta as if they have attended Michael from 12.10.2023-13.3.2024 as an outpatient (Appendix 15; Appendix 16; Appendix 17). Having offered the worst customer, or illegal-prison, experience ever — isolating, interrogating, mis-framing, false-reviewing, abusing, brand-bashing, mis-communicating-over, mocking, torturing and experimenting everything possible on Michael under a superficial pretext of "the need for an immediate, acute, hospitalization and care" for an inexistent, false, pathological, mental, diseases, or predisposition to violence, for two weeks, after the 22nd of September, the mis-diagnosis, the reason for which Michael, declared as a mental patient, was detained illegally on the 22nd of September 2023 in the first place, will be equivocated as that which was done by mistake, according to the administrative court of Helsinki, among others. Then after, Michael, as an abused, discriminated and torched, among others, safety critical subject of the value chain of the Finnish health industry, would file nearly 200 pages of report [though the report

was written while Michael was under a negative constraint, home water and air supply getting tampered with lethal chemicals] substantiating the suspected crimes, injustices, human and democratic rights violations, misconducts, misdiagnoses and neglect, among others, he experienced to Finnish police, Valvira and the administrative court of Helsinki, among others. Pointing, or forwarding the matter, to Valvira, and protecting the state and implicated entities from liability and accountability, Finnish Police would refuse to investigate the case from the start to finish immediately while Valvira — a state entity customarily entrusted with dealing with suspected human and democratic rights violations, or destruction-propositions, or value-destruction, or misdiagnosis, among others, in the health sector — would transfer the matter to the Regional State Administrative Agency(AVI) which disregarded and referred the case back to HUS, the epicentre of the superstitious and preposterous scandal, or human and democratic rights violations, in the first place(Appendix A21A; Appendix A21B; Appendix A21C). As it stands, except the civil court, supreme civil court, the state attorney general, or chancellor of justice, or the parliamentary ombudsman, or the parliament of Finland and the European court of human rights, among others, nearly all the conventional, non-punitive damage enforcing, local, institutional, remedies in the jurisdiction of the state of Finland, Valvira and the administrative court system, have been exhausted. In this thesis project, weighing on the empirical and rational observational experiences in the customer touchpoints of the researcher, or the service subject, or the prisoner of concise, or the victim, a technical CX report and service model canvases, or frameworks, would be presented.

1.1 Context of the Case Entities in the Ecosystem of the Finnish Health Industry

The ecosystem of the Finnish health industry comprises of unique customers, entity(organizational) customers, the Finnish public healthcare system, the public health administrative regions, the private health care system, academia, police, the-justice-system, media, government and political parties, among others, working towards ensuring harm-centric, or value-destructive, services are not rendered to, or subjected on, any person consciously or obliviously.



Figure 1. Some of the entities in the ecosystem of the Finnish health industry.

Subsequently, when a customer complains about unethical, unsolicited, unrequired and subjected, harmful, harm-centric, value-destructive and life threatening, among others, services, it is the safety critical service offering role for which they are instituted for by applicable law — to protect the health, wellbeing, safety and security of all persons impartially in the jurisdiction of the state of Finland — that Valvira, the administrative court, Police and AVI, among others, take outstanding matters responsibly and imperatively, without any indifference, prejudice and discrimination, among others, swiftly. In addition, it is through a customer-centric, service-conscious and value-proposition-oriented-service-process and customer-touchpoint strategy aimed at ensuring no single

person is harmed, or have a desolating customer-experience, that the mission, vision and values of the entities in the health ecosystem of Finland would be realized directly and indirectly.

1.1.1 The Client, the Author, the Customer, as a Private Entity

The customer journey of the author, the-case-customer, the-service-process-subject and the observer of the service, Michael Argaw, started by the time when he called up to schedule an appointment for visiting a general doctor, or receiving a referral to an audiogram. As a result, an in-person appointment to the nearest healthcare service, which is represented by Omalääkäri, Mehilinen, would be scheduled for the 19th of September 2023. The intention for seeking service, or the context of the customer, is value-creation: “1) Carry out a hearing test, or audiogram; 2) and if possible, receive a support/recommendation notice from medical professionals regarding the suspected, health-harming, organized, scientific, directed, empirical-software-engineering, crimes he had reported before (Argaw 2024; Appendix A7; Appendix A8; Appendix A9; Appendix A18).”

1.1.2 Oma Lääkäri, Mehilinen, a Private Intermediary

With 840 bricks and mortars, 37000 health professionals and an annual revenue of €1,850.2 million, Mehilinen, the parent company of Oma Lääkäri then, is a fast-growing, international, healthcare service provider operating in Estonia, Germany, Finland and Sweden. The expressively started mission and values of Mehilinen are “improving health and well-being together” and “skills and knowledge, growth and development, partnership and entrepreneurship and caring and responsibility” respectively (Mehilinen 2024). Prior to visiting the subsidiary of Mehilinen, Oma Lääkäri, as an intermediated representative of the public healthcare system, the author had an experience of visiting Mehilinen for non-psychiatric services as part and parcel of a private health framework, or value co-creation sphere, in which he received unethical services, including false, or disputed, reviews and mis-recording of the client’s account unethically. For instance, 1) the context for Michael’s visit would be altered and Michael would be asked personal questions in which he would be correcting the female doctor immediately, 2) a female nurse who was not even present at the scene where Michael visited another female doctor would write a deliberately false, or misleading, secession review which misrepresented the secession intentionally, 3) a male doctor would write false and misleading reviews regarding Michael’s account of experiencing a temporary eye-problem [after getting attacked biochemically by an unknown chemical substance] which will not recover before Michael applied drops of anti-biotics for couple of days, among others. In addition, relevant employees of Mehilinen would refuse to attach Michael’s version of secession review regarding the false, or misleading, reviews written about him by the staffs of Mehilinen and Bee Helathy Oy on the national health register system of Finland.

1.1.3 Western Uusimaa Wellbeing Services County

The Western Uusimaa Wellbeing Services County provides health, social and rescue services for the residents of Espoo, Hanko, Ingå, Karkkila, Kauniainen,

Kirkkonummi, Lohja, Raseborg, Siuntio and Vihti(Western Uusimaa Wellbeing Services County 2024).

1.1.4 Valvira, National Supervisory Authority for Welfare and Health

An agency operating under the Ministry of Social Affairs and Health, Valvira is an entity responsible for supervising and guiding private, state and non-governmental healthcare and social-services providers, authorities in charge of licensing and monitoring the production and distribution of alcohol and the operation of entities safeguarding environment in the state of Finland. When it comes to the safety-critical, healthcare, service-systems of the state of Finland, in the end, or tactically and strategically, Valvira is responsible for making sure no single person get harmed, or dissatisfied, as a result of any deliberate, value-destructive, oblivious operational mis-conduct of the professional representatives of the healthcare service offering entities in the ecosystem of the health industry of the state of Finland directedly and indirectly. As a result, Valvira fails on its professed mission, vision and values of overseeing everyone's right to wellbeing, high-quality-services and safe-living-conditions at the national level, effective oversight: "responsible actors" and expertise, courage and fairness respectively when it, deliberately, or obviously, fails to ensure that a person, or customer, is not harmed, or dissatisfied, with any entity in the healthcare service system of Finland(Valvira 2024).

1.1.5 The Administrative Courts of Helsinki

There are two administrative courts in Helsinki: "The administrative court of Helsinki and the supreme administrative court of Helsinki" While the administrative court of Helsinki reviews and decides on appeals logged against decisions by authorities, the supreme administrative court of Helsinki — fixed on achieving its mission, vision and values of upholding the rule of law in Finland by providing legal protection and ensuring administrative decisions made are normative, societal-impact, functional-process and competent and responsible personnel and fairness, independence, reliability and expertise, respectively —

reviews and decides on appeals logged against decisions by the administrative court of Helsinki (The supreme administrative Court of Helsinki 2024).

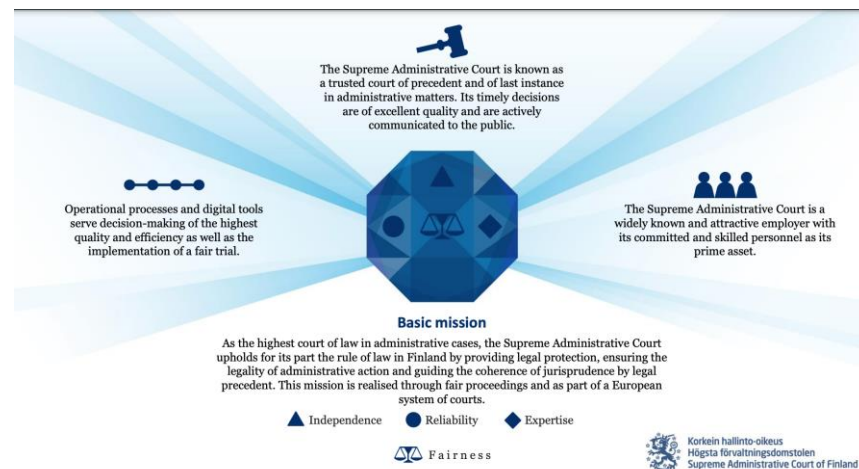


Figure 2. The mission of the supreme administrative court of Finland (The Supreme Administrative Court of Finland 2024).

1.1.6 Parliament and the Parliamentary Ombudsman

Consisting of 200 members and 11 parliamentary groups elected for a period of four years, the parliament of Finland, which is the highest legislative, executive and judiciary entity in the country, enacts legislations, approving and reviewing the coalition government formed by political parties, among others (Eduskunta 2024). Elected by the parliament of Finland, the parliamentary ombudsman of the state of Finland ensures that the operational conduct of private and public actors performing public activities in the state of Finland is normative, ethical and legal (European Network of National Human Rights Institution 2024; Parliamentary Ombudsman 2024).

1.1.7 The Finnish Bar Association and Private Law Firms in Finland

Founded in 1919 with a professed mission, vision and values of safeguard the rule of law, everyone can trust an attorney-at-law and loyalty, independence, avoidance of conflicts of interest, confidentiality and integrity, respectively, the Finnish bar association is a public entity which supervises member attorneys-at-

law in particular and the practice of the corresponding profession in general, training and guiding lawyers and arranging Finnish Bar Examination(The Finnish Bar Association 2024). As a self-regulatory community of private lawyers promoting the highest possible quality standard for the practice of jurisprudence in Finland, the Finnish Bar Association is a key entity in the health industrial ecosystem of Finland when it comes to making sure unethical, or harm-centric, value-destructive services are not rendered in the jurisdiction of the state of Finland, Europe and beyond. Consequently, the Finnish Bar Association fails, or becomes obsolete, when it fails to ensure that unethical, or harm-centric, or value destructive, services are not rendered in anyways, or by any means, or if and when a prospective customer fails to get represented by its *attorney-at-law* intrinsically. As far as the experience of the author from many years ago is concerned, law firms implicated in the Finnish bar association, or member *attorney-at-laws*, though they have a history of defending harmful, suspected and convicted, criminals, were not interested in dealing with, or advocating for, dozens of crimes committed on the researcher, or harmed party, or the service process subject, hitherto superstitiously and preposterously.

1.1.8 Police Finland

Finnish Police — which consists of the National Police Board, two national police units and 11 local police departments — is a government agency entrusted to maintain law and order in the sovereign jurisdiction of the republic of Finland. Operating with an annual budget of 863 666 000 € and increasingly extending its presence to the changing needs of the security of the society and delivering its services under the guidance and direction of the ministry of the interior, which is responsible for drafting the executive legal frameworks of Police, Police Finland serves millions of customers across the country every year(Finnish Police 2024 2024; Ministry of the Interior 2024; Ministry of the interior 2024 2024). Entrusted to serve, and maintain the safety of, everyone without any discrimination, Finnish Police touts evolving as part and with the society, customer service, fairness, professionalism and staff welfares are values which underpin its value proposition. The author's, or the researcher's, relation with Finnish police is

complicated: “According to Appendices A1, A2, A3, A5, A6, A7 and A19, among others, Finnish police would refuse to investigate different cases of suspected crimes committed on the author in Finland from over a decade ago; the author has a history of running discussion forums critical to the operational mis-conducts of Police, among others(Argaw 2018); and Finnish Police, among others, have a history of stacking and intimidating, among others, the author, among others, before it all was changed to protection recently.”

1.1.9 Higher Education: Faculty, Student Union and Students

The higher education system in Finland comprises of university of applied sciences and universities. While the former, offering bachelor’s and master’s, professional specialisation and adult education and open UAS education and professional teacher education programmes, is aimed at meeting labour market needs and conducting research and development aligned to the need of businesses, industry and service sectors at the regional level, the later, offering open studies, bachelor’s, master’s, postgraduate licentiate and doctoral degree programmes, carries out scientific research and produce intellectuals meeting the changing need of business, society and world(Studyinfo 2024). Consequently, the role of higher education in the health industry, justice and media, among others, ecosystem, of the state of Finland is to make sure ethical professionals keen on promoting health, wellbeing and safety are formed and the health ecosystem of the state of Finland is operating, or performing, ethically, upholding industry specific standards strategically. For what he touts, “unethical conducts or mis-conduct of abusing and deterring Michael from the university directedly and indirectly, and bogging him down and creating more problems when he got back to Finnish his studies, among others,” by the faculty of the university, among others, to which the student union of Åbo Akademi and the national student union of Finland(SYL), among others, were complicit, or acted unethically, among others, the author filed a suspected crime complaint to Police and a civil complaint to the district court of Turku, Finland regarding Åbo Akademi University(Argaw 2024). In addition, the author encountered problems — he was deterred and intimidated at first proactively and faced unethical inconveniences, or deterrence

strategies, when he came back to Finnish his studies — with both Metropolia University of Applied Sciences and Åbo Akademi University (Appendix A19M; Argaw 2024). Furthermore, from Police, journalists, university faculty and politicians through suspects of crimes of empirical software engineering, cultural direction and weaponization of the healthcare system to complicit neighbours, researchers and unethical executives, professional event organizers and fellow entrepreneurs, among others, most of the persons, or institutions, or entities, which the author experienced in Finland are an indirect representatives, or alumni, of the Finnish higher education system unequivocally (Appendix A3).

1.1.10 Private and Public Mass Media in Finland

Finland's mass media landscape comprises of several public and private entities. Touted for, and professing, impartiality, the state-owned public broadcasting service, YLE, is the largest and the most funded media conglomerate setting the order of culture and politics, among others, across the country. Helsinki Sanomat, Ilta Sanomat, Iltalehti, Hufvudstadsbladet, YLE news, Kauppalehti and Helsinki Times, MTV, TV7, Nelonen (Channel 4) and YLE and Yleisradio Oy, MTV3, Radio Nova, Radio Day and Radio Suomipop, among others, are popular press, television and radio services in the state of Finland respectively. While Finland, scoring 86.55, ranked 5th in the 2024 global media freedom index of reporters without borders, representation of the voices of immigrants (especially visible ones) is a desolating reality (Migrant Tales 2022). As a matter of fact, the media ecosystem creates a very hostile and value-destructive environment for immigrants collectively and individually subtly and overtly (Horsti and Saresma 2021; Nortio, Niska, Renvik and Jasinskaja-Lahti 2020; Keskinen 2016; Horsti 2015; Horsti and Nikunen 2013). In addition, the author has a history of experiencing abuse publicly and privately for exercising citizen journalism independently (Appendix A1 and Appendix A3). Moreover, the media ecosystem in Finland is notorious for suppression: “not exposing and hyping human and democratic rights violations on visible minorities directly and indirectly (Migrate Tales 2022)” As a result, chances institutions, or civil servants, among others, of the state of Finland would be exposed for gross violation of human and

democratic rights, or aiding and abetting thereof, is slim customarily. Consequently, employers, academia, the police and justice system, parliament, private entities, public institutions and individual citizens, among others, are protected and reinforced by the complicit media culture empirically. 7 of the 10 migrants who dared to take a swipe at injustice in Finland publicly using private means, such as social media, said they have been countered with allegations, or more injustices, then after. Subsequently, the issue of press freedom, or happiness index, in Finland, contrary to what is hyped, can be so dire that hybrid, proactive, strategies will be executed on those who stand tall against injustice openly and fervently (Appendix A1).

1.2 Industrial Challenge and Objectives: “Avoiding Destruction Proposition and Value-destruction and Promoting Value Proposition and Value Creation”

While the unique customer is keen on creating the highest possible, safe and secure value out of the services offered by the Finnish healthcare service system in particular and the ecosystem of the Finnish health industry in general, the Finnish healthcare service system, as a safety critical, customer, consumer, centric, service offering community of entities, must ensure that sub-standard, harm-centric, value destructive, user-disrespecting, unethical, unhealthy, abnormal, discriminatory, wasteful and human and democratic rights violating, among others, services are not offered in anyways, or by any means, consciously or obliviously. The rest of the actors, or entities, in the ecosystem of the health industry of the state of Finland, such as academia, police and the justice system, media, government and political parties, among others, must strategically manage (plan, monitor and ensure, among others) that no, or less, harm-centric, discriminatory, dark-triadic, substandard, delusional(unfounded and based on the subjective, inappropriate, mis-interpretation of professionals) and human and democratic rights violating, among others, services are not offered intrinsically consciously or obliviously, or that the infrastructure, assets and human resources, among others, of the health ecosystem will not be used as an instrument for political, or private, or non-governmental, objectives ulteriorly unethically. Consequently, the objective of the thesis is to produce a technical CX report and

conceptual frameworks, or service model canvases, regarding a special, management specialist, case study, observation, of a safety critical service business process, customer experience, journey and touchpoint and value creation sphere in the ecosystem of the Finnish health industry.

1.3 Scope and Outline of the Study

The study is aimed at producing a technical CX report[first] and conceptual frameworks, or service model canvases, regarding a special case study of observation of a safety critical service business process, customer journey, experience, engagement and touchpoint, value creation and destruction sphere and destruction proposition, among others, in the ecosystem of the Finnish health industry. The study comprises of 9 sections. The first section, the introductory chapter, acquaints the readers with the context of the relevant entities in the ecosystem of the Finnish health industry and the corresponding industrial challenges and objectives regarding thereof and the scope and outline of the study in a nut shell. The second section acquaints the readers with the thesis project plan briefly: “research approach, research design and data collection” Premised on an empirical review of relevant technical literatures and introducing new concepts, presented in the third section are contextualized service model canvases tailored to the service business process experienced or entity to customers(E2C) interaction studied. The technical CX report of the service experienced — analysis of the service, or value, delivery process, decomposition of the observation of the CX touchpoints and its corresponding timeline and complaint processing service process, among others — will be carried out from section 4 through section 7. While the appendices and reference sections present relevant internal(interviews and customer touchpoints, among others) and external (technical literatures for the most part) data substantive to the research directedly and indirectly respectively, before concluding with Chapter 9, section 8 presents a holistic vision and recommendation for advancing the research and its results, the technical CX report and the corresponding frameworks created, among others, by prospective students and researchers, among other stakeholders.

2. Project plan

This section introduces the research approach, design and data used for the thesis at large in a nutshell.

2.1 Research Approach

From medicine, business and history through sociology, theology and arts to engineering, plant sciences and psychology, among others, case study is a convenient research approach, or method, when there is a need for an in-depth decomposition of a particular case or multiple cases (Hartley 2004; Feagin, Orum and Sjoberg 1991; Feagin, Orum and Sjoberg 2016; Thomas 1987; Strauss and Corbin 1998). Gerring (2006) contends case study is a research approach where an intensive study is carried out on a single, or multiple, sample related cases to understand not just the case but the context of the population derived from, or related to, the case. In addition, case study makes it possible to include many observations, or multiple individuals, or entities, or services, or processes, among others, under a single case or across multiple cases (Gerring 2006). The value proposition, or the special character, of case studies: “lending themselves to an idiographic style of analysis, case studies are premised on empirical and rational evidence(s) drawn from a single case [while] shedding light on the behaviours, or features, or substances, or substantive elements, of different set of cases, showing similarities, differences and dynamics of correlation, among other benchmarks.” Given the fact that the human judgment, or behavioural conduct, or professional fitness, or customer centricism, or service operation, or service excellence, or value-creation with, or customer touchpoint, regarding different relevant entities (organizations) in the health ecosystem of the state of Finland is studied, behold are the reason why case study was chosen as a research approach: “1) the phenomena under observation entail different related cases (or customer touchpoints, or observations, or value-creation spheres, or customer to entity[C2E] interactions), or a single case across different cases. 2) In addition, case studies, when meditated through relevant literatures and frameworks, help

formulate, or abstract, theoretical insights, such as service model canvases, or management frameworks, from the case studied (Gerring and Seawright 2008)”

2.2 Research Design

Research design is a series of logical steps, or strategies, followed to produce the envisaged outcomes or answer the research questions. According to Figure 3, the different phases of the research are decomposed in a nutshell. As outlined earlier, the outcome of the thesis are technical CX report and service model canvases, or frameworks, premised on relevant literatures and the holistic contextual analysis of the service. The semi-tabulated-allocated research design architecture depicted in Figure 3 is modelled, or allocated, on three data models showing the subsequent relations among the data models, corresponding activities and outcomes: “model 1, model 2 and model 3”

What happens in the phase premising on model 1

Gathering and updating and analysing the latest organizational information, or branding, documents, or services, of the relevant entities in the ecosystem of the Finnish health industry. In addition, review relevant technical literatures regarding customer interaction with service providers. The results of this phase are process diagram, tailored frameworks, concepts and theories which serve as a standard, benchmark, model and premises for producing a technical CX report.

What happens in the phase premising on model 2

The customer experience, or observation of customer touchpoints, with service providers, and complaint processing entitles in the ecosystem of the Finnish health industry, will be deciphered. The result of this phase: “the technical decomposition of the CX touchpoints, timeline and overview of the complaint processing process”

What happens in the phase premising on model 3

Open to integrating new data, the last phase is dedicated to iteration and refinement of the CX report and the service model canvases. As a result, what was done and pivoted will be reviewed and enhanced to deliver an improved, final, CX report and service model canvas, or framework, overriding the initial decomposition, abstraction and encapsulation.

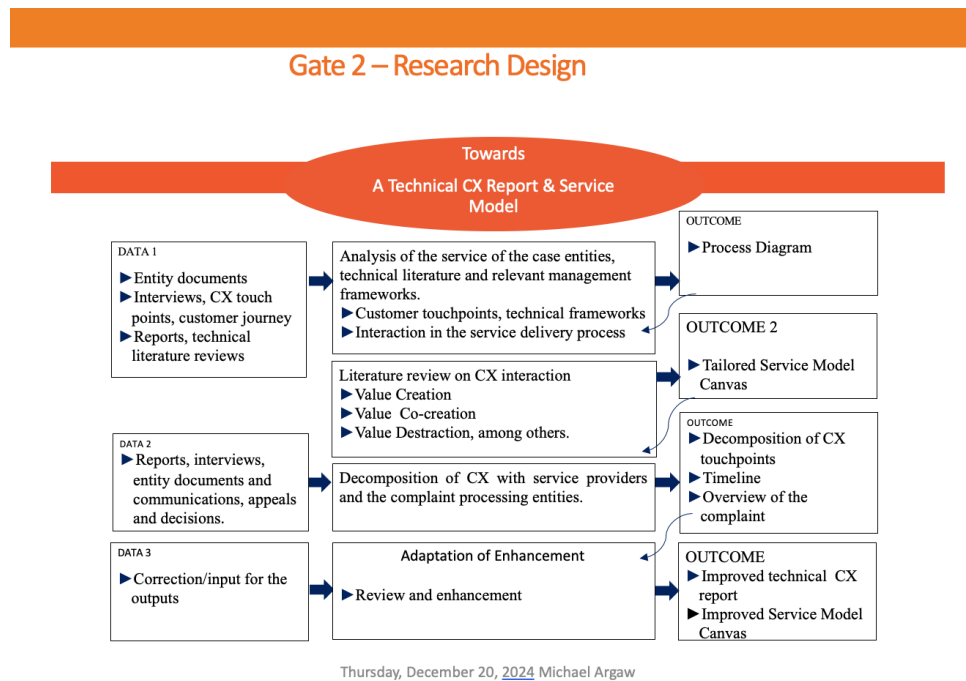


Figure 3. The research design in a semi-tabulated-allocation architecture.

2.3 Data Collection

The project scheduling of the thesis — regardless of the timing but premised on the envisaged order of outcomes for the thesis — is a key factor that shaped the data plan of the research design. As a result, the data plan is divided into three agile, unrigid, sections in which some activities in one section could be executed in another. For instance, the author, having contacted [with a request] for clarification about their vision, mission and values, among others, had to wait to read from some of the entities in the ecosystem of the Finnish health industry for several months before deciding to limit himself solely to informations available on their corresponding website. Meaning, 1) the availability of the data determined what can be analysed and tailored into the study and the order and delivery

schedule of the corresponding initial and final outcomes of the thesis; and 2) the researcher was forced to be agile in the execution of the thesis writing process. From the spray ambush that the researcher experienced at the vicinity of Metropolia University of Applied Sciences to unresponsiveness, or snub, to his polite requests, hypothesis of suspected indirect hybrid control and undermining of the study can not be ruled out(Appendix A19M). Nevertheless, the agile study continued eventually.

DATA PLAN					
	CONTENT	SOURCE	INFORMANT	TIMING	OUTCOME
DATA 1 ► ANALYSIS OF THE CX	<ul style="list-style-type: none"> - Analysis of the service, or value, delivery process - Expiriance of the service process 	<ul style="list-style-type: none"> - Customer, CX, touch points - Interviews - Observation, reports 	<ul style="list-style-type: none"> - Service process subject or customer - Researcher or observer - Service providers 	By December 2024.	PROCESS DIAGRAM TIMELINE DECOMPOSITION OF OBSERVATION OF CX TOUCH POINTS TECHNICAL CONCEPTS
DATA 2 ► ENHANCING THE SERVICE	<ul style="list-style-type: none"> - Literature review and frameworks - Enhancing the service - The complaint processing service 	<ul style="list-style-type: none"> - Customer, CX, touch points - Interviews - Observation, reports, - Literature 	<ul style="list-style-type: none"> - Service process subject or customer - Researcher or observer - Service providers 	By Decemeber 2024	<ul style="list-style-type: none"> - INITIAL SERVICE MODEL CANVAS - INITIAL TECHNICAL CX REPORT
DATA 3 OPTIMIZING WITH FEEDBACK	<ul style="list-style-type: none"> - Improvement of the initial concepts, CX decomposition and service model canvas 	<ul style="list-style-type: none"> - The comprehension of the researcher and subsequent pivots. 	<ul style="list-style-type: none"> - Researcher's ideation - Participants in the pivot 	By January 30, 2025	<ul style="list-style-type: none"> - FINAL TECHNICAL CX REPORT - FINAL SERVICE MODEL CANVAS - Thesis ready for language check up.

Table 1. The data plan of the thesis project in a nutshell

3. Literature Review and Conceptual Frameworks

3.1 Review of Existing Technical Literatures

Discussed in this section is a brief literature review of common concepts in business interaction: “Customer journey, customer experience, customer engagement, customer touchpoints, value proposition, value proposition canvas, value creation, value co-creation, value co-creation sphere, value destruction, value co-destruction and value cycle”

3.1.1 Customer Journey

Customer journey is a path, or cycle, which a customer follows before buying a product, or service, from a company (Lemon and Verhoef 2016; Herhausen, Kleinlercher, Verhoef, Emrich and Rudolph 2019; ZinKann and Mahadevan 2017). It starts from the time when the customer becomes aware of the brand, consider interacting with, or using, or buying, the product or services, of the brand, make a decision to purchase by selecting a product or brand, complete a transaction either online or offline, evaluate the corresponding customer experience after the purchase and, if the customer is content about the product or service bought, or tested, he/she will become a regular customer advocating for, and promoting, the brand, or product, or service. Although there is not an outright consensus among scholars, customer journey is divided into three basic steps: “a) pre-purchase: an impulse, or event, would create a need to buy a product or a service, prompting the customer to consider different options, b) transaction phase: once the customer decide on a product, or brand, a purchase is carried out and c) post-purchase: the customer would value the product, or service, bought, becoming either a loyal, or dissatisfied, customer”

3.1.2 Customer Experience

From the time when a prospective customer learns about the brand to becoming an advocate, or opponent, of the brand, the customer develops, or forms, opinion

about the brand or the service provider. Customer experience (CX) is the perception, or subjective opinion, of the customer towards the brand or the service provider. Customer experience is the totality of cognitive, affective, sensory and behavioural responses during the pre-purchase, purchase and post-purchase stages of the customer journey of the customer (Godovykh and Tasci 2020; Wikipidia 2024; Bagdare and Jain 2013; Sahw 2007; Vesterinen 2014). According to (Manning and Bodine 2012) strategy, culture, governance, customer orientation, design and measurement underpin the foundational elements of an excellent customer experience. Customer experience is how the customer experiences the service provider with its stimuli or how the service provider influences the stimuli of the customer (Andajani 2015). Happening in cooperation with the customer, customer experience is about adding value to the customer (Kotler, Burton, Deans, Brown and Armstrong 2015). From the conduct of how an entity provides an empathic support regarding inquiries and complaints received through the reliability, dependability, performance, safety and security, among others, of the product or service, to consistency, personalization and fulfilment, among others, customer experience encompasses different qualitative and quantitative metrics of variables. Entities providing positive customer experience — for instance, responsive and empathic customer service during the interaction with the customer — prevail when it comes to service excellence, customer retention, brand loyalty and business growth, among others. Consequently, as important as the quality, ease of use and availability, among others, of the product, or service, on offer is the customer experience strategy attached to it. Because, abnormal, or unethical, or bad, customer experience deters customers from the product, or service, or organization, or even from a city and country.

3.1.3 Customer Engagement

Customer engagement is the quality of the interactions, or touchpoints, or connections, or synchronizations, between the customer and the service provider, or brand. According to (Sashi 2012), customer engagement is about creating a deep and meaningful connection during the pre-purchase, purchase, interaction, post-purchase and participation process. Customer engagement is

an intimate, long-term, relationship with the customer (Brock, Kai-Uwe, Zhou and Yu 2012; Beetles and Harris 2010; Bügel, Verhoef and Buunk 2011). The process of building a meaningful relationship starts from the time when the customer becomes aware of the brand through the different stages of conversion to loyalty, dissatisfaction and partnership, among others. Reducing churn rate, dissatisfaction and brand disloyalty, among others, customer engagement, or executing optimum customer engagement strategies, help organizations understand their customers, design profitable value proposition milestone at each point of interaction and measure and optimize value co-creation. In the pursuit of a business, or service, engagement, both the service provider and the prospective customer are challenged to meet key objectives. While the service provider, or the brand, is challenged to ensure prospective customers, having an appropriate awareness of the brand in the right marketing mix or distribution channels, would interact for value creation so far up to becoming a loyal brand advocate, the prospective customer is challenged to become aware, consider interacting with, interact and stay loyal with the right, ethical, dependable, predictable, rewarding, secure and safe brand, or service provider, or business, or entity. Customer engagement — or how an entity engages with and establish a meaningful connection with the customer online or offline — is essential as creating awareness alone, if not followed up with a goal oriented, ethical and optimum customer engagement strategy, will not lead to achieving the highest quality of interaction, increment in unit and gross purchases, increased turn over, business growth and brand loyalty.

3.1.4 Customer Touchpoints

Customer touchpoint is the direct and indirect, and past, present and future, contact between the customer and the service provider (Aichner and Gruber 2017; Åman 2022; Bascur, Rusu and Quiñones 2019; De Keyser, Verleye, Lemon, Keiningham and Klaus 2020; Dhebar 2013; Hallikainen, Alamäki and Laukkanen 2019; Kim and So 2024; Lundin and Kindström 2024; Stein and Ramaseshan 2016; Sultan 2020; Vannucci and Pantano 2020; Wind and Hays 2016). The perception, trust and decision [to continue, or stop, interacting with

the service provider] of the customer regarding the service provider is influenced by his/her subjective, and objective, customer touchpoint experience with the service provider. A customer buying from a retail chain in person, ordering items online and paying monthly bills are examples of customer touchpoints. The first instance of customer touchpoint is created when a prospective user, or customer, becomes aware of the service provider. Then after, more [albeit both value-creative or value destructive] episodes of customer touchpoints will be experienced, or created, along the interactions, or considerations, or decisions, or purchases, or post-purchase, or retention, or advocacy, phases, carried out in the service delivery process or customer journey of the customer. As important as, or even more important than, offering an excellent product is ensuring customers, or users, will have a positive customer touchpoint. Because, retaining users, or customers, take more than an excellent product. Consequently, the service provider's ability, or steadfastness, or empathy, in identifying, examining and improving the customer touchpoint experience they provide to their customers is crucial for achieving the envisaged outcomes of service excellence, customer satisfaction and stakeholder trust.

3.1.5 Value Proposition

Value Proposition is the total preferential provisions, benefits, advantages and economic, social, political and cultural, among others, values which a product, or service, or company, provides to a user, or a market segment, or customer, as compared to its competitors. The compound word, Value Proposition, a clear, simple, statement of the tangible and intangible benefits of the company, or product, or service, with its corresponding price, was used first by Michael Lanning and Edward Michaels who authored a staffer paper in the title, "a business value system is a delivery system," for McKinsey and Co. in 1988(Lanning and Michaels 1988). A company's strategy, or business model, or service offering, is built on its value proposition (Kaplan and Norton 2024). While a company's value proposition is formulated through a business, or marketing, statement called positioning statement which describe why a prospective customer should buy, or use, its product, or service, the customer's value

proposition is the envisaged benefit, advantage, usefulness and subjective value of the product, or service, to the unique need of the customer. For instance, when a client living with a mild tinnitus in the left ear visits a doctor to promote ear health, it is aimed at adding value to the ear health: "learning about the current measure, or status, of his/her ear health through the scientific testing provisions of audiometry or enhancing ear health through other means directedly and indirectly." In the safety critical service business process case of this thesis, the safety critical service subject, Michael Argaw, envisaged different outcomes, or values: "1) Carrying out an audiogram or getting a referral to an ENT for a price which will not cost more than 50-250 euro; 2) and receiving a recommendation, or notice, from medical professionals that suspected, ear health, among others, harming, empirical software engineering crimes reported to Police Finland hitherto get investigated.

3.1.6 Value Proposition Canvas

The value proposition canvas is an essential part of the business model canvas which depicts the value, or service, proposition of the service provider regarding the need, or requirement, of the user and possible pains, or negative outcomes, of the service, or product, utilized (Haaga-Helia 2024). It tells why the user needs a service, what the user considers a preferential value, or option, and what the user finds painful or disadvantageous. As a result, the value proposition canvas comprises of the following: "a) gains, b) pains, c) user jobs, d) gain creators, e) pain reliefs and f) product and services"

A) Gains: "The benefits, wellbeing, values, delight and satisfaction the user is in the lookout for and factors which will increment the probability of adopting the value proposed by the product, or service, or the entity."

B) Pains: "The negative experiences, or emotions, or hazards, experienced by the customer in the course of accomplishing jobs to be done."

C) User jobs: "The tasks which users are planning to accomplish or the needs which users are trying to meet."

D) Gain creators: “How the product, or service, create gain, or add value, for the user.”

E) Pain relievers: “Elicitation of how the product, or service, alleviates user pains”

F) Product and services: “The product, or services, which relief pain, create gain and help users accomplish the envisaged task or solve problem.”

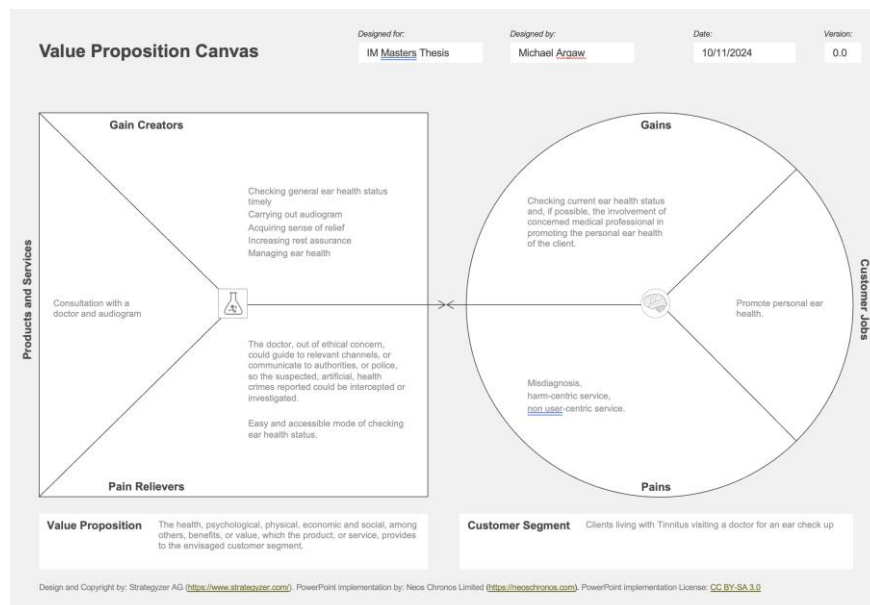


Figure 4. Example Value Proposition Canvas for a person living with Tinnitus Encountering a Medical Doctor

3.1.7 Value-creation

Value creation is the process, or act, or state, of adding value to something. Value creation is a process because it is aimed at converting raw materials, or inputs, into outputs, or products, or good, or services, having more worth than their corresponding, or superseding, or preceding, components. Value-creation is a result of, or emanates from, an act because value is created in an act of design, or development, or production, or testing, or utilization, or delivery, or [continuous] offering and enhancement, of a product, or service. Value-creation is a state as its ontology is time, among other attributes, bounded. Value-creation begins

when the customer starts using the product or service (Grönroos 2017). Saving time, enhancing ease of use, increasing productivity, alleviating pain and decrementing cost, among others, are examples of types of values created for a business, or private customer, or government, among others. Value-creation comprises of three steps or can happen in three ways: a) transformation: while converting, or processing, raw materials, or inputs, into products, or services; b) distribution: while getting the product, or service, to the customer through relevant distribution channels and c) consumption: when a public, or private, or non-governmental, customer, or actor, commences the utilization of the product, or service, among others, acquired. Value creation in the customer, or consumer, centric, or safety critical, services of the entities in the ecosystem of the Finnish health industry happens in the distribution, consumption and post-consumption(complaint) phase of the service business process transaction or exchange.

3.1.8 Value Co-creation

As discussed in the previous section, value is created by both businesses(service providers) and customers. Subsequently, value co-creation is a two, or multi, way process, act and state where consumers and service providers a) ideate, or discover, or produce, or test, or adopt, or enhance, or sunset, a product, or feature, or service, b) use the product, or service, sold, or acquired, loyally c) shape the vision of the product, or service, regularly. According to (Grönroos, Strandvik and Heinonen 2015) value co-creation is the mechanism of interplay between service providers and customers. Windsor (2017) argues the acts of business executives, directors and client facing service providers, among others, influence the value created for customers, businesses and the society at large.

3.1.9 Value Co-creation Sphere

According to (Grönroos & Voima 2013), the process, act and state of value co-creation between a customer and service provider comprises of three distinct spheres: “a) provider sphere: the provider facilitates the delivery of value, b) joint

sphere: the customer acts as an dependent value creator whereas the provider, as a co-creator, gets the opportunity to interact with the customer and c) customer sphere: the customer creates value out of the product, or service, independently while the provider transitions to a facilitator state” For instance, in the value co-creation sphere for a person living with tinnitus meeting a medical doctor for an ear checkup secession, among others, the service provider, which is represented by the medical doctor, must facilitate value, or benefits, to the client in the provider sphere by ensuring the service will not harm the client in anyways or by any means. In the course of the interaction with the customer in the joint sphere, the service provider must listen, and pay attention, to the needs, or problem statements, of the customer in the real time in order for the customer to be able to create value out of the services experienced in the customer sphere, provided the customer’s need is aligned to the value proposition of the service provider.

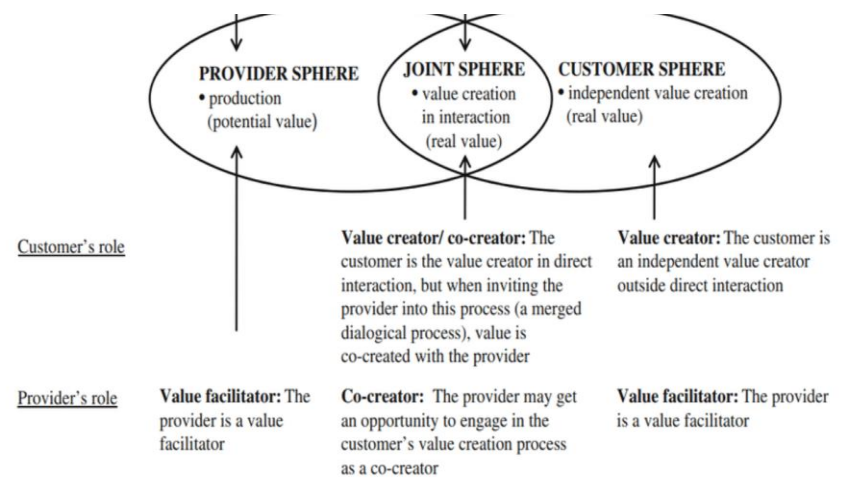


Figure 5. The three distinct value co-creation spheres (Grönroos & Voima 2013).

3.1.10 Value-Destruction

Value destruction is an activity which harms the value, or objective, or benefit, of a product, or service, or idea, or relation, or function, or the depletion, or undermining, or total decimation, of a product, or service, or any usable matter. Value destruction is the loses, disadvantages and economic damages, among

others, which a product, or service, or company, or idea, or act, bring about to a user, or market segment, or region, or country, or world, among others, as compared to its competitors. A service harming a customer, or research, innovation and intellectual communities not taking side to solve pressing institutional, social, business, academic and global problems, or private, public and non-gov working environments, or institutions, captured by unscrupulous, and complicit, intellectuals, officials and employees, and their corresponding absolute and relative reticence in the face of value destruction, are examples of value destruction. Value destruction could be a one-time act, continuous process, vicious cycle and reinforcement learning constrained, among others. Value-destruction can be architected, directed, executed and implemented by multi-lateral institutions, organizations, executives, private entities, state, gov and non-gov entities, safety critical service providers, customers and intermediaries, among others. Waste, loss, deterioration, undermining, harm, desolation, inhibition, insecurity, death, mal-function and disharmony, among others, are examples of results of value destruction. Value destruction can be avoided by setting a clear goal, or intended outcome, for a product, or service, or good, or project, or interaction, or relation, or function, or term, or duality, or case management, or role, or process, or unit, or community, or communication, or by pivoting, or testing, the value proposition of the service provider to the customer, among others. In a B2C environment, the customer is the first, or the most critical, entity to pivot, or validate, the value propositions of the service provider.

3.1.11 Value Co-destruction

Not all B2C, or B2B, or G2C, or G2B, or G2G, among others, interactions, or relations, or functions, or service business processes, or negotiations, or communications, or experiments, among others, result in the envisaged outcomes of value creation, or value co-creation. If not for both, or all, parties, it may turn out the B2C, or B2B, or G2C, or B2B, or G2G, among others, interactions, or relations, or functions, may result in [albeit either temporary or permanently] harms, or a sub-standard delivery of value, to one of the parties. Value co-destruction is an interaction which results in the dissatisfaction, or the decline of wellbeing, or harm, of one of the parties (Camilleri and Neuhofer 2017;

Echeverri and Skálén 2021; Kähkönen and Torvinen 2018; Lumivalo, Tuunanen and Salo 2024). Value co-destruction can happen as a result of an external interference or the conduct of one of the parties directedly and indirectly.

3.1.12 The Value Cycle

The value cycle is a series of five stages between value creation and renewal: a) value creation, b) value appropriation, c) value consumption, d) value renewal and e) value transfer.

A) Value creation

Value creation happens leveraging *Key Partners*, *Key activities* and *Key resources*.

Key Partners: the value creating entity uses the resources, capabilities, knowledge and information of its partners.

Key activities: the set of activities, and their corresponding links with key partners, needs to be carried out to create value.

Key resources: the assets required to add value to the product, or service, for the customers.

B) Value appropriation: value can be created by enhancing the buying and fulfilment experience of the customer.

C) Value consumption: it is the process of using, or adopting (the value of) a product, or service.

D) Value renewal: it is the processing of renewing the value delivered by the product or service.

- E) Value transfer: it is the process of transferring the value acquired to another entity.

3.2 New Service Model Canvases

It is one thing what service providers profess in their mission, vision and values statement. But another what and how they deliver to the safety critical service subject. Subsequently, not all services are customer-centric, or would be carried out to meet the need of the customer, or would be delivered and managed by ethical, qualified, professionals and customer-centric representatives of the service providers: “the services delivered could be ill-conceived, unethical and harm-centric, doing away with the clear problem statements and clarifications of the customer and the mission, vision and values of the service provider.” Delivering destruction, or bringing about damage, to the service subject, or misusing the organizational infrastructure of the service ecosystem, in the service delivery process, resulting in unprecedented personal, social, organizational and political, among others, damages and, last but not least, entering in to legal disputes, among others, is common in B2C, G2C, B2B and G2B, among others, interactions of service, or value delivery, business processes in major industries. Consequently, whether the harm delivered during the interaction process is by accident, or intentional, destruction proposition, or interaction with harm, or dealing with unprecedented problems, or the creation of a value-destruction sphere as opposed to value-creation, is inevitable operationally. Although the effect of the enforcement of the misdiagnosis is not stated clearly, more than 7 million incorrect, or wrong, diagnoses were made in American emergency rooms (CNN 2022). According to (YLE 2024), the corresponding level of trust of users towards the Finnish healthcare system dropped to a new low in the past three years. In this section, one of the outcomes of the thesis project, service model canvas, frameworks and concepts encapsulating real world examples of interaction for service — destruction proposition, the destruction proposition canvas, the pain alleviation proposition canvas and the pain elimination proposition canvas — will be discussed.

3.2.1 Destruction Proposition

Destruction proposition is a dark green, or military, or civilian, harm-centric blow, or disadvantage, or impediment, or social, or cultural, or diplomatic, or economic, or health, or time, among others, damages, among others, which an entity, or a product, or service, or idea, or proposition, bring about, or deliver, to the target customer segment, or the vulnerable, or exposed, person, or victim, or constituency, ulteriorly, or overtly, directedly and indirectly. The ultimate objective of destruction proposition is dissatisfying, or failing, or harming, or undermining, or weakening, or impeding, or destroying, the other, or vulnerable, party. Destruction proposition is carried out by understanding the position, place, time, relations, weak(vulnerable) points and encountering spheres, among others, of the target segment or entity. In the same way as consumers take interest in and adopt a product, or service, or value proposition, for its value, any form and element of destruction proposition is rejected for its harm to the customer or human subject. For instance, operational misconducts, or unprofessional clinical acts, observed in Appendix A7, Appendix A8 and Appendix A9, among others, in the ecosystem of the Finnish health industry would be rejected by the harm receiver as a destruction, or harm, proposition and unethical acts of harm and damage intrinsically.

3.2.2 The Destruction Proposition Canvas

The destruction proposition canvas decomposes how the destruction provider, or destruction proposer, determine the loss creators and pain aggravators, and why and how destruction is proposed through the product and service, to the target with respect to the corresponding losses and pains the target is experiencing and avoiding. For instance, a military regiment, or a civilian actor, determine the loss creators and pain aggravators for a target segment to add and deliver destructions through the products and services while the target segment/person elicit his/her/their statement of losses and pains for the rejection of the proposed destruction or harm. The destruction proposition canvas has two sides: “a) the provider, or destructive value proposer, side, or the destruction proposer side and

b) the customer, or the target, or the harm receiver, side” The destruction proposer side consists of *loss creators*, *pain aggravators*, *the destruction proposition statement* and *the destructive product and services* while the target side consists of *losses*, *pains*, *jobs to be done* and *statements of rejection* of the receiver of the harms or the harmed party.

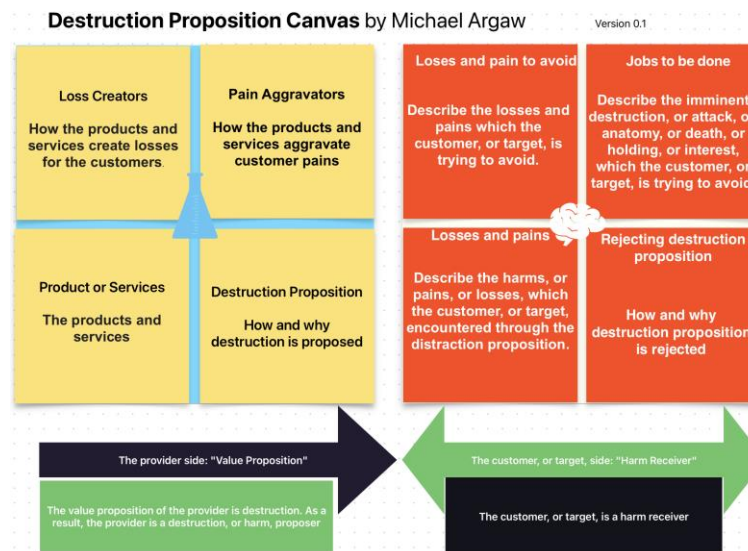


Figure 6. Destruction Proposition Canvas by Michael Argaw.

3.2.3 The Pain Alleviation Proposition Canvas

The pain alleviation proposition canvas decomposes how the pain-alleviation-value service provider, or proposer, determines the loss creators and pain alleviators, and why and how the pain alleviation is proposed through the product and service and the losses to avoid and pains to alleviate by the customer. For instance, an MD can determine the loss creators, or side effects, or pain alleviating dimensions, of a product, or service, to the customer while the target segment/person elicit their/his/her statement of losses to avoid and pains to alleviate and whether or to accept the pain alleviation proposal. The pain alleviation proposal canvas has two sides: “a) The value provider, or the pain alleviation proposer, side and b) the customer, or the relief seeker, side”

The pain alleviation proposer side consists of *loss creators*, *pain alleviators*, *the pain alleviation proposition statement* and *the pain alleviating product and services* while the customer side consists of *losses to avoid*, *pains to alleviate*, *jobs to be done* and *statements of acceptance* for alleviating pains.

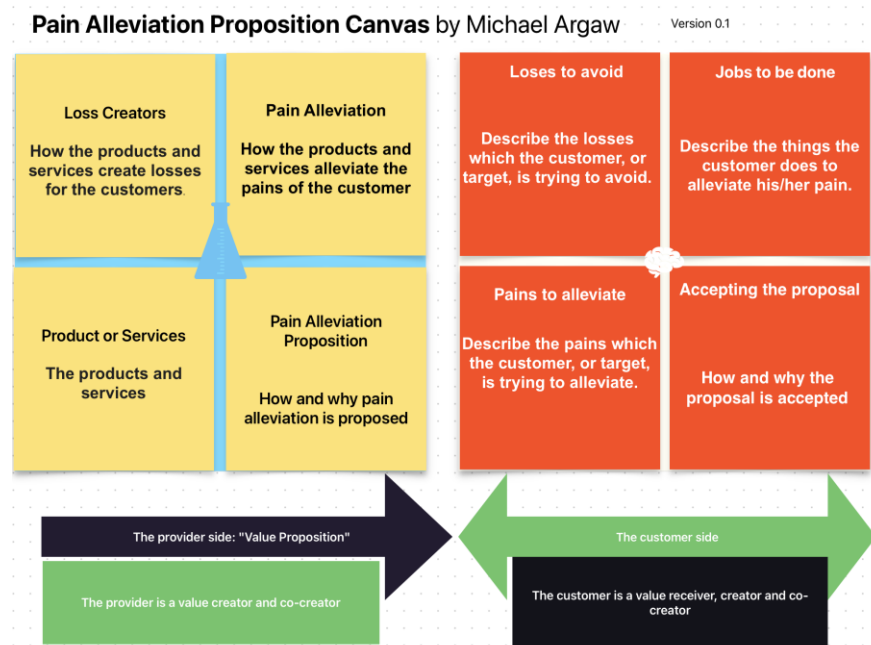


Figure 7. Pain Alleviation Proposition Canvas by Michael Argaw.

3.2.4 The Pain Elimination Proposition Canvas

The Pain Elimination Proposition Canvas decomposes how the pain elimination value provider, or proposer, determines the loss creators and pain eliminators, and why and how Pain Elimination is proposed through the product and service and the losses to avoid and pains to eliminate by the customer. For instance, an MD can, or should, determine the loss creators, or side effects, or pain(problem)-eliminating-dimensions of a product to the customer. A service provider — through its contract, or duality, with the customer — must determine, or specify, risks, or source of pains, among other insecurities, associated to the product, or service, offered and, if and when come to light, the corresponding dispute resolution mechanisms, when the target segment/person elicit their/his/her statement of losses to avoid and pains to eliminate and whether or to accept the

pain elimination proposal. For instance, the safety critical subject, Michael Argaw, notified the service providers about the corresponding pains, or deterioration, he experienced after the unlawful detention and subjection to chemicals though it was neglected deliberately. Before the subjection to chemicals, the safety critical service subject iterated, "that a persistent exposure to very loud noises aggravated his tinnitus; that tinnitus, which he has been living with, is a disorder in the inner ear as opposed to a psychiatric disorder and that he wanted to carry out an audiogram instead; that his subsequent requests and clarifications about his need for seeing an ENT doctor, or receiving a referral to an audiogram, was ignored; that except verifying and validating his real-time, conscious, normal state and active analytic judgment, he did not want to talk about the suspected crimes he reported to the police hitherto; that medical professionals uphold industry specific standards regarding the need for a) paying attention, or listening to, the customer, b) setting clear goals, or objective research questions, premised on the need, or real-time, problem of the customer, c) listening and solving the real problem presented as opposed to degenerating into interrogations about legal, or social, or cultural, or technological(empirical-software-engineering, among others), among others, case-effect constructs outside of their expertise, comprehension, knowledge, cognition, sense, experience and ontology, among others, of the event there and then, among others(Appendix A7; Appendix A8; Appendix A9)". Nonetheless, while the service subject, after getting subjected to harmful bio-chemical, or psychiatric, torture, complained about the exponential deterioration of his health and wellbeing, it was neglected belligerently deliberately(Appendix A10; Appendix A12; Appendix A13; Appendix A14; Appendix A15; Appendix A16; Appendix A17).

The pain elimination proposal canvas has two sides: "a) The value provider, or the pain elimination proposer, side and b) the customer, or the healing seeker, side" The pain elimination proposer side consists of *loss creators, pain eliminators, the pain elimination proposition statement and the pain eliminating product and services* while the customer side consists of *losses to avoid, pains to eliminate, jobs to be done and statements of acceptance* for eliminating the pains or seeking procedures for healing.

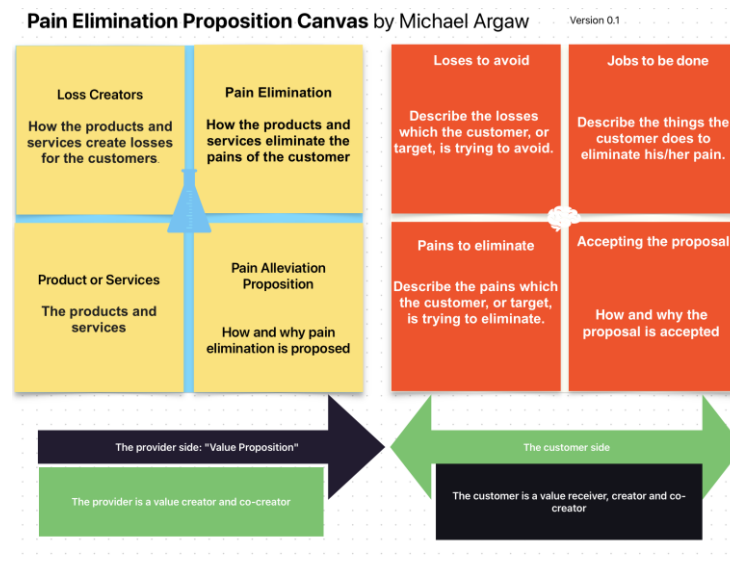


Figure 8. Pain Elimination Proposition Canvas by Michael Argaw.

3.2.5 The Value Co-destruction Sphere

The process, act and state of value co-destruction between the customer and the service provider can happen in the provider sphere, or joint sphere, or customer sphere. If, and when, value co-destruction happens, or begins, in the provider sphere, the provider, acting as an integral, or strategic, value-destructor, facilitates the delivery of invaluable, or preposterous, or superstitious, or harm-centric, service consciously or obliviously. In addition, value co-destruction can happen in the joint sphere: "a) when the customer, as a dependent value co-creator, damages the product, or service, intentionally or obliviously, or b) when the service provider fails to engage, or operate, customer centrically by ignoring the need, or problem statements, of the customer as discussed earlier, or c) when the service provider is keen on delivering, or administering, harm, or mistreatment, to the customer, or d) when the ontology, or environment, of the joint sphere is jeopardized[as a result of regulation, artificial impediments and natural disasters, among others], or is conducive for value co-destruction as opposed to value co-creation. Furthermore, value co-destruction can occur in the customer sphere when the customer uses a substandard, or malicious, or compromised, product, or service, such as acts of deliberate mis-diagnosis by a mal-acting, or preposterous, or superstitious, or ulterior, or insinuating, or unqualified, health

professional, unsupported, or dysfunctional, or ill-intended, among others, product or service, if the customer does not know how to use the product or service and in a circumstance where neither the service provider nor relevant authorities venture on intercepting a harm-centric service, or product, ensuring industry specific quality standards are not violated consciously, or obviously, in anyways, or by any means(Appendix A7; Appendix A8; Appendix A9; Appendix A10; Appendix A12; Appendix A13; Appendix A14; Appendix A15; Appendix A16; Appendix A17).

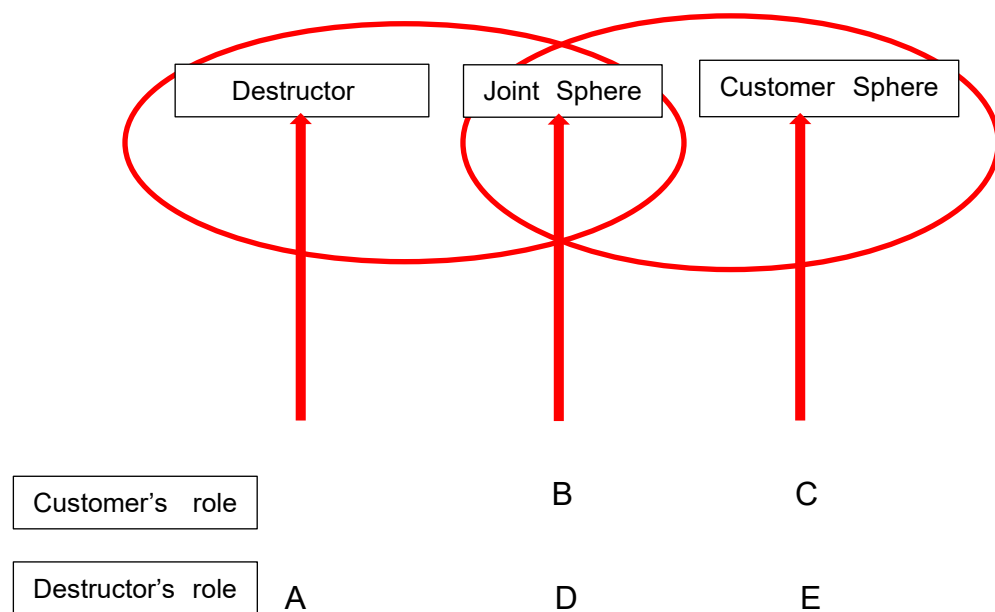


Figure 9. The Value Co-destruction Sphere by Michael Argaw.

- A) Destruction facilitator: "The destructor is the destruction facilitator or value saboteur."
- B) *Destruction creator/co-creator*: "The interacting customer, or target, is the destruction creator in the direct interaction."
- C) *Destruction co-creator*: "The customer is an independent destruction, or harm, receiver outside of the direct interaction with the destructor."

- D) *Co-destructor*: “The destruction provider may get an opportunity to harm or destroy the target or customer. In addition, the destructor could optimize its destruction proposition based on its observations of destructions carried out on the target.”
- E) *Destruction facilitator*: “The destructor, or the destruction provider, is a destruction facilitator.”

3.2 Modelling the relation between two interacting entities

3.2.1 Ontology Model Canvas

The scaffolding nature, setting and relation of the organization to the customer, or user, in terms of political, cultural, social, individual, organizational, academic and historical, among other attributes, may affect and influence the value-creation sphere between the customer and the organization. As a result, to establish whether the relation between the organization and the customer is at risk of getting constrained(if we are planning a relation) or is constrained(if we are evaluating a relation), it is essential we assess the ontology, or context, or operating environment, among others, of the organization to the customer. For instance, depicting the corresponding ontologies of Michael's value-creation sphere with relevant entities in the state of Finland, it is possible to formulate a rating model presenting the nature, setting and relation of Michael to relevant entities.

Types of ontologies	The ontology of the organization for the customer					
	Excellent	Very good	Good	Ok	Bad	Worth
Political						
Cultural						
Social						
Individual						
Organizational						
Academic						
Historical						

Figure 10. The Ontology of the Organization for the customer

If the ontology of the organization for the customer is negative, chances will not be slim the value co-creation sphere between the customer and the organization

would be against the best interest of the customer, or user, of the service. For instance, Michael's ontology of relation with Finnish police — that Michael has long been running open discussion forms entertaining criticism against Finnish police, that Michael has dozens of dispute with Finnish police regarding Police's reluctance to investigate suspected felonies and organized crimes reported, that Michael has long been blogging against Finnish police, and that Michael has long been abused by Finnish police time and again, among others — might have affected and influenced police's illegal decision, or judgment, or operational misconduct: "Not caring about [verifying] the fact Michael was conscious, non-violent and non-psychotic before it requested Michael to jump into the police van without any real-time substantiations of the corresponding alleged conducts of Michael on the 19th of September 2025." Consequently, whether in B2C, B2B, G2C, G2B, or B2BC settings, analysing over the ontology of the organization with respect to the customer is essential when determining, or measuring the impartiality of, the relation between two parties.

3.2.2 Customer-centricism in a safety critical context

Organizations relate with customers, or users, through their representatives, values, brand, services, product, mission and vision, among others. In a safety critical, human-health-centric, interaction sphere, for an organization to carry out value-creative [as opposed to value-destructive], customer-centric, interaction with the customer through its corresponding product, or services, or representatives(or human resources), among others, it is essential medical professionals 1) practice active listening, upholding normative principles, conforming to ethical objectives, envisioning to solve for the customer, or user, authentically, 2) make sure they are aware of the need, and corresponding context, of the safety critical customer attentively and, 3) exercising careful judgment, resonate accordingly. As a result, customer-centricism in safety critical, human-health-centric, interaction environment is attained, or established, in the intersection sphere of active-listening, conscious-awareness and resonance to the customer.

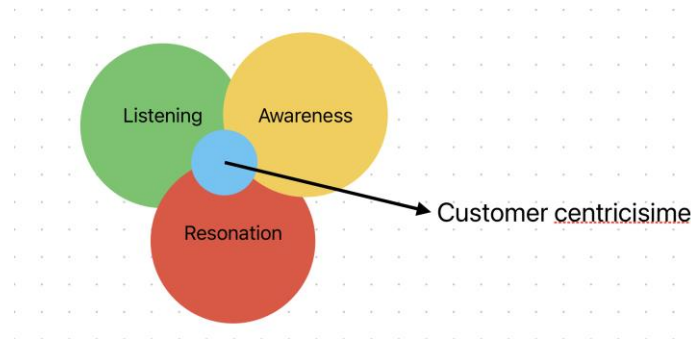


Figure 11. Customer-centricisme in a safety critical value-creation sphere

3.2.3 Knowledge and identification of the customer's problem

For value co-creative interaction resonating to the problem of the customer to occur between the customer and the organization in a safety-critical, human-health-centric, environment, it is essential both the organization, or its representative, and the customer, identify and know the problem of the customer.

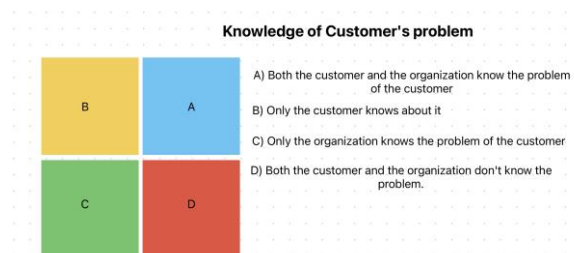


Figure 12. Knowledge of the problem of the customer sets the stage for resonance.

Scenarios where only the customer identifies, or knows, the problem, both the customer and the organization(or its representative) don not identify, or know, the problem and only the organization knows, or identifies, the problem would not be optimal, or ideal, for working towards achieving the envisaged goals — resonating to, and solving for, the customer, upholding the mission, values and vision of the customer-centric organization. As it was demonstrated time and again, Michael, the safety-critical-subject, iterated his need: “It has been years since he last carried out an audiogram for a pre-existing condition, he has been exposed to

high-pitched nuances lately, and he wanted to get a referral to ENT or audiogram.” As opposed to listening actively with an intent to be aware of the need of Michael, and resonating customer-centrally, representatives of the organization, the medical professional — going above and beyond his/her boundary, limitation and operational jurisdiction, among others — were involved in unnecessary interrogation and review of Michael’s official police reports and legit political activities, among others, unethically(Appendix 1; Appendix 2; Appendix 3; Appendix 5; Appendix 6; Appendix 7; Appendix 8; Appendix 9).

3.2.4 The resonance of the organization to the customer

The resonance of the organization, or representatives of the organization, to the customer is a very important aspect of the value co-cocreation sphere determining whether or customer-centrism would be achieved upholding the universal mission, vision and values of the organization. Unless the organization, or its corresponding representative, resonates to the customer having listened actively, with an intent of becoming aware of the problem of the customer, it is difficult to establish a customer-centric value co-creation sphere.

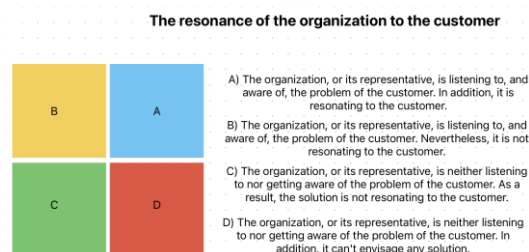


Figure 13. Resonance sets the stage for achieving customer-centricism

That the organization, or its corresponding representative, was not listening with an intent to be aware of the need of Michael, resulted in a failure to resonate to the envisaged objectives of Michael in the safety-critical, human-health-centric, value-creation-sphere(Appendix 1; Appendix 2; Appendix 3; Appendix 5; Appendix 6; Appendix 7; Appendix 8; Appendix 9): “A referral to ENT or Audiogram — specialists Michael had visited couple of times between 2016 and 2023 in a private value-creation-sphere.”

3.2.5 The dedication of the organization to understand the customer

In a safety-critical, human-health-centric, value-co-creation-sphere, unless the organization, or its corresponding representative, is dedicated to the customer — putting sufficient amount of efforts to listen to the customer actively, acting with an intent to be aware of the need, or problem, of the customer tactically and strategically and exercising normative professional standards and ethical active analytic judgment resonating authentically, among others — it is hard to establish any of the envisaged, ethical and customer-centric outcomes normatively.

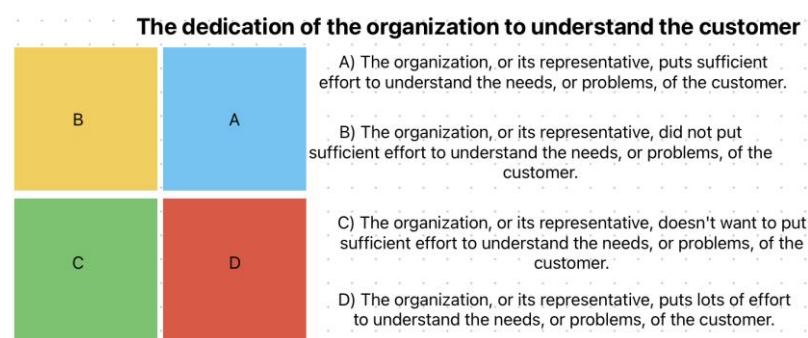


Figure 14. Dedication is important for achieving customer-centricism

As far as the corresponding secessions with the organization, or its corresponding representative, during the safety-critical, human-health-centric, value-creation-sphere is concerned, immanent in the one-on-one, dedicated, secession, among others, was a clear lack of dedication to listening and understanding, among others, Michael, upholding normative, ethical, standards. Consequently, the operational misconduct led to avoidable exponential harms, wastes and damages, among others, to Michael, among others, directedly and indirectly permanently(Appendix 1; Appendix 2; Appendix 3; Appendix 5; Appendix 6; Appendix 7; Appendix 8; Appendix 9). If the organization, or its corresponding representative, was dedicated to the customer — whether or the envisaged need of the customer, carrying out audiogram, or visiting an ENT, would have been achieved immediately — the inherent, subsequent, avoidable, health, social, time and political, among others, exponential, orthogonal, harms, or damages, or crises, among others, would have been avoided.

3.2.6 Value-destruction by an organization

In order for value-destruction to occur, it is essential there is a relation between two or more parties. While one party can damage another without any interaction, or value co-creation sphere, for value-destruction to happen, it is essential there is an interaction[whether or influenced by other parties directly and indirectly] between two, or more, parties at any point in time. Experience has it that not all safety-critical, human-health-centric, interaction-environments result in the envisaged positive outcomes of value addition, among others. As a result, value-destruction is a permissible outcome in any environment of value creation, or interaction, for which managers should be prepared for.

As important as making sure value-destruction will not happen in a safety-critical, human-health-centric, interaction environments is reacting to developments, or conducts, of value-destruction by the organization, or its corresponding representative, managing scenarios of value-destruction tactically and strategically, responsibly and promptly. For instance, setting permissible guiding questions as in Figure 15, using the corresponding answers as an input-domain for managing crises arising from value-destruction and processing the corresponding feedbacks received from the damaged customer, among others, are some of the intervention mechanisms.

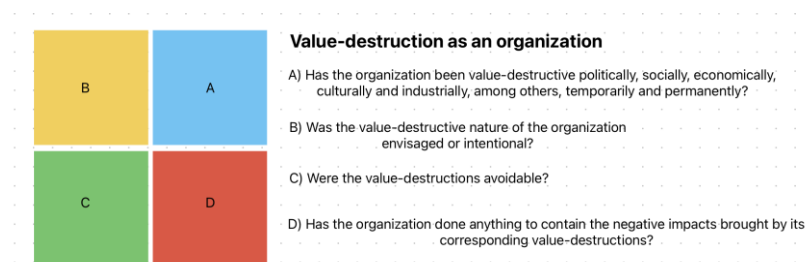


Figure 15. Questions for capturing the breadth and depth of the value destruction

3.2.7 Organizational Problem Identification Canvas

Organizations operating in a safety-critical, human-health-centric, environment, even if they do not have a clearly articulated vision, mission and values, among others, will, and must, stand to serve some purposes: “Value-proposition, value-creation and value-delivery, among others.” If any given organization fails to live up to its purpose, or engages in gross-value-destruction, it is time to deploy tactics and strategies of organizational introspection and retrospection. For instance, setting permissible guiding questions as in Figure 16 and using the corresponding answers as an input-domain for identifying the underpinning problems of the organization while processing feedbacks from insiders and outsiders, among others, are some of the intervention mechanisms to capture the breadth and depth of problems in the organization.

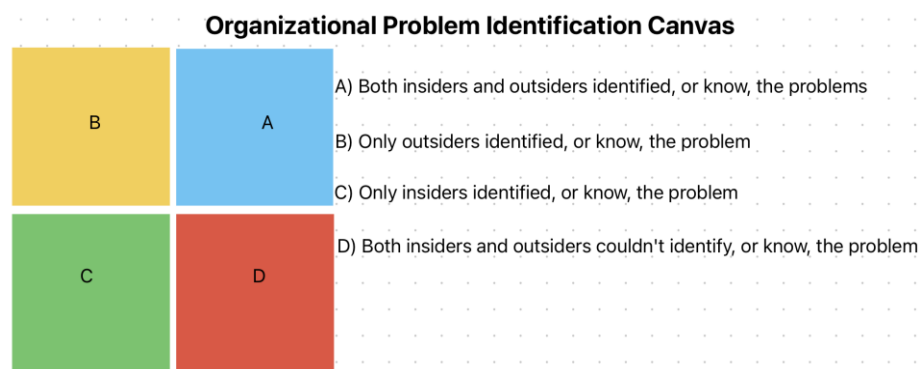


Figure 16. Questions for capturing the breadth and depth of organizational problems

3.2.8 Resolution Status of Problems Identified

Organizations which don not solve, or reduce, lists of identified and unidentified(that which are poised to happen, or exacerbate, sometime) problems decline, or fail. Organizational stability, predictability, growth and success, among others, is maintained and promoted by 1) reducing as opposed to ignoring problems, 2) and, avoiding procrastination, making sure the problems identified have been solved for both insiders and outsiders genuinely. For instance, setting simple and direct permissible and guiding questions as in Figure

17 — and using the corresponding answers as an input-domain for ensuring problems identified have been resolved while processing relevant feedbacks from insiders and outsiders, among others, in due time — are some of the intervention mechanisms to capture the corresponding resolution status of problems identified from the angel of both the organization and the customer, among others.

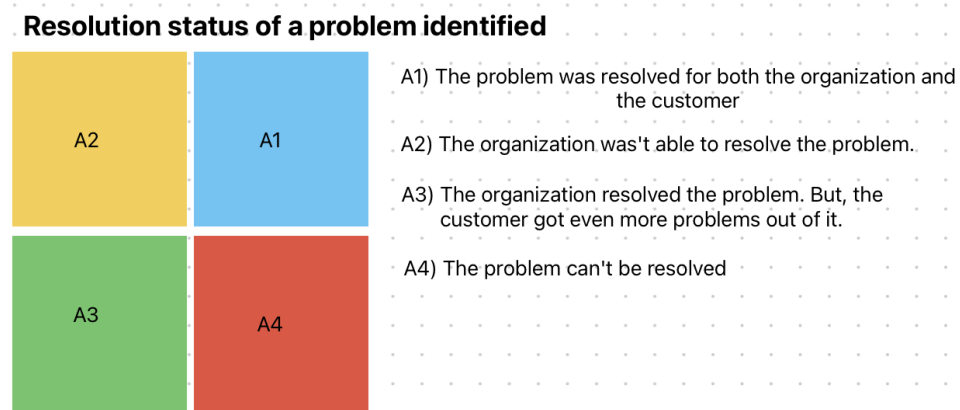


Figure 17. Example questions for understanding the resolution status of problems identified in the organization

3.2.9 Linear risk analysis for an entity with another entity

Let alone between two interacting entities, such as persons, organizations and countries, among others, any given entity may have indirect risks because of the development between two, or more, relevant entities. In a safety-critical, human-health-centric, value-creation-sphere, whether the organization or its representative, had a value-destruction-sphere with another entity, such as customer, or country, among others, it is essential modelling the breadth and depth of the corresponding risks resulting from poor, or inappropriate, or unethical, interactions. Identifying and rating potential risks would position the entity to exercise holistic and enhanced control tactically and strategically in due time before, when, and after, crises emerge, setting the stage for prescriptive, real-time and holistic contemplative actions respectively.



Figure 18. Risk analysis model canvas for an entity with another entity

Not all interacting entities, or parties, with an entity exhibit the same levels and types of risks interacting with an entity in a safety-critical, human-health-centric, value-creation-sphere. Figure 19 shows a generic-risk-analysis-table for any given entity interacting, or aligning, among others, with different parties, or entities, such as persons, organizations and countries, among others.

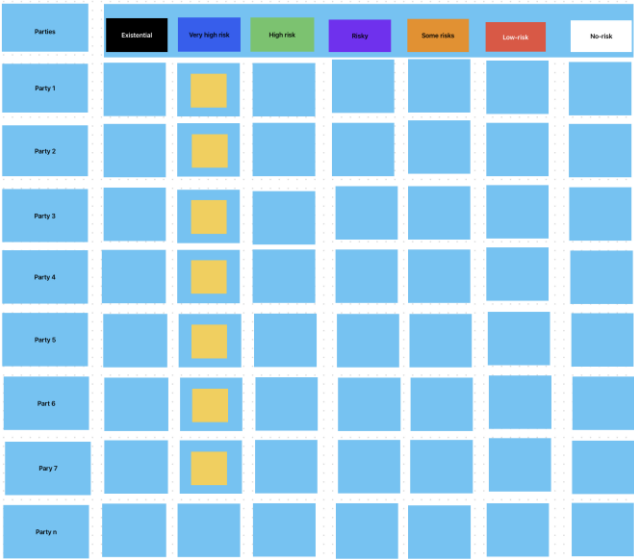


Figure 19. Benchmark for comparing the level of risks among different interacting entities.

4 The Service, or Value, Delivery Process

As depicted earlier, the service, or value-destruction, delivery process — for the safety critical, human-centric, service which was experienced as ulterior, harmful and predatory, among others, by the prisoner of conscience — started 1) by the time when the safety critical service subject called up Omalääkäri, Mehilinen, 2) scheduled an appointment for the 19th of Sep 2023, 3) visited a general doctor on the 19th of Sep 2023, and as opposed to a referral for an ENT, or audiogram, received a nazi salute and got transferred to the emergency acute psychiatric ward of Jorvi, 4) alleged of unconsciousness and critical psychiatric conditions, among others, got referred to passing two days of observation at the Jorvi emergency psychiatric observation centre, 5) though allegations of unconsciousness, among others, were cleared off, or deconstructed, unequivocally at the reception and exit interaction spheres on the 19th and 21st respectively, referred to passing a day of observation with advanced experts at P7, Helsinki's critical psychiatric observation and treatment centre(Appendix A8), 6) met non-advanced experts and underwent an interrogation about the historical, legit, suspected crime reports he made to the police hitherto, and his political and group affiliations, among others, before alleged of having a disorder, a mental pathological diseases in the receptors of the central nervous system, which needs an immediate declaration as a mental patient and treatment officially, 7) subjection to two weeks of involuntary detention and clinical experiments, among others, instruments of torture, 8) discharge and recovery from torture and 9) fight back: "Countering the injustice, or the basic human and democratic rights violations, experienced procedurally, upholding industry specific standards(Appendix A9)." In one hand, value is added, or created, in the service process experience journey if the service providers, or representatives thereof, are not only customer centric but also solving for the customer [in which case it would have been writing a referral for an audiogram, or ear check-up, and (if possible) a support letter that suspected, organized, empirical software engineering, health crimes reported to the Police be taken seriously(Appendix A1; Appendix A5)]. In another, value destruction happens in the service process if the service results in torture, or abomination, or brutal harm, or oppression, or

attempted suffocation to death, or a waste of time, or disparagement, or pain, among others, to the subject, or the key value weigher of the envisaged service, intrinsically.

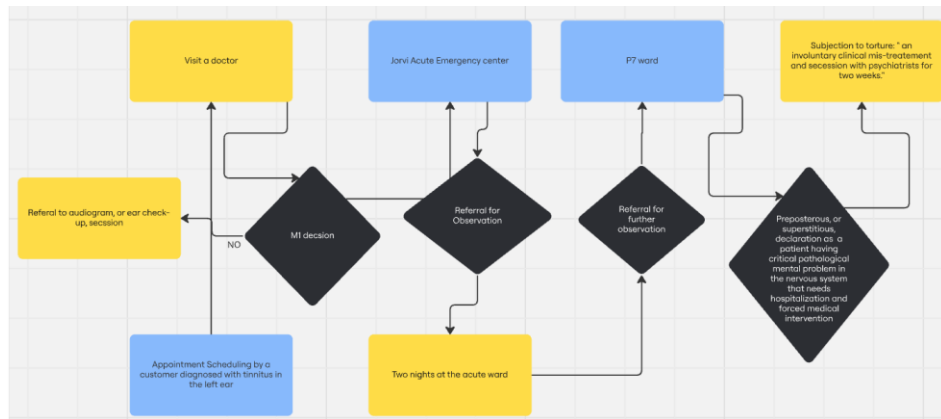


Figure 20. The process diagram for the service delivery process

In the process diagram above, what is touted as the destruction proposal service delivery process is abstracted to be composed of the aforementioned processes and procedures in a nut shell: “visiting a doctor at Omalääkäri, Mehilinen on the 19th of Sep 2023; passing through two days of observation at Jorvi’s emergency acute psychiatric centre; passing through nearly two weeks of detention, or torture, or clinical experiments, at P7 after getting falsely categorized as a service process subject having a pathological diseases in the central nervous system which needs imperative hospitalization; and a value destruction process with a psychologist, among others, in which the service process subject’s outstanding issues will not be recorded on Omakanta belligerently(Appendix A17)” A decomposed observation of the interaction, or customer touchpoints, with the alleged representatives of the service providers containing technical, medical and business terms is discussed in the next chapter.

5 Decomposition of the CX Touchpoints

5.1 Visiting a Doctor at Omalääkäri, Mehilinen(19/01/2023)

Pre-visit	On the 14 th of September 2023, the client would call and schedule appointment for the 19 th of Sep 2023.
Observation 1	A false review which will not be corrected before the 20 th of Sep 2023 would be written (Figure 22 and 23).
Observation 2	On his way to Omalääkäri, Mehilinen, the service case client would receive a hint he would be framed (Appendix A6).
On visit	On the 19 th of Sep 2023, the client would meet a young, skin-headed, doctor, Maiju Malmberg, whom he had not met before.
Observation 1	The doctor is not qualified to practice disputed safety-critical service in English.
Observation 2	As opposed to getting right down to checking the ear of the client and streamlining him to an ENT, or audiogram, among others, as requested, Malmberg would venture on asking unnecessary questions, such as if the client is involved in politics, and if somebody has ever attempted to attack him, among others. Then after, the doctor would make a false, plausible and disputed report the client is unconscious, among others.
Observation 3	The alleged, swatted, ear-health client was conscious and normal when a police van and paramedics arrived at the scene. The super-young doctor, from a bit afar, on the other side of the door, smiling, would show a Nazi salute to the ear health client. An important fact to note: "as opposed to receiving any help from the paramedics as an unconscious subject, the victim, putting his hands in his pockets, would walk into the ambulance and seat consciously himself."
Observation 4	The young, skin-headed, doctor was not emphatic or customer oriented. As a result, her holistic, professional, moral, psychological and psychiatric state of judgment, or integrity, or competency, was very plausible intrinsically. Looking at a very conscious and stable person, police and paramedics should have challenged the doctor.
Post-visit	What came out of the visit: "value destruction, or destruction proposition, or bad experience, or pain, or abuse, to the customer; not attaining the envisaged needs of the customer: 'if not a cordial, civic and empathic support letter to law enforcement suspected health, empirical-software-engineering, crimes reported by Michael get investigated, receive a simple referral note for an audiogram secession; and trumped up, or mis-guided, M1 misdiagnoses, or referral, for an observation process to Jorvi's acute psychiatric emergency unit which deals with real-time, mental, or emotional, or conscious, state problem/diseases as opposed to pre-existing cases of ENT.

Figure 21. Observation of the visit to Omalääkäri,

There are dozens of substantive facts which pose legitimate challenges to the objectiveness, or ethical standards, of the conducts of service operation, or delivery, observed, or deciphered, in section 5.1.

1. Michael would make a call to OmaLääkäri — which represents the public health care service of the western Uusimma wellbeing county service of the Espoo municipality — on the 14th of Sep 2023. The reason why he called the health center was to book an appointment with a general doctor, or get a referral to an ENT, or audiogram, or hand massage (for he has just recovered from a casted scaphoid on his right hand which occurred during an amateur soccer tournament). Citing an already existing case which requires a regular check-up, Michael requested if he could be referred to an audiogram, or ENT, service directly without visiting a medical doctor. Nonetheless, he would be told he would need to visit a general doctor first. Subsequently, passing through a general doctor was the only way to receiving a referral to an audiogram. However, the call review would be written falsely, according to Figure 22 and 23. As a result of the unethical, unprofessional, customer service he experienced while he attempted to book for a schedule, Michael, putting aside his thought of complaining about his negative customer touchpoint with the nurse to Valvira, would tell the nurse that he is worried about her health.

Etusivu > Terveystiedot > Käynti

Käynti 14.9.2023

Omakanta näyttää Kanta-palveluihin tallennetut terveystiedot terveydenhuollon käynneistäsi. Tiedot tallennetaan Kanta-palveluihin viiveellä. Jos käynnin tietoja ei näy kohtuullisen ajan kuluessa, voit ottaa yhteyttä sinua hoitaneeseen lääkäriin tai yksikköön.

Ajankohta 14.9.2023
Palveluyksikkö Länsi-Uudenmaan hyvinvointialue

Potilaskertomus

HOITOTYÖ
 Nenonen, Carita Sairaanhoidaja
 Terveyskeskus Mehiläinen Espoontori, LUVN HVA
 14.9.2023

Hoidon toteutus

Etäkontakti
 Takaisinsoitto. Varaa lääkärin aikaa. Jokin toimenpide tehty käteen Terveystalolla keväällä. Aiemmin tästä soittanut, kts. aiemmat kirjaukset alla. Potilaalta pyydetty Terveystalon asiakirjoja leikkauksesta toimitettavaksi, ei ole kuitenkaan selvinnyt mikä leikkaus tehty. Kädessä ei tällä hetkellä kipua. Kokee, että käsi ei kuitenkaan ihan täysin palautunut. Toivoisi lääkärin aikaa käden tarkastukseen.

Konsultoitu Iri Lehtonen. Lääkäri näkee, että potilas käynyt ESH:n puolella käsikirurgialla arviossa 07/2023. Tuolta ohjattu yhteys jos ökk sisään kädessä kipua. Ohjataan potilasta olemaan yhteyksissä tuonne.

Soitettu potilaalle lääkärin kommentit tiedoksi.

Potilas kertoo lääkärin konsultaation jälkeen, että haluaa lääkärin vastaanotolle. Useita vuosia kokenut väkivaltaa ja hyväksikäyttöä. Kertoo, että v. 2016 lähtien. Yritetään haastatella potilasta. Potilas ei halua kertoa enempää asiasta. Haluaa keskustella lääkärin kanssa asioista.

Hoidon tarpeenarvointia ei voida kunnolla tehdä, sillä potilas ei kerro tilanteestaan. Lisäksi puhelimessa kuuluvuus huono.

Konsultoitu Iri Lehtonen uudelleen. Lääkäri ohjaa potilasta hakeutumaan Espoon psykiatrisen sairaanhoidajan vastaanotolle ilman ajanvarausta klo 8-12 maanantaista perjantaihin (Suomenlahdentie 1, Iso-omena kauppakeskuksen, 3. krs, 02230 Espoo) tai soittamaan Mieli ry kriisiapu numeroon 09 2525 0111 auki 24h/vrk.

Hoidon syy
 L12
 Käden/sormen oire/vaiva

Figure 22. False review by the staff of Omalaakari, Mehiläinen.

Visit 14.9.2023

My Kanta Pages displays the health information stored in the Kanta Services about your healthcare visits. The data is stored in the Kanta Services with a delay. If the information about the visit does not appear within a reasonable period of time, you can contact the doctor or unit that treated you.

Time 14.9.2023
Service unit Western Uusimaa Welfare Area
 Health Centre Mehiläinen Espoontori

Patient Record

NURSING

Nenonen, Carita Nurse
 Health Centre Mehiläinen Espoontori, LUVN HVA
 14.9.2023

Implementation of treatment

Remote contact

Callback. Make time for the doctor. Some procedure was handed at Terveystalo in the spring. Previously called about this, see previous entries below. The patient has been asked to provide Terveystalo's documents for the surgery, but it has not been determined which surgery has been performed. No pain in the hand at the moment. However, it feels that the hand did not fully recover. I wish the doctor had a hand check-up.

Consulted Iri Lehtonen. The doctor sees that the patient visited ESH's side of the hand surgery in assessment 07/2023. From there, a guided connection if 6 months in the hand pain. Let's guide the patient to be in contact with you.

Called the patient for the doctor's comments.

After the consultation with the doctor, the patient will tell you that he or she wants to see a doctor. For several years, experienced violence and abuse. It says that from 2016 onwards. Let's try to interview the patient. The patient does not want to tell you more about it. Wants to talk to your doctor.

The need for treatment cannot be properly assessed, as the patient does not report on their situation. Plus, the phone's reception is poor.

Consulted Iri Lehtonen again. The doctor will direct the patient to see a psychiatric nurse in Espoo without an appointment from 8 a.m. to 12 p.m. on Monday to Friday (Suomenlahdentie 1, Iso-apple shopping centre, 3rd floor, 02230 Espoo) or call Mieli ry crisis help number 09 2525 0111 open 24h/day.

Cause of treatment

L12

Hand/finger symptom/ailment

Figure 23. The English version of the false review by the staff of Omalaakari, Mehiläinen.

As a matter of fact, writing to Omalaakari, Michael would dispute the misguidedly written false review politely, peacefully, consciously and professionally as follows:

Forwarded message ----- From: **Michael Argaw** <argawmichael@gmail.com>
 Date: Thu, 21 Sept 2023, 1:02 pm Subject: Another dispute/complaint
 To: Ina Kyhyräinen Ina.Kyhyrainen@omalaakarisi.fi
 To whom it may concern,

I, yet again, would like to dispute the call review report that was made about me with regard to the reservation call on the 14th. I haven't talked, or met, with a doctor by the name Dr. Lehtonen at all. Instead, I talked with the phone nurse, or receptionist, who portrayed difficulty as well as unwillingness to understand my ultimate objectives: "GP, or Ear doctor, or audiogram, or hand massage" The medium of communication with me was English. Forgetting what I told her, she would ask me the same questions time and again. And I, frankly, there and then, iterated, "I'm worried about her health". I haven't had any hand surgery. While my hand had been casted (by a private healthcare company), it has recovered pretty well, according to the conclusion by Georgios Pierides, a HUS hand specialist. As a result, I only wanted to get a hand massage and carry out a check-up. Nevertheless, I would decide to call HUS — where I've a provision for a call back in matters of hand for couple of months — about the matter after the call with her. I told her that there are new circumstances which require me to visit an ear specialist: "persistent exposure to high pitched noises, such as aeroplanes atop my home location, among others, affecting my hearing system somehow" As a result, I told her that I would like to meet an ear specialist, or a general doctor, who can streamline me to one, among others. She suggested that I see a psychiatrist nurse so as to talk about it. However, I told her that the mild, or minor, hearing loss, or tinnitus, I have is a disorder in the inner ear. As a result, only non-medical professionals would assume it is a psychological, or psychiatric, problem, or disorder. The first time I did an audiometry in 2016, I recorded a minor hearing loss. But, the second time I did an audiometry, I recovered nearly all my hearing. As a result, I wanted to carry out another audiometry, among others, again. The

nurse was impolite, aggressive and unwilling to understand me. In a word, “racist(discriminating based on pre-existing condition)” as far as my experience is concerned. I suspect the call back reservation secession with the nurse has been subverted. The reason as to why I am writing to you: “ Reads like the nurse has been passing misinformation to Dr. Lehtonen regarding the 14th, according to Figure 22 and 23”

Thanks

M.

According to OmaKanta, the national health register system of Finland, the aforementioned review will not be corrected before the 20th of September 2023, according to Figure 24, 25 and 26.

14.9.2023	Terveyskeskus Mehiläinen Espoontori Länsi-Uudenmaan hyvinvointialue	20.9.2023
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Figure 24. Date of correction of the corresponding false review.

Käynti 14.9.2023

Omakanta näyttää Kanta-palveluihin tallennetut terveystiedot terveydenhuollon käynneistä. Tiedot tallennetaan Kanta-palveluihin viiveellä. Jos käynnin tietoja ei näy kohtuullisen ajan kuluessa, voit ottaa yhteyttä sinua hoitaneeseen lääkäriin tai yksikköön.

Ajankohta 14.9.2023
Palveluyksikkö Länsi-Uudenmaan hyvinvointialue

Potilaskertomus

YLEISLÄÄKETIEDE

Lehtonen, Essi Yleislääkäri
Terveyskeskus Mehiläinen Espoontori, LUVN HVA
14.9.2023

Hoidon suunnittelu

Muu merkintä

Ks Navitas, käsikirurgi Georgios Pierides kirjaus:
"Oikeanpuoleinen scaphoideum-murtuma, 4 1/2 kuukautta.
Oikeanpuoleinen veneluun murtuma 2.3.2023. Alku yksityisesti. Sitten toivonut hoidon siirtymistä julkiselle puolelle.
Nyt 3.7.2023 uusi oikeanpuoleinen ranteen KKT tehti.
Kertoo, että juurikaan kipuja ei ole enää esiintynyt. Kutsuu tuntemuksiaan enemmänkin "epämukavuudeksi".
Kommunikaatio englanniksi.
Nykytila
Yleistila hyvä. Ulospäin ei turvotuksia. Ranteen liikkeet ojennukseen ja koukistukseen vastaavat vastakkaista puolta.
Forseeraminen koukistukseen tai ojentamiseen eivät satu. Tabatiären palpaatio ei satu eikä scaphoideumin palpaatio satu. Watsonissakaan ei suurempia kipuja. Naputtelu ei tuo kipuja esiin.
3.7.2023 KKT:ssä asento säilynyt, fissuuralinja kolmessa leikkeessä enemmän ulnaarisesti nähtävissä. Radiaalisesti näyttäisi olevan jo täysin siltaava luutuminen.
Annetaan lupa käyttää kivun mukaan. Saa siis myös nostaa, mikäli ei tee kipeätä. Sellaiset asiat, jotka tekevät kipeätä, täytyy vielä pitää tauolla.
Uutta kontrollia ei automaattisesti järjestetä. Mikäli puolen vuoden aikana lisääntyvää kipuilua, niin potilas voi varata itselleen uuden käyntiajan."
Suunnitelma
Fysioterapeutille voi varata aikaa jos taivoo kuntoutusohjeita.
Jos lisääntyvissä määrin toiminnanvajausta/kipua voi alkuvuoteen 2024 asti olla suoraan yhteydessä käsikirurgian poliklinikkaan.

Figure 25. The corrected review which was edited on the 20th of September.

Visit 14.9.2023

My Kanta Pages displays the health information stored in the Kanta Services about your healthcare visits. The data is stored in the Kanta Services with a delay. If the information about the visit does not appear within a reasonable period of time, you can contact the doctor or unit that treated you.

Time	14.9.2023
Service unit	Western Uusimaa Welfare Area Health Centre Mehiläinen Espoontori

Patient Record

GENERAL MEDICINE

Lehtonen, Essi General Practitioner
Health Centre Mehiläinen Espoontori, LUVN HVA
14.9.2023

Treatment planning

Other marking

See Navitas, hand surgeon Georgios Pierides entry:

"The right-hand scaphoideum fracture, 4 1/2 months.

Right-hand boat bone fracture 2.3.2023. Start privately. Then hoping for the treatment to move to the public sector.

Now 3.7.2023 new right wrist CCTT made.

It says that there hasn't been much pain anymore. Calls his feelings more "discomfort." Communication in English.

Current state

General mode good. No swelling on the outside. The movements of the wrist for stretching and flexing correspond to the opposite side. Forseeing to bend or extend does not hurt. Tabatière's palpation does not hurt and scaphoideum palpation does not hurt. Not much pain in Watson either. Tapping doesn't bring out the pain.

3.7.2023 CCTT position maintained, fiscal line in three clips more ulnarically visible. Radially, it seems to be a completely bridged ossification.

Give permission to use according to the pain. You can also raise if you don't feel sick. Things that hurt you still have to take a break.

No new control is automatically provided. If there is more pain in six months, the patient can book a new appointment for themselves."

Plan

You can make an appointment with a physiotherapist if you wish to receive rehabilitation instructions.

If, in increasing amounts, functional impairment/pain can be directly contacted with the outpatient clinic for hand surgery until early 2024.

Figure 26. The English version of the corrected review edited on the 20th of September.

2. As discussed in Appendix A6 in detail, Michael Argaw would walk into the premise of Omalaakari to request for a referral to an audiogram or ENT. On his way, he would encounter a Finnish man with a motorcycle who said: "Michael, to Miro-crises-framing at Mehilainen" Then afterwards, the suspect — who was putting on black and had his face fully covered with a helmet — would ride away. What is tantalizing is that dedicating more than 8 hours, Michael would be making a presentation canvas dubbed, "leadership in crises," on a management visualisation platform known by the name Miro on the 18th of Sep 2023. Michael's plan, subsequently, was simple: "Addressing his followers on Chewata's popular

social media page through presentation, or public ideation, or commentary, on the political crisis unfolding in Ethiopia and his holistic strategy for democratisation as well as conflict resolutions(Argaw 2023; Argaw 2023).” The corresponding suspected crime of violation of data protection, intimidation, harassment and terrorism, among others, was reported, or communicated, to Police Finland though it was not taken seriously, according to Appendix A6.

3. The empirical and rational interpretation of the salute mark aside, the young, skin-headed, doctor showed a Nazi salute to Michael.

4. Let alone making a plausible statement (if it is assumed Michael made a plausible statement, such as having an experience of flying like an eagle), even being violent does not necessary lead to a swift diagnosis, forced detention and isolation and medical intervention unless it is justified legally, socially and medically that all options have been exhausted to contain and solve an immediate problem. If we [theoretically and temporarily] assume the service process subject a) has a repeatedly recorded, or at least a moment of, history of violent crimes, or substance abuse, b) or was unconscious, or unstable, beating healthcare service providers, or throwing items on everyone at the scene where police arrived, c) or was talking non-stop for unknown reasons, d) or is suspected of mis-interpreting his real-time environment, such as making abnormal remarks, such as showing Nazi salutes to strangers, and carrying out violent shooting incidents like Timo Vouranen, MP, and the Jyvaskyla shooters, in the real time, without ruling out, or precluding, other factors beyond any reasonable doubt, there would have not been any legal, moral, security and scientific, among others, reasons to diagnose a healthy person swiftly illogically (Roiha 2024; Yle News 2024; Yle News 2024). Unethically diagnosed and prescribed with chemicals which could damage their nerve, or change their state, Timo Vouranen, and the Jyvaskyla shooters, among others, were not isolated in any acute psychiatric detention center with patients, or unethical professionals, or environment, which could have posed a life-threatening challenge to their safety, security and wellbeing, among other orthogonally and exponentially demolishing instrumentations intrinsically, among others. As a matter of fact, there was a moment where a

patient would come up to fight with Michael out of the blue at Jorvi. By and large, immanent in the isolation, torture and getting instrumented with chemicals, among others, is discrimination, among others.

5. Up on checking Michael is very conscious and stable, Espoo police — having recorded its field observation: “for instance, that Michael was conscious. Nor was fighting with, or threatening, anybody. Nor was misinterpreting his real-time environment. Nor was making any plausible political comments. Nor he was making abnormal statements. Nor he was making trouble with anybody in the run up to and by the time when police and paramedics arrived. In addition, he was able to stand, walk and seat in the ambulance independently as a conscious person. He was assertive. Smiling, he was putting one of his hand in his pocket confidently, among others” — should have left Michael alone to go home and sat the stage for processing outstanding legal disputes between Michael and the service providers, and representative thereof, through independent, impartial, dispute resolution mechanisms. For instance, Police Finland had to remove an intoxicated MP of Finns party who could have posed a danger to others from a Finnair flight(YLE News 2025) while it did not take another Finns Party MP, Timo Vouranen, to a psychiatric center immediately even when there was a public concern about his active analytic judgment regarding his acts of causing a nightclub shooting incident(YLE news 2024). In the case of Michael, what was evident by the time when police and paramedics arrived was unambiguous: “Michael was conscious, calm, peaceful, collected and not talking randomly. Nor portraying any predisposition to violence to anybody in anyways, or by any means, intrinsically.”

6. Given Michael’s ontology of complicated relation with Police Finland and dozens of private and public entities of the state of Finland — for instance, Espoo police neither turned up during Michael’s call to 911 nor bothered to investigate Michael’s report of attempted murder, or assault, by a suspected psychotic and violent person, among others (Appendix A2) — the objectivity of Police Finland towards Michael is plausible intrinsically. By and large, it is the basic principle premised on which industry specific standards are set that let alone in a safety

critical interaction processes, any service, or value-creation, or customer touchpoint, or interaction, sphere on which there is a slight substantive element for mis-trust, or prejudice, or mis-conduct, among others, the human subject can not be forced to be a customer intrinsically.

7. The young, skin-headed, medical-doctor, having written a mis-leading review, did not only swat Michael to Police but also wrote to media keskus(center) against Michael.

8. The young, skin-headed, medical doctor — befor swatting Michael to Espoo police — would ask him to wait in another room where a nurse who presented herself as a midwife would interrogate him about irrelevant, unprofessional, personal questions for over 30 minutes. Michael was not violent to the nurse, among others, though he was provoked by the psychologically abusive conducts of the nurse and Malmberg. In conclusion, unless an interrogation by Police if, and through, a due process, there was not any pressing need for 1) carrying out irrelevant interrogations on Michael and 2) making unnecessary questions, remark, diagnosis and referral Michael passes through a period of observation, or treatment, at Jorvi's acute emergency psychiatric unit superstitiously and preposterously. Although Michael was not administered with any liquid chemical, or medication, at Jorvi, prescribing the application of chemicals on any safety critical human body unreasonably is unethical and abusive intrinsically.

9. Moreover, Malmberg was nether qualified nor impartial to practise the disputed, safety-critical, service on Michael for which she made a diagnosis.

5.2 Reception at Jorvi (19/01/2023)

The safety critical service process subject was received by professionals Outi and Heidi of Jorvi's emergency acute psychiatric centre on the 19th of Sep 2023.

Observation 1	Violation of industry specific service standard: "1) Outi and Heidi, the reception professionals, were not qualified to practice disputed safety critical service in English; and the care professionals — violating normative principles of safety critical customer care service — were angry and disrespectful"
Observation 2	As opposed to clinical — verifying and validating whether the alleged service case client is unconscious, among others, in the real time — the interrogation carried out with the duo was 1) legal in nature and 2) based on hearsay-centered allegations as opposed to the verification of Michael's conscious state there and then: "She said, they said and why are you saving this and etc."
Observation 3	"The reason why Michael was referred to an observation process at Jorvi's emergency acute psychiatric center was due to a suspected, or alleged, state of unconsciousness, among others. Nevertheless, the client 1) asserted he was in a state of super-consciousness by leading an awareness exercise effectively, and 2) iterated that except clinical ones, legal matters can not be front and center of the value-creation sphere of the service process intrinsically."
Observation 4	Outi and Heidi — transcending their jurisdiction of service operation, or duty of care, validating the real time state of consciousness, or normality, of the safety critical service subject — were controlling, or reprehending, what the conscious victim should have not said allegedly expressly. Although the victim was conscious (so far up to leading an awareness exercise to deconstruct, or demystify, allegations of unconsciousness there and then), Outi and Heidi, as opposed to leaving the person, would write a referral for two days of in-house observation, with an administration of chemical, at Jorvi's emergency acute psychiatric center, harshly.
Conclusion	The reception process did not follow normative professional procedures and standards. As opposed to an execution of a duty of safety critical care on an unconscious service process subject, it exhibited targeted and perverted interrogation for the most part.

Figure 27. Observation of the reception procedure at Jorvi.

5.3 Two Nights of Observation at Jorvi (19.01.2023-21.01.2023)

Michael would spent two days in his room without getting subjected to any liquid chemical. Working on his Master's thesis, the software product management of Chewata, and chatting with friends and e-psychologists, among others, were some of the activities which Michael carried out as a conscious, non-psychotic and non-violent person. Nevertheless, the substandard, disrespectful and unprofessional observation secession with Dr Victor Volkov and et Il would culminate with a referral for an observation by advanced experts at P7 on the 21st of September 2023, according to Appendix A8.

Observation1	Violation of industry specific service standard: "At the time-of-service delivery, Dr Victor Volkov was not qualified to practice any disputed safety critical service in English"
Observation2	As opposed to clinical — verifying and validating whether the alleged service case client is unconscious, among others — the unethical interrogation by Victor and et Il was 1) legal(historical suspected crimes reported by the observation service process subject) for the most part, 2) based on one sided, biased, hearsay for the most part: "they said, she said and why did you say this and etc" and 3) though corrected not to degenerate and, where needed, clarified and instructed time and again, the doctor was indulging in mocking, falsely framing and putting words into the mouth of the subject deliberately time and again. "Are you a politician? Who funds you? Which party do you belong to?" (Appendix A8)
Observation 3	While allegations of unconsciousness, among others, were dropped on record on the 21 st of September 2023, a referral for another observation process secession with advanced experts at p7 will be made by Victor.
Conclusion	The observation secession process did not follow normative professional procedures and standards. As opposed to an execution of duty of safety critical care on an unconscious service process subject, it exhibited interrogation, mockery and deliberate mis-interpretation of the clarifications, and corrections, of the service process subject for the most part(Appendix A8).

Figure 28. Observation of the observation process at Jorvi

5.4 Passing Nearly Two Weeks of Detention or Torture at P7

The process regarding passing nearly two weeks of detention, or torture, at P7 — after getting falsely categorized as a service process subject having a mental pathological disease in the central nervous system which needs imperative hospitalization — was unprofessional, preposterous and superstitious strategically deliberately. As a matter of fact, it was during this process phase that the safety critical service case subject was subjected to biochemical torture, among other harms, belligerently.

<p>Observation 1</p>	<p>Violation of industry specific service standard: "At the time of service delivery, let alone being touted as an expert, Dr Eeva Hekkila, the alleged advanced expert with whom the service subject had strategic diagnosis secession, was neither qualified nor impartial to practice disputed safety critical service in English."</p>
<p>Observation 2</p>	<p>As opposed to clinical — verifying and validating whether the alleged service case client is unconscious, among others, in the real-time — the unethical interrogation by Eeva and et II was 1) legal(historical suspected crimes reported by the observation service process subject, such as the suspected direction of planes into his vicinity, among others) in nature substantively, 2) out of real time context or substantiations(i.e based on historical suspected crimes reported to Police) and based on one sided, biased, hearsay, or allegation, for the most part: " they said, she said, that you said and why are you saying this and etc" and 3) though[time and again] instructed, or corrected, not to degenerate out from real time, conscious, state analysis of the safety critical service subject, the doctor, based on her suspicions and mis-interpretations of the suspected crimes reported by the subject, would make a preposterous allegation that the service process subject has a critical mental pathological problem resulting from the dysfunction of the receptors in the central nervous system which needs urgent treatment or immediate hospitalization(Appendix A9). Meaning, until the time of the diagnosis, the service subject was touted as a normal person who is suspected of being unconscious who needs to pass through a period of observation as written by the young, skin-headed doctor, among others, since the 19th of Sep 2023. While the mis-diagnosis conducted on the 22nd of Sep 2023 is the reason why Michael was subjected to an involuntary detention, declared as a mental patient who needs to be in a special care, it would be equivocated as a decision made by mistake subsequently(Helsinki Administrative Court 2024).</p>
<p>Observation 3</p>	<p>On the 22nd of Sep 2023, a snap 10 min call would be arranged between the service process subject, Michael Argaw, and an impolite woman who presented herself as a chief doctor who, based on the fabricated reports, or recommendations, of Dr Eeva, would do nothing but only communicate to the service subject that she has decided to get him to stay put in the detention cell [officially] as a confirmed patient to receive treatment for an alleged, fabricated, mental, pathological, diseases resulting from the mal-functioning of the receptors in the central nervous system.</p>

<p>Observation 5</p>	<p>That allegations of predisposition-to-violence, unconsciousness and psychosis could not be used to isolate and demolish Michael anymore, a new, false, case, an urgent pathological-diseases resulting from the imbalance of chemicals in the receptors of the central nervous system, which requires an immediate hospitalization declared as a mental patient, was made swiftly to harm Michael orthogonally as demonstrated subsequently. The impolite women who presented herself as the chief doctor, except upholding the recommendation of Dr Eeva, did not bother to listen to Michael(Appendix A8; Appendix A9).</p>
<p>Observation 5</p>	<p>Following the official mis-declaration as a mental patient for a pathological diseases on the 22nd of Sep 2023, for he refused, the safety critical service process subject was not administered with any chemical. Seating still, he was working on his master's thesis, the Software Product Management of Chewata, in the room where he was detained on the 26th of Sep 2023 when a skin headed Finnish nurse would turn up, show a nazi salute and shout, "Why are you not taking the treatment? It sharpens your brain. You do not want to have a super-interpretation," some time before bringing his colic and injecting an intellectually, or mentally, debilitating, or malfunctioning, substance into Michael Argaw violently.</p>
<p>Observation 6</p>	<p>Asked about her empirical and rational medical grounds for the misdiagnosis and subsequent involuntary detainment of the service process subject, the alleged expert, Dr Eeva, to whom the service process subject was referred for an advanced observation preposterously, exhibited prevarication time and again. At one point, she said, "it seems to me, it seems to me," belligerently time and again(Appendix A9).</p>
<p>Observation 7</p>	<p>Nurses and psychologists, among others, in the P7 detention center would ignore, or disregard, problems reported regarding the clinical torture experienced by the victim, or the value destruction, or destruction proposition, subject(Appendix A7; Appendix A10; Appendix A12; Appendix A13; Appendix A14; Appendix A15; Appendix A16; Appendix A17).</p>

Figure 29. Observation of two weeks of detention, or torture, at P7

5.5 Value Destruction by a Psychologist, among others.

After his release from the unprecedented involuntary isolation, imprisonment and torture, among others, hoping to find some relief and institutional support from impartial, professional, psychologists, Michael would sign up for a psychological secession with Inka Westerlund. Michael Argaw wanted to have a value co-creative secession regarding his experience of abuse by Meta Platforms inc hitherto and the Finnish health care system (from the 19th of September 2023, especially after the 21st and 22nd of September 2023). Nevertheless, Inka Westerlund, the psychologist entrusted to provide an independent, professional, safety-critical, customer-centric, service to the service subject impartially 1) was a colic of the suspects of gross human and democratic rights violations and 2) violated industry specific standards time and again. Although informed repeatedly, the psychologist would refuse to record Michael's account of abuse on OmaKanta deliberately and consciously. Instead, she would bring a medical doctor to the online, Team-meeting, secession [once] in which Michael [again] would impart about his account of abuse, or harms, and the need for logging the information on OmaKanta unabridged. Nevertheless, Telkki, the medical doctor who listened to Michael's online secession of imparting his account of abuse, or harms, once, and a medical doctor by the name Mikael who has never met Michael both online and offline, building on the false and mis-leading reviews written by Malmberg and Eeva, among others, would write a purported to be real, deceitful, medical review on OmaKanta as if they have attended Michael from 12.10.2023-13.3.2024 as an outpatient(Appendix 15; Appendix 16; Appendix 17).

Observation 1	Violation of industry specific service standard: "At the time of service delivery, the psychologist, Inka Westerlund, violating industry specific standards, had prejudice towards the service subject: she was not recording the alleged harms, or torture, the service subject imparted(Appendix A7; Appendix A10; Appendix A12; Appendix A13; Appendix A14; Appendix A15; Appendix A16; Appendix A17). Instead, she would write 'I could not meet the psychosis patient and etc' on Oma Kanata mis-informatively."
Observation 2	Outright violation of industry specific service standard: "During the couple of online Team meeting secessions carried out, Inka would bring and introduce a medical doctor, Telkki, who, yet again, would neglect recording the alleged harms, or torture, the service subject imparted. Instead, Telkki and Mikael, another physician whom Michael Argaw did not even meet online, would write long lines of false medical reviews on Oma Kanta, purportedly presenting a patient experience they did not have at all"
Conclusion	The subsequent, value-destructive, couple of Team secessions carried out after the release from detention — in which the service subject, Michael Argaw, imparted, and iterated about the need for recording harms, or tortures, or abuses, experienced — was a cover up and extension of the heinous human and democratic rights violations renounced by the service subject in the first place.

Figure 30. Observation of value destruction by a psychologist, among others.

6 The Case Service Process Timeline

As composed in Appendix 18 in detail, the prisoner of concise, or the safety critical subject, Michael Argaw, passed through a series of customer touchpoints during the service process which — as opposed to value-creation, meeting his intended, or ultimate, objectives of carrying out an audiogram, or receiving a support letter, or referral, suspected health crimes reported to Finnish Police hitherto get investigated — resulted in unprecedented value-destruction, or harms, among others, premised on the experience of which new management frameworks, or service-model-canvases, are innovated in the thesis project.

6.1 The Customer Journey Timeline

The customer journey timeline started with calling the [Espoo]healthcare service on the 14th of Sep 2023 to schedule an appointment to see a GP, or an ENT, followed by an experience of stalking by a masked Finnish man along the way to the premises of Mehiläinen on the 19th of September 2023 through meeting with a female, skin-headed, Mehiläinen GP to a series of inconsistent, misguided, misdiagnoses which resulted in unsolicited, wasteful and harmful experience of torture violating industry specific and moral, among others, standards intrinsically. In the infographics, or the safety critical service process timeline, below, please find information about the service process in a nut shell.

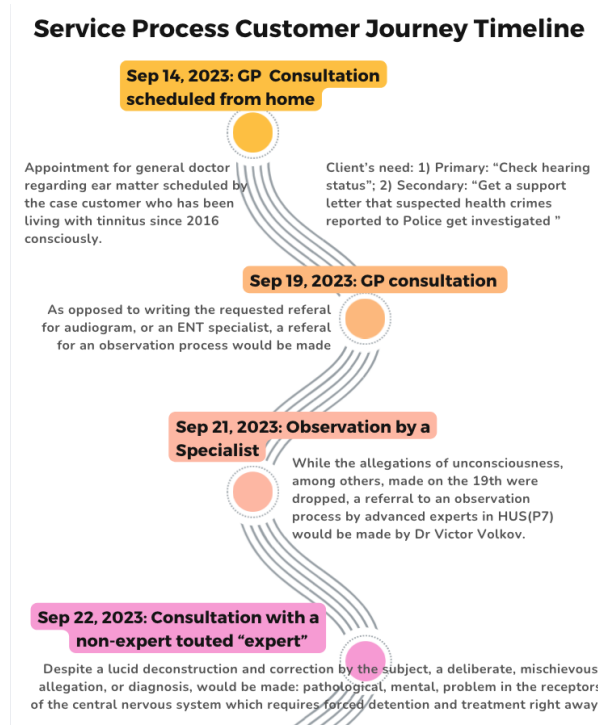


Figure 31. Safety Critical Service Process timeline Part 1

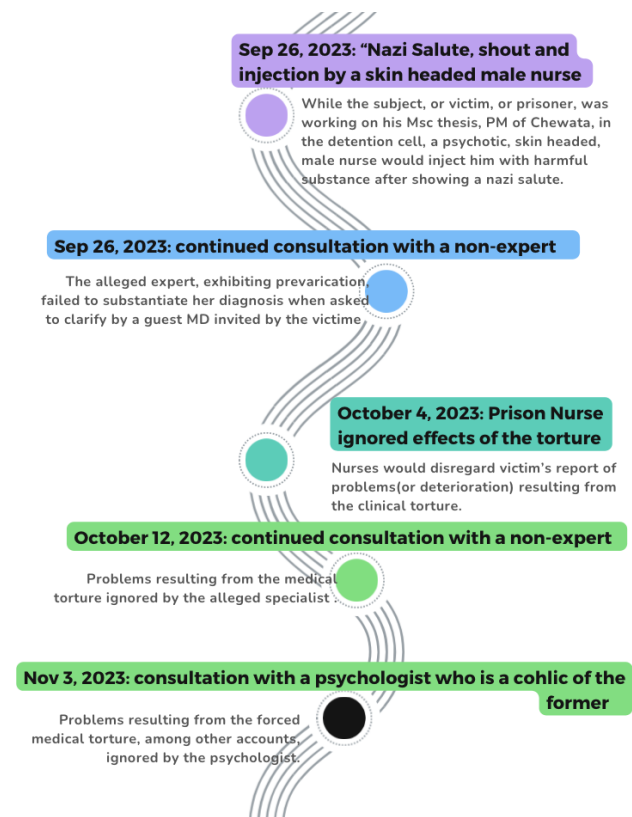


Figure 32. Continued: Safety Critical Service Process timeline Part 2

7. The Complaint Processing Service Process

As a result of the unprecedented, abusive, wasteful, unsolicited and harmful, among others, safety critical service process experienced along the value creation sphere of the value chain, detailed complaints of nearly 200 pages were made — on entities implicated in the ecosystem of the Finnish health industry, such as Oma Lakari, Mehilinen, Jorvi Acute Psychiatric Detention Ward, HUS, Valvira, AVI and the administrative court of Helsinki — to relevant authorities.

Entities Complained About	Relevant Authorities, or Entities, Complained to	Nature, or Pretext, for Complaint	Result, or Decision, by the Complaint Processing Entities
Oma-Laakari, Mehilinen	Oma-Laakari, Mehilinen, Police, the administrative courts of Helsinki, AVI and Valvira.	Destruction proposition or Value co- destruction, or unethical service	Did not bother to read through and process the complaint accordingly.
Jorvi Acute Psychiatric Center	Police, the administrative courts of Helsinki, AVI and Valvira.	Destruction proposition or Value co- destruction, or unethical service	Did not bother to read through and process the complaint accordingly.
HUS	HUS, Police, the administrative courts of Helsinki, AVI and Valvira.	Destruction proposition or Value co- destruction, or unethical service	Did not bother to read through and process the complaint accordingly.
The Administrative	The supreme administrative court of Helsinki	Neglect, Value co- destruction.	Did not bother to read through and process the

Court of Helsinki			complaint accordingly.
Valvira	The administrative courts of Helsinki, the PM, or chair of the board, of the government of Finland.	Neglect, Value co-destruction.	Did not bother to read through and process the complaint accordingly.
AVI	The administrative courts of Helsinki, the PM, or chair of the board, of the government of Finland	Neglect, abuse of authority, destruction proposition, value co-destruction	Did not bother to read through and process the complaint accordingly.

Table 2. Complaints made along the value chain.

8. Vision for the Advancement of the Service Model Canvases and Taking the CX Report Towards Action-oriented Outcomes.

A thesis is not just only about its results, or outputs, but the stage, or precedents, it sets for future research and development, the revolutionarily, strategic, decision support it entails, steers and enforces and the prospective, high-level, mould it could create for shaping service operations, businesses, industries, local and international trading, orders, relations, functions, phenomena and world, among others, not just micro-economically but also macro-economically, culturally and politically, among others, intrinsically. In this section, as an instance, holistic visions for the advancement of the business outcomes of the thesis in the sphere of customer centric, or oriented, software products will be discussed.

8.1 Building on the New Service Model Canvases or Theories

First, the preliminary concepts, or theories, or frameworks, or service model canvases, introduced, or modelled, contextualizing existing technical literatures, or research and customer experience, touchpoint, engagement and journey — destruction proposition, the destruction proposition canvas, the pain-alleviation proposition canvas and the pain-elimination proposition canvas — define, abstract, contemplate, institutionalize and model new research topics in the arena of harm centric services or experience of destruction propositions. Second, if a harm-centric service, or value destruction, is probable, or if not all interactions would result in value-creation, then academia, authorities and media, among others, would need to advance more researches (frameworks or service model canvases, among others), policies and mass communication, respectively, to make sure [whether safety critical or not] no value destruction happen. In this regard, to avoid value destruction, or harm centric services, or customer, or user, dissatisfaction, developing a Global Touchpoint Portal Product, Reviewitall, which, capturing, measuring and analysing interactions, help carry out strategic decision support regarding the value-creation sphere, or user, or customer, touchpoints, between users and service providers in the real-time, historically and

prescriptively, among other provisions of product features, by engaging with the private, public and non-gov sector iteratively, would be instrumental and indispensable strategically (Argaw 2025; Argaw 2025). Moreover, the theories, or frameworks, or service model canvases, elicited can be applied in the defence industry where products, or services, are modelled on either inflicting permanent damages or countering, or resisting, incoming existential damages (social, commercial, economical, ethical and cultural, among others, security threats) strategically.

8.2 Building on the CX Report

The technical CX report for the service experienced — analysis of the service, or value, delivery process, decomposition of the observation of CX touchpoints and its corresponding timeline and the complaint processing service process, among others — can be used as an afflicted customer experience report by relevant entities and stakeholders in the ecosystem of the Finnish health industry.

8.3 A Global Customer/User Touchpoint Product: “Reviewitall”

While the service model canvases discussed in section 3.2, setting the stage for more researches in the study of business, or service, transactions, or customer relation, are instrumental in encapsulating experiences, or the fact that not all services bring about positive result, or though operational, or managerial, actions, or acts, which will follow suit premising on the CX report are essential strategically, envisaged for future research and development is a technological remedy, or product strategy, which [though several private, public and non-gov entities may[or could] be anxious about getting monitored granularly customer-centrally strategically] power a multi-dimensional view, comprehension and accountability, consciousness and user experience based customer relationship measurement and decision support, among others, orthogonally: “A Global Touchpoint Portal Product in the title ‘Reviewitall’ set on giving strategic, or additional, or alternative, power and value co-creation enhancement sphere, to users, customers, authorities, businesses, academia and non-gov organizations,

among others(Argaw 2025; Argaw 2025)” Human beings — as customers, citizens and students, among others — interact with different private, public and non-governmental service providers. Nevertheless, that users of services write their customer touchpoints, or reviews, in a fragmented sphere observed by decision makers granularly seldomly, it is difficult to capture, measure and carry out strategic decision support regarding the value-creation sphere, or user touchpoints, or customer touchpoints, between users and service providers. As a result, powering customers, citizens, entities, authorities and students, among others — with a preferential technological option, or product, or service, or platform, which enable them to log in to a portal, or app, search a service provider, or identity thereof, and write an experience review[immediately] regarding the service, or product, experienced, or used — would help monitor the conduct of, and relationship with, service providers strategically. From social, industrial and health, among others, policy through criminology and consumer protection to enhancing E2C, B2C, B2B, G2C and G2B, among others value-creation spheres, a granular, or sliced and diced, among others, view of the historical interaction relationship review between service providers and service receivers through a global user touchpoint portal product could be a preventive, or prescriptive, solution for enhancing value-creation, avoiding destruction proposition, promoting accountability and delivering justice swiftly, among others. For instance, if the victim was able to write his touchpoints, among others, immediately, the corresponding exponential damages of the misdiagnosis, or medical mal-practice, or weaponization of the healthcare system, among others, would have been avoided instantly, according to Appendix A9A. Consequently, whether safety critical, or common services, having customers, or users, or interactors, write their user touchpoints review in one, centralized, digital environment is an indispensable solution for enhancing value creation if accepted and adopted by countries and multi-lateral institutions. It remains to be seen if cut-throat lobbying cartels behind cover-up centric private, governmental and non-governmental entities anxious about transparency would tamper with the proposal for a global user touchpoint portal, Reviewitall, which may require relevant governmental and multi-lateral policies, regulations and cooperation frameworks, among others, directedly and indirectly.

9. Conclusion

Premising on a case-within-case-study of customer experience, touchpoint and value co-creation sphere, among others, with the entities in the ecosystem of the Finnish health industry in a B2C and G2C context, technical CX report and holistic service model canvases have been presented. In addition, a holistic vision for the advancement of the management frameworks, or service-model-canvases, innovated, and taking the CX report towards action-oriented outcomes, has been discussed. Furthermore, one among several potential empirical and rational prescriptions, or holistic tech solutions, or intervention mechanisms, harnessing the preventive, multi-dimensional, holistic and security provisions of empirical software engineering is Reviewitall, a global customer touchpoint product, technological-remedy, service and platform which would power customers, users, citizens, entities, authorities and students, among others, to monitor, review and comment about the conduct of, and corresponding relationships with, public, private and non-gov service providers strategically to be presented to the governments of Finland, EU, UK, AU, US, Mexico, Russia, Nigeria, Indonesia, UAE, Israel, India, AU, China and Canda, among others, as a working proposal. In conclusion, the study laid a holistic foundation for studying about, and synthesizing appropriate business solutions for, value-destructive experiences, touchpoints and interactions during the business processes and procedures of value co-creation.

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Appendices

Appendix A1: Observation of Torture, Agitation, Harassment and Intimidation Empirically (Suspected Empirical Software Engineering Crime 1)

As the first person to apply digital ads and mobile games, among others, shaping the Ethiopian political scene intensively and extensively for years, one of the activities of the author carried out using his connected Mac, iPhone and android devices was social media marketing and campaign activities. Repeatedly observed, or sensed, or heard, corresponding to the preferential messages of freedom, renunciation of injustice and legal ads reaching thousands, among others, posted on the social media pages of Chewata, or corresponding to the activities of the author on his private computer, were sounds of hammering, pornography, gun-shots, marbles rolling on the floor, banging mixed with bits and bits mixed with sounds of tinnitus, among others, coming from the flats in the building the author lived in Espoo, Finland for couple of years after 2017. In addition, the horrible sounds were served to the author frequently every time he criticized Facebook, Twitter, Google, the Ethiopian regime and Finnish government, police and justice system, among others. Although the observed, repeated, incidents of suspected empirical software engineering crimes correlating with his activities were reported to Finnish police citing witnesses, it, eventually, was concluded that the time frame, 7AM through 10PM, is not protected for silence and that the other parties can make any kind of noises(sounds) they deem pleasing and necessary at their discretion constitutionally. As far as the sounds observed, or listened, empirically and correlatively scientifically is concerned, it is evident the author was controlled, stalked, intimidated and threatened, among others, systemically by monitoring his connected devices and opinions, among others, illegally. For instance, in 2017, a tenant would move into one of the apartments in the building. He would start making weird sounds, such as banging mixed with bits, sounds of marbles rolling on the floor, dumbbells and kettlebells dropping on the floor and sound

effects of tinnitus, among others, correlating with the legitimate and ethical activities of the author on his connected devices. By the time when the author requested the observance of silence, at least, after 10PM, the tenant would tell he is making the nuances because he has a problem on his left ear which he needs to relief, or treat, through different types of sounds. Nevertheless, sound effects of banging mixed with bits, marbles rolling on the floor, dumbbells and kettlebells dropping on the floor and tinnitus, among others, will not be made to treat, or relief, any problem in the left ear. The persistent internal nuances will not be made if, or when, the author brings visitors, among other conditions.

Appendix A1A: Examples of Legit, Human, Posts by the Author



Figure 33. The author opposing the nomination of Tedros Adhanom for WHO.



Figure 34. The author organizing a twitter campaign against Ethiopia's then PM.

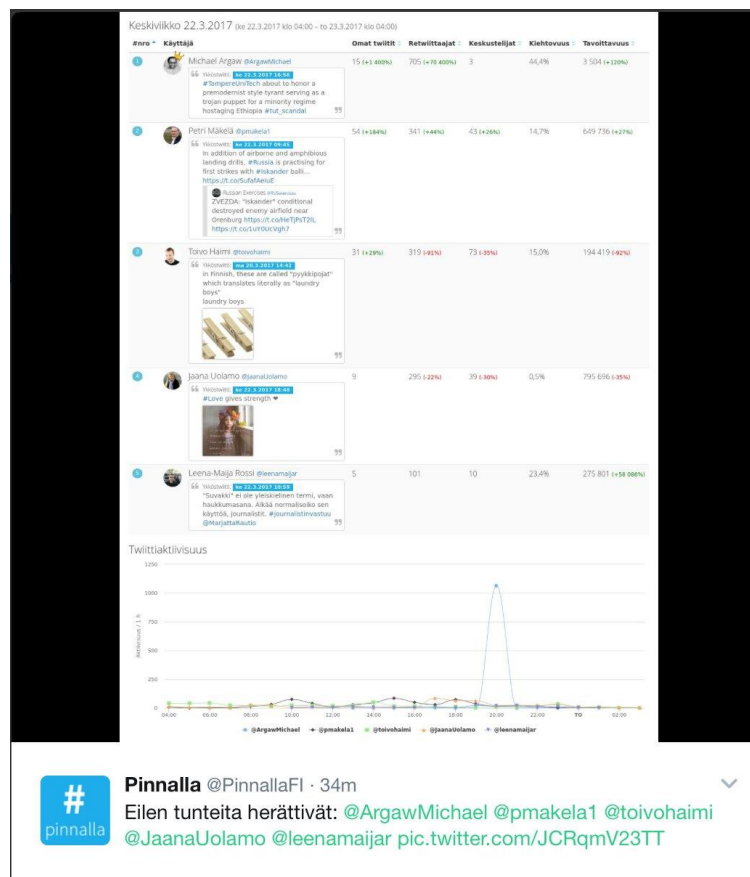


Figure 35. Successful Twitter campaign against the scandal of TUT(Appendix A3)

By and large, the author — while fighting with the regime in Ethiopia and its affiliates in multiple fronts intellectually — has also been fighting with several entities in the state of Finland: “Place of work, academia, police and justice system, media and culture, entrepreneurship ecosystem, government and opposition and nearly all manipulated services, or interactions, which he encountered.” In addition, the author has been fighting with BigTech which suppressed his legit, or civic, initiatives, projects, innovations, products and business, among others, directedly and indirectly, among others.



Figure 36. The author's complaint regarding his experience of suppression, and manipulation of posts, by Facebook.

The author was running a somewhat popular social entrepreneurship education platform for entrepreneurs, www.entrepreneursinfinland.net, which enjoyed over 2K visitors a day for couple of years. Before it was closed — because of a sudden, swift, decrement of its organic reach due to unjustified restrictions encountered both online and offline — the community was rebranded to Notacit. Although the aim of the non-profit activity was impact, the author faced different active and proactive problems from the startup community in Finland persistently.

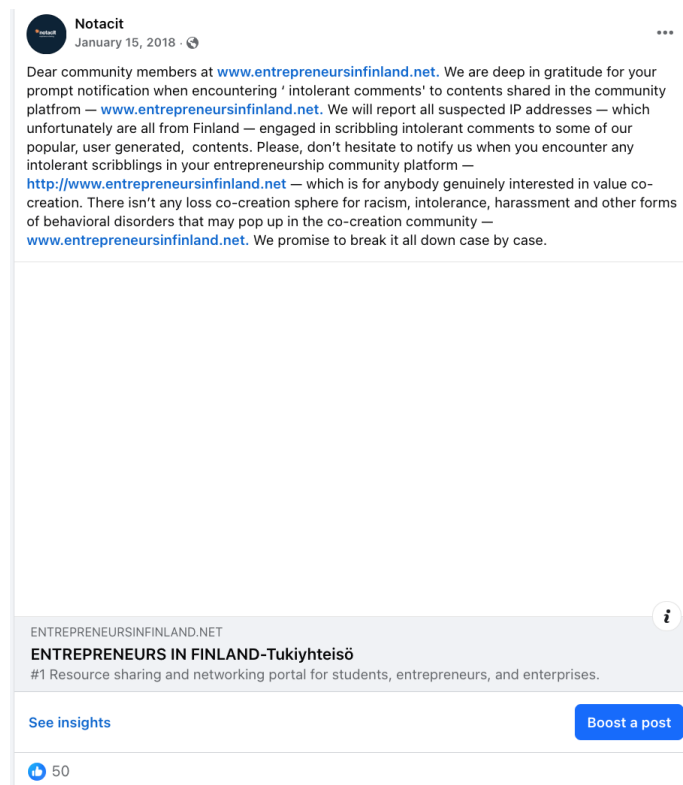


Figure 37. Example of a complaint made regarding impediments experienced.

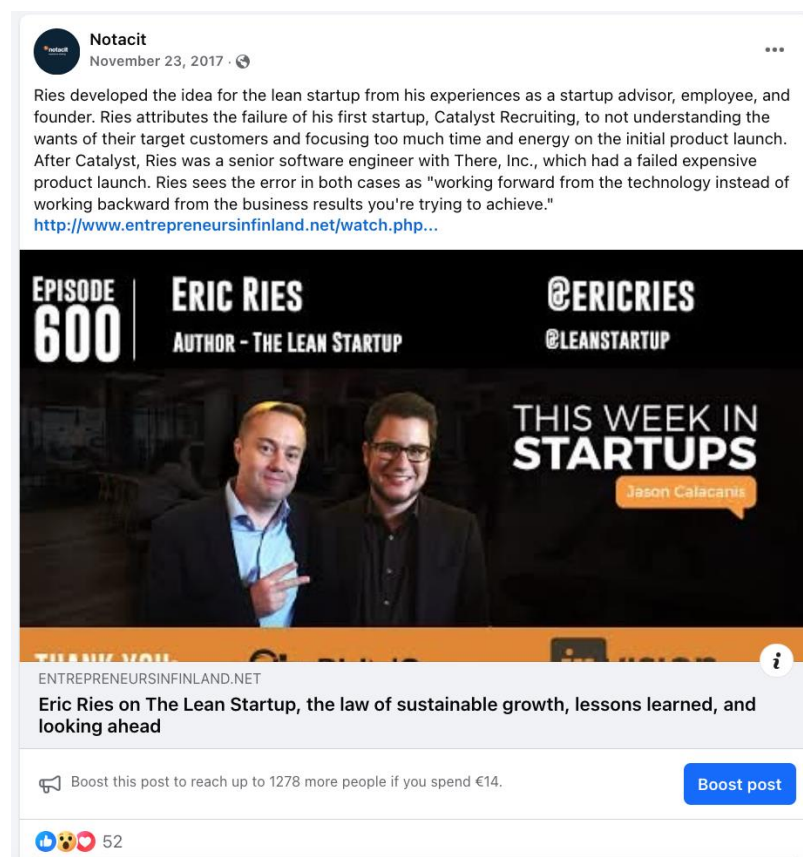


Figure 38. Example of a legit content regarding lean startup.

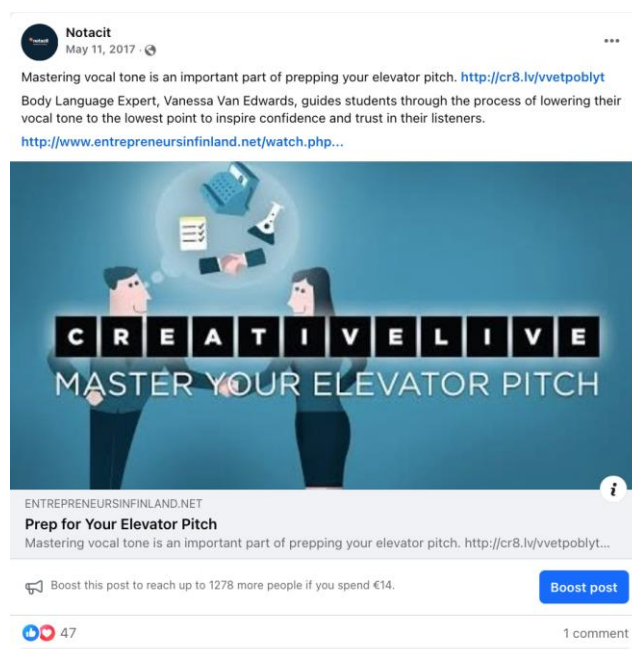


Figure 39. Example of a content regarding an elevator pitch.

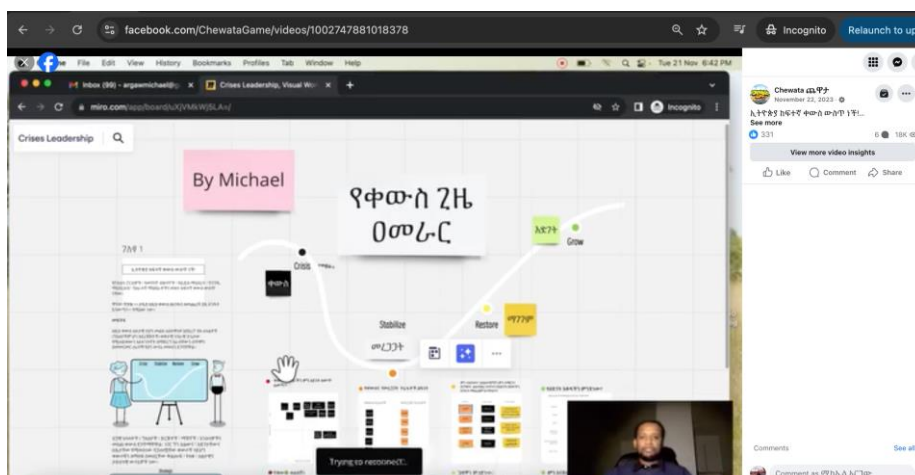


Figure 40. A Facebook content, or public reflection, about leadership in crises.



Figure 41. Fact based opposition regarding the privatization of Ethio-Telecom.

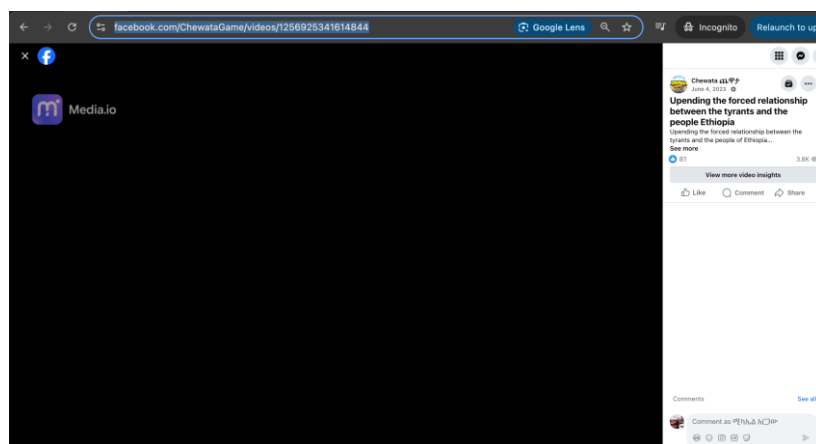


Figure 42. Dubbed, “I interfere and direct,” reflection about the need for controlling, interfering-in, directing, randomizing, shaking and upending the forced, abnormal, relationship between the tyrants and the people of Ethiopia.

One thing is clear: there isn't any single, legitimate, private court on earth. It all has to be direct, public and clean like what we're doing: "not barking and to pursue an interest of chewing like a dog but using open, direct, uninfered and bold human languages(words, expressions and emotion, among others)."

Our ongoing fight, solely because we're standing tall, with premium(systematically bribed) dogs in the private, public and NGO sector behind the scene: our good, legal, moral, unstoppable, public, ignorable, noise Vs their repugnant, cruel, corrupted, noises aimed at conditioning(or insinuating over) us to stop being the voice for the voiceless through various personal, group, network, sate, private and non-gov means hybridley. In the end, or apparently, our superseding noise(voice) wins, brands and frames orthogonally, leaving the suspects with nothing but a perpetual state of shame, scrupulous and worthlessness until they get to contemplate about potential concrete solutions through silence and resolve to execute a set of corrective action plans, including presentation, or sacrifice of oneself , in the altar of democracy swiftly.

#Deframing #framing #Stopmmm #Stopchewing #Stopthebite #Stoptl



Figure 43. A LinkedIn post criticizing Safaricom and EthioTelecom.

Essential fact, or potential conflict of interest between the author and the state of Finland and its higher education system, which should be impartial and premised on justice: "Ethio-Telecom and Safaricom have long been customers of Nokia

which has long been the Milk-cow of Finland. As a result, Nokia is implicated in unethical deals or transactions”

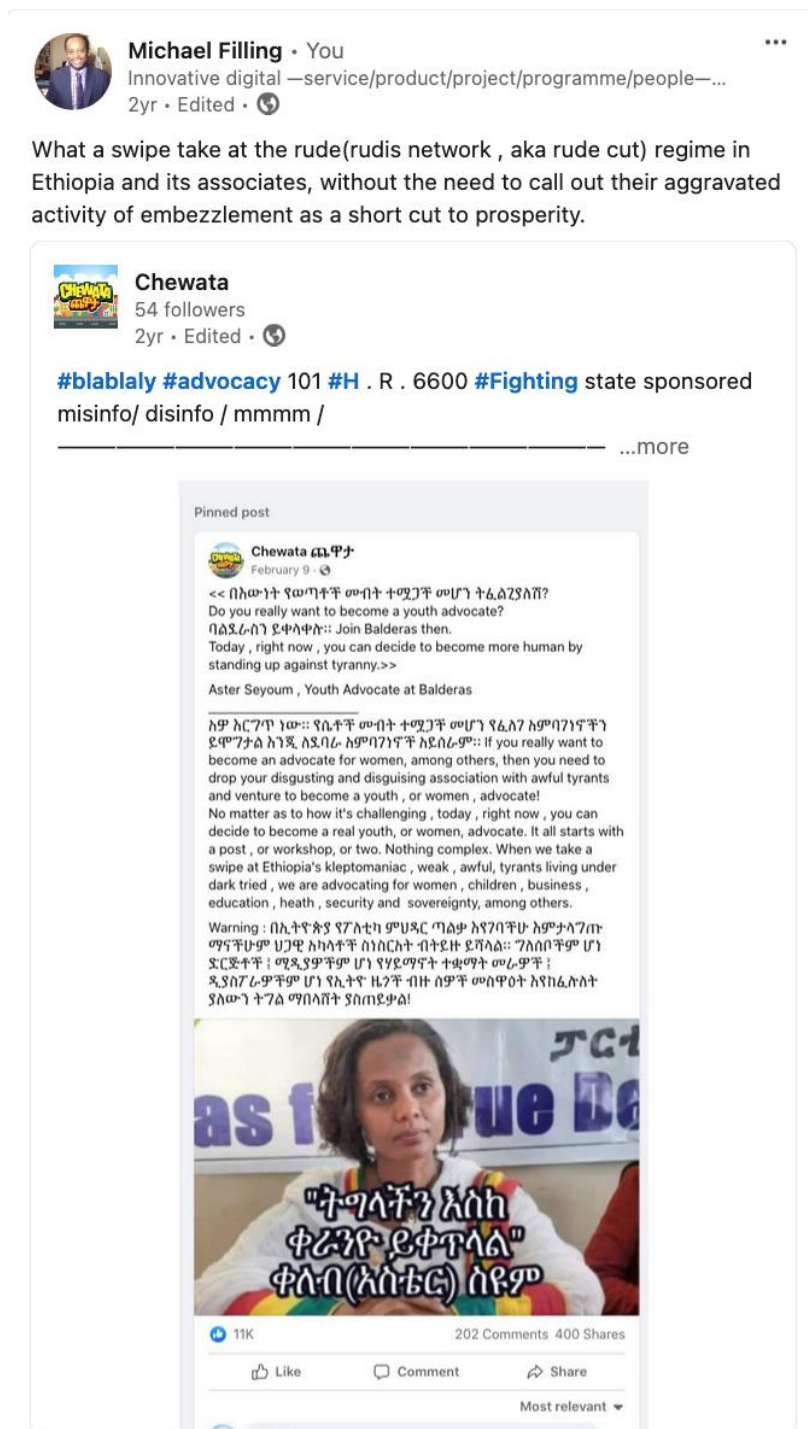



Figure 44. A LinkedIn, and Facebook, post about fake and corrupted feminists.




Michael Filling • You

Innovative digital —service/product/project/programme/people—...

2yr • Edited •

HR6600 tampered and watered by lobbyists paid to hide the atrocities unfolding in Ethiopia and clean-wash TPLF-EPRDF , PP-EPRDF and OLF psychopathically. [#Thenegativelearningportfolio](#)




Chewata

54 followers

2yr • Edited •

Scribble and leave it. That's all you need. Nothing much to take on awful tyrants. [#CultureBook](#) [#Behaviour](#) [#OurNoise](#) [#HR6600](#) [#the learning portfolio](#) [#where](#) humans are absent animals will be present.



H. R. 6600

17TH CONGRESS
2D SESSION

support stabilization, peace, and democracy efforts in Ethiopia.

IN THE HOUSE OF REPRESENTATIVES

FEBRUARY 4, 2022

Mr. MALINOWSKI (for himself, Mrs. KIM of California, Mr. MEEKS, and Mr. McCAUL) introduced the following bill; which was referred to the Committee on Foreign Affairs, and in addition to the Committees on the Judiciary, Financial Services, and Armed Services, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

Contemplating : some fictitious visitors and users of Dr Chewata.

Chewata on LinkedIn • 2 min read

Year : 2017 Dr Chewata : TPLF-EPRDF — which is illiciting out billions — is co...

Figure 45. A political LinkedIn post



Figure 46. A LinkedIn post about business.




Figure 47. A LinkedIn post about business.

Michael Filling • You
Innovative digital —service/product/project/programme/people—...
4yr • Edited •

<<ኢትዮጵያ በአለም ታይቶ በማይታወቅ ፡ በሚያስደምም ፡ በራው በረረ
በሚያስብል ሁኔታ ከተጠመዱ ዜጎች አፍና ከተራቡ ልጆች ሆኖ አገጽላ 70%
የሆነውን ሃብቷን(GNI) እየሰጠች ነው። በአንፃሩ ግብፅ አመስጋኝና ወለታ ከፋይ
ሳትሆን ኢትዮ ላይ ሃሰተኛ ውንጀላ ፡ ጥላቻና ጥፋት ታቀነባብራለች>> ዛሬ
በሰጠሁት ሃተታ
<https://bit.ly/3iDi0lu> ❤️👉👉👉

If Ethiopia, the most generous country in the world stops transcending equitability in the best interest of Egypt, then Egypt would be required to intercept exporting 29bcm of water a year and level down its water security in par with, or less than, Ethiopia. Even the most generous countries in the world, the Nordics(Sweden, Finland, Norway, and Denmark, among others), offer between 0.5% to 1% of their GNI, not 70%, jeopardizing their basic security significantly.
One thing is clear: the issue of the dam is less about engineering but politico-economical.



2 1 comment

Figure 48. A LinkedIn post about business.

Michael Filling • You
Innovative digital —service/product/project/programme/people—...
4yr • Edited •

"We can't breathe," say cooperative investors in Addis as an intruded mayor — unknown to, hostile and enforced on Addis Abebians — set to step down and face justice amid the scandal of transferring thousands of "40/60" titled, among others, private apartments under the table, among others. To what many say is for the outright, aggravated, violation of the international banking protocol by the intruded/illegal mayor of Addis, the world bank has reportedly withheld its already allocated fund for Ethiopia. VideoLink in the comment . የ40/60 ቤቶች ከባንክ ጋር ለተዋዋሉ ደምበኞች በስምምነቱ መሰረት ቀድመው ለቆጠቡት ደንበኞች መተላለፍ አለባቸው። እስካሁን የተላለፉት ቤቶች በሙሉ ህገወጥ ስለሆኑ የመንግስት አካላት በተዋረድ መጠየቅ አለባቸው። ከንቲባውም በአስቸኳይ መውረድና መታሰር አለበት። ኢትዮ የዓለማዊ ባንክ ውልና ስነስርዓትን ጥሳለች። የቪዲዮውን ሊንክ ኮመንቱ ላይ ያገኛሉ!

ሚካኤል አራጊ
1 July at 18:48 ·

"We can't breathe," say cooperative investors in Addis. An intruded mayor — unknown to, hostile and enforced on Addis Abebians — set to step down and face justice amid the scandal of transferring thousands of "40/60" titled, among others, private apartments under the table, among others. የ40/60 ቤቶች ከባንክ ጋር ለተዋዋሉ ደምበኞች በስምምነቱ መሰረት ቀድመው ለቆጠቡት ደንበኞች መተላለፍ አለባቸው። እስካሁን የተላለፉት ቤቶች በሙሉ ህገወጥ ስለሆኑ የመንግስት አካላት በተዋረድ መጠየቅ አለባቸው። ከንቲባውም በአስቸኳይ መውረድና መታሰር አለበት። ኢትዮ የዓለማዊ ባንክ ውልና ስነስርዓትን ጥሳለች።

CLOSING THE BELL EAST AFRICA
13,000 RESIDENTS IN ADDIS ABABA SET TO LOSE THEIR HOUSING
-3:38

125 4 comments 22 shares

Figure 49. A LinkedIn post about business.

This — interesting and statically essential — wonder in me got galvanized when I bumped in to three, second generation, immigrants in Helsinki from Somalia.

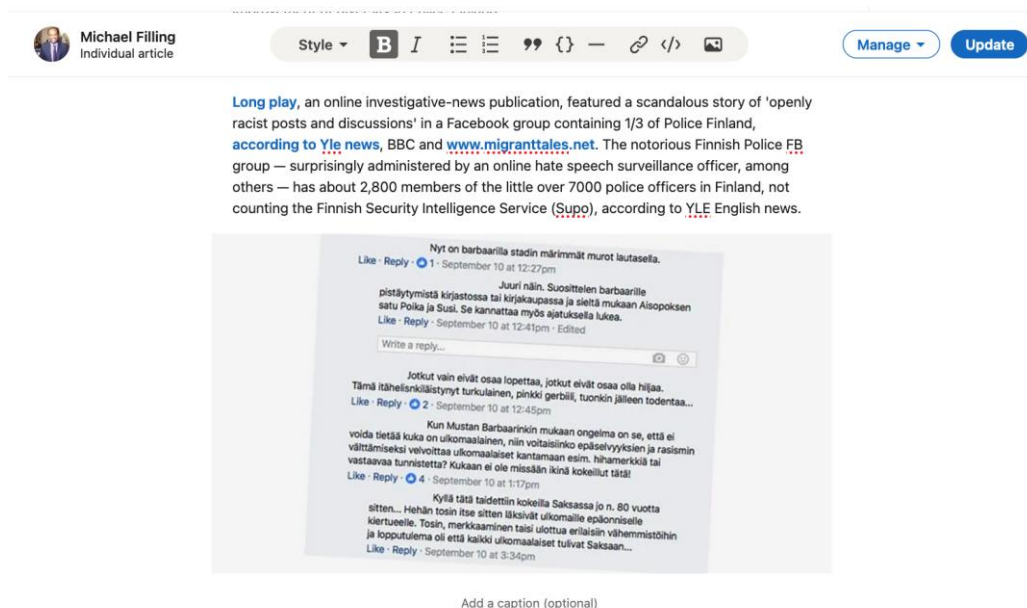
Who — to me, in 2015—said :

"We would like to be a **Police** as well so we can protect our community, city and country from criminals."

"We would like to be police officers as well so we can monitor bigots who write hate speech against our race and all different from them. "

"We would like to be a police officer as well so we can have a good stand in the introduction and amendment of concrete legislation with regard to the political, institutional, cultural, legal, media and other aspects of racism in Finland."

"Best of all, we would like to get in to law enforcement because we would like to serve our country, Finland. However, the problem is that, representation of diversity in the police sector isn't written anywhere in the strategy, operation frameworks and activities of Police Finland. They don't seem to have a goal oriented plan for the diversification of the sector. Instead, Finnish Police has been putting visible minorities away through selective/ targeted agitation, harassment and hostility"



Add a caption (optional)

Figure 1. The bizzare screen shot above shows members of the Finnish Police force in their habit of cracking crude, crazy, jokes about immigrants — and visible minorities such as rapper **James Niklander (Musta Barbaari)** —through openly racist as well as implicitly coded consensus of slanders.

That a FB group containing 1/3 of the Finnish Police force — or over 90% of Finnish Police officers using FB — is caught hand on with such a scandal, isn't a surprise to the Finnish law enforcement scene that has yet got to transform itself from a bunch of 'Big kids' to 'Grown ups', well before it could exhibit basic organizational ethics of diversity.

The interior minister — **Paula Risikko**— has got to monitor the **big kids**. Police resource must not be wasted on the wrong people and causes. In addition, goals for the diversification of Finnish Police must be set, and measured with accountability. Moreover, she must know that Police as any organization is subject to ethical, operational, service excellence, fiscal

What would be the impact if Police Finland isn't reformed?

What is CSR, value co-creation sphere, customer orientation and service excellence for Finnish Police as a very customer oriented public organization?

What is operational ethics for Finnish Police as an organization?

Isn't it hypocrisy to talk about social inclusion without addressing the notorious issue of the under-representation of Finnish citizens of a different race in the police sector?

If you are afraid of discussing about the topic, then don't hesitate to ignore it. In the making is neither an investigative nor a provocative vanity but a pause for a genuine reflection.

Yours Dudesonsley

The Superior Customer

The article was originally posted in a Facebook discussion group in the title "[Foreigners and Finns-Open discussion](#)" by Michael on October 4, 2015. |

Mikael is a resident in Finland who has put the Finnish Police and justice system under his monitoring and activism surveillance list. Increasingly, he advocates for open, co-creative and blended monitoring of government institutions in Finland. Contrary to many big kids who use freedom of expression for hate speech, Michael believes that he has yet got to fully exercise his freedom of speech for innovative ideations. Furthermore, Finnish Police, according to his experience, is a notorious, unrepresentative, service provider. As a result, its board and management must be held accountable.

"Game my mind? My mind game; Mind my game. "

For tips, stories, experience and opinion about Finnish Police, please don't hesitate to write to impact@entrepreneursinfinland.net

Figure 50. A political, LinkedIn, post about Police Finland, among others.

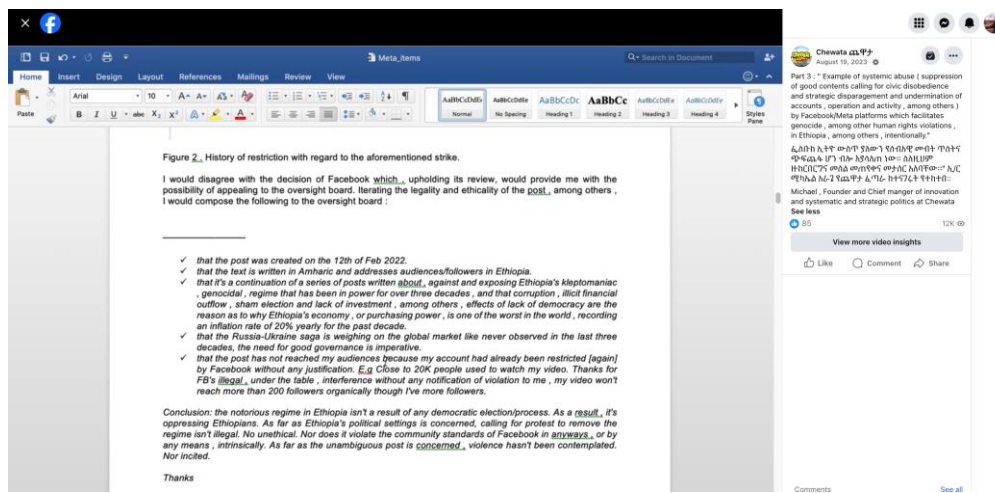


Figure 51. A Facebook post criticizing Facebook.

Appendix A2: Attempted Assault, or Murder, by a Suspected, Violent, Psychotic Person

The author was walking around his neighbourhood when a stranger suspected of having psychosis and some sort of premium motivation, among others, would throw harmful items, such as screwdrivers, shaving machine and glasses, among others, at him. As a result, Michael would frame the matter as attempted assault, or manslaughter, or suspected psychosis, by the time when he called up 112. There were at least three witnesses present in the scene: “Two men and one women” Although he offered his number cordially at first, one of the witnesses, changing his mind, said: “I do not want to be a part of this. Nor do anything to do with it.” In addition, the women said: “I wish I could be a witness. But, I have been warned not to be a witness for you. I am really sorry about it.” Luckily, the third witness, Stenberg, would testify as a civic citizen, according to Figure 52.

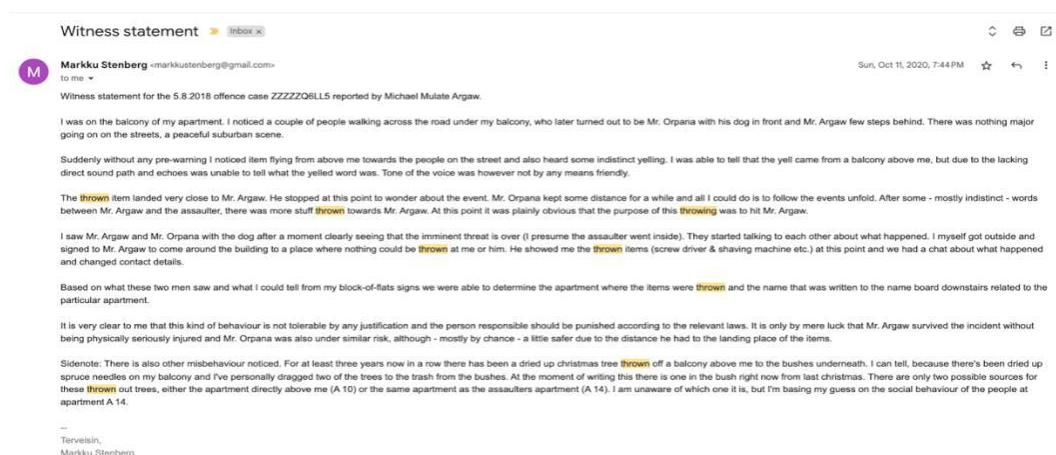


Figure 52. A statement by Markku Stenberg, one of the witnesses, unabridged.



Figure 53. Observation of some of the harmful items thrown at Michael.



Figure 54. The balcony from which harmful items were thrown.

Nevertheless, Finland Police, which should always be on a standby to make something out of nothing, would refuse to investigate the vivid case of suspected psychosis, or attempted assault, or attempted manslaughter, among others, presented (reported) swiftly belligerently. Meaning, somebody who could be a threat to the security of others, or a vivid case which involves suspected attempted violent attack, or man slaughter, is not very interesting to Finnish police. As a matter of fact, this is not the first time Finland's police would not take cases of suspected acts of violence clinically and legally seriously, among others. For instance, Finnish men suspected of acts of violence have been released without needing to undergo an immediate psychiatric evaluation (Marja 2024; Yle News 2024; Yle News 2024).

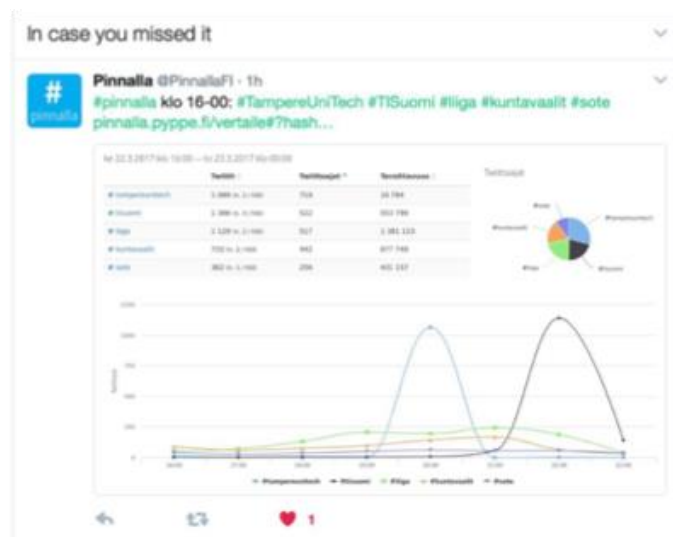
The appeal written to Police by the author regarding a case of suspected discrimination and disparagement by Helsinki Sanomat.

I'm writing to appeal the decision of police (By Niina Kolari) not to investigate on case 5530/S/9010/23

In 2017, the disgraced TUT (now part of Tampere University) awarded an honorary doctorate to its tyrant Almuni — PM Hailemariam Desalegn of Ethiopia.

And, I — a social entrepreneur working round the clock to upend the tyranny in Ethiopia, among others — led an upfront campaign, or fight, that forced TUT to rescine its notorious award: "Executed Twitter campaigns, streamed live on Facebook and carried out an interview with Ossi Mansikka of Helsinki Sanomat, among others [picture here with]"



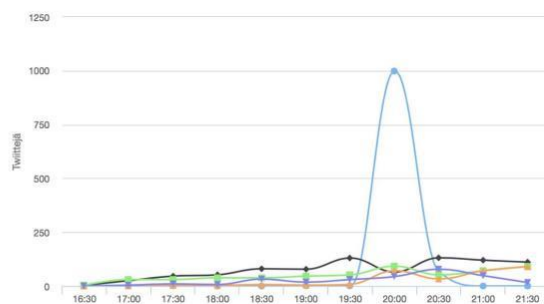


Juuri nyt

- Michael Argaw** @ArgawMichael · **ke 22.3.2017 16:56**
 #TampereUniTech about to honor a premodernist style tyrant serving as a trojan puppet for a minority regime hostaging Ethiopia #tut_scandal
[cs-164](#)
- Petri Mäkelä** @pmakela1 · **ke 22.3.2017 17:50**
 #Russia exercise in occupied #Crimea expands. Coastal defense forces have been put on combat alert. @20committee... <https://t.co/b0dySbjaCh>
[cs-111](#)
- Michael Argaw** @ArgawMichael · **ke 22.3.2017 16:49**
 Scandal at #TampereUniTech of failing to research about the moral integrity of a candidate for honorary doctorate degree. #tut_scandal
[cs-101](#)
- Michael Argaw** @ArgawMichael · **ke 22.3.2017 16:46**
 #TampereUniTech honoring 26 year of tyranny of a military junta in #Ethiopia <https://t.co/NJFH7STfi> @juhasipila #tut_scandal
[cs-101](#)
- Michael Argaw** @ArgawMichael · **ke 22.3.2017 17:01**
 #TampereUniTech honoring a tyrant who use water aid money for homicide, genocide, incarceration and corruption #tut_scandal #Staff must resign

TOP 5

	Twiiitit	Twiiitaajat	Tavoittavuus
1	#TampereUniTech	1 068 (n. 2 / hio)	704
2	#Liiga	841 (n. 2 / hio)	400
3	#kuntavaalit	544 (n. 2 / hio)	329
4	#puoluepäivä	291 (n. 2 / hio)	135
5	#salibandy	287 (n. 4 / hio)	79



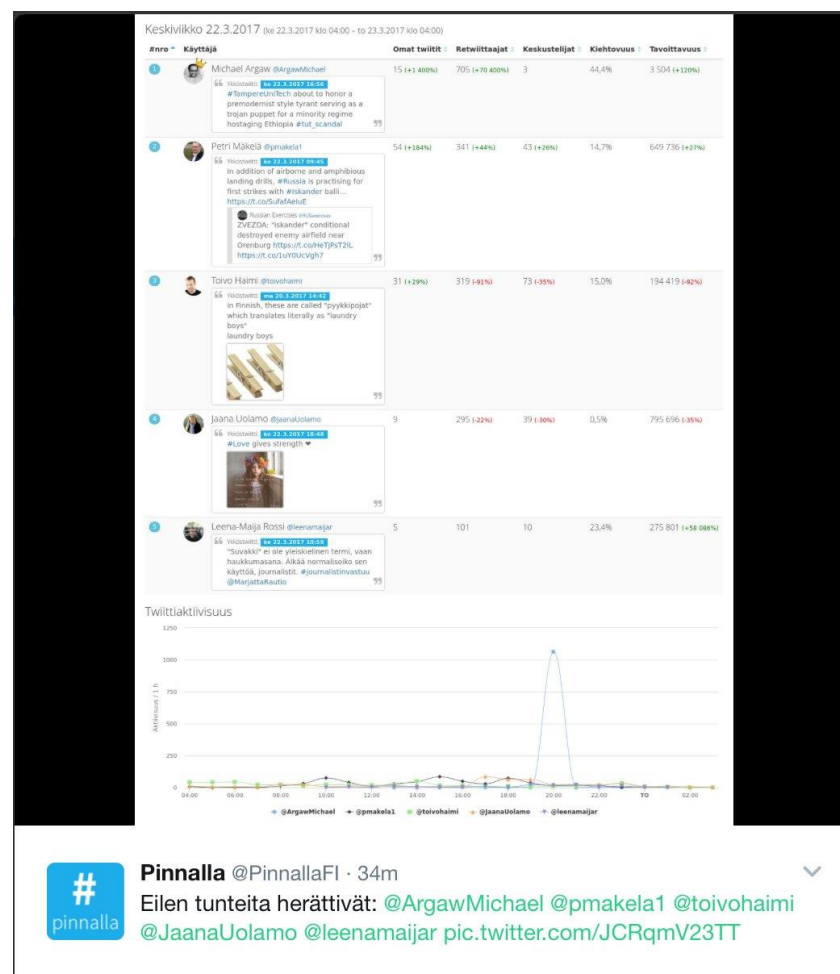


Figure 55. Social media campaigns opposing the conduct of TUT.

Subsequently, HS would be writing a long story about the scandal of disgraced TUT in which the snippet of my tweet, citation of my name as an entrepreneur and why I, among others, opposed the tyrant PM, Hailemariam of EPRDF, and the corresponding [insane] conduct of his alma mater, among others, is included. However, after years of getting buzzed to lots of audiences, the content of the news would be edited in such a way that my name and everything connected to me which was featuring me on the article would be taken out from www.hs.fi/ulkomaat/art-2000005148930.html

As a result, I would make a suspected crime report to police that Helsinki Sanomat, violating its very article of incorporation and customary laws, among others, discriminated and disparaged me when it decided to remove a content

relevant to me. In addition, I iterated that that the post-social media campaign interview which I carried out with HS, which get me featured, was done under an entrepreneurship and educational research project protected by Giftom Oy, Helsinki Sanomat's decision to take out my information has undermined the project. In addition, I, in my report, made a legitimate case that that lots of [attempts of committing] crimes have happened to me in Finland pre and post-2017, destroying records of anything, or person, or entity, among others, that has ever had any dispute, or relation, with me is not ethical intrinsically, among other, rationalisations. Furthermore, I, in my report, iterated that HS ignored my kind request for clarification — about the mis-conduct of its staff by the time when I contacted from the CEO[Pia Kalsta] through its journalists to the CX department of the entity by phone, email and in person more than 6 times — deliberately. Consequently, I am writing to appeal the in-compassionate and belligerent decision of Police not to take a look at the suspected crime report presented.

Sincerely

Michael Argaw, Founder and Chief Manager of normative innovation, digital philosophy and systematic and strategic politics at Chewata, among others.

Appendix A4: Control, Interference, Manipulation, Direction and Narration Increased

The author says though he has long prepared for it, he observed an increase in control, interference, manipulation, mal-direction and narration of mis-information and disinformation regarding his relationships, or dealings(including technical services) and private, business and academic operations, among others.

Appendix A5: Nuances of Planes Sensed, or Observed, in the Vicinity of the Author Increased (Suspected, Organized, Empirical Software Engineering Crime 2)

Corelating with his online, and in-computer, activities — such as advocating against violation of human rights, or criticizing Facebook, Twitter, Google, the regime in Ethiopia and Finnish government, police and justice-system, among others — the frequency of the detour of planes, or nuances of the planes sensed, or observed, in the vicinity of his domicile increased. As a result, bundling his anonymous informants, Michael would file a suspected crime report — that planes have been routed to detour through his home vicinity — though Police would refuse to investigate it. Then after, he would appeal regarding Police's refusal to investigate the cases presented.

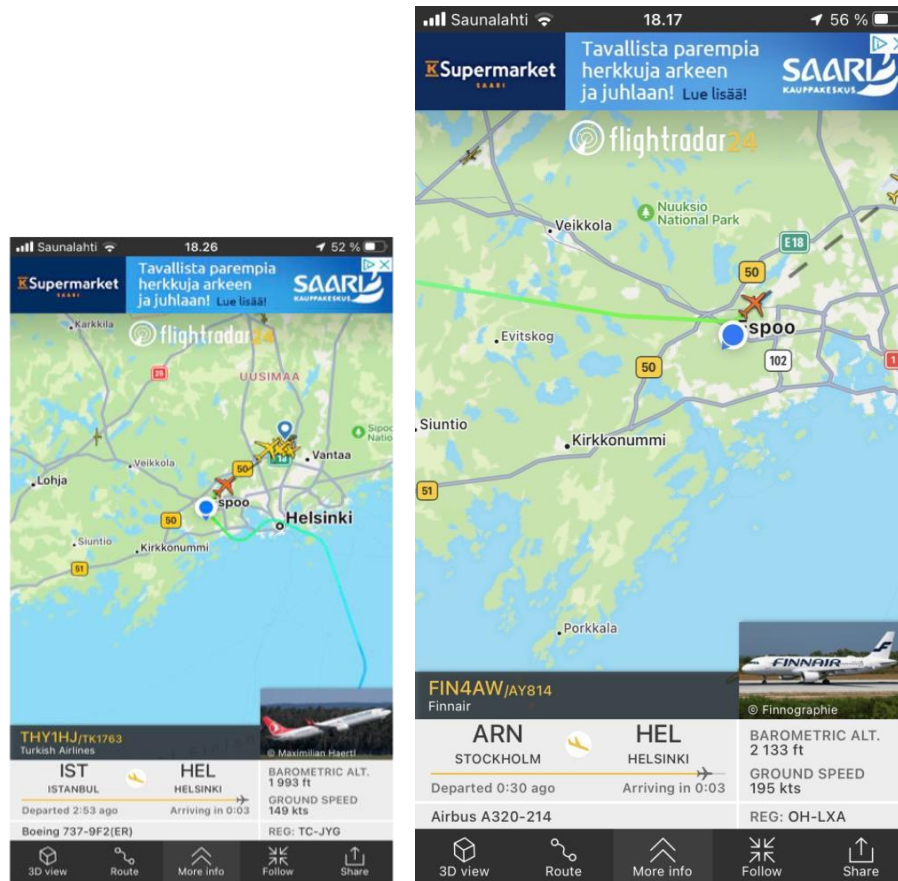
To whom it may concern,

I'm writing to appeal on Police's (By Jonna Arifullen, among others) refusal to investigate on case 5530/S/7366/22

Case Background

Although my core, home, geo-location is about 30KM away from the Helsinki-Vantaa Airport, I would cognise a pattern that aeroplanes inbound to and outbound from the Helsinki-Vantaa airport detour through my home, core, geolocation, making loud, torchersome, nuances, giving me an experience of living right next to the airport effectively. While the aeroplanes may enjoy a legal right to get to do so, I have the right to suspect — and where applicable prosecute and request for a restitution regarding the corresponding damages — the motivation of the detour atop my core, home, geo-location. Consequently, I, asking Finnish police to investigate the motivation for the detour, would file a suspected crime report. In the picture below, the blue annotations represent the

vicinity of my geo-location. The line shows the corresponding path undertaken by the flight.



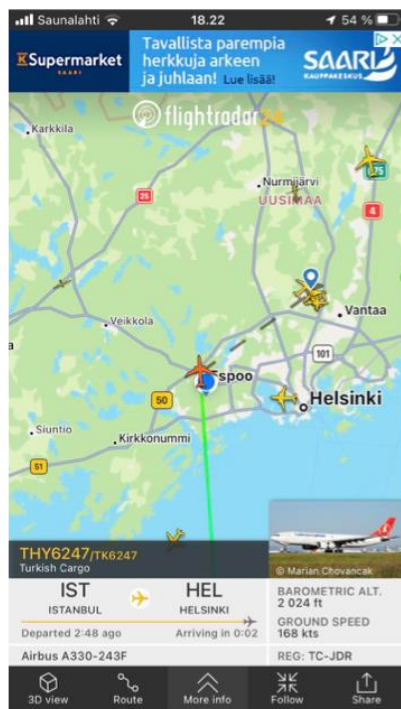


Figure 56. Example of flights detouring through my vicinity.

Nevertheless, Finland's police would refuse to investigate on 5530/S/7366/22 though I framed the imperative case as, "suspected violation of data protection, torture, cognitive-classical-conditioning-experiment, coercion and terrorism, among others," if the detour of the aeroplanes through my vicinity is ulterior. Just to recap why I framed the report as suspected terrorism, torture, organized-crime and violation of data protection intrinsically.

Suspected Terrorism

Because there is a suspected application of violence, or negative impact, or negative-reinforcement-learning, by exposing a subject to persistent-high-pitched-sounds of aeroplanes, forcing(instrumenting) the interruption of the legal, intellectual and humanist pattern of the subject/victim proactively, modelling the vicinity metadata of the empirical software engineering subject.

Suspected Torture

In the making is a suspected infliction of physical, or mental, pain, or suffering, for a goal oriented purpose: "Exercise of negative-control, or undermining, to inflicting punishment and interrupt legit patterns[digital campaigns] which can not be tampered with otherwise."

Suspected Violation of data protection

If the aeroplanes have been directed to detour with reference to my core home geo-location, then it is a violation of data protection.

Suspected organised crime

If two or more entities are involved in making any crime, then the activity would tantamount to organized crime.

Consequently, I asked Espoo police to investigate, or research, the following:

Analyse the historical path data of aeroplanes inbound, and outbound, to the Helsinki-Vantaa airport with respect to my core, home, geo-location.

Analyse the aeroplane route plans of Finavia, an entity responsible for planning the routes of aeroplanes.

Ask the residents in my vicinity if they have heard persistent nuances of planes.

And posit the following research questions, among others.

Why should a detour need to happen through Michael's vicinity?

Why should a detour through Michael's vicinity get executed immediately after Michael reported a hearing loss and allergy to a persistent exposure to a high pitched sound, among others, to the healthcare system in 2016?

Isn't the detour through Michael's vicinity more expensive? If it's more expensive, then why should it happen?

Is there any ulterior [personal and political, among others, motivation] plan to cause torture and terrorism, among others, to another party through the detour?

Are there any additional scenes which give substance to this suspicion, such as the presence of a target relevant to the primary, secondary and tertiary suspected parties?

Is there any relevant tip, or information, which gives substance to this suspicion apart from deciphering the previous research questions?

Yes. For instance, a stranger, a reserve of the Finnish army, who knows somebody working at Finavia (which is responsible for planning the routes of aeroplanes) bumped into me on the street and said: "Michael, I have heard about you. They tried to demolish you with girls or women. But, they failed time and gain. Because, they could not find you in social clubs or dating sites. Now, they have intentionally planned (like directed) the routes of the aeroplanes through your home address when it is not cloudy to yield maximum nuances and disturb you. I am afraid unless I give you tips privately, I can not defend you publicly. There are well established elites going after you."

Thanks M.

Police's decision not to investigate the suspected crime reported was met with an appeal to the parliamentary ombudsman and the chancellor of justice who refused to get the report filed observed and investigated timely, according to the

snippet below. Eventually, the Chancellor of Justice, following customary suit, will uphold the decision of the Parliamentary Ombudsman not to investigate the suspected crime, or scientific observation, presented.



 <div> <div>Open with</div> <div>OKVI451/10/2024</div> <div>OKVI451/10/2024-OKV-2</div> </div> <div>OIKEUSKANSLERIN VIRASTO</div>	<div>Summary</div> <div>1 (1)</div> <div>28.5.2024</div> <div>OKVI451/10/2024</div> <div>OKVI451/10/2024-OKV-3</div>
<div>Michael Argaw</div> <div>Arvostelette oikeuskanslerille 15.2.2024 osoittamassanne kirjoituksessa Länsi-Uudenmaan poliisilaitoksen menettelyä asioidenne 5530/S/9010/23 ja 5530/S/7366/22 käsitellyssä. Näkemysenne mukaan poliisi jätti mainituissa asioissa perusteetta esitutinnan käynnistämättä.</div> <div>Esittelin asianne apulaisoikeuskanslerin sijaiselle Petri Martikaiselle, jonka pyynnöstä totean Teille seuraavan.</div> <div>Eduskunnan oikeusasiamiehen kansliasta saadun tiedon mukaan oikeusasiamies on jo 16.8.2023 ja 6.9.2023 ratkaissut samaa asiaa koskevat kantelunne EOAK/5093/2023 ja EOAK/5327/2023.</div> <div>Valtioneuvoston oikeuskanslerin ja eduskunnan oikeusasiamiehen valvontatoimivalta on rinnakkainen. Oikeuskansleri ei ryhdy uudelleen tutkimaan asiaa, jonka oikeusasiamies tai apulaisoikeusasiamies on jo ratkaissut. Kantelussanne ei ole esitetty sellaisia uusia seikkoja, jotka antaisivat oikeuskanslerille aiheen ryhtyä asiaa tutkimaan. Kanteluanne ei tämän vuoksi oteta tutkittavaksi.</div> <div>Tämä asiakirja on allekirjoitettu sähköisesti.</div> <div> <div>Vanhempi oikeuskanslerinsihiteeri</div> <div>Petri Rouhiainen</div> </div>	<div>  <div>THE OFFICE OF THE CHANCELLOR OF JUSTICE</div> </div> <div>Michael Argaw</div> <div>Reference: Your complaint to the Chancellor of Justice 15 February 2024</div> <div>The procedure in the Office of the Chancellor of Justice is in Finnish or Swedish. Therefore, although your letter of complaint is in English, the attached decision is in Finnish.</div> <div>Please be informed that according to the Constitution of Finland the Chancellor of Justice and the Parliamentary Ombudsman hold an equal status and enjoy equal powers as far as oversight of legality is concerned. The Chancellor of Justice will not investigate a matter that has already been resolved by the Parliamentary Ombudsman or the Deputy Ombudsman.</div> <div>This document has been signed electronically.</div> <div> <div>Senior Legal Adviser</div> <div>Petri Rouhiainen</div> </div>

Figure 57. The decision not to investigate by the parliamentary ombudsman.

Appendix A6: Suspected Stalking, Intimidation and Terrorism

Diary of the safety critical service subject as reported to the Police

To request for a referral to an audiogram, or ENT, to a general doctor, I, on a scheduled appointment, was walking to the healthcare center on the 19th of Sep 2023 when I encountered a Finnish man with a motorcycle who said: "Michael, to Miro crises framing at Mehilainen." Then afterwards, the suspect — who was putting on black and had his face fully covered with a helmet — would ride away. Dedicating more than 8 hours, I would be making a presentation canvas dubbed, "leadership in crises," on Miro, a management visualisation platform, on the 18th of Sep 2023. Addressing my followers on Chewata's popular social media page, I was about to make a live video, or presentation, on the political crisis unfolding in Ethiopia and my strategy for democratisation as well as conflict resolutions(Argaw 2023; Argaw 2023)."

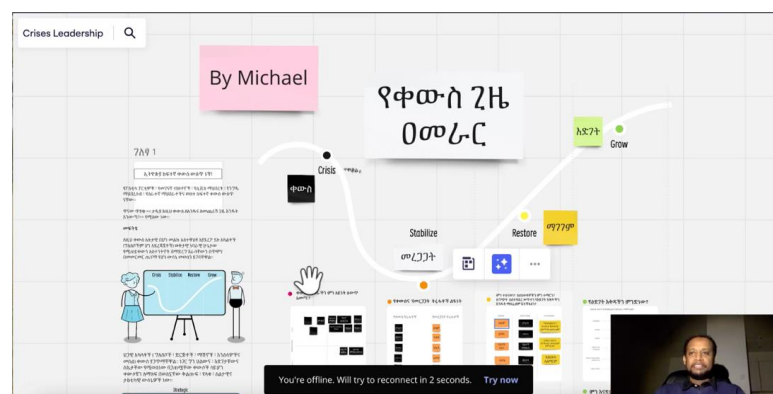


Figure 58. A public lecture, leadership in crises, by Michael Argaw.

Connecting the matter to what happened to me at Oma Laakari then after, I reported the scientific, empirical, observation, the act of a masked man stalking me with a motor bike, as a suspected crime report to Espoo-Police while I was in an illegal detention at Jorvi's acute emergency psychiatric unit, alleged as unconscious, among others, preposterously.

Appendix A7: A Conscious Secession Carried out with a Psychologist While Detained as Unconscious, among others.

As a result of the unprecedented psychological abuse, such as mis-framing, false allegation, pressure, intimidation and harassment, among others, he experienced since the 19th of September, apart from calling up with friends in the medical industry, among others, Michael would visit Ethiopian e-psychologists immediately after the illegal detention.

PSYCHOLOGICAL SERVICES

KAL Psychological Services
Session Record

Session Date: 19 Month: 09 Year 2023 Session: 1

1. General Information

- Name - Michael Mulate Argaw
- Age - 37
- Sex - Male
- Education Status: Completed: BEng and IPM. Not completed: MSc in software engineering and MEng in industrial management. Writing a thesis at the moment.
- Occupational Status: [Redacted]
- Religion: Christian
- The client is a 37-year-old, married, straight, male who has resided in Finland for the past 13 years. He is currently married, follows a healthy lifestyle: physical exercise, eating a healthy diet, having a good appetite, and sleeping very well for an average of 7-8 hours daily. Takes only from 18 to 20 small glasses of wine a year. He said he reaches hundreds of thousands to millions over social media, though Meta platforms keep on impeding him unethically. He also reported he doesn't have any criminal record. Nor has he ever been invited to defend himself

4. Medical History

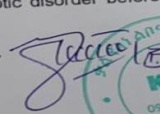
- The client had a hearing loss, which he regained partly due to changes in lifestyle. Due to sitting a lot, he also had an incision for anal fissure from which he recovered.
- Michael says that "falsely framed, he was involuntarily referred to a psychiatric evaluation recently by the time when he went to the public clinic looking for a GP to refer him to an ENT specialist, so as to check his hearing status." As a result, he's disputing the matter with Finnish police, as a criminal case. He contacted me for the trauma he went through. In addition, having met another occupational doctor who understood his need, Michael said he has already carried out an audiogram.

4. Observation

- The client presented witness statements of crime reports he made to the police.
- According to my conversations with the client, he is conscious, able to describe himself confidently, and spoke well with an excellent command of Amharic and remarkable augmentation. He was calm and gave due attention to the proposed questions, which he answered accordingly. In addition, the client didn't make any statement which tantamount to psychosis or delusion.

5. Findings

The traumatic attempted assault, or manslaughter, on the client, which is backed by witnesses, should be investigated by Finnish Police. The client's account should haven't been classified as a delusional psychotic disorder before due consideration.

Therapist Name - Kalkdian Berhanu Sign. 

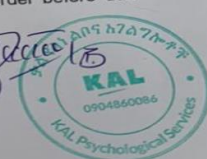


Figure 59. Example secession with a psychologist while in detention.

Appendix A8: Meeting with the Psychiatrist and the Nurses at the Jorvi Acute Psychiatric Center(Taken directedly)

21th of September 2023

Participants

M = Michael N = Nurse(Man) FN = Female nurse(Guest nurse, or a student nurse) DV = Doctor Victor, Chief psychiatrist

Before carrying out an observational meeting, Michael was abused by a harsh nurse in the morning. While Michael stated he is conscious and normal, and that he does not need any medication the likes of which he never depended on, the Jorvi nurse was harsh. In addition, he was concerned with, and anxious about, Michael's recording capability of the detention cell. As a result, Michael doubts not only the professional ethics but also the mental state of the nurse who talked with him impolitely when Michael was conscious, rational and non-violent unequivocally(Argaw 2025).

Observe that as opposed to Michael saying stuffs non-stop as an unconscious, violent, psychotic and delusional person, it was the psychiatrist initiating an interrogation about legally protected matters, such as the legit, historical, suspected, crime reports made by Michael hitherto. Observe that as opposed to establishing a rapport on how Michael interprets, feels and thinks, among others, in the real-time, among others, the psychiatrist, incorporating hearsays, was interrogating Michael about the suspected crimes he reported to Finnish Police hitherto and private political affiliations, among others, over which Victor has neither a judiciary and defendant legal standing nor a credible, sufficient, information, knowledge and expertise, among others, on Michael's legal and political affairs with entities in the state of Finland, among others, transcending the bounded, two-way, value co-creation sphere. Observe how the psychiatrist, as opposed to listening, becoming aware and resonating, among others, was keen on mocking Michael, the safety critical subject, unethically. In the lens of the need and expectation of Michael, observe what the objective of the psychiatrist

was empirically: “That it was nowhere near understanding and serving Michael customer-centrally but the creation and extension of distortion, misappropriation, torture and abuse while gathering private and political, among others, information, among others.”

Observe the substandard questions asked, among others, analytically. Basically, the psychiatrist demonstrated an objectionable, unethical, research design and methodology, fundamentally: “For instance, the psychiatrist did not reflect a clear and honest objective of establishing whether Michael is conscious, among others, methodologically, among others.” Observe Victor’s inherent fallacious decisions subsequently: “At the end of the conversation, Victor made a wrong hypothesis, or conclusion, that Michael is in psychosis implicitly.” Nevertheless, according to the conversation, it is evident Michael was normal, conscious, non-violent and non-psychotic, among others, unequivocally. Instead, Michael was correcting, instructing and re-orienting, among others, the degenerating professionals time and again consciously and logically. In addition, please note Victor, among others, are not impartial-enough to practise disputed, safety-critical, political, service in English on Michael.

To the secession

M: So, you can read it. What I kind of reported as a crime.

Commentary

The author, Michael, was presenting the complaint he composed regarding what happened to him on the 19th of Sep and the corresponding suspected crimes he reported to Finnish police hitherto. Some of which are listed in the Appendix section.

N: Seeing it .. Before I side. So.

N: This is yours?

M: Yeah. You can scroll it up slowly.

M: So, my trust in the Finnish healthcare is now over.

Silence for some time

M: This is not also the first time. On the 14th, I would call the health center. Again, they would write a false story. A false review.....over the phone.....Let me show you.

Commentary

Please, check section 5.1, Figure 22 and 23 regarding the false reviews written.

Pause for a period of reading

N: Okey

M: You read it..

N: e

M: On the 14th, I would call Mehilinen and I would ask them to give me an appointment with an ear doctor or a GP who can streamline me to an ear doctor.

N: Ear Doctor?

M: Ear Doctor

N: Why did you go to an ear doctor?

M: In 2016, I had a hearing loss. As a result, I did this audiometry.

N: Ok

M: It was the first time that I did a hearing test. And, I lost some hearing. The second time I did a hearing test, I regained it. Since my circumstance has changed, since in the environment I'm in I've been exposed to loud noises, I wanted to meet an ear specialist again so I can carry out the same kind of test(audiometry). Because, my circumstances have changed. Since I've a record that I've visited an ear specialist before, they could [one] streamline me to an ear specialist directly. But, then, if that doesn't work, then they should be able to streamline me to a general doctor and the GD would streamline me to an ear specialist, right?

N: Was there.. Was there anything wrong?

Commentary

I have a record, an existing condition, but he does not understand it. Ideally, medical professionals should be aware of your existing conditions. Shouldn't they start with understanding existing conditions? He should have listened carefully.

M: I think you may not understand it. So, I shouldn't go to the detail. It should be handled by an ear specialist. I told you. I have visited an ear doctor before. It isn't a psychological matter. It isn't a psychiatric matter.

N: It's only ear.

M: Yeah, it's an ear matter. But, the nurse would tell me: "No, you should visit a psychiatrist."

Commentary

I never visited a psychiatrist for my tinnitus. Only ENT(once) and audiogram years ago.

M: Lol..... You understand what I mean?

N: I understand.

M: She was intentionally misunderstanding and aggressive.

N: Somehow worried about your mental health?

M: No, no.. she was intentionally asking the same questions time and again. And, at last, "I'm worried about you," I told the nurse. Because, she was misunderstanding and asking the same questions time and again though I was addressing her very politely. Like, the way that I'm talking with you is the way how I talk in business or politics. It's no different. So, what I asked was, if possible, for her, looking at my record, to streamline me to an ear doctor, but, if not possible, to streamline me to a GP(GD) who would consult with me and streamline me to an ear doctor. I would tell the ear doctor about the circumstance that has changed and I will carry out an audiometry. As I told you, I've visited an ear doctor before.

N: I just wonder why... I just wonder....Why they think in Mehilainen that you've psychosis...is there a reason ?

M: They wrote a false story. They wrote he's unconscious.

Commentary

It is evident I'm relaxed. Nor in psychosis. Nor unconscious. Nor portraying any predisposition to violence. Even at this point, that I am super-conscious and normal, among others, it is clear there is not any need to keep me in any isolation framework against my will and normativism.

N: Okey

M: Like, do you think I'm unconscious with you now ..lol?

N: No

M: I'm conscious, right?

N: Yeah

M: They wrote: "he's unconscious, he's psychotic, he could be a threat to somebody"

M: They wrote flying cows. It's honestly unbelievable.

N: Has something happened in your life that made them think you might be..

M: If you listen to me. I went to see a GP and I asked to be referred to an ear doctor. As I told you a while go, and if you listen to me, it's very simple. Do you understand my English?

N: Yes, I do.

M: I've a history of visiting an ear specialist. There was a time when I visited a GD(general doctor) and I visited an ear specialist. And, my circumstances have changed. So, it should be simple, plain and straightforward: "They would streamline me to an ear doctor and I would discuss with an ear doctor who understand the situation, who has a record....and then we carry out audiometry, among others"

M: Insteadthey have written that [falsely] he's violent, unconscious...and etc..

M: Yes, that's why I reported it to the police. Honestly, that's why I've lost trust in the Finnish healthcare system. Imagine, you are writing a review that Michael was using violence against me....against her.... Do you understand what I mean?

N: You don't seem like a violent personBut, I wonder what has happened that you're here!

M: They just wrote a false story..... "he's violent...."

I told you what I've communicated with them. Let me know if you understand what it means? I've been a teacher...and I ask my students affirmative questions. ... Let me know if you understand me!

Commentary

It is evident I'm asserting non-psychotic and super-conscious conducts which aren't predisposed to violence unequivocally. As a result, there was not any need to keep me in isolation against my will.

N: I do understand you.

M: What about her?

N: It makes me wonder why are they writing like that

M: My wife was also surprised. I would have been violent to her. I would have a history of police reports. I don't have any crime. I don't do any drugs. So, she has written a false review and I'm here. Do you understand what I mean?

N: Yeah

N: You want to talk to the doctor?

DV: I've other writings right now. I'm a bit busy.

FN: So, How is your hearing ?

M: I think ...

FN: Just tell me.. do you hear?

M: I can hear pretty well!

FN: Do you have ear problem still?

M: I've a hearing loss.

FN: Let's talk only about that.

M: The last few weeks, there has been a lot of sounds. So, my tinnitus has been higher. So, that's it.

FN: What kind of sounds do you hear?

FN: Do you think it's close to you or far from you?

M: No. The thing is if you don't understand what it's, you will misunderstand it and you might think it's like a delusional disorder or something. If you've a hearing loss, when you are exposed to a high pitched sound, it [the tinnitus] spikes, or aggravates. So, that's about that....If you understand what I mean. A nurse or GP should understand this science. It's simple.

N: I read her texts that in the apartment something weird has happened

M: She was asking me about the circumstances that aggravated this...and I told her that I was exposed to noises. Let us not talk about that.. that's like a different thing. But, the most important thing is this: "I called up to the healthcare system. I went to the healthcare system myself peacefully"

N: Because of the hearing

M: Exactly

M: I told them I would like to be streamlined ...I told them the circumstancesIt's just straight forward. They totally wrote a false story: "He's psychotic, he's violent, he's unconscious... blab la..bla"

N: Where does the knowledge about the violence come from? Is there any evidence of you being violent?

M: Not at all. If I've been like rangling and

M: Fabrication. It's just a fabrication.

N: You don't have a history

M: We were having a fine conversation. A police would come, a security guard will come..paramedics, ambulances.....will come and they would tell me: "Let's go to Jorvi"

That was it man.

N: You weren't fighting?

M: Nothing men... That's why I reported it.... If you understand what I mean.

N: You don't seem violent.

M: "I don't seem violent. I have never been violent. I blog live to fifty thousand people. I'm a public facing person. I'm always vetted publicly. I'm just suspecting [which I've reported to the police] the call-back and the session with the GP has been subverted.

N: One question

M: Yeah

N: You don't want to come to eat.

M: The thing is I've my ____ bringing me food. So, I'm okay.

M: For security reasons.

M: I don't know why I've been streamlined.

M: I told you I'm a politically active person. I blog. I do lots of stuff. I've political foes.

FN: Do you think we could talk to your ____ about this?

M: If I've been violent?

FN: I'm just asking what if we take your ____ to this conversation with Dr?

FN: What does your ____ say about this ?

Commentary

This is not a court where you bring a witness for anything in the past. For instance, if we assume Michael had been indicted for violence and psychosis (possessing drugs and attacking others, among others), it can not be an empirical and rational pretext for isolating Michael the way they did. That it is evident in the real-time Michael is conscious, non-violent and non-psychotic, as opposed to substantiating with any hear says, Victor should have left Michael to go home. One thing clear in the secession unequivocally: "The referrals, or allegations, of unconscious-behaviour, predisposition-to-violence and psychosis are inexistent, fallacious and superstitious evidently."

M: ____ is surprised that you've said he's violent, unconscious and so on..

FN: Is there any reason why your ____ could be concerned about something ?

M: Not at all. ____ concern is about the false review that has been written about me. ____ thinks it's politically motivated.

If I would be violent, I would be violent to ___ first. I would have ever had a history of not just being violent in the last couple of days, in the run up to, I would ever have a history of this kind of thing.

FN: I am not talking about violence. I'm talking about you being here. Is ___ worried about your mental health? Do you think?

Commentary

Despite Michael's conscious and rational clarification of what he wanted and how it has been addressed, the nurse would degenerate the conversation out into external review or hear says. At this stage, Michael has already clarified what he wanted, or that he is conscious, or non-violent, among others, in the real time. As a result, they should have dismissed him by now.

M: If you understand what I mean. A false report has been written and I'm here. So _____ concerned about the false report that has been written about me.

FN: About that

M: Once I'm here. this gentleman... they look at the report the doctor has written about me. They don't know me. They haven't met me. I don't start fighting with them. Do you understand what I mean?

N: Yeah

M: All they do is that....They have this hypothesis: "the hypothesis that Michael is unconscious.. the hypothesis that Michael is violent... you know...Michael might attack you"

M: All they do as a scientist is validate...verify... that hypothesis.

M: For example, you and I... you've already verified that I amn't violent...you've verified that I amn't unconscious.....You've verified that I speak English pretty well....

N: Yeah

M: I amn't trying to boost myself... you've verified that I'm an intelligent person.

DV: I will find this Mehilenen Doctor. I will find this petition.

M: Yes. Yes, sir. Go ahead. Lol.

N: The original one isn't in our system

M: The only thing the people can do is see If I would be going out on the hallway

M: How do you review me for example ?

N: I don't think you're violent.

M: Exactly

M: Do you think I'm unconscious ?

M: lol

N: Not that either.

M: Yeah

N: Third thing , I don't know what has happened in your home?

There is nothing which happened in Michael's home which got Michael to be in the hospital. Time and again, Michael iterated he decided to have an ear check-up himself and made the first move: "He called up the health center"

Observe the professionals are engaging in unnecessary degeneration.

I think that's important

M: Before I came here... false report

Commentary

That a false, trumped up, report was written about him, Michael was directed to an acute psychiatric ward for an observation. He already told what happened on the 14th: "The nurse had written a false story about the call-back secession as discussed earlier." Michael went to Oma lakaari on the 19th because he decided to see a doctor for a pre-existing condition[himself] about the customer journey of which he reported to the police(Appendix A6). So, it has nothing to do with anything about anyone in his home or elsewhere. Michael decided to book an appointment and see a doctor himself. But then, on the 19th, at Omalakaari, they would write a false story Michael's violent, psychotic and unconscious, among others, and that he needs to pass through an observation under the intensive care unit. Nonetheless, the nurses were not listening to Michael properly. Regardless of whatever, the professionals were supposed to dismiss Michael who was non-violent, super-conscious and non-psychotic from the involuntary isolation and dentation, among others, effectively.

DV: Who was the name of this doctor ?

DV: Malmberg . Mehilienn Espoo Tori.

DV: She is quite a young doctor.

DV: This is the petition.

DV: This is how you come here.

M: Yeah

DV: We have a system and there isn't any single writing about you before. You came yesterday.

M: The day before yesterday.

DV: There isn't any information about you.

N: There isn't any information.

M: Maybe because I've disputed, or filed, it as a criminal report.

N: Maybe you haven't been using the public healthcare system much.

M: Yeah, I don't.

DV: Hus system.

M: Lol .. I've never had to use the Finnish public or private healthcare system for any psychiatric reasons. That's the reason why you don't have any information. Lol.

N: That's why we don't have any information.

M: Yeah

DV: There is no psyci. We have an old system here. Sort of Miranda system ..
Kirurgia.. Wrist stuff

Commentary

Kirurgia. Injured in a friendly soccer match, I had a scaphoid on my right hand
which recovered after getting casted at a private healthcare company.

M: Hand stuff

DV: Wrist problem.

M: It has now recovered

DV: Fracture

M: Yeah, fracture

DV: Nothing psychiatric.

M: Nothing. Nothing.

M: It's just the GP. She wrote a false .. I'm here.

Commentary

While it is evident, I am not pre-disposed to violence, nor psychotic, nor
unconsciousness, they kept on diverting the secession beyond its envisaged,
ethical, strategic objectives, assuming it all was done for my best interest, not
precluding syntheses of instrumentations of negative control intrinsically.

N: Do you usually use HUS when you use healthcare? Do you use Mehilien?

M: For example, on 2016, I've done this audiometry with the public healthcare.

M: There are also some, parts of the healthcare, which I did with the specialist. I had hand fracture. I did part of the procedure with the public healthcare. They said, "I don't need to be in control of the matter with the doctor." It was casted, I followed the instructions and it recovered.

DV: Why ..why ..did you went to the doctor in the first place?

M: Where?

DV: this Mehilenen Doctor?

DV: You went to make some report about something?

Commentary

Michael has already explained the reason why he called up and visited a doctor clearly. Nevertheless, as opposed to focusing on his need, ENT or audiogram, they would ask him degenerated questions time and again. Nonetheless, it is incumbent upon the interviewers that listening carefully, taking a note and establishing whether or Michael is conscious, violent and psychotic, and releasing him from the illegal and involuntary isolation and torture effectively, upholding normativism and human and democratic rights, among other applicable statutes, laws and liberty of a person intrinsically.

M: Yes. Let me tell you

DV: What is the idea?

M: I've been telling them. Let me tell you.

M: So, it is called a hearing loss. In 2016, I visited a generalist as well as an ear specialist with regard to that. I carried out audiometry .

DV: It's the left side?

M: Left side. Yeah. Hearing loss. I carried out an audiometry test and I had a hearing loss. But, I also carried out another hearing test and I nearly regained everything. Because, I started changing my eating habits and all that.

N: It must gone better.

M: It kind of got better. I followed the instructions. I did science after high school. But then lately, my circumstance has changed. I'm exposed to noisy environments. As a result, I wanted [if possible] to see an ear specialist directly. If not possible, meet with a generalist and then get streamlined to an ear specialist. And then there.... tell the new circumstance, as to how it might have affected me and then carry out a new audiometry. Simple and straightforward. So, that was all I asked. But, they have been writing a false story actually. The nurse has been writing a false story on the phone call that I made. I think what happened with the doctor last time could be a revenge. Because I complained to the nurse on the 14th that she is aggressive, she was intentionally not understanding me and that I say one thing, she say totally different. And, I told her that I'm worried about her health at the end of the phone call. And I believe, may be, when I meet the GP, she would use the secession to revenge me. I'm just disputing this.

Commentary

Repetition of what I have already clear out. Could there be an ulterior, or malicious, reason for going over what has already been cleared out: "That Michael is conscious, non-violent and non-psychotic time and again in the real-time?" Let's observe together.

N: That sounds very weird.

M: Exactly.

N: Why would they...

DV: The doctor didn't check your ear.

M: Not at all. She didn't.

DV: You go there. She has instrument. She will check your ear.

M: They just like... the whole session was hijacked. She wrote totally different stuff.

DV: Ear problems and you are in a mental institution.

Commentary

When somebody present a case of ear problem. All doctors must start with assessing the condition of the ear. Nonetheless, the doctors did not venture on using materials available in the shelf abstracting on the need of the customer.

M: Exactly

M: She wrote that I'm unconscious. Like I'm conscious now, I can go to the court and sue anybody. She said he's psychotic, or he would be violent. I went to.... I made the first call myself. I went to see a GP myself. I've had a fluid conversation. The same way that I would do a presentation in office, or I would teach in a class room, or I would stream live to other people. I can show you the videos. It is just unbelievable. It has been hijacked and that's why I reported it to the police.

N: This seems so unreal.

M: Yeah, unreal and you have better things to do. You have people who need urgent care and always there's limited resource when it comes to healthcare right now. They are now talking about big cuts and everyone is talking about it. Because, the care system is jeopardized.

DV: You went to the reception. You wanted to make some documentations with the doctor. You are claiming that you are politically active for couple of years. ... and for what reason you have been chased by Police, finnair and finavia ? looks like ...widespread.. sort of surveillance.

Michael has already clarified all that need to be clarified. Look, how the doctor is degenerating out the conversation setting the stage for what we don't know.

M: If you understand what I mean. If you pay attention to me pretty well. The documentation has been done subvertly. Just listen to me carefully. What I mean is that I asked to be directed to an ear specialist because the circumstances I'm in has changed : "There's a noise"

N: Where is the noise coming from?

M: The planes. There is a high pitched... The planes are now passing on top every five minutes.

N: Do you live near the airport?

M: Eventhough I live 30KM away from the airport, the planes have been directed to pass by my geo-location.

N: The planes descend by your house?

DV: You write that Finavia has changed its flight path the direction of your house. The ambulances as well are crossing your roads. You think it's on purpose?

M: Listen to me. Forget about the report she has written and let me tell you the story.. You're framing the story..

DV: I'm just writing directly.

M: No. Forget about that. This is the situation.

M: I'm reporting that my circumstances has changed.

N: you've moved elsewhere

M: No, It's in the same place

N: The same place

M: My circumstances have changed and I would like to meet with an ear specialist. She asked me a detailed question why I would like to meet an ear specialist. I told her.. right now ...I've planes passing over making noises and stuff...I would like to carry out an audiometry.

N: Now, I understand

M: That's the most important thing right now.

N: Yes.

M: You can, for example, over-analyse a statement. But, it's irrelevant now.

Commentary

Apparently, Michael is busy correcting and guiding the professionals time and again consciously, non-violently and non-psychotically that as opposed to whatever is written over him, what he is stating as his customer need and account as a conscious, non-violent and non-psychotic person there and then should have been addressed attentively.

N: You're worrying about your hearing?

M: I amn't worried about my hearing. I amn't worried. I don't have any psychological problems. I don't fear. I haven't even [there] said that. What I said is that as a GP, I was asking her to streamline me [because] my environmental circumstances [let's put it in short] has changed. Do you understand me?

N: I understand this

M: Do you understand what I mean. Am I making sense to you?

Commentary

It is evident I make sense: "That I am conscious, non-violent and non-psychotic." In addition, I inferred there was not any need for any repetitive discussion on what has already been discussed and clarified. Let us assume I was violent(that the public know me for attacking others with weapons, psychotic(to such an extent that the public know me for using and campaigning for drugs) and unconscious(that the public know me for being unconscious after taking drugs and getting intoxicated with drinking alcohol, among others) in the run up to my secession on the 21st of Sep time and again. Nonetheless, that I, there and then, in the course of my conversation, proved I did not need any involuntary psychiatric treatment, or isolation, or interrogation, among others, I should have been left to do what I wanted to do elsewhere. Because, there, evidently, at least, at this point of the juncture, was not any imperative public interest qualified by a civil court regarding predisposition to violence, psychotic-behaviour and unconsciousness which required involuntary interrogation and isolation, among others, despite the expressed and circumstantial will of the safety-critical subject. In addition, let us assume a person faced tragic events, or anything, in the past, or here and now, there would have not been any empirical and rational pretext for any mis-justified isolation and mis-treatment, among others, premised on false, or irrelevant, or non-urgent grounds. If the empirical and rational objective is to establish whether or Michael is violent, unconscious or psychotic, it has already been verified and validated in the preceding conversations unequivocally.

N: I understand

FN: Yeah

N: This makes sense

M: Yeah

M: She has written totally different kind of version or.

DV: It's here..Finavia has purposely changed the flight patterns purposely cross directly you house...and the ambulances are passing your house.. weird reason... you are claiming it's part of terrorisme ..and ..next to you neighbour..... you have been hearing shot guns...noises.

Commentary

Michael explained, or clarified, the matter, or his state, or need, pretty well. As a result, he should have been dismissed from the unjustified detention.

M: Yeah...Look .. the most important thing is that .. my environmental circumstance has changed. There are sounds coming. So, we don't need to go to the detail. Because, I'm politically activethere has been cases where young people would come with motor cycle (around where live) and make noises. I have [for example] reported that somebody has attempted to attack me with glasses. But, that's a different thing. She asked me something extra.

DV: People recognise you when you walk on the street ? Oh That's Michael

They know who you are ?

M: Sorry

DV: Random people on the street recognize you?

M: No, no

Commentary

In what I believe is mis-direction of the objectives of the secession, I was interrogated about suspected crime reports I made to the police[out of context]. As a result, I ventured on not discussing about suspected crime reports I made to Finnish police about which I could have written blogs, among others.

M: She asked me about my circumstances and I told her. The most important thing here is that I asked to be directed to an ear specialist. Do you understand what I mean?

M: And, I mentioned the reason why I would like to be directed to an ear specialist. Because, my environmental circumstances have changed.

N: The doctor's text invite that you might be paranoid? What do you say about that?

M: Look. If you listen to what I mean. I told you. I've already disputed this. I asked to be streamlined to an ear specialist. One is because I've the experience of visiting an ear specialist. Two. I've to tell this new circumstance, new situation: "That means that right now, I've planes going atop"

Commentary

I am focusing on a real time need: "That I have been exposed to a loud environment — that my environmental setting has changed, getting exposed to high-pitched nuances due to planes detouring through my home location — I have yet got to address my need of meeting an ENT or audiogram."

N: It's quite common here.

M: But, that's a different thing.

M: I've a unique situation. For that, among others, I asked to be streamlined to an ear specialist.

M: If she take that statement and say he's paranoid.. that's a different thing.

N: Yeah.

N: That is the text she

M: You can frame anything psychologically.

M: If you see my report from 2016, I've had a hearing loss and I had audiometry.

N: Yeah

M: What happens is that if you have any matter of ear, you get to an ear specialist. One is you contact the nurse. If that doesn't work, you contact the GP and the GP would streamline you to an ear specialist. Simple and straightforward. That's it.

Commentary

Observe that the medical professionals were making irrelevant(as far as what they were supposed to do to address my need is concerned) statements time and again.

N: Are you bothered about the noises of the planes and the ambulances?

Commentary

Michael clarified what he needed time and again: "Audiogram, or a referral to an ENT specialist who could refer him to audiogram." Michael clarified, or it is evident, he does not need any psychological, or psychiatric, help regarding his ear. In addition, he never visited a psychiatrist for it. One thing clear: "The dispute has already been clarified."

M: Since you don't understand about what a hearing loss is and as to how that gets...

N: I've

Commentary

If he knows about tinnitus, then he should have not asked most of the questions repeatedly.

M: eh

M: Exactly, then that's good. I would need to be streamlined to an ear specialist. That was what I asked. She has written he's violent .. he's unconscious..... this just like you know....

Commentary

The doctor is not an omni-present being who experienced the environment Michael is in, or being Michael, to start interpreting anything, or any matter, regarding the relation between Michael and his environment outside of the value-cocreation sphere between Michael and the himself there and then.

N: The doctor has made it up by herself

M: Frame it up

DV: There is one phrase here which says you have couple of web pages and your enemies inserted pornographic material.

Commentary

Michael never made a statement his enemies inserted pornographic materials in to his sites. In addition, Victor does not need to ask about Michael's report of suspected crime regarding request for ransom(Appendix A19A). The matter has nothing to do with Michael's current state of consciousness, or behaviour, among others. The statement that someone put something on Michael's site is false fundamentally. Basically, the doctor is making false statements or allegations. Nevertheless, Michael would clarify patiently, consciously, non-violently and non-psychotically.

M: No, no

M: She would ask me. She asked me unnecessary questions. She intentionally wanted to subvert the matter to psychological. She asked about the reports that I've made about the crimes that occurred to me in my life. The reports that I've made to the police. I've reported them as a crime. So, that's a criminal procedure. We can leave it.

Commentary

Again, it is evident I did not want to discuss about the reports I made to police.

M: I've provided witnesses and ...I've reported it...but... that's different thing. U understand what I mean?

N: Yeah

M: If somebody abuses me, I would report it to the police. If you ask me if I've ever had any experience of abuse, I would tell you. She asked me and I told her. But, the most important truck we shouldn't get carried away, or out, from, is that I called the health service myself, I wasn't brought to the health service [to Mehilien Espoon Tori or Omalakari] by force and I haven't had any violent stuff with anybody. The conversation was fluid. Eeeee....The whole thing has been hijacked. forget about that.. She has written a false review.. he's violent..he's psychotic.. he's unconscious.

DV: You have this web page and they put this pornographic material
..blackmailing you

Commentary

Again, Victor is asking unnecessary external, legal, questions.

What is the point of asking 1) if a crime happened to Michael, 2) or anything about the crimes which happened to him, or 3) reports Michael made to Police about crimes which occurred to him. What is the point of starting up a conversation, or interrogation, out of the blue unless it is a matter about which he can, or is willing to, do something about, upholding the objective of the value co-creation sphere.

M: Ahha Okey

M: Listen to me. Look, listen to me.

DV: They're blackmailing you.

M: I think you need to listen to me. I think if this secession is for me, then you need to listen to me. If you don't listen to me, if you just cook with what she has told you, then there isn't any point in me being here.

Commentary

It is evident Michael is conscious, non-violent and non-psychotic. As a result, needless to use hear says apparently.

N: Yeah, we will listen.

M: If you listen to me, you have to listen to what I say and record what I say.

N: Now we have to evaluate if you have to continue or not.

DV: Yes

N: Continue the treatment or not.

Commentary

Having failed to validate any of the false hypotheses beyond any reasonable doubt time and again, having failed to make a proper thesis, or diagnosis, what treatment are they talking about? Michael has not been receiving any medicine in the detention ward. Because, he did not need any chemical to be conscious (or get back to remission), non-violent and non-psychotic.

M: Yeah, but, I've just been in my room. I've been doing the things I've been doing every day.

N: That's why want to listen to your conversation.

DV: is it true that some people were blackmailing you.. they put some material..

M: She asked me about crimes that happened to me.. Yeah..I've had a website. It's like you have a phone number, right? You can return it to Elisa or DNA, right ? Then anybody can use it.

M: I had a website: URL. And somebody would claim it.

M: I returned it to GoDaddy and somebody would claim it and they would put pornographic content and they would call me up and say "Michael, pay us this much amount so we will delete it"

Commentary

It is like you have a land-line or a mobile-cell-phone-number. You would return it to the telecom service provider. A new client can acquire and do anything with it. It is not Michael's fault if the new owner of the url(the website domain) would deploy a shopping portal software, among others. Again, there is not any point of asking what the doctor is not an expert about, setting the stage for making a case for false allegation, or mis-diagnosis, among others, subsequently.

N: So, they would delete it?

M: Yeah. I told them. Number one. The site isn't in my name anymore. Nobody even visits the site. I've been trucking it. One or two visit it.

N: The website you have befor is hacked ?

M: Yeah...But.. it's irrelevant.... She asked me...and I've reported this as a crime. Police say..they are doing it from China or elsewhere... So, this is.....and I don't really care. Nobody even cares because people know me. Do you understand what I mean?

N: yeah

M: Nobody even visits that site..so

N: Yeah

M: It was an educational site. I appeared on VOA. I appeared on SBS Amahric. But, that was reported to the police. Do you understand what I mean?

N: Yeah

M: And that's it.

N: Yeah

M: First, she intentionally asked me questions....to intentionally subvert it to a psychological I don't understand.

N: We have to understand why you are admitted to the hospital.

M: I've told you.. in the report.. She has written about totally different stuff. Totally different stuff.. She would ask me some questions and write totally different stuff. Even write a false story that I'm violent, unconscious and stuff like that. Totally false stuff. I've now totally directed it to the police ...why she has framed me. It's total bullshi.

DV: You are politically active.. in which way.. you are a blogger?

M: Sir, I don't understand as to why we need to discuss about that.. as to why we should discuss about my life. Do you understand what I mean?

Commentary

Michael is conscious, non-violent and non-psychotic. What is the Dr doing now.

DV: You are politically active, you think that some people are manipulating you ..checking your background...disturbing you.. This is what I'm seeing now.. action and reaction.

Commentary

The Dr is making false statements, conclusions and fallacies. Michael did not say people are manipulating... etc... He only corrected the mis-interpretations of the doctor regarding the story of the website domain he returned to GoDaddy. Nor Michael brought up, or started, issues of paranoia, or phobia, or manipulation, with Victor.

M: No. No: But, that you can have in your life.. but you report it to the police.. that's it.

Commentary

The OmaLakari doctor asked Michael about the suspected crime reports he made. He told her about the case of a stranger going after him: "Making attempted manslaughter, or assault, a stranger would throw harmful items on Michael. In addition, he was staked by a masked Finnish man in the run up to." As opposed to being empathic during the conversation, Victor, mis-incorporating and mis-interpreting the factual matter as fictitious, or as that which is created in the mind of Michael, would make a psychiatric thesis, or distraction-proposition, unethically.

M: It's over. That's it.

DV: Why police is in here.. at all.

DV: How come it's a police matter.

Commentary

It is a police matter because suspected crimes are reported to the police.

M: sorry

DV: Why do you talk about the police?

Commentary

Victor asked Michael mis-interpreted , or mis-framed, questions in the first place. Nevertheless, Michael clarified to him time and again though it is incumbent up on Victor to be conscious of what he asks, why he asks and who he asks, among others. That Victor, among others, were not listening, the conversation was not fluid. Empirically testifying they are not listening as a consciously present person, they would ask Michael the same questions time and again. Although we can not conclude yet, it appears active listening, or consciousness, by the professionals was absent despite the fact the secession was aimed at listening to, and understanding, Michael first. Remember when we carry out interview in psychiatry, 1) we must be aware we are carrying out a research, 2) the research method and methodology we adopt should be ethical and professional, such as we can not validate our mis-interpretations as a hypothesis, or a research question, which has repeatedly been the case for Victor, 3) harnessing already existing knowledges, or literatures, we are going to make a thesis about another person, and that is a safety-critical-synthesis intrinsically. Let us assume [there is a report that] Michael insulted, or assaulted, the medical doctor. Do you know that an even vivid, aggressive, violent behaviour, or reaction, or conduct, can not be framed as psychosis unless all potential cause-effect constructs are ruled out beyond any reasonable doubts empirically and rationally intrinsically.

M: I think we aren't communicating here.

M: There is this functional thing that I talked with the GP: “getting streamlined because my environment has changed and carry out an audiometry”

M: Now, there is this unnecessary question that she has asked me and I’ve answered it. Now, based on that you are trying to question me. If you, as a person, ask me, I would tell you.

If you ask me, “Michael, are you politically involved”
I would tell you, “Yes, I’m politically involved”

I’ve these pages, I write. I create content. I create knowledge.

DV: Are you part of some parties ?

M: I amn’t part of any political party in Finland. But, in Ethiopia, I’m trying to advocate for democracy. I’m a pro-democracy intellectual. I blog and write articles and so on.

Commentary

Why is Victor gathering classified information about Michael. What does he want to do with the information. What is the compelling reason for gathering information when the fact that Michael is conscious, non-violent and non-psychotic has been proven time and again beyond any reasonable doubt? One thing is clear: “Victor went overboard when it was established Michael was conscious, non-psychotic and non-violent time and again.”

DV: You like a party or independent ?

M: I’m independent.

M: In Finland, I've written against racism in the Police. I've written articles...But .. that isn't relevant. She asked me what I do as a hobby and I told her. I just don't understand what she wants to make out of it.

M: If you understand, the whole thing has been hijacked.

DV: I'm trying to get some facts out of its contexts.. which isn't true.

DV: Motorcycles are chasing you.. you neighbours are making sounds .. disturbing you

Commentary

Listen how Victor intervened to pervert the conversation to delusion, or paranoia, or psychosis. Michael did not say motorcycles are chasing him. Michael did not simply say his neighbours are making sounds. Instead, he said whatever he said to Malmberg 1) based on her questions and 2) in the right context, expressions and words. Then again, how come Victor knows about what happened in the run up to visiting the doctor at OmaLakari on the 19th(Appendix A6). Victor is not an omni-present being to interpret, or comment, about the in-building nuances (Appendix A1). Nevertheless, he is merging two distinct, perverted, fallacies to make a thesis about Michael clinically in the real-time unethically. As a result, it is plausible he knew and mis-framed the fact Michael was stalked and intimidated by a Finnish man on a motor cycle about which Michael did not impart to the doctor(Appendix A6). Because, a crime scene has its own place of investigation.

M: The whole thing has been hijacked..lol

M: Forget what ...everything: I want you ..

M: Everyone is surprised that I'm here. My ____ is surprised that I'm here. My ____s are surprised. Medical doctors. Everyone is surprised. I haven't told about this over social media.

M: Just verify and validate if I'm violent to you in anyways or by any means. If you need a security guard.

DV: There isn't a violence story here.

M: I've seen the review that she has written.

DV: There isn't a single paper.. violence.

M: Look .. I've seen the review. This was what was written. The day before I came here.. She has written a report .. He's violent.. he is unconscious .

DV: Ahh , It's written here that ..may be. If someone is touching you.

M: Exactly

DV: You are ready to kill these person.

M: Yeah. She just.

DV: That isn't true.

M: Yeah

M: I told you the whole thing has been hijacked: Honestly, there isn't any point of talking about what she has written. Because, it's all rubbish. There is this big frame. I took the initiative. Nobody forced me to go through. And, I told you why I did it. It's attached to an already existing condition.

M: And, I only want to verify.. are you here with me? Are you paying attention?

M: Yeah, I only want you to verify that I amn't violent to you. That I'm concisions. That I amn't unconscious. You can cognize me.. the same way I can cognize you. ...which is false if they say otherwise.

Commentary

While Michael keeps on making his points logically — that Victor should focus on there and then in which Michael asserted, or proved, or clarified, his super-normality time and again: “That Michael is conscious, non-violent, non-psychotic and goal oriented ” — Victor kept on presenting hear-say-centred allegations against Michael which [even if assumed to be true] can not tell Michael's state at the time of the interview with the doctor. One thing clear: “If Michael had been beating the medical doctor violently days ago [theoretically], the development could have not been a pretext for diagnosing Michael as psychotic person immediately intrinsically.”

N: The thing is you stay here and we will evaluate if you are psychotic.

M: Unconscious, violent....I understand.

N: If you aren't, then you are free to go.

N: If there is a doubt, then we have to suspect more.

Commentary

At this point of the juncture, what is there to suspect in the real-time?

Not only the authentication of the present that Michael is conscious, non-violent and non-psychotic but also disagreement about the past, what the referring doctor said about the suspected crimes Michael reported to the police and how victor is reformulating and interpreting it, has been cleared out unequivocally.

M: Exactly.

M: You take what she has written. You don't believe it but you'll verify it. My friends, other doctors in US, Russia and Sweden, everyone is wondering.

N: Yeah

M: But, you would also validate it

DV: If you don't have any mental issues, then there isn't any goal for us to keep you here.

M: Exactly.

Yeah

M: And, the resource could be used for someone else.

N: Yeah

M: They are talking about cutting resources now... a deficit of 11 billions. If you follow the news.

FN: It isn't about the resources. We are evaluating your health now.

DV: You are working in this _____.

M: Once a week, I work there.

M: Four or five days a week, what I do _____. I _____. I _____.

DV: It's quite expensive to produce the materials.

M: It's confidential.

DV: Do you have some supporters?

M: It's confidential. I can't talk about that. But, there are political parties which at some point I look forward to putting me in a position. I work for de(democracy).

N: That's in your home country.

M: Yea, that's in my home country.

M: I kind of _____, do _____, make _____.. do professional stuff.

DV: Concerning Finnish political situation, or Ethiopia?

M: Lately, I have refrained from commenting on Finnish politics.

There was a time I would write against racism. I had discussion forums where I kind of do this kind of stuff. Right now, the situation in Finland [Conflict in the region] doesn't allow for any internal whatsoever.

N: You are in the E

M: in the Ethiopian

M: , I write and read books about it and...stuff like that..

N: Once a week, you _____.

M: It's a _____. _____.

N: You don't need to because you get your income from this?

M: That's a bit confidential.

N: _____

M: _____..

M: I've pages. 75K followers.. They follow me because of the knowledge that I create.

N: _____.

M: The other is in marketing and IT.

N: We don't need to know much about you.

M: Yeah, I'm a normal person

DV: You are now in a preliminary evaluation. For a day or two. There is a possibility to send you to another hospital to make precise studies.

M: studies about what?

DV: about mental health

DV: It's usually full. We can do it actually today. That's in Helsinki.

DV: they have specified this paranoid, first sort of psychosis episode,

Commentary

Michael has already clarified all that needs to be clarified going above and beyond what is expected of him. As a result, it is more than evident there is not any psychosis with Michael. As a matter of fact, Michael was correcting and putting the degenerating professionals back on track time and again. If we have to suppose plausible doubts regarding active analytic judgment, or mental conduct, or interpretation, or flow, in the course of the interrogation, it would be of the psychiatrist there and then instead. Victor, making unfounded mis-interpretations deliberately, despite Michael's clarifications and correction, made an unfounded hypothesis, if not a conclusion, that Michael is in psychosis, or paranoia, and that he needs to be checked out by those who have advanced expertise. "What was the pretext for asking unnecessary questions despite Michael's lucid strategy of

clustering, clarification and abstraction attentively,” is one of the legitimate questions to be investigated by Police. When somebody is in psychosis, or paranoia, or delusional psychosis, among others, the person will hyper, or make unnecessary, or unreal, statements, such as this person is going to attack me, among others, mis-interpreting the environment in the real-time, among others. If you pay attention to the real-time conversation, Michael has been keen on executing a goal-oriented strategy of conscious-clarification, abstraction and clustering despite the diffusive tactics adopted by Victor, among others. Not just pieces of some commentaries, a series of books can be written about the secession with Victor alone [meditatively, contemplatively and literarily, among others], educating about how to handle safety critical services. According to (Argaw 2024), as opposed to alleging and questioning about suspected crime reports made, or legally protected matter, to mis-frame a person ulteriorly, psychiatrists find out and deal with real psychiatric problems, such as if the person is unconscious, violent and psychotic apparently, following clear lines. Nevertheless, the disrespectful interrogation secession with Victor violated customary industry standards time and again. Let alone matters of controlling the mind and destiny of he that controls millions at high-level politically in a value creation sphere of which ontology is predisposed to political, technological, enterprise and institutional, among others, elements, if Michael had always been living a private life and enjoying a perfect relation with entities in the state of Finland, among others, psychiatrists can't act on him unless there is an imperative need.

N: We don't usually make here.

DV: It's there .. procedure

N: If they define that you are okay then you are okay. We don't have the service here .. so, it's between to send you there.

Appendix A9: Meeting with the Alleged Expert, Dr Eeva, and Mika (Nurse), for Advanced Evaluation

22nd of September 2023

Venue: P7

Preamble

The pre-meeting section answers the questions: “Who is the alleged expert checking the real time, conscious, psychotic and violent state of Michael after the conclusion of the preceding observation(evaluation) secession with Dr Victor, who made fallacious diagnoses on the 22nd of September, and then after, swiftly, unethically and belligerently, and what is the conflict of interest between the alleged experts and the safety-critical-service-subject, among others.” While Dr. Eeva professed she is a professional who knows what she is doing, even after getting corrected by Michael logically, according to the interrogation secessions coming up, Linkedin has Eeva as a doctor still in training at the time of the incident. In addition, the Chief doctor who called up Michael based on the recommendation of Eeva knew the professional capacity, or level, among others, of Eeva. Moreover, as discussed earlier, Michael Argaw has a conflict of interest with Tampere university, Mehiläinen and several public, private and non-gov entities in the state of Finland to which Eeva, among others, are related to directly and indirectly: “From business relationship through trade-deal, or gainful-employment, to different instrumentations of direct and indirect control, among others.”

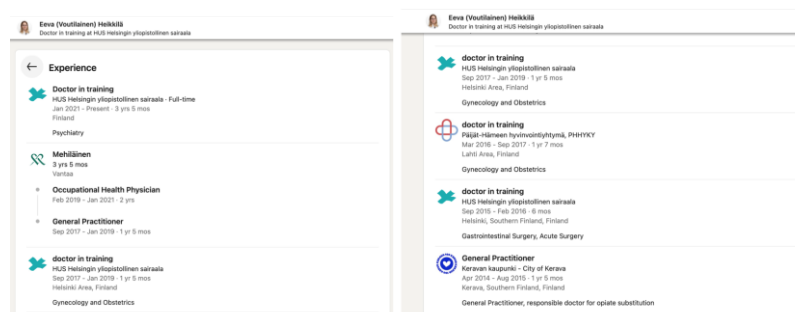


Figure 60. An unconfirmed public profile 1

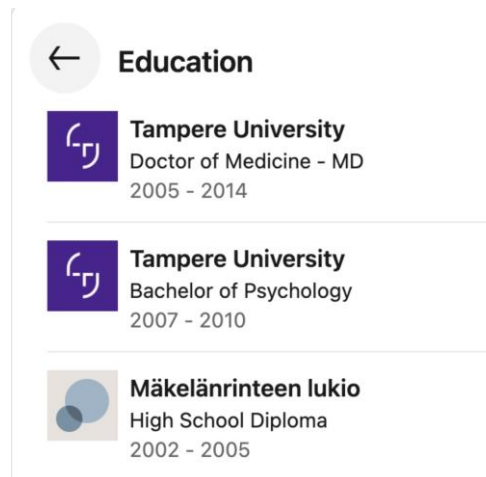


Figure 61. An unconfirmed public profile 2

Seccession introduction

22nd of September 2023 is the day on which the observation phase was closed after a women who claimed to be a chief doctor called up Michael and told him she has decided to get Michael detained and hospitalized for a critical condition of abnormality preposterously based on the recommendation of Dr Eeva who diagnosed Michael with a delusional psychotic disorder resulting from a pathological dieses, or dis-function, of the receptors in the central nervous system preposterously earlier during the day.

- ✚ Michael did not have a one-on-one session with Eeva, psychiatrist, befor.
- ✚ Observe the objective of Eeva's substandard questions analytically.
- ✚ Observe that as opposed to Michael saying stuffs non-stop as an unconscious, or psychotic, or violent, person continuously, it was the psychiatrist initiating interrogation about legally protected matters, such as suspected crime reports, or scientific observations, made by Michael hitherto over which she does not have sufficient information, knowledge and expertise, among others.

- ✚ Observe that though asked, Dr Eva 1) was not mentioning how Michael misinterprets his real-time environment 2) and how and why he misinterprets his environment scientifically evidentially. In addition, she repeatedly failed to answer his legitimate, rational, questions regarding the pretexts, or premises, of her cause-effect construct synthesis, misdiagnosing Michael harshly, among others.
- ✚ Observe Dr Eeva was not only ignoring but also prevaricating on outstanding, imperative, reflections made by Michael who did not demonstrate a pathological, or mental, diseases problem during the conversation.
- ✚ Observe that as opposed to premising on scientific grounds, it is purely based on what seems to her that Dr Eeva would allege Michael has a delusional psychotic disorder resulting from a pathological diseases, or dysfunction, in the receptors of the central nervous system.
- ✚ Despite making a purported to be scientific, tremendously-deceitful, thesis, or a poorly synthesised grounded theory, on Michael that he mis-interprets his real time environment as a result of a pathological diseases which conditions his receptors to mis-interpret reality, among others, due to the unbalanced release of chemicals as she alleges preposterously, observe that the psychiatrist failed to mystify 1) how Michael mis-interprets his real time environment repeatedly, 2) how Michael's receptors mis-interpret the environment and 3), most of all, how she studied the scientific phenomena, among others, in an hour secession. After all, as a substantiation, all she said was, "it seems to me, it seems to me," belligerently, unprofessionally.
- ✚ Let alone disputed safety critical conclusions made by professionals who are not qualified nor impartial to do so, even the hypothesis, or suspicions, made by a well-qualified, experienced and impartial doctor who knows what he/she is saying, and doing, must be 1) premised on realism, 2) delicate, or prudent, or upholding the highest duty of care possible and 3) premised on putting the safety and security of the safety critical subject, Michael, front and centre first. While Eeva can have her opinion, which is premised on her experience, written on the health portal provided it is done

ethically — while Michael can write his experience, or account, of value-destruction publicly, among others — she can not instrument Michael's mind and body with any chemicals unless there is a need.

- ✚ Mika, the nurse, too, was in a hurry to judge and frame Michael as opposed to listening to him and guiding the flow of the secession in the right direction. As a result, his conduct of aiding and abating injustice is deplorable intrinsically.
- ✚ As opposed to investigating real-time symptoms of unconsciousness, violent behaviour and psychosis, if there any, the secession, going above and beyond its normative objectives repeatedly, was marked with arbitration of Michael's legal and political disputes with second and third parties, transcending the value-creation sphere there and then, citing suspected crime reports made to Finnish police hitherto over which they don not have full domain, control and expertise, among others.
- ✚ There is not any doubt the secession, which was an experience of abuse and psychological torture, among others, violated industry specific ethical standards and customary laws, among others, from the start to finish vividly intrinsically.

The secession play

Participants: Michael, Eeva, Mika(nurse)

22nd of Sep

Mika: You suggested that you do not require, or wish an interpreter in Amharic or English. I mean,

Michael: I speak English fluently.

Dr. Eeva: Yes, because you do have the right for an interpreter but you don't feel that you need one.

Michael: I speak English fluently. So, as long as you understand my English... as long as you listen to me and I listen to you; as long as we communicate; as long as both of us are conscious and have a dialogue as opposed to one-way communication, it should be okay.

Commentary

As far as Michael's reply is concerned, Michel does not sound somebody having a pathological problem. In addition, it is apparent Michael is very conscious, non-psychotic, non-violent and normal.

Dr. Eeva: Okay, very good. So, we will start without one and we'll see if we need one.

Dr. Eeva: Okay, Michael. So, do you know where you are now?

Michael: Laughter. Yeah, I'm aware. Tremendously aware. Tremendously conscious.

Dr. Eeva: You're in a psychiatric ward in Helsinki.

Michael: Yes.

Commentary.

It is evident Michael is conscious and aware of his environment. In addition, he is not mis-interpreting the real-time environment. Furthermore, Michael is not violent though he was isolated illegally without any due process. Moreover, Michael is not psychotic. Nor exhibited any behaviour which needed an urgent, or immediate, or intensive, hospitalization torturously.

Dr. Eva: And tell me. I know you've been talking about it for days and days about the same things. But my responsibility is to hear your thoughts and opinions about the last few days. So, you have to repeat yourself a little. I have understood from the texts that you went to the doctor to have your hearing examined.

Commentary.

It looks like the Dr is acting now. Michael had a very limited, goal-oriented, interaction with the nurses: "Greetings for the most part." He did not talk for days and days with any health professional about any topic. As a matter of fact, the secession with Mika and Eeva is presented. An important pose: "Why the need to make up a false story Michael has been talking about something for days and days."

Michael: Okay, should I explain? I mean, you got it, this information, from him or from the previous doctor?

Dr. Eeva: I got it from the texts of our nurse and the doctors that visited me. We have the texts every day.

Commentary

Michael did not talk with any other doctor in the detention ward. Except carrying out one introductory secession with Mika(nurse), or short greetings, or asking brief questions, such as directions, Michael did not have any discussions with the nurses, or doctors, about any topic. Instead, they wanted to talk with Michael about the suspected, white-collar, organized, torture, or abuse, among others, he reported to police, out of context, despite Michael's refusal to discuss on legal matters. As a result, Eeva is making up a false medical premise, or review.

Michael: Yeah, okay. So, in a nutshell, this was what happened. I would go to Mehilainen which is the nearest public health service available to me. And prior to that, I have also made attempts to call them up. So, my main objective was to get to an ear doctor. In 2016, I lost my hearing on the left side. As a result, I had to visit a specialist: an ear specialist. I did my first audiometry in which I lost my hearing. In the second audiometry, I nearly regained everything. But, since 2016, my circumstances have changed. The environment that I am in has changed. I have been exposed to a tremendous amount of nuances or noises. As a result, I wanted to get my hearing tested again.

Commentary

It is evident Michael is not unconscious. Nor psychotic. Nor violent. Most of all, Michael does not portray any abnormal behaviour which needs an urgent detention and hospitalization in an acute psychiatric center against his will and reason. As a result, if the professional objective of the advanced specialist is genuine — verifying and validating if immanent in the real-time state of Michael is, “unconsciousness, and predisposition to a psychotic violence, among others” — he was supposed to be dismissed from the involuntary state of isolation and detention effectively. Again, the conversation is legal as opposed to health(real-time state of feeling, among others,) for the most part, such as what happened in the past. Although Michael was not interested about explaining what he cleared out earlier, he cooperated cordially, non-violently, non-psychotically and consciously, in some cases correcting, clustering and correcting the diffusion.

Dr. Eeva: Okay.

Michael: At first, I called up Mehilainen. And she, the nurse, would tell me, you need to see a psychiatric nurse. And I would tell her that this is a disorder in the

inner ear. But, of course, there are cases where some people go on taking antidepressants if it bothers them and so on. But this is just a disorder in the inner ear. And it happens because you lose some hearing, you lose some hair in the inner ear. I mean, you know the anatomy of the hearing system and all that. I'm not going to tell you. So, I told her, if you can, [because you can see my record that since 2016 I have seen an ear doctor,] streamline me directly to an ear doctor. If not, you can streamline me to a GP who can refer me to an ear doctor, or audiogram. But anyways, she was just, like, intentionally misunderstanding me. I say one thing, she says totally different. And I, according to my active analytic judgement, honestly speaking, in my opinion, firmly believe that it was not because she misunderstood me, she was intentionally misunderstanding me. I guess, I think, she's racist(discriminating me based on my background). This is the first time that I have commented about a nurse or a customer receptionist in Finland. In Finland, the customer service is the best. Number one. It's better than Sweden, it's better than Denmark, it's better than anywhere else. Like, of all customer services in the world, in Finland the customer service is great. Whether you go to a restaurant and stuff. And then comes the other Nordic countries. And this is the first time for me, honestly speaking. I have experience of reviewing a restaurant in the run-up to and so on. So, it was a bit weird for me. But anyways, I also have had this hand fracture, scaphoid. It was casted. And I also saw a GP and then I was transferred to a specialist. And I fully recovered. And a HUS specialist, Dr. Georgis Prides, said: I think I don't want to control it anymore. Because it has recovered nicely. But then he said, in the coming couple of months, you still have a provision to call back in matters of hand and look through it. And I wanted to have a hand massage. And, of course, you go see a physiotherapist close to where you live, right? So I would call Mehilainen. But, the nurse would tell me, "would you like to see a psychiatric nurse?" But, anyways, it isn't because she does not understand English. Because, almost everyone that I spoke to in Finland speaks English fluently. But, anyways, what happened on Tuesday the 19th of Sep? I will get myself to Mehilainen in person. Nobody forced me to get there. It was me, I told you, from the outset, who took the initiative to get myself there. So I would meet a practitioner, a doctor, who

would ask me about my problem statements as a customer. And I would tell her that since 2016, I've had these situations. And I would tell her the things that I have told you which I don't need to repeat. And she would ask me deep questions about the circumstances. And I would tell her. And she would ask me if I am involved in politics. And, I told her "yes, I'm involved in politics."

That I have pages which reach like 70,000, 100,000 people. I carry out, like, Facebook ads. So I take a swipe at. And I have fans and enemies, or haters. And, I sometimes get protection from the state or from different parties in Finland. That's a very different detail. So I'm active. I have games. I have websites. I blog. I make theories. Scientific interpretations and predictions.

Commentary

For instance, intellectual, or political, activities, or interpretations, of Michael over social media which can, or may, not be understood by anybody: "Please, scan through, or scroll down, the English text about Michael's interpretations of why the universal church got divided into two in the 4th century, according to his interpretation of the history of culture, politics, economics and religion, among others of the world(Argaw 2023)." As a matter of fact, there was a disgracefully failed attempt to mobilize western intellectuals researching on theology, philosophy and politics, among others, regarding the thesis of Michael on the potential reason for the division of the universal church and how culture, history, politics and economy, among others, took shape subsequently. Nevertheless, Michael could have packaged his research into masters, or PhD, thesis with both liberal and conservative universities. As a matter of fact, the scholars who introduced humanities to Michael from his childhood, and during his youthhood, are intellectuals(philosophers and theologians) affiliated to the Roman Catholic Church. The first time when Michael presented his oral thesis regarding politico-economics in certain regions after the 4th Century nearly 20 years ago, though his empirical and rational premises were founded on the writings of Pedro Páez, a Spanish Jesuit missionary, there were some who took him for insane.

Nevertheless, Michael — except presenting his synthesis of causality intersecting the accounts of Fr Pedro Páez and the works of Richard Pankhurst, among others, with theological, political, cultural, historical and economical, among others, interpretation of developments then, to present potential empirical and rational explanations — did not make any infallible conclusions.

So, she asked me some personal questions. And I would tell her. Definitely. You won't refuse.

But what happened was that she would literally branch out. If you understand what I mean, she would literally branch out of the facts of the matter. The main reason why I was there was about an ear matter and stuff. But she would just be asking degenerative questions. She would just branch out to different issues and stabilise and rationalise on that. And, at some point, on that branched out stream, she would, for example, ask me about as to what I would do if I get attacked by gangs? And I told her, of course, I will act in self-defence. But that's like after the degeneration of this unnecessary branch out, rationalisation, that she got into for whatever reason, about which I won't even learn until I would review the report that she wrote later. So, what she did not carry out: for example, what an ideal GP does first: "carry out a hearing test."

You understand what I mean?

Use the stuff, the basic stuff, that you have. She hasn't done that. Instead, we had a very fluid conversation. The same way that I have with you, you know. Do you think that in the conversation that I am having with you, do you think I am unconscious? Do you think I'm not aware of what I'm saying?

Dr. Eeva: I think you are aware of what you are saying.

Michael: And you also, like, for example, are aware that there is a person in front of you, right? You're conscious. And I'm conscious that you're in front of me. And

I'm conscious that there is this man who has a beard in front of me. This is what I mean by cognition. Being conscious. Honestly speaking, she would, in the report, write: Michael was unconscious. Michael wasMichael can be a threat. You know.....flying cows. She would write that. And what happened was that at the end of the fluid conversation that I had, there was a drama. Paramedics, police and security guards would come. They would walk into the room and tell me: Michael, let's get to the Jorvi acute psychiatric ward. And I was dumbfounded. I, in any way, or by any means, did not react. Because, this is a false framing. The whole thing, the secession, has been subverted. So, as a conscious, I would report the matter to the police. I would also report the matter to the Data Protection Office of Mehilainen. I would only talk with lawyers. I would only, you know, then politely talk with medical doctors. Ethiopian medical doctors that I know. Medical doctors in Sweden. Medical doctors in the US. I have friends. You understand what I mean? I would only be talking with friends. And of course, they would tell me to make sure that I don't react in any way by any means. So I would go to the ward. And once I get to the ward, they would also be surprised. Why are you here?

The psychiatrist was surprised because of what she had written. He thought I would be an unconscious person. He thought I would be like a violent person or somebody who would be like going out on the hallways and disturbing and wanting to fight with everyone and so on. He was dumbfounded about the report he was reading and the conversation that I had with him.

Commentary

Nevertheless, it does not mean Michael does not have objections, or disagreements, with Victor. It is evident Michael asserted consciousness and non-violence. Nor any episode of psychosis which required remission intrinsically.

Dr. Eeva: So, practically, you're saying that you think that you are here because of a misunderstanding.

Michael: It's, well, you can classify it as a misunderstanding. But she has written a false review. It was just the GP that I met. And then I met with a midwife who also asked me non-functional and, as a matter of fact, irrelevant questions. I don't even understand as to why the MD would direct me to a midwife. It just doesn't make any sense. And the review was written by two medical doctors. And I met only, like one, the practitioner, and then it was this midwife. And both my meetings were conducted one on one. First, one on one with the MD. And second, because the MD directed me, one on one with the midwife. And in the run up to, I have not had any history of being violent. I have not been to any psychiatric ward. I am a person who for very many years advocated for democracy in Ethiopia using nonviolent means intellectually: making games, writing articles and talking to the media, among others, reaching millions(Argaw 2024). So I have a track record of advocating through nonviolent methods of awakening tyrants, awakening citizens to take charge. And look, behold, is an irony for me. It's just, you know, the whole thing is a drama. That's why I'm suspecting this as a setup drama.

Commentary

Please, pay attention to the fact Michael is conscious, non-violent and non-psychotic. As opposed to Michael's real-time state of unconsciousness, predisposition to violence and psychosis, the discussion is about a hearsay and how Eva understood it. As a matter of fact, the discussion is about her contemplation, imagination, interpretation and expression, among others, of what has been written by the referring doctor as opposed to the imagination, contemplation and behaviour of Michael on the real-time as she may know and see him. If Michael had been violent, unconscious and psychotic, among others, there is not any empirical and rational pretext for overriding facts of the present — that Michael, free from pathological diseases, is conscious, non-psychotic, non-violent — with a true, or half-truth, or false, or disputed, among others, past.

Dr. Eeva: Michael, I want to ask some thoughts that you have told me about. I understood from the text that when your hearing diminished, was it 2016 or 2017, you had a feeling that from this moment there has been some kind of abuse or terrorism towards you?

Commentary

By that particular date and time, Michael did not meet Eeva. Nor told her about his experience of torture, among others. Behold, this very secession is the first time he met her. Eeva is neither a psychologist nor a criminologist. Nor a journalist. Whatever Michael reported to Finnish police, such as reports of suspected torture, or ransomware, or manslaughter, among others, made to the police based on tangible and circumstantial elements, or historical data, can not be brought to a secession with a psychiatrist. Dr Eeva — as opposed to clearing Michael out for he is conscious, non-violent and non-psychotic — is attempting to weigh on suspected, complex, crime reports he made hitherto about the details of which she does not have any idea about. Nor Michael imparted to her[willingly]. As a matter of fact, Dr Victor did the same. Dr Eeva is degenerating the conversation by interpreting an environment, or a case, or a legal history, or complex, substantive, legal compounds and mixtures, she does not have any idea about unethically. Whether Michael has evidence or it was delusional a suspected psychotic, dark-triadic, person threw unbelievable, deadly, items on Michael can not be a pretext, or premise, for diagnosis intrinsically(Appendix A2).

Michael: Now, forget about what she has written. Because the thing is this. Even if you take it to the court of law, anybody can come in and say that Michael said this. But that's just that. But, what I'm trying to say is that, look, since 2016, the environment that I'm in has changed. So, if you ask, like you have done experiments, you are a scientist. If I am a subject and if the conditions of the environment, if you think that as variants, like for example, you have now sounds

coming, if let's say you have now planes detouring over your house. So the variants applied to you and then whatever has been controlled will be randomised, isn't it?

Dr. Eeva: eh

Michael: So, for example, all of a sudden, you are here, right? If somebody knocks on the door, you're hearing/sensing an environmental change. That means that you hear somebody knocking on the door, right? So given me living in my apartment, all of a sudden, if the planes that land at the Helsinki-Vantaa airport start passing through my geo-location, I have evidence for it, data based evidence for it, [But that's a different thing.] so my environment has changed. Isn't it?

It would be like I live right next to the airport and that was actually the case. There has also been a neighbour intentionally trying to create problems for me using noises. But, that is framed and presented as a change of environment. So, a police matter is a police matter. But for a medical professional, the matter is that, look, I have had this history of hearing loss and change of environment. And now my environment has changed. I have been exposed to loud noises and so on. So, I need to see an ear doctor.

Dr. Eeva: what I do not understand is how that hearing deficit is connected to aeroplanes?

And how is it connected to the neighbours harassing you?

Commentary:

It is a science that tinnitus gets aggravated with a persistent exposure to loud noises. Now that planes are passing over Michael's vicinity, Michael has been exposed to persistent nuances. It has been a while since Michael carried out an audiometry. As a result, he wanted to check the status of his hearing after a

couple of years. It is legit Michael has a concern over his persistent exposure to loud nuances. Everyone, regardless of an existing condition, will have a concern over any persistent exposure to loud noises, such as nuances of planes. After all, who would want to live right next to where planes touch down and take off persistently? Does Michael need to explain the science about tinnitus to a medical doctor? Has the doctor missed the basic research(if she does not know what tinnitus is) she needed to carry out before meeting Michael? What is the objective of Eeva? After all, what is the pressing problem she is trying to understand, resonate to and solve? How is she going to solve it? What is Mika doing? While this commentary is not a court, a lot can be asked and corrected about the operational conduct of Eeva, among others, on Michael in the value co-creation sphere.

Michael: I think you are now getting carried out. She asked me about like, forget about her, forget about the way how she has honed(framed) the story. I told you that is rubbish. I have already disputed it(the review she has written) to the data protection office of Mehilainen as well as to the police. So, forget it. She asked me about this change of the environment. So I told her how the environment has changed: "Now that planes are moving right atop where I live, I am exposed to loud noises. Now that there has been loud noises coming from my neighbour..." Then, she would ask me detailed questions: "Why is this happening?" But that is really a degeneration. Unnecessary detail here. So it is an unnecessary detail that she went on to stabilize on. Like, there is this big picture, the branch and there are these degenerative questions she asked and stabilised on for whatever reason.

Dr. Eva: Well, I am not asking about her. I am asking about your thoughts.

Commentary

Although he is not obliged to discuss about allegations, or hear-says, Michael, time and again, clarified allegations are not relevant to his pressing need or the verification and validation of his consciousness, non-psycoticness and peacefulness there and now. What is the objective of Eeva in asking questions outside of the justified need for verifying and validating the normality of Michael? What has it got to do with Michael's real-time state of normality? Is it to solve for, or co-create value with, Michael? What is the objective of the value co-creation sphere?

Michael: So, there is no paranoia here. So, for example, my ____ was there yesterday [was looking at Mika when I was making that statement and was referring to the noises coming from the neighbours which both myself and my ____ heard, about which I discussed with Mika befor.] You remember, right? Whatever noise that, for example, I am claiming, which is in what I justify for the changing environment, is a noise that even my ____ has heard. So, it is objective as opposed to subjective. It is not paranoia. It is not a delusional problem. But in any case, the most important thing is that because of this change of environment, I need to carry out what? Audiometry anew. I have to take an audiometry test. I have to see an ear specialist.

Commentary

Let alone a safety-critical one, all services are modelled on the need of the customer. Again, Eeva and Mika are not paying attention to the pressing need of Michael, which is ENT, or audiometry, because he has been exposed to the persistent, high-pitched, nuances of planes detouring through his home vicinity in the run up to."

Dr. Eeva: So, you think that you are over sensitized to loud noises because of the ear?

Michael: Let's put it simply. Because the environment has changed, I wanted to see an ear specialist. That is what I told her. She asked me unnecessary questions about as to what kind of sound and how the environment changed. And then if I went on to do something about it, how I reacted and etc. I told her I reacted by putting on an ear cover. That I reacted by listening to music instead. And then, I would just totally forget.

She asked me if it has bothered me. But, the thing is she asked me unnecessary questions.

For example, are you politically active?

“Yes, I am politically active.”

And I have had this situation where people committed crimes on me.

And I have reported it to the police. But that is still not important.

You can, for example, ask me a question if a crime has happened to me and I will tell you, “yes, this crime has happened to me and I have reported it to the police.”

You may ask me if I have ever been interrogated by the police anywhere in the world and If I have had to defend myself in a court of law.

I would tell you, not at all.

You may ask me if I have used marijuana.

I would tell you not at all.

You may ask me how I drink.

And I would tell you I have about 18 to 20 glasses of wine or beer a year.

You may ask me what my hobby is.

And I would tell you, well, I love reading books. I love writing. And I love blogging.

And I love advocating for democracy. And that's a nonviolent means. And I have never had a fight with anybody in Finland. I don't have a history of violence. So, it's just unbelievable.

Dr. Eeva: I wanted to ask you also about.....you have a laptop here. Did you have some kind of experience that you might be surveillanced or followed through your laptop? Or every time you are on the computer, do you have that kind of experience?

Commentary

Why the need to ask Michael about possessing a laptop? Using devices cannot be a pretext for a clinical hypothesis substantively. Michael would resort to bringing the degenerating out Dr back into the line instead.

Michael: I'm not going to comment about it. It's not a subject of this. The reason why we are here is that a Mehilainen doctor has written a review that Michael is unconscious. That is false. I'm tremendously conscious. You see that I am talking with you. She said Michael could be, among others. I am here to pass through an observation. And you should validate that. There is this hypothesis that she has passed on to you. And, it's up to you to validate that hypothesis. If Michael is unconscious, if Michael is like somebody who you have to meet with a security guard because he's violent. If Michael would be a threat to somebody. So, let's just focus on that. But, that's (the computer thing) a different thing.

Commentary

What Eeva is looking for is not clear.

Mika: You mentioned that you have connections to different parties. Is it because of that that you are suspicious and you want to record....

Commentary

Michael did not mention he has connections to different political parties. Instead, he avoided political parties. And, why the need to interrogate about that?

Michael: But I think that's a different thing. I am politically involved. I blog to different people. So, when you're politically involved, it's a different thing. I think it has nothing to do with that.

Dr. Eeva: Do you feel that? Why do you have your own water?

Michael: Excuse me. I think that's still not important. It's not an important question.

The most important question is that she has said he is violent. She said he is unconscious.

Commentary

As opposed to grounding on the real-time state of unconsciousness, predisposition to violence and psychotic behaviour (if there any there and then), Dr. Eeva keeps on raising and passing judgment as a prosecutor and judge on matters, places and times she hasn't been to as an non-omni-present being, violating her mandate and jurisdiction of value-cocreation intrinsically. For instance, nobody can judge, or frame, Michael for drinking a natural water in anyways, or by any means. Whether having Finnish pie soup, pasta with pesto or Ethiopian style half-lentil stew, among others, from outside, nobody has any professional mandate to judge, or frame, Michael on that. After all, Michael is not expected to trust any party even in a scenario where he has been having a perfect relation with several parties.

Dr. Eeva: Michael, I'm sorry, I'm interrupting. My job here is to survey and make observations and interview you. I only have some information from the past. But, I am making my decisions from the synthesis of that information and what I see here. And what I see here is more important. So, now is your opportunity to explain to me. And my job is to see if there is something that is medically pathological or we have to think about. But it is important that it would be very beneficial that you answer me. Tell me your thoughts and feelings. And I am interested not in the text.

Michael: So, for example, I have been poisoned before. I have this history of being poisoned. And that's like in 2016. The reason why I have been poisoned is because I have been targeted politically. But, I do not really honestly want to get into that. I have this situation where gangs would come to attack me on the streets. And this is factual. I have witnesses. So, this is not paranoia. But, I don't think it should be a topic here. It's not important.

Commentary

As opposed to reading and discussing about my current, real-time, conscious state of predisposition to violence, pathological disorder and psychosis, if there any, Dr. Eeva, transcending her jurisdiction, or physically-bounded-cognition, keeps on digging about my historical, legal, political and social, among others, affairs with other parties over which she does not have sufficient information, knowledge and expertise, among others, if we assume she captured everything communicated to her by others rightly without any discrepancy from what the subject, Michael, is saying intrinsically. Nonetheless, that she has been corrected time and again, she would be responsible for her professional judgment.

Dr. Eeva: So what I'm hearing from this is that because you have been poisoned before, you are being careful now.

Michael: I'm just taking a security measure. And then I also don't trustBecause in the first place, I told you, I did not request for this control: "to be in this control"

It was just, as I told you, disputed. So, if you are in a disputed control, you would wonder why. You understand what I mean? You wonder why she would want to... I mean, why she.. I told you, it's just out of security measures. It is not that I am paranoid. It isn't because, as I said, I am listening to a sound that does not exist. But the most important thing is that I asked to visit an ear specialist. And she asked me the reason why. And I told her about the changing circumstances. And she asked me how the circumstances changed. And I told her. And she asked me "as to why you are hearing this sound" and I told her, well, those sounds are objective. It's also something someone else hears.

And then she asked me, are you politically active?

And, I told her, yes.

And then, has anything happened to you? I told her that.

But then she would literally forget the main thing. And then she would just build on the questions she asked.

Dr. Eeva: I wanted to ask you about that... You feel like you're being followed?

Michael: What do you mean being followed?

Dr. Eeva: Being followed on the street, for example. Or being followed by police or some kind of organization?

Michael: That cannot be a subject of this topic. It cannot be a subject of this topic. Because, if we have to talk about some other things, we have to get into complex issues.

Dr. Eva: You don't want to open that conversation?

Michael: I mean, let's just focus on the fact that she has made this report that Michael is unconscious. Michael might kill somebody. And let's just validate that. Because, whatever outside, it is based on the legal, psychological and social context outside, there and then. And to get to that, we may need witnesses. We may need to look into the crime reports that I made and the witnesses I presented. I think it will totally be, again, degenerated. So, let's focus on the false...

Commentary

Again, Michael would focus on his real-time state there and then as opposed to what Eeva is reading, imagining and interpreting.

Dr. Eeva: You have many times said that the first doctor... said you would be violent and might kill someone else.

Michael: Yeah, exactly.

Dr. Eeva: So, what do you want to say about this? So you don't have any violent thoughts towards people?

Michael: Look, honestly, look at me. She said, he is violent and unconscious. I am a person who has a history of, to date, advocating through nonviolent means, intellectually, to bring democracy to Ethiopia. Advocating against, for example, racism in Police Finland. I don't hate Finnish police officers, you know, but there is racism. And I have been civilized, I have been running Facebook groups, discussion forums. So, I am a person who has a history of advocating non-violently, non-aggressively, for democracy. That's it. And I am a person who has a history of awakening others to be democratic. Awakening others to join my causes. So, I don't have 100,000 sheeps in a couple of pages. I have 100,000 human beings following me. And I awakened them through my contents. And, it's ironic that I would go see a GP for a very determined pre-existing condition. And, she would literally write about this nonviolent person, about this person who has never had any history of violence on to other people, that he is violentabout this very person who has been conscientizing, awakening the conscience of others, that he's unconscious. Bla, bla, blah, blah, blah. It's unbelievable. And I have disputed, reported, it to the police. And that's the situation. So, yes, it's really sad, honestly speaking. It's sad that she has written that. You know what would happen If I am a violent person, you know what would happen? I would be fighting with you. I would attack others, commit a crime and, handcuffed, I will have to be brought befor the magistrate or to you for a check-up. You understand what I mean? If I were a violent person, that's what it means. That's the kind of case that you send to... Look. This is just like a cooking drama, as I said. It's a cooked drama. And it's quite sad. Unbelievable.

Dr. Eva: I don't have many questions anymore. I understood that you have had some experience of some kind of violence or torture towards your body or anatomy. Do I understand correctly that you have had experience of that?

Michael: But that is to be taken care of by an ear doctor. Because it is subjective. It depends on... for example, yesterday I was talking. My _____ and I, we could hear the same sound. But, we reacted differently. We are just dwelling on the degenerative questions you asked.

Commentary

While someone else who does not have any preexisting condition can take it otherwise, Michael's experience of a persistent exposure to nuances of marbles rolling on the floor, among others, coming from the apartment in the building he lived was a defacto exposure to violence and torture both subjectively and objectively intrinsically. It does not matter if the other party said he made different sounds because he has a problem with his left ear sarcastically or genuinely(Appendix A1). Dr. Eeva — who can not and has not experienced what Michael experienced(planned, organized and controlled torture) due to the fact she is not an omni-present being, or because she may not have the pre-existing condition Michael has(tinnitus in the left ear), among others — could not judge him emphatically in a matter even a judge can not make conclusions. Dr. Eeva demonstrated how she did not understand the link between exposure to high-pitched nuances of detouring planes and getting served with sound effects of marbles rolling on the floor, banging mixed with bits and gunshots mixed with wielding and hammering and tinnitus — a position which will make her impermissible for talking about the matter with Michael any further effectively professionally. In the end, Michael's need, getting a referral to an ENT or audiogram, was not materialized, if the objective of the conversation was understanding Michael safety-critical-customer-centrally genuinely. After all, if Michael had been violent when any party committed anything to agitate him deliberately by throwing harmful items or putting on sound effects, among others, it would have been evident. If we assume[theoretically] Michael responded with violence towards the violences and agitations, among others, he experienced, it may still not be a matter which needs psychiatric prescription. The last thing any

medical professional should do when he/she hears about a subject is getting instrumented with variants of agitation or violence, among others, deliberately, such as getting encountered with weird sounds or harmful items, among others(Appendix 1 & 2): “Not ask if the subject was crossed with thoughts of violence reacting to the corresponding agitations, going above and beyond the strategic objectives of the session — establishing whether Michael is conscious, non-violent or psychotic in the real-time.”

Dr. Eeva: I just want to hear your feelings.

Michael: “That’s the degeneration part of it. That is what she intentionally degenerated.

Dr. Eeva: do you have any experience of torture towards your body, or anatomy?

Michael: “I’ve had this experience where somebody would release different kinds of sounds. Marbles rolling on the floor. Bits mixed with hammering, among others. But, this is something that I’ve reported to the police(Appendix A1).

Dr. Eva: Okey

Commentary

Michael has already encapsulated and abstracted his immediate need: “ENT or audiogram.” What is the strategic, or professional, objective of Dr. Eeva? Please, reflect on mapping out her paths and steps carefully.

Michael: “This is something that I’ve reported to the police and I’ve witnesses for that. It isn’t something that I’m making. That’s a different issue. I’ve reported it to the police and it’s a police matter. I’ve witnesses and we can’t really...and yet, for

me that's like a torture. Somebody knowing that you've a hearing loss does something to annoy, agitate, you is violence.

Commentary

Dr Eva is affiliated to entities in the state of Finland having lots of high-level(business, cultural, political, academic and media, among others) disputes with Michael. As opposed to caring about my account, or understanding my account, or the work-ethic to solve my problem customer-centrally, she is challenging what I should have not said, without any consensus on what I had said in the first place(Appendix 1 and 2, among others), premised on that which I have not imparted to her exclusively set in any context and objective intrinsically.

Dr. Eva: okey

Michael: It's like torture. But, it's to be taken care, or has been taken care of, through the police. Through witnesses and so on, among others. I told her because she asked degenerated questions about the changes in the circumstances of the environment I am in since 2016. I told her

Commentary

All Michael is saying is simple: "1) Although it is not optimum for everybody, he has a special allergy to a persistent exposure to loud noises, such as planes flying over his vicinity every minute. 2) Unfortunately, he was exposed to loud noises persistently. As a result, he would like to carry out an audiogram, or get referred to an ENT, like he did before" As a medical doctor and nurse respectively, the least Eeva and Mika were supposed to do effectively was streamlining Michael to an audiogram or ENT not only at this line of the secession, or juncture, but way

earlier. As a result, they neglected the safety-critical need of Michael repeatedly deliberately preposterously, violating their duty of care intrinsically.

Dr. Eeva: ehu

Michael: The most important thing is that I went to see a GP so she would streamline me to an ear doctor.

Dr. Eeva: ehe

Michael: For some reason, she would ask me about the circumstances and if I've ever had thought of hurting somebody. And, I told her that there's only this risk that I, for political reasons, may be attacked. And, she would ask me "what would you do if you get attacked?" and I told her that it's natural that I would act in self-defense. As a country, as a person, though you aren't violent, you would have to defend yourself. Do you understand what I mean?

Dr. Eeva: somebody had attempted to assault you?

Commentary

Again, the objective, or degeneration, of Dr. Eeva — albeit after Michael cleared out his need, among others, time and again, unequivocally — is not clear tactically and strategically.

Michael: For instance, somebody had attempted to assault me by throwing harmful items: screw drivers, bottles, on to me. I've witnesses. If she takes that as a paranoid, that's rubbish(Appendix 2).

Commentary

Suspected crime reports made to Police by Michael hitherto — reports of attempted manslaughter, throwing deadly items at him(Appendix A2), or request for ransomware(Appendix A19A), or the sound-centred-nuances patterns he observed(Appendix A1 and Appendix A5), among others — are complex legal, multidisciplinary, matters transcending her limited experience, information, knowledge and expertise, among others, unequivocally.

Mika: “Did those police report led to court?”

Michael: Even though I’ve witnesses, the case hasn’t gone to court. I’ve been writing against Police. May be they have prejudice about me. They won’t investigate it. It won’t go to court. I also told her about other crimes that occurred on to me. I’ve websites and somebody would blackmail me, asking for ransom...could be somebody from China...police won’t investigate it(Appendix A19A).

Somebody came.....started living right next me.....started making different kinds of sounds..

Mika: “provoking you”

Michael: “Yes, provoking me. To get me into fight”

I’ve a history of being the most non-violent person on the face of the earth in terms of my political record and as to how I reacted even when the police didn’t want to take the matter in their own hand.

Dr. Eva: “Like the neighbour, for example, who is provoking you.. Why they want to provoke you”

Michael: “I don’t want to get into the details. I’m telling you that somebody would come right next me, provoke me and tell me that he’s doing it because he has a problem on his left ear. But, it’s just a sarcasm towards me.

Mika: "How did he know that"

Michael: "I'm surprised. I reported that I've a hearing loss in 2016. I am not going to get in to the details. I've provided witnesses who streamlined it to the police. It can't be solved here. I'm just telling you that I've a history of being non-violent"

Commentary

As opposed to finding out, or establishing permissible cause-effect constructs beyond any reasonable doubt, such as if Michael, on the spur of the moment, or in the real time, mis-interprets his environment as a result of the pathological diseases she alleged, Dr. Eeva, going above and beyond her human limitations and service-journey-line, keeps on interrogating him about the historical, legit, suspected, crime reports he made to police, the scene of which she did not experience in anyways, or by any means, to incorporate a swift and fallacious mis-diagnosis.

Dr. Eeva: you've been to audiometry. Did they discover what caused the hearing loss?

Commentary

Except scientific measurements, audiometry can not establish the empirical and rational explanations for a hearing loss experienced by the safety critical subject. Audiometry deals with measuring hearing for variations in sound intensity, pitch and tonal purity, involving thresholds and differing frequencies, among others. Anyways, she should have known about this.

Michael: That's a very good question

Dr. Eva: "you've been in evaluation for four days. The maximum allowed legally. I'm wondering if you need some hospitalisation. At this point, you seem to have delusional psychosis. You know what that means?"

Michael: Delusion is that you sense what does not exist.

Commentary

In the conversation, it is evident, or apparent, I did not sense anything in-existent in anyways or by any means. Let alone non-omni-present Eeva, even a panel of judges, unless how I would sense my environment in the real-time, with my witnesses, among others, time and again, beyond any reasonable doubt intrinsically, cannot rule my past experiences of torture as delusional fallaciously. One thing clear: Appendix 1 or 2, among others, are not delusional experiences fabricated by a human subject but lived experiences of torture making a false testimony over which is unethical intrinsically.

Dr. Eeva. Hallucination.. That's hallucination.

Dr. Eeva: Delusion is that you might have theories or thoughts that isn't based on reality.

Michael: For example, tell me a concrete one, for example.

Dr. Eeva: For instance, you might have a vast theories of conspiracy

Commentary

I have not [offered] to discuss any conspiracy theory with Eeva. As a matter of fact, everting she brought up and modelled as a conspiracy theory or delusion, among others, is that which she wanted to discuss premised on her misinterpretations, or misappropriations, referring whoever as opposed to what is in the real time. The following premises, if not incorrect, are plausible intrinsically, according to the interpretation of the author: “A) The information she acquired from the referring doctor. B) Eeva’s understanding, imagination, interpretation and application, among others, of A. C) Eeva’s persistent degeneration despite Michael’s correction.

Michael: For example, be concrete, tell me a concrete delusion that you’ve observed.

Dr. Eeva: That I observed from you?

Michael: yes

Dr. Eeva: I do have a feeling that there’s some part is delusional theories of conspiracies. That you’re being intentionally provoked, or followed,

Commentary

When asked strategic questions time and again, Eeva will not tell concrete and proven(beyond any reasonable doubt) delusions she observed in her secession with Michael. As opposed to establishing whether Michael is conscious, psychotic, violent and delusional in the real time, Dr Eeva would interrogate Michael about the historical crime reports he made to Police Finland though he underlined there is not any need for brining that up time and again. She would insist on having a perverted interrogation about the suspected injustices carried

out on Michael despite his strategy of correction(that she does not get degenerated out), clarification and clustering. Then after, indirectly denying, or nullifying, the suspected injustices committed on Michael[as if she is in control as a presiding judge over, or as if she knows what she is interpreting, or as if she has a right to comment and weigh on that in the first place], she would resort to diagnosing Michael, doing away with real-time matters. What happened: “Eeva mis-diagonized Michael for the abuses he experienced befor literally.” It is like somebody punched Mr M in the face several months ago and Mr M will be diagnosed for it back-datingley. Was the objective of asking about Michael’s legal history, though her grounded theory is fallacious and contradictory evidently, to seize the possibility of mis-framing Michael with a pathological dieses, keep him detained and build any form of value-destruction, including manslaughter, among others? Remains to be deciphered subsequently. Whether Michael is predisposed to being a subject of political violence, man-slaughter, mis-framing, witch-hunt, sabotage or undermining, among others, is a legit pose to be weighed by relevant parties objectively. As a result, Police would need to investigate if the subsequent attempted suffocation to death on Michael is pre-meditated? Who meditated it? Why?

Michael: Sorry, intentionally what?

Dr. Eeva: intentionally provoked

Michael: Hey, but that is outside. It isn’t something that happened here. Something that happened elsewhere which I’ve reported to the police which I’ve a witness for. It isn’t delusional if there are other parties witnessing it. It’s a legal matter. A delusion is that given in a controlled environment like this that I hear, or see, what isn’t existential in the natural, or If I would be making a false claim. I think you are wrong to say that.

Dr. Eeva: “you’ve the right to think like that”

Michael: “This is something that I’ve reported to the police. Something that I’ve a witness for. You can’t say it’s delusional”

Dr. Eeva: “My job is to observe in the thought patterns, or in the behaviour, if you have symptoms of psychosis”

Commentary

Except going above and beyond her mandate, and mis-interpreting Michael’s historical legal accounts, Dr. Eeva has not been able to observe his inscribing and circumscribing strategic questions which she refused to answer in the real-time time and again.

Michael: “I’m trying to rationalise what you are ascribing, or citing. The lexicon. For instance, I’ve made a crime report that somebody would throw stuff at me. You can’t, for instance, say that it’s delusional unless you know about the whole story. Unless you’ve read the report. Unless you know about the accounts of witnesses on that regard”

Commentary

Dr. Eeva — though aware her diagnosis is not a result of a real time interpretation of her environment of conversation with Michael but her interpretation and understanding of hearsays she is running in her mind, going above and beyond her mandate, interpreting an environment, or a legal history, she does not have the big picture of — acted as a judge on disputes between two or more parties outside of her knowledge, expertise and domain unprofessionally.

Dr. Eeva: "I want to conclude this meeting. My professional opinion is that there's something to treat. I am not saying that I know everything that happens on your life. I'm observing symptoms of delusional thinking and thought patterns and my professional opinion is that

Michael: "based on what? Based on what the doctor said? "

Mika: "let her finish"

Dr. Eeva.: " Now, what I want to do is make a formal statement. It's a form we call "M2" where I tell my professional opinion that you need a hospital treatment for delusional psychosis at the moment. And, the chief doctor will make the decision today if you need to stay in the hospital.

Commentary

What is she premising her concussion on? What is that which needs to be treated? Delusional psychosis for having had a history of reporting abuses, or crimes, even when I have not offered to discuss about the corresponding reports from the outset exclusively? Observe the preposterous and superstitious fallacy which followed suit.

Michael: "I can just go home. I don't understand as to why I need a treatment"

Dr. Eeva: "Would you like that M2 statement? You will see it today. Would you like it in English or your mother tongue, Amharic"

Michael: "I understand English pretty well"

I asked to be referred to an ear doctor. A false review would be written against me. For some reasons, I'm here. Again, what is this delusional thing you think that I've if you can tell me concretely.

Dr. Eeva: "You don't benefit from me saying it for the second time.

Michael: "I don't have a delusional problem. Somebody, all of a sudden, would tell me that I've a delusional problem, but don't tell me a concrete reason... I've to take medicine and ruin my life... change my bio-chemical permanently.

Dr. Eeva: Your neurotransmitters are over-interpreting the environment because of the imbalance of some transmitters in the brain. The medicine doesn't do anything more. It establishes the medical balance of the neurotransmitters. It doesn't change your personality or thoughts in any way.

Commentary

Fallacy 1: Dr Eva made a conclusion Michael misinterprets his real-time environment. The conclusion is not premised on there and then but based on her misinterpretation of Michael's experience of abuse(Appendix 1 and 2, among others) over which Michael, except cutting short on time and again, did not even offer to discuss exclusively. In addition, she could not replicate her allegations in the real time, there and then, beyond any reasonable doubt, time and again, when asked, if we assume the outstanding matters mentioned in Appendix 1 and 2, among others, are a result of delusional psychosis as opposed to an inhuman experience of injustice and torture, among others, intrinsically, as Michael contended.

Fallacy 2: fallacy atop a fallacy by Eeva: "Your neurotransmitters are over-interpreting the environment because of the imbalance of some transmitters." Eeva did not establish if Michael has the alleged [critical] pathological diseases which gets Michael to interpret his environment incorrectly clearly. Nor she studied the level of balance of Michael's receptors or neurotransmitters. Michael met Victor and Eeva on the 21st and 22nd of Sep 2023 respectively. As a result, Eeva is not justified to make [but she made] a purported to be scientific and

instrumental but fallacious conclusion Michael has a pathological diseases, i.e fallacy 1 and fallacy 2, among others, unethically to enforce a harmful, or torchersom, chemical. Let alone a grounded theory on a human being, you can not make any conclusion regarding a non-safety-critical product, or service, without deciphering the threats to internal and external validities, among others, of what you are concluding, or substantiating, among others, morphologically. As far as the record is concerned, the key research questions have been answered already: "Michael is concisions, non-violent, non-psychotic, non-delusional, not having pathological dieses"

Michael was not misinterpreting his real-time environment. If we assume he did, or he was misinterpreting his real-time environment time and again, say as a result of intoxication, or drug, or chemical attack, in Appendix 1 and 2, the real causes of the mental problem, or the failure of his active analytic judgment, then must be established factually, clearly, logically and scientifically before making fallacies on the top of fallacies as opposed to alleging Michael mis-interpreted his environment regarding Appendix 1 and 2, among others, enforcing a debilitating, weaking and degrading, among others, substance, involuntarily when there wasn't any need apparently.

Fallacy 3: A swift prescription of a medicine which would have not helped Michael if he had the alleged pathological dieses.

Commentary

At this point, it is not even legit to weigh on the experiences of Michael. Because, the entire process has been degenerated wrongly and ulteriorly deliberately.

Michael: "When did this mis-interpretation of the environment by my brain happen?"

If this interpretation is happening now, then you must recommend a treatment. I am not interpreting the environment as it stands. The doctor only asked a historical thing. Something that happened months and months ago. Why do I have to take a medicine for something that happened some time ago. Something which witnesses testified. If my brain is interpreting something that doesn't exist, it should be immanent now. Then, you really need to treat me. All I asked was I wanted to see an ear specialist. And the ear specialist would carry out an audiometry. And she asked me degenerative questions about the changes in the environment since 2016 which might have damaged my hearing. We need to streamline to an ear specialist.

Dr. Eeva: "my recommendation to the chief doctor is that you stay here in the hospital for a while. I recommend medication for psychotic symptoms. We've to conclude now. If he (Michael) can't take the med , then we won't have to get him injected until Monday"

Mika: "I'm concerned about the web cam and the privacy matters of our patients. Do you have a webcam on your laptop. You can use that during the meeting while we store your portal web-cam with your deodorant, water and "

Commentary

It does not matter if Michael, in his room, has a computer with cams. Why are they concerned about the webcam. In addition, please, observe they have not justified how Michael misinterprets his real time environment time and again. Nor even about how he misinterpreted his past, such as Appendix 1 and 2, among others. There are lots of questions[as a matter of fact dozens of books could be written about it line by line, contemplatively, reflectively and meditatively if there need be] regarding the operational mis-conduct of Eeva, Mika and Victor, among others, alone.

Michael: "I'm working on the computer. It doesn't have any security issue for you"

Michael: " Why would I need to take medication?"

Eva: "The medication will help you differentiate between realities and thoughts"

Commentary

Failing to justify how Michael is not capable of distinguishing between realities and thoughts time and again, he was declared he is a patient having delusional psychosis resulting from of a pathological dieses in the receptors which prevents him from distinguishing realities from thoughts as she alleges premised on her subjective interpretations of the suspected crime reports made to the police, without formulating how the medicine she prescribed would help, among others, if we assume Michael has the dieses hypothetically, preposterously.

Michael: "Do you have concrete evidenceany instance which validates that I've this discrepancy between reality and thought? I don't trust this process! You aren't listening to me! I would like to get an Ethiopian doctor to see me instead.

Dr. Eeva: you always have a right to make a formal complaint of your treatment. Our patients have tha

Commentary:

She has already classified Michael as a patient. Nevertheless, Michael keeps on asking a strategic question: "For instance, can you tell me how I am misinterpreting this environment?" Observe that they will not answer to him.

Mika: "We have people who help patients when the chief doctor makes a decision"

Michael: "Once again. Can you tell me as to how I'm mis-interpreting this environment, for example.

Dr.Eeva: I've explained myself enough.

Mika: "We've explained the situations multiple times. We are going in circles."

Commentary

It is clear Mika, the nurse, is aiding and abating the felony: "The intentional, illegal, mis-diagnosis in which [apparently] non-violent, non-psychotic, non-delusional and conscious Michael was disrespected, suppressed and dehumanized as an experimental subject as opposed to an adult human being who can stand for his thoughts, feelings, needs, experiences and values, among others, so far up to disregarding and denying the injustices and tortures, among others, he experienced, when advocating against injustice, incorporating his accounts into pathological diseases(Appendix 1)"

Dr.Eeva: "Now, we have to end the discussion"

Mika: "Yeah, when the chief doctor has made the decision, we will let you know as to what the decision is"

Dr.Eeva: “yes”

Mika: “We will also translate it to your preferred language, or English”

Commentary

Although asked time and again, they will not provide the English translation until months later. Nor they mentioned how Michael misinterprets his real-time environment. Nor did they tell how Michael has a critical problem of distinguishing between realities and thoughts in the real time as a result of a pathological problem or diases in the receptors of his central nervous system. Nor did they mention how they made a scientific conclusion his receptors have the alleged, scientific, pathological problems of imbalances. As he refused to discuss about it with her repeatedly, let alone making any scientific, pathological, diagnosis premised on Michael's suspected crime reports made several months ago preposterously, Eva does not have substantial, or sufficient, ground to even express any opinion about matters outside of the boundary of her jurisdiction or the value co-creation sphere. Because, she has not experienced what Michael experienced if she assume she could experience it all. Nor she knew all he know. Nor she has any idea about the complex relationship he has with other parties. Nor she is a judge to rule on complex cases she does not have any idea about instantly. After all, Eva is not an omni-present being in anyways or by any means. In addition, Dr Eeva was not an expert in the field.

Michael: “In the report, can you write as to how you experienced me misinterpreting the environment. In this meeting, tell me as to how I've misinterpreted the environment”

Commentary

Again, they will not answer Michael's strategic questions: "That Michael faced lots of crimes against humanity in Finland by state, private and non-gov entitles time and again." As a result, if Michael had the alleged problem of unconsciousness, psychosis, pathological diseases and predisposition to violence, the health professionals would have not been an ideal, impartial, party as they are affiliated to different entities with which Michael has not been having a good fellowship, and value-cocreation sphere, among others, with historically.

Mika: "Thank you"

Mika: "you can bring the webcam. It is powered with a battery or

Appendix A9A: Suppression, Abuse and Control of Information by Mehiläinen.

As a result of the psychological abuse and suppression he experienced since his involuntary detention — and because his need for carrying out an audiogram secession was not met — Michael would call up Mehiläinen to get a referral to a psychologist and an audiogram secession. On the 25th of Sep 2023, a nurse by the name Riikonen would tell Michael a referral to a psychologist would be made on the 26th.

Visit 25.9.2023

My Kanta shows the health information about your healthcare visits stored in Kanta services. The information is stored in Kanta services with a delay. If the visit information is not displayed within a reasonable time, you can contact the doctor or unit that treated you.

Timing September 25, 2023
Service unit Bee Oy

Patient report

CARE WORK

OCCUPATIONAL MEDICINE AND OCCUPATIONAL HEALTH CARE

Riikonen, Emma Nurse
 Mehiläinen Oy, Medical Center Mehiläinen Töölö, Helsinki, Mehiläinen Oy
 September 25, 2023

Treatment implementation

Remote contact

Customer calls, inquires about the possibility of speaking with an occupational psychologist. Needs a referral first.

Plan: Let's make an appointment with the occupational health nurse for tomorrow to get a referral.

Figure 62. Riikonen would tell Michael referral would be made on the 26th.

A Mehiläinen nurse by the name Kuittinen, who apparently had difficulty speaking in English, would call up Michael. “ I am in an involuntary detention after health professionals wrote false reviews about me, Michael, as if I am unconscious and under an intensive care, among others. For I am experiencing a psychological abuse, I would like to meet with a psychologist online, or in person, or over the phone. In addition, I would like to get a referral to an audiogram,” Michael would request. Nevertheless, as depicted in Figure 63, Kuittinen would write a false, suppressing, review about Michael. While Michael

expressed his need, or problem statements, clearly, she wrote an outright false review it was difficult for her to understand the immediate need of Michael. If Michael said he needed to talk with a psychologist [to log his account and upend suppression, among others] then she should not prevent him from meeting his need by writing a false review she was not able to understand his need. In addition, Kuittinen would make a false statement, “psychotic features were immanent in Michael,” during his interaction. Nevertheless, Michael — except narrating the points iterated above — was not making any abnormal or psychotic statements. Instead, Kuittinen used the value-creation sphere as a bastion, or defence, against Michael.

Visit 25.9.2023 - 26.9.2023

My Kanta shows the health information about your healthcare visits stored in Kanta services. The information is stored in Kanta services with a delay. If the visit information is not displayed within a reasonable time, you can contact the doctor or unit that treated you.

Timing 25.9.2023 - 26.9.2023
Service unit Bee Oy

Patient report

OCCUPATIONAL MEDICINE AND OCCUPATIONAL HEALTH CARE

Kuittinen, Senni Occupational Health Nurse
 Mehiläinen Oy, Medical Center Mehiläinen Leppävaara, Espoo, Mehiläinen Oy
 September 26, 2023

Treatment implementation

Remote contact

Called the customer. DTA booked a call time, the customer inquired about the possibility of talking to an occupational psychologist.

The customer's language of communication is English. The speech is very fast-paced and fragmented. It is difficult for the employee to understand the employee's need for help. The customer describes the need to book an appointment with an otolaryngologist and an occupational psychologist. At the end of the call, the employee says that he is voluntarily in ward care. Describes the situation that led to this and the discussions between the nursing staff. Dissociative and psychotic features are conveyed in the call.

The customer is told and recommended to book the appointments in question only after he has been discharged from ward care. The customer is told that it is best to make these appointments at the reception and that a visit to a specialist requires a referral from an occupational health doctor. He currently feels that he is not getting help/he is not believed. Therefore, he would like to have a remote appointment with an occupational psychologist. It is recommended to the customer that a referral be made when he has been discharged. It makes no sense to have two care contacts at once and the employee is currently in ward care.

Figure 63. Kuittinen lying she could not understand the need of Michael, among others.

Appendix A10: Observation of a Near Death Experience Due to Suffocation While in the illegal Detention



Figure 64. The social media post Michael carried out, leadership in crises, on the very day he was alleged of having a dangerous pathological problem which needs immediate hospitalization(Appendix A9).

Michael's diary

On the 22nd of Sep 2023, the date on which I was misdiagnosed officially as person having pathological diseases resulting in delusional psychosis falsely and preposterously, before going to bed, I would make sure that the windows of the room I was detained in were closed. Like every room, or house, on earth, I should have been able to inhale and exhale without any problem. Nevertheless, experiencing disturbances in my cardiovascular system due to the lethal airfare pressured into the room(out of the window of which was Adolfo and etc street and school), I would wake up to suffocation couple of hours later. As a result, I would jump out of the bed and open the window slightly immediately. Then after, I was able to inhale and exhale all through the night without any problem. With the windows closed, the room could not provide me with an optimal condition for inhaling and exhaling that after the suffocation, I had to open the window all the time to establish an optimal, thermodynamic, room equilibrium conducive for countering any lethal airfare administration into the room capable of abnormalizing my cardiovascular functioning. "Against my will, under the false pretext of unconsciousness ulteriorly, they put me in an acute room which is controlled thermodynamically. I must keep the window slightly open to prevent anybody from controlling the room air-system, among others," I resolved. As a result, from that moment onwards, I would keep the window open slightly for strategic reason.

Another person would be brought into the room I was in a week after. That I have had an experience of suffocation, I would tell him the window should not be fully closed at night. As a result, he would agree with me. Nonetheless, there was one late night in which he would close the window while I was asleep and leave the room. No surprise I, yet again, would wake up to suffocation or having experienced a discomfort in my cardiovascular system an unusual. Opening the door of the controlled room and looking into the dining room, I could see the boy seating on the couch. Dressed in black, he was doing stuff with his phone. As a

result, the reason why they brought the boy, albeit having examined my pattern of fortifying against total control by leaving the window open a little bit, could be to design a value-distraction sphere — seal the room by closing the window to meet the need for controlling the room fully.

Appendix A11: The Secession on the 26th of September

26th of Sep Meeting with Dr Eeva

Participants: Mika, nurse, Dr Eeva, psychiatrist, Dr. Sebsibe, my visitor and Michael(myself)

Context: That Michael — as a tremendously conscious, non-psychotic, non-violent and non-delusional person — cognized he is in a controlled mis-framing and demolition process, seldom did he interact with the nurses while in detention. His limited interactions, such as saying kittos(thank you) when he left the refectory, or complaining about banging noises in the detention center after 10 PM (Appendix A14), or negative experiences from the enforced mis-treatment (Appendix A12 & Appendix A16, among others) are all well remembered and documented. The author's touchpoints with Dr. Eeva — which happened in couple of group sessions, and the first being the date on which the misdiagnosis was made — are recorded and presented as an appendix.

The statement of Dr Eeva, when asked about her decision to swiftly diagnose Michael with “delusional psychotic disorder resulting from a pathological disfunction, or dieses, of the central nervous system” on Friday the 22nd of Sep.

Eeva: “Our conclusion was that when we met on Friday. Unfortunately, we only met one time. That isn't preferable. I wanted to see you several times. But, our protocol sometimes goes like this. The situation was that I got this feeling of Michael that there was.. I amn't saying that everything ..there was.. I got this..mmm... My English isn't working today. It seems to me that there was partly a delusional interpretation of the environment in his talk. Not everything. What's very clear is that Michael is highly intelligent. And, you've a high capacity. And, you're academic. That's real. It also tells me that you have vast resources of

cognition. You can get to remission. But what I got from the interview and all I got from the report was that there had been some concern of fearful thinking of the environment. And there was..ee.. A tone of paranoid..You came to the ward with your own water and food. Because you were afraid that someone may poison the food and water because you had been poisoned before and you wanted to be careful. You also had some concerns if you were completely safe here. You wanted to film the doorway of your room. You also had suspicion that the nurse might have a camera on him. These are all elements that are familiar to me in a state where there's paranoia..that is delusional. That's my concern. And my interpretation was that without treatment, the state would get worse. This kind of state does need to be treated for it to get better. That's the reason why I recommend hospitalization on Friday and our chief doctor made the decision that you need hospitalization on Friday. And now we're here. You have been cooperating the whole time. But, you haven't taken the medication. I remember you say that it would ruin your life if you take the med.

Commentary

1. Michael did not meet the chief doctor in person. A brief, clear, dramatic video call was arranged. Subsequently, the woman who introduced herself to Michael as a chief doctor would tell him he has delusional psychosis based on the recommendation of Eeva, among others — the superstitious ground for mis-diagnosis by whom carried out by building fallacies on top of another fallacy was deciphered before. What was discussed as an empirical and rational pretext for the quick, superstitious, preposterous and inhuman mis-diagnosis was the legit crime report made by Michael upholding the due process over which Eeva can not make any grounded theory. In addition, the diagnosis was not made based on anything in the real time. Furthermore, unless Michael is controlled in an environment the empirical and rational witness of which he trusts, or approves, even if the

diagnosis would be made premised on real-time matters beyond any reasonable doubt, it will not be permissible ethically, legally and clinically. As far as the diagnosis session on the 22nd of September is concerned — that the first allegation, or mis-framing, that Michael is unconscious, violent and psychotic could not hold any water as a cup for a mis-framing-argument — she went on to make up an allegation Michael has a pathological dieses inducing problems in the receptors swiftly, absurdly and disrespectfully, committing an unequivocal felony effectively.

2. Michael did not express any fear regarding the alarm the nurses put. Instead, Mika, the male nurse, was very concerned about Michael having computers with cams in his private room, among others. As a result, Mika would confiscate one of the[though not so important] external, IoT, camera devices which Michael had. Should Mika, who was concerned about Michael having cams in his private room, get diagnosed for paranoia, or phobia, or delusion, quickly as well? Well, I do not believe so. Nonetheless, it should be questioned, or remains to be seen, if the confiscation was aimed at under-equipping Michael's legal defence presumptively.

3. You don not make a judgement, or diagnosis, to apply chemicals on a human being based on your feelings, or assumptions, or mis-interpretations(as it was immanent evidently on the 22nd), of the crime reports made by the subject transcending your professional jurisdiction of value-creation but based on acceptable, normative and objective scientific processes and research methodologies, validating the hypothesises in the real-time time and again, upholding industry specific standards intrinsically. When asked a key, strategic, question iterating she can not interpret my historical crime reports to police, Appendix 1 and 2, among others — about which let alone providing any exclusive information, I did

not offer to discuss, as far as my conversation on the 22nd is concerned — and tell me, “you have a pathological dieses [now] which needs to be treated,” please, observe she said, “it seems to me... it seems to me,” unethically and unprofessionally.

4. Please, observe Dr Eeva is not willing to answer the questions which she refused to answer before: “The reason for the mis-diagnosis of Michael as somebody having a critical pathological dieses in the central nervous system which needs an intensive observation and treatment, among others.” That Michael uses a bottled water brought from outside, or that Michael has a cam in his computer, or room, can not be a pretext for concluding Michale has a pathological dieses which needs to be treated effectively intrinsically.
5. Not just in clinical matters, even in common safety critical research, you have to rule out other factors before you make a conclusion for a diagnosis. Michael met Eeva once and a swift decision was made based on a fallacy. Was it a dark-green-pasture-strategy for those who would like to demolish Michael orthogonally exponentially? It remains to be investigated. One thing clear: “The misdiagnosis was desperate as opposed to resonating to the need of Michael in the real time — referral to an ENT, or audiogram, regarding an existing condition.”
6. Get to remission to what? Michael was, and is, very conscious though she infers Michael has yet got to get into remission or a normal state. Meaning, for her, Michael was not conscious, and that he needed to get into remission, when he was refuting her cause-effect constructs, predicates, premises and grounded theories, among others, upfront on the 22nd?

7. If Michael has a safety concern regarding the illegal detention center for general (because of his legitimate historical life experience and political fights in Finland) and specific (for what happened to him in the run up to, including receiving a nazi salute, among others, along his subjected, unconsented, customer journey: "From Espoo Keskus through Jorvi to P7") reasons, it is perfectly normal. If he did not sign a contract, or does not agree to a harm-centric and disrespectful process, or if he does not trust Finnish institutions(it does not matter whether or there is a legit precedent), then he can do so by deploying any form of passive activism, such as sticking in his room. Then again, unless Michael is violent, such as posing a threat to others, or himself, there is not any pretext for interrogating Michael by force, gaining(planting) access to his body and administering liquid chemicals which deteriorated his normal state of condition. As a result, Michael should have been released immediately.

8. Given what happened to him at Jorvi [victor mis-directing, or degenerating out, the conversation despite Michael's conscious, strategic, non-violent and non-psychotic strategy of abstraction, clustering and pipelining of the diffusion], and yet again, in Tölo, where Dr Eeva was keen on subverting the conversation unethically, it should not be framed as delusional if Michael takes extra care or object anything[whether or] uncatagorically. When you make a decision about a person, it should be based on the holistic settings and context of the person. The Dr acted as if she knows Michael very well. She acted as if she knows, and has experienced, everything Michael went through though she was corrected time and again. In addition, interpreting on, commenting about and judging crime reports she never experienced, Eeva acted as if she is an omni-present being available at the scene of the reports made by Michael which in philosophy of mind is a very dangerous behavioural act of personifying an

omni-present character. All theologians and philosophers in monotheism(Judaism, Christianity and Islam), such as St Thomas Aquinas, Karl Rahner, Billy Graham, Jesus Christ, Prophet Mohamod, Moses and Abraham, among others, never contended a human being has an omni-present capability. Nevertheless, Eeva acted as an all knowing and omni-present being when she made her mis-diagnosis based on Michael's legit legal history of crime reports made to the police.

9. Is it legitimate to have a safety concern based on existentialism? Yes, it all depends on Michael's experience which is evident unequivocally. As a matter of fact, Michael can have a history of having perfect experiences the likes of which like never seen before all the time in the state of Finland and, still, pose and act with a safety concern. Forget about Eeva, which super-power, or supreme court, or multi-lateral institution, among others, has the right to tell what, and who, Michael should trust that nothing wrong will happen, or will be lost interacting with, in anyways, or by any means, intrinsically subsequently?

Michael: "listen to me. As I told you. I've been poisoned before and, also, I was brought here involuntarily, without my expressed consent. Lots of crimes have happened to me. Me taking security measures isn't paranoid."

Mika: how many crimes

Michael: I can't mention it here. But, the thing is that

Dr Sebsibe.. ehh

Michael: Several crimes ...have happened to me.

Mika: what kind of crimes

Michael: For example, when I was walking on the street, somebody would throw harmful items on me: “glasses and screw drivers, among others”

Commentary

Even at Jorvi, somebody would attempt to bump and fight with me out of the blue. As anything, with persons, people and chemical, among others, can be built on me, it is essential, or super-normal, that I care. For instance, on my connecting flight back to Helsinki from US aboard Icelandic air in 2024, I was attacked with a biowarfare [which resulted in coughing, headache, weakness and running nose for couple of weeks] after taking soda on board. I have been attacked with spray agents multiple times.

Mika: How many time has this happened

Eeva : thrown at you

Michael: thrown at me

Michael: I’ve been abused by employers. They have written false stories against me.

Michael: There was also a time when 4 guys would come with a knife on the streets.

Mika: when you came to the ward you had your own water. You also wanted to keep your door locked. Is it because of what security concerns?”

Commentary

What if a mental patient would open the door, run into the room and do something while Michael is sleeping. Why should not Michael lock a door next to a dining room where folks and knives, among others, are accessible? As a matter of fact, Michael does not need to mention any negative experience since the 19th of Sep 2023, or hitherto, among other precedents. Michael is not a subject, or animal, or property, of the state of Finland. But, a sovereign human being with his own judgment, ID and super-go, among others, formed by his legit personal experiences, among others, about which Eeva, among others, are intellectually, culturally, professionally and experientially, among others, bounded to understand exactly. That Michael brought a bottled water with him, can not be a pretext for framing him as a person who has delusional psychosis due to a pathological diseases either.

Michael: I think you are over analysing it. Look. The context that I'm here wasn't clear in the first place. If you have had this experience, you would always want to take precautions. You just want to know the environment.

Dr. Sebsibe: Can I say.. You don't believe that you belong here.

Michael: Exactly.

Dr. Sebsibe: the process you went through, you don't believe in it. What the doctor suspects for you, you don't believe in it.

Michael: yeah

Dr Sebsibe: when you suspect the conclusion the doctor made, so you start suspecting everything around it.

Michael: Exactly. exactly.

Dr Sebsibe: You don't believe that you belong here and you suspect the whole environment.

Michael: "Not the whole environment. I've eaten. I've drank. It isn't against you honestly speaking. It's like... If you look at the circumstances with which I went to Jorvi, it's heartbreaking and that's why I'm seeing a psychotherapy for. She (the general practitioner) has literally written a false review: "He's violent, unconscious"

Commentary

The circumstance with which I was directed to Jorvi: "I received a nazi salute. While I was conscious, non-violent and non-psychotic, police and paramedics, as conscious beings, did not bother to verify whether or I was conscious, non-violent and non-psychotic circumstantially. While tangible facts of unconsciousness, violent behaviour and psychosis can justify a doctor to contact police, unless police can justify a real-time immanence, presence and evidence of [predisposition to] violence, [lingering] unconsciousness and [that-which-need-to-be-isolated] psychotic behaviour which needs to be contained urgently, police can not aide and abate in isolating a person in a psychiatric-ward involuntarily. Police can not use unjustified circumstantial evidences even when the subject does not have any conflict of interest with the police intrinsically.

"It's false!"

"Even in Jorvi, the people were saying 'Michael, you're very conscious.

“It was totally based on false stuff”

Dr. Eeva: “ We have only 15 minutes and we haven’t started the most important conversation.”

In this situation. When we talk about psychotic disorders, psychotic symptoms, it’s never black and white. It isn’t like here everything is realistically complete. It’s this line. Sometimes, when you have a series of bad luck and bad things happening to you. People bullying you or abusing you, you may start to interpret the environment that way. I’m just saying what I’m seeing. My professional interpretation is that you took bad experiences, or trauma, mistrust with your environment.. Some of your realities have to the delusional state... it isn’t something that defines you but something that I think you need help with...you would be happier, if you get help with. You would be more trusting and more secure. Your everyday life would be easier when you can make a healthy question of is this realistic. You would benefit from a small dose of antipsychotic medicine. It doesn’t change your personality. I’ve a situation that it doesn’t mix your metabolism. It doesn’t make you gain weight. It doesn’t make you tired. It just makes that if you have psychotic symptoms, it helps with them. If you don’t have psychotic symptoms, it doesn’t do anything. You try it for a couple of months, then you stop with it. That’s my suggestion.

also getting close to an agreement with you. You take this medicine for a couple of months and then go to polyclinic as outpatient... this is your way of getting out of here..

Commentary

Michael’s interactions are all documented, according to which it is evident Mika, the nurse, and Eeva, the doctor, acted based on the historical crime reports he made to the police(Appendix 1 and 2, among others) though Michael did not make any exclusive disclosure nor offered to discuss about it to them. Everything

Michael discussed with Eeva, among others, was in reaction to their version of mis-quotation, mis-appropriation, understanding and interpretation, among others, of hear says[despite Michael's correction] in which, as a conscious, non-violent, non-psychotic and non-delusional person, Michael executed an unequivocal strategy of clarification, correction, abstraction and clustering patiently, preventing the medical professionals from getting carried away, or degenerating out into complex, experiential, legal spheres they don not know time and again. As a result, what happened through the mis-diagnosis is that those who made the mis-diagnoses assumed an omni-present role of knowing and experiencing what Michael experienced by the time when he made a suspected crime report to the Police. In addition, they made false statements, or fallacies, against Michael, citing false hearsays about what they allege Michael said through their bounded, one-sided, interpretation and understanding, among others. Furthermore, violating the basic principles of any scientific research on a safety-critical, super-conscious, non-violent and non-psychotic human person[as opposed to a laboratory rat], they disregarded his anti-degeneration-strategy of clarifications, corrections and clustering time and again — a burden, or act, or iteration, which Michael was not required to carry out more than once. As a result, as a matter of principle, it is quite unacceptable intrinsically making a false case, or grounded-theory, on a safety critical human being [regarding his relation, among others] quickly 1) in a political, social and cultural, among others, settings which the party has negative historical relationship with different entities, 2) acting as an independent, omni-present, evaluator, or all-knowing, and present, expert regarding Michael's experiences, 3) without consent, or contract, with the subject, among others, 3) disregarding his repeated corrections and clarifications, among others, intentionally.

Michael: still you aren't making any statement about the false review that has been written.

That means that she said he is delusional based on false stuffs

If I'm taken to the ward in that context, me not trusting the environment at first isn't delusional. I'm sorry, let's first focus on the fact that in Mehilainen a false review was written on me. Let's analyse that. Let's analyse that if that's true or not.

Commentary

As a matter of fact, Victor could not establish if Michael was unconscious, violent, psychotic and delusional, among others that could be made there and then — a real-time proof of burden incumbent up on Victor and Eva, among others, as opposed to Michael who was conscious, non-violent, non-psychotic and non-delusional apparently and evidently unequivocally.

Eva: But, Michael. I'm a doctor, I've made my decision or recommendation on Friday. I've done it based on my own review of the situation. My own interview with you. My own reviews of all the days you were at the hospital. How you interacted with the nurses. How you interacted with the doctors. I didn't make this decision based on one document.

Commentary

Except with Eeva, which is recorded above, Michael did not interact with other doctors at Tölö by then. As a result, the fallacious pretext used for the misdiagnosis has been deciphered unequivocally. In addition, please, observe they changed the whole framing or problem: "That Michael is eating food from the illegal detention/isolation center seldom, it was considered one of the fallacious reasons to diagnose him." In addition, Mika made an allegation Michael doubted his security camera when it was him who was bothered about Michael having a

computer with a security camera in his private room. Moreover — contrary to what Michael demonstrated unequivocally: “That he was non-psychotic, non-violent and conscious(not needing to get into remission to be fully conscious) and non-delusional — they went on to allege Michael has a psychotic disorder resulting from a pathological diseases of the nervous system just like that deliberately. Furthermore, Michael had very limited, and goal oriented, interactions with the nurses: “Hi and etc”. If eating a vegetarian food, salad, brought from outside is a matter of security for him, or if he does not trust and accept being in a torchering environment, then it is not a psychotic disorder[that must be treated effectively]. Making a misdiagnosis someone has a psychotic disorder resulting from pathological diseases of the receptors because their incorporation of Michael’s crime report(Appendix 1 and 2) was neither permissible nor sustainable, is quite a big generalisation, or grounded-theory-centered-thesis, or conclusion, among others, normatively. Administering psychoactive chemicals by force based on any mis-guided pretext, or when there was not any need evidently, is a crime against humanity.

Me bringing water....me bringing vegetarian food .. doesn’t make me psychotic.

You can’t just come and tell me “if you don’t trust me, you are psychotic”

In the first place, the context with which I was brought here is inappropriate. That’s what we need to fix first. Imagine somebody falsely writing, “he’s violent, unconscious...” and you are taken somewhere involuntarily...of course...you should be questioning everything. This is right and proper.. Questioning as to why I got referred to the mental ward is right.

Commentary

- 1) The circumstance with which I was directed to Jorvi: “I received a nazi salute. While I was conscious, non-violent and non-psychotic, police and paramedics, as conscious beings, did not bother to verify whether or I was conscious, non-violent and non-psychotic circumstantially. While tangible facts of unconsciousness, violent-behaviour and psychosis can justify a doctor to contact police, unless police can justify a real-time immanence, presence and evidence of [predisposition to] violence, [lingering] unconsciousness and [that-which-need-to-be-isolated] psychotic danger which needs to be contained urgently, police can not aide and abate in isolating a person in a psychiatric ward involuntarily. Police can not use unjustified circumstantial evidences even when the subject does not have any conflict of interest with the police, among others, directly and indirectly intrinsically. 2) Heidi and Outi denied Michael was conscious, non-violent and non-psychotic when it was evident Michael was conscious, non-violent and non-psychotic.
- 3) Victor could not establish if Michael was unconscious, violent, psychotic and delusional, among others which could be made there and then when it was a matter and ontology which was proved time and again unequivocally — a real-time proof of burden without any reasonable doubt time and again incumbent up on Victor and Eva, among others, as well, as opposed to Michael who was conscious, non-violent, non-psychotic and non-delusional apparently and evidently unequivocally.
- 4) Mika, the nurse, and Eeva, the doctor, acted based on the historical crime reports Michael made to the police(Appendix 1 and 2, among others) though he did not make any exclusive disclosure nor offered to discuss about it to them. Everything Michael discussed with Eeva, among others, was in reaction to their version of mis-quotation, mis-appropriation, mis-

understanding and mis-interpretation, among others, of hear says in which, as a conscious, non-violent, non-psychotic and non-delusional person, Michael executed an unequivocal strategy of clarification, correction, abstraction and clustering patiently, preventing the medical professionals from getting carried away, or degenerating out into complex, experiential, legal spheres they don not know time and again. As a result, what happened through the mis-diagnosis is that those who made the mis-diagnoses assumed an omni-present role of knowing and experiencing what Michael experienced by the time when he made a crime report to the Police(Appendix 1 and 2). In addition, citing false hear says about what they allege Michael said through their bounded, one-sided, interpretation and understanding, among others, they made false statements, or fallacies, against Michael. Furthermore, violating the basic principles of any scientific research on a safety-critical, super-conscious, non-violent and non-psychotic human person[as opposed to a laboratory rat], they disregarded his repeated, anti-degeneration-strategy, of clarifications, corrections and clustering time and again — a burden, or act, or iteration, which Michael was not required to carry out even once.

Dr. Eeva: “you believe that we are here trying to help you?”

Michael: “Because, you aren’t listening to me”

Dr Eeva: “Do you think we are here to help you”

Michael: “The reason I was directed to a psychic ward must be questioned. She has written a false review. We have to question that”

Dr intervened.

Michael: "You aren’t listening to me intentionally”

“It has to be two ways. If you, honestly, are trying to help me, then you have to listen to me”

“Tell me as to why anybody would write Michael is unconscious when I’m conscious, violent when I amn’t. It’s just unbelievable”

Commentary

Let us forget about analysing bogus allegations. Imagine Michael having had a bad (violent) behaviour of attacking others, or throwing harmful items on the streets, for several years, until weeks, or days, or hours, ago befor as a result of a proven, dangerous, pathological problem or dieses, if he does not have it in the real-time, his violent acts in the past will not get him diagnosed with a disorder today. Because, decision is made based on present. You get diagnosed for a real time condition, or matter, the hypothesis for which can be proven time and again beyond any reasonable doubt by an objective, trusted, partner. Anybody with a right mind can see that the entire process, or conduct, or grounded-theory-centered-safety-critical-thesis which Eeva and Victor made on Michael was unethical intrinsically.

Dr. Sebsibe: “is it possible to read what she wrote?”

Dr. Eeva: “We have now 10 minutes”

Michael: “Yeah, we have to read it”

Commentary

Dr. Eeva was reluctant to answer, or make time for explaining about, her unethical rush to mis-diagnosis. Although invited, she deployed an avoiding pattern

towards reading and analysing the reports and the corresponding mis-diagnosis. As it was evident in this Appendix, Eeva went on to mention different premises which weren't brought up on Friday, 22nd of Sep, 2023.

I'm politically active. Nobody can tell me that you aren't politically active, you don't have enemies, among others.

Mika: Who are your enemies

Michael: Those who I criticise

It can't be analysed in a psychological context but a political and social context.

Those I write and blog against..... Because of that I'm in a different situation. If you aren't one, then you mayn't understand.

Commentary

No comment. The conversation explains it all.

Appendix A12: Example of Reports of Unattended harms

October 4

Michael: Can I ask you a question?

Nurse: Yeah.

Michael: I've taken the shat (of the medicine) today and I have encountered some experiences.

Commentary

When he was in the detention ward, they would put a liquid substance in a cup and give it to him. The chemical he was administered with tested differently in different days — an important note to make. In addition, it showed different reactions, or results, when applied to his body, harming(or altering) him negatively differently. As a result, it is evident he was receiving different mixtures of chemicals testing and impacting differently effectively. Sometimes, he felt lots of pain in his stomach. Another, with his stomach pain inexistent(or recessive), the reaction of his leg(pain and hot etc) to the chemical would exacerbate, among others.

Nurse: Yeah.

Michael: Number one. It doesn't taste sweet. Nor...eh

Nurse: Yeah, it hasn't been...it's hard to describe the test. It isn't sweet and not sour.

Michael: Number two. The texture of my mouth changes immediately after the med.

Commentary

It seems the nurse does not understand the term texture — a measure of roughness or smoothness. As a result, Michael would explain it to her.

Michael: texture is like the measure of the [change in] roughness, or smoothness, among others.

Nurse: It is most likely not because of the medicine but something you ate. Because, this isn't something listed as the effect of the medicine.

Michael: I haven't eaten anything that I haven't eaten before.

Nurse: This has been there longer time or

Michael: This is quite an isolated incident. I've observed this phenomenon through controlled observations. And, I am categorising whatever you call, abilify, as a treatment variant and my mouth as an ecosystem on which the variant is applied. Another thing: I feel some pains here: left and right side of my stomach. If the texture of my mouth changes, gets rough, or looks like it has been cracked, then it can also damage my internal system, liver and intestine, among others, easily.

Nurse: This isn't something I heard.

Michael: So, I would like to get the picture of my mouth, which shows changes in texture, taken. It's important for me.

Nurse: I will write it up and will ask the doctor to look at it tomorrow.

Commentary

Neglection: "Nobody bothered to check on that. Nor had it recorded on OmaKanta subsequently."

Michael: Is it possible to handle it here? I've a phone light and we can take the picture.

Nurse: We can tomorrow.

Michael: Isn't it better to do it now because I've just taken the medicine.

Nurse: I don't see the reason we need to take it now. We follow the situation and the doctor.

Michael: Now is the best time before it changes. The thing is that this thing that happened is that which wasn't supposed to happen.

Nurse: The doctor will look at it tomorrow. And, I will write it up.

Michael: Yeah. Thanks

Commentary

Neglection. Again, nothing happened in the following day. Behold, which violates their oath, profession and industry specific standards, among others, should haven't happen in any safety critical value co-creation sphere intrinsically.

Appendix A13: Another Meeting Where Michael's Physical Symptoms— and Experience of Torture — Will be Disregarded

12th October

Participants: Michael, Eeva, Heidi(nurse)

1. Michael would list some of the negative symptoms he experienced after receiving the forced, alleged, torchersome, liquid medication(chemical) he was administered in the detention ward. For instance, Appendix A12, among others.
2. Michael would request a psychologist who could document the abuse he experienced from the start of his involuntary detention. Because, it is evident Michael has been a subject of torture unequivocally.
3. Iterating he does not have the alleged, fabricated, pathological problem/dieses (Appendix 1 and 2, among others), Michael would ask why he was diagnosed, and subjected with, a delusional psychotic disorder resulting from a pathological problem/dieses as Dr Eeva and the Chief Doctor(the women who made a quick mis-diagnosis based on the alleged recommendation of Eeva) alleged. Nevertheless, Dr. Eva will not address his outstanding issues directly. In addition, his report of physical symptoms, or harms, such as problem in his stomach(which has stopped now) resulting from the debilitating, undermining, torcherome liquid chemical he was administered with will not be recorded on OmaKanta(the health register system) nor get considered as an outstanding agenda despite Michael's prompt notification.

The secession

Dr. Eva: You need an anti-psychotic medicine for the mis-interpretation of reality.

Michael: Which reality?

Dr. Eva: My professional opinion is that you have a tendency to be suspicious about things. Suspicious about different things in life. If someone talks with you, or if someone passes by on the street. Look at you.

Commentary

Again, the Dr is making false statements. It remains to be investigated by Police if it is aimed at defending Appendix A1, A2 and A6, among others, transcending her place, time and context bounded jurisdiction. One thing clear: "She brought another allegation."

Michael: Have I said...Have I told you ?

Dr. Eva: Let me finish.

Michael: You're only making up a statement here. I haven't told you that I'm suspicious.

Dr. Eva: I'm telling you my professional opinion and then you can tell me about your opinion. It's very important that you hear it.

Michael: I'm all ears

Dr. Eva: My interpretation is that you've a tendency to interpret your environment in a manner that can be seen as paranoid.

Michael: Okey

Dr. Eva: When you come here, you have suspicion that you aren't safe or you're being filmed, or people are wanting to do bad things to you because of your political activity. I am not saying you are doing all these things on the internet and anything can't happen on the internet. I'm just saying that when there's a spectrum of .. when you see the reality, it's a spectrum. Sometimes when you see someone on the street, I don't know that guy why is he looking at me. I do this all the time. People do this. When your neurotransmitters aren't in balance.

Commentary:

Michael did not say anything about somebody looking at him. Nor did he say anything about "fear" in the illegal detention ward. Eeva would make up an allegation, or statement, superstitiously, and, when caught and reprehended outright, would claim it is an example, constantly changing the corresponding pretext for the misdiagnosis. On the 22nd of Sep 2023, Michael, consciously, would ask tangible, implausible, questions regarding her diagnosis beyond any reasonable doubts. Nevertheless, she would not mention anything tangible, implausible, as a pretext. Nor stabilise on the very premises of the official misdiagnosis.

Michael: I understand your science. You're right. If the neurotransmitters bla bla that will happen.. But, I, in anyways, or by any means, since I met you [I met you a couple of times] have never, ever, told you I feel suspicious that this person is going to harm me. All I said is that, if you've listened to me, in my left ear, I have a disorder in the inner ear. It's called tinnitus. It has nothing to do with somebody following me, or damaging me. I don't know where you get this from... I haven't said that .. I haven't talked about that. You just made that statement. And, based on that statement, you diagnosed me. That was what happened.

Dr. Eva: I just want to make this clear to you one time. I was just making a general example.

Michael: Give me a concrete example. You're making a diagnosis. And diagnosis should be...

Dr. Eva: I get a report about everything every morning. Nurses tell me what's going on with my patients. Is this a news to you. I've been treating you for three weeks. I know what you have been doing?

Commentary: Rarely did Michael talk with the nurses. He remembers with who and what he talked about: "For instance, requesting the English translation of the receipt of the mis-diagnosis, complaining about persistent banging sounds happening past midnight and enumerating the side effects, or torturesome experiences, regarding the chemicals he was subjected to, among others." Michael has always been careful and reserved based on his personal, justified, legal and healthy rationalizations.

Michael: can you tell me a concrete thing .. honestly..... you did like this... like that...

Dr. Eva: I will tell you now. I was coming to it. On this reports, I've heard about the things you said. What you talk about. For example, you had a suspicion that Facebook may try to do something to you. Do you know what I mean... you've been suspicious that some women tried to connect with you with some motives... do you remember about this discussion....

Michael: I haven't discussed this with you. But, it's a fact that some women would go out live on Facebook, stream live and insult me and I've a document ... at some point .. I'm going to take this to court... this isn't a suspicion.. it's a fact!

Commentary

The nurses would tell Michael he can use the psychologists available. Michael would tell one of the nurses he has been abused by Meta platforms and some users of the technology, among others. As a result, he would like to document his account of abuse with a psychologist. As a matter of fact, Michael met the aforementioned nurse weeks after the day of the mis-diagnosis. Again, Michael is asking a strategic question: "Clarification regarding the misdiagnosis executed on him on the 22nd of Sep 2023 quickly." As a result, there is not any pretext for diagnosing him [if, let us say, what Dr. Eeva was attributing as an example was true regarding his conversation with Hanna, the aforementioned nurse] prescriptively, weeks in advance, on the 22nd of Sep 2023, before his meeting. As result, the psychiatrist is lying again.

Dr. Eeva: Insult you. I thought it.

Michael: It's a fact. They insulted me. Like, for example, insulting Eeva, or Heidi, isn't it legal? I've been in this kind of, this situation, and, in fact, one of them has been arrested.

Dr. Eeva: okay

Michael: I don't think it's because of me. She also insulted another person..... I've evidence for that. I even have a video on that. Let alone being suspicious, even when they attacked me, I've been pacifist. I've always been pacifist. I try to rationalise. May be they are mis-communicating with you. Somebody had to cut his leg because of mis-diagnoses. The problem that I've on my left ear is tinnitus. I've been having it since 2016. And, it's a disorder in the inner ear. It has its own amenities. One is that I shouldn't be stressed. I should avoid frequenting extremely loud environments, among others. I've managed to live with it. I amn't a person who, because of tinnitus, thinks, "this person is going to attack me. that person is going to attack me, and that person is talking bad behind me,"...not at all..

If I do, I would have told you about it.. with my own words.

Hey... I've had lots of cases of abuses ... insults on Facebook..which I can bring to psychologists

Psychologists here..... I heard it's ____.

Dr. Eeva: it's ____

Michael: I heard it's usually _____ if you would like to get it.

DR. Eeva: Very _____.

Michael: Even _____.. Honestly,... If you would allow me, I can use the psychologist ...services.

Dr. Eeva and Heidi: yes Michael: It isn't that I've something against you.

Appendix A14: Persistent Banging Sound Happening in The Illegal Detention Ward

Persistent banging, or maintenance, sound heard in the ward past 10PM. Subsequently, Michael would report the incident to the nurse who would tell him, “go back to bed, go back, ” harshly, showing a nazi salute, according to Michael’s conscious memory of the night.

Time: 2 : 25 PM

Date 7/10/2023

Immediately after Michael left his room, he would be in the dining room where he will bump in to a nurse lying on the couch

Michael: I’m hearing this banging sound

The nurse: I heard that. It isn’t coming from our department.

Michael: You’re hearing some banging sound.

Nurse: Yes, I hear.

Michael: Usually there’s this silence time when you don’t do maintenance.

Nurse: Go, sleep now. No problem. I know that. I heard.

Michael: Is it possible to observe silence after 10PM?

Nurse: No problem, go to sleep now. Close the lights.

Commentary

Michael is telling the nurse there is a problem: “Persistent, high-pitched, nuances of banging past midnight.” But, the nurse was keen on addressing it otherwise abusively_____

Appendix A15: Observation of Recurrent and Disappeared Symptoms, or Harms, as Reported in Late 2023.

Michael's diary

Some of the recurrent and disappeared symptoms, or harms, I experienced, or incurred, since the time of my unwarranted, illegal, detention and the corresponding mistreatment(or enforced torture, harm and abuse, among others) starting the 26th of Sep 2023 using the strategic resources of the state of Finland. As it stands, while some lasted for months, while others still linger, most symptoms don not apply anymore — variables which I observed empirically.

Symptoms which started after the forced mis-treatment but which disappeared gradually after leaving the detention or the period of the forced torture and mistreatment.	Current state: still recurring symptoms
Heartburn, blocky throat, drooling, flu	Pain on both sides of my stomach(decreased now) for I've decided to eat less in a day— one or twice a day, avoiding meat and heavy food for the most part.
Fast and slow breathing, red eyes, drowsy.	Tiredness, recurring numbness of the leg, legs hot (significantly reduced now), legs in pain (significantly reduced now), itching (nearly stopped).

<p>The texture of my mouth ecosystem would change immediately after drinking the med I was getting administered by force.</p>	<p>Tinnitus went up an unusual (responding to the stress, med and nuances of banging past midnight I experienced while in detention, among others)</p>
<p>Harassment (unwanted eye contact)</p> <p>One lady would stare and wink at me time and again during my time in the refectory. Since I have already got used to countering such types of harassments in the public transport, I would make sure that I don't look at her, among others. I can also frame two nurses for inappropriate eye contacts. There is a strategic reason why I stayed put in my room: "to avoid stories, or framing"</p>	<p>Both triceps, with a visible mark, showed cosmetic damage (Appendix A16), recurrent blood clotting in the legs, discomfort in the foot. At the moment, I can't carry out an activity which requires me to lift slightly heavier weights regularly and not experience pain or discomfort letter. For instance, due to the jeopardy of my legs, I can't work out in the gym(pressuring my leg muscles with weights), run, hike, walk and play soccer, among others, on the same day or for subsequent days anymore — an activity which I was able to carry out without any problem for days, without any negative experience hitherto. Forget about anything, I can't make long walks everyday without expiriencing discomfort— a right which no force can take away</p>

	<p>from me. Nor can disregard for any comparative and superlative pretexts. In addition, I don't know the long-term consequences, or potential complications, of the [nerve] damage I incurred in the right leg due to the unneeded diagnosis and corresponding involuntary enforcement of [lethal, according to my expiriance] biochemicalals.</p>
<p>Threatening behaviour</p> <p>One patient in Töölö would stare at me while holding the knife strongly in the refectory. Police would need to investigate if the act is a result of a mental health problem or aimed at serving the interest of third parties.</p>	<p>I stopped playing football to avoid kicking the ball with my right foot for now. As a matter of fact, I was forced to reduce, or stop all together, some hobbies.</p>
<p>I always felt still, collected and stabilised after each and every reading. Nevertheless, receiving a forced liquid chemical [the veracity of which I don't know] while in detention through my mouth like the holy Eucharist, I had difficulty with concentration, comprehension and writing, among others, for couple of</p>	

weeks even after discharge from the temporary isolation.	
The liquid substance I was administered with after the 26 th of Sep for two weeks depressed and debilitated me instantly. In addition, it resulted in uneasiness (restlessness) and drowsy, among others. The colour of my urine changed to light green. Moreover, pain and itching in the glans penis an unusual and uncomfortable feelings inside was experienced for the time I was in the isolation	
Refer Appendix A10: near death experience as a result of suffocation.	

Table 3. Recurrent and disappeared symptoms reported to psychologists, external medical doctors and Valvira, among others, in late 2023[by and large].

Appendix A16: Observation of More Physical Symptoms Reported Then

Both triceps, with a visible mark, showed cosmetic damage

There was a sudden swelling on his right hand. When the swelling busted, a water-like substance was released. Except normal wounds, Michael did not have such an experience before where a swelling would turn up and bust. Well, maybe, it is the immunology, or excretion, or just a casual manifestation, or an alert mechanism of his anatomy towards uncusomary chemicals, or biochemical reactions, regarding the forced liquid substance, or whatever, he was administered with a cup. Unless Michael was administered with weird chemicals, he should not have such reactions or problems. As a result, it is suspected something even more critical attempted might have failed[Because, lethal biochemicals may not necessarily be effective 100% most of the time].

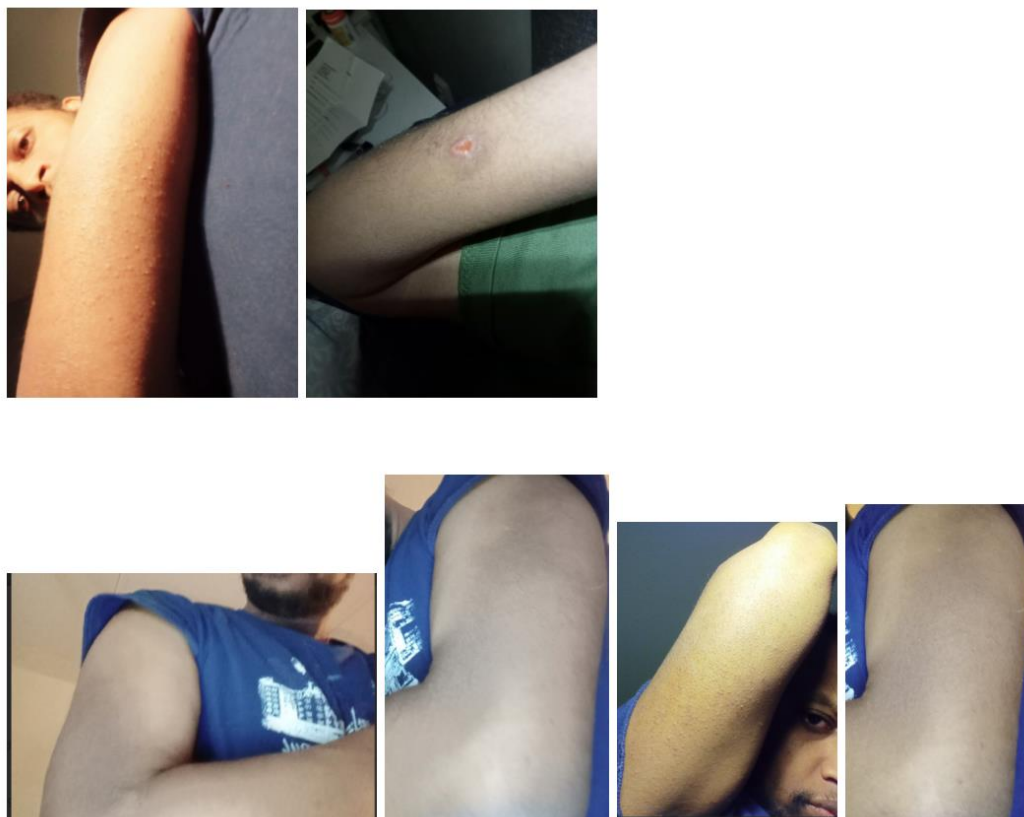



Figure 65. Cosmic damages: "Some of the physical symptoms"

Appendix A17: Value Destructive Meeting with a Psychologist

Meeting with Inka Westerlund and Oli

Date: 3rd of November 2023



MEETING MINUTES

Date: 10/03/2023

Attendees	Agenda
<ul style="list-style-type: none"> Michael Argaw Inka Westerlund Oli 	<ul style="list-style-type: none"> Status update

Updates	Action Items
<ul style="list-style-type: none"> In a nut shell, Michael recapped how falsely alleged of violent behaviour and unconsciousness, among others, he was detained(isolated) and misdiagnosed(abused and tortured) illegally, without any warranty, by the time when he went to see a doctor to request for a referral to ENT for a pre-existing condition, hearing loss, on the 19th of Sep. Near death experience as a result of suffocation on the 22nd of Sep (Appendix 6), among others. Michael iterated the false, unethical, immoral, abusive and harassing medical reviews written against him on OmaKanta are deliberate and aimed at destroying him. Reading from the hundreds of pages he wrote, Michael shared about his experience of mistreatment while in detention, the corresponding new symptoms which 	<ul style="list-style-type: none"> Waiting for weeks, or months, to see if the symptoms will cast away like the rest of the physical symptoms which had appeared while in detention but which disappeared gradually. Disputes regarding to the misdiagnosis will continue to be streamlined to appropriate local and international entities. Michael will continue to examine the patterns of the following symptoms: <ul style="list-style-type: none"> Pain on both sides of his stomach Recurring numbness of the leg Tiredness Legs hot (significantly reduced now) Legs in pain (significantly reduced now) Itching (nearly stopped)

Figure 66. Meeting memo with a psychologist

<p>detention, the corresponding new symptoms which appeared, disappeared and still linger[for the first time], among others. In addition, he expressed his apprehension about symptoms and effects yet to disappear and reappear.</p> <ul style="list-style-type: none"> • Lab tests — such as folate , HIV , vitamin B12, Ca and urine analysis, among others — carried out so as to establish potential scientific correlation between the symptoms that appeared during the period of mis-treatment or misdiagnosis though some of the test could be mis-represented. • While most of the symptoms that appeared while in detention(mis-treatment) disappeared after the release from the unwarranted detention gradually, Michael, praying, looks forward the lingering symptoms will disappear with time. Nor will have serious effects in his life coming up. • Michael iterated that, if there any, his trust in the Finnish health care system is gone. That he wonders if the same has been happening to other immigrants. 	<ul style="list-style-type: none"> — Itching (nearly stopped) — Tinnitus went up an unusual(responding to the stress, chemical and nuances of banging past midnight experienced while in detention, among others) — Both hands(arms), with visible marks, portrayed skin damages (appendix 10) — Weight gain — Recurrent blood clotting in the legs. — Discomfort(pain) in the foot (especially when standing) — While I amn't depressed now, as far as my mood is concerned, I don't have the same state of serenity that I had before the period of detention and mistreatment.
<p style="text-align: center;">Upcoming</p> <ul style="list-style-type: none"> • Another meeting aimed at carrying out a psychotherapy secession is scheduled for the 17th of Nov 2023. • Main agenda: "How Meta platforms, among others, violating their very terms of services, mission, vision and values, among others, abused Michael Argaw, pro-democracy advocate, opponent of the regime in Ethiopia and founder of Chewata, among others, time and again unceasingly." 	

Figure 67. Meeting memo with a psychologist continued

Observation: "Psychologist Inka, who works in the same unit and interacts with the suspects regularly, refused to log the minutes of the session on OmaKnata. Instead, she wrote, "I could not find this new, psychosis, patient," on OmaKanta. Asked to clarify and correct on that, she snubbed Michael's request.

Appendix A18: Service Process Timeline

Date and Place: September 19, 2023, OmaLakari, Mehilinen, Espoo Keskus

What happened: as opposed to checking the ear of the service process subject and referring him to an audiogram secession, Michael Argaw, who has been living with Tinnitus, would be classified as unconscious, among others, for which a referral for an observation process would be made (Argaw 2024; Malmberg 2023).

Actual state of the person: Michael was not unconscious. Nor in a state which will cause harm to himself and others in anyways, or by any means, intrinsically.

Date and Place: Sep 19, 2023, Jorvi Acute Psychiatric Emergency Center, Espoo

What happened: Alleged of being unconscious yet again, Michael would be referred, or subjected, to pass through an observation process by Heidi and Outi, the specialists whom he met in the emergency department, who were not qualified to practice any disputed, safety-critical, service in English in the first place.

The actual state of Michael: Although he was alleged of “a critical state of unconsciousness which requires a mandatory observation and clinical treatment process,” Michael would lead an awareness exercise consciously, demystifying the allegations he encountered unequivocally. In addition, the victim would keep on working on his master’s thesis, The Software Product Management of Chewata, while calling up with friends, among others, consciously like a super-healthy, fervent, dedicated, conscious and ambitious man fighting to liberate millions out of the bondage of tyranny (Argaw 2024).

Date and Place: Sep 19-20, 2023, Jorvi Acute Psychiatric Detention Center, Espoo

Again, the victim kept on working on his master's thesis, The Software Product Management of Chewata, while calling up with friends, among others, consciously like a super-healthy person having a normal active analytic judgment.

Date and Place: Sep 21, 2023, Jorvi Acute Psychiatric Detention Center

What happened: as opposed to focusing on verifying and validating the suspected hypothesis for which the person was directed for an observation process, such as unconsciousness, predisposition to violence and psychosis, among others, Dr Victor Volkov would disrespect, mock and interrogate Michael about legal, historical and political matters which are not in the jurisdiction of the value co-creation sphere of the observation service process, such as who funds Michael, which political party he belongs to, if he is making money out of his political activities and why he reported the suspected, and confirmed, crimes on him reported to the police before referring Michael to P7 to pass through another phase of observation with "advanced" experts (Appendix A8).

Actual state of the person: Iterating he ought to be referred to an ear specialist, or an audiogram service process, instead, Michael was correcting and clarifying Dr Victor Volkov professionally, consciously and patiently without demonstrating any psychosis, unconsciousness and violence (2023).

Date and Place: Sep 22, 2023, P7, Helsinki

What happened: as opposed to here and now, checking whether the service process subject is unconscious, making unnecessary statements non-stop, among others, interrogations about the [legally protected]suspected crimes he reported to the police hitherto would be brought up for discussion by the alleged experts, Dr Eeva Heikkila and Mika(Nurse), despite Michael's repeated refusal to

engage in irrelevant conversations and correction of their degeneration. Then after, building a false cause-effect construct, Michael would be declared as a person suffering from a pathological, or mental, disorder, or diseases, of the receptors in the central nervous system induced by the imbalance of chemicals preposterously and superstitiously(Appendix A9).

Actual state of the person: Iterating his need for receiving a referral to an ear specialist, or an audiogram service process, or discharge from the wrong service process, or detention, Michael, going above and beyond his responsibility, engaged in correcting and clarifying to Dr Eeva Heikkila professionally, consciously, non-psychotically and non-violently patiently (Appendix A9).

Date and Place: Sep 26, 2023, P7, Helsinki

What happened: Still and seating, Michael was working on his master's thesis, The Software Product Management of Chewata, by the time when a skin-headed male nurse would show up and show a nazi salute, speaking disrespectfully before bringing his colic and a security guard to take Michael to an injection room and enforce a very debilitating substance.

Actual state of the person: Michael's state was normal: "communicating with friends and psychologists [about the detention] and working on his master's thesis, among others, before he started showing physical symptoms immediately after a forced subjection to a liquid chemical on the 26th of Sep 2023 (Appendix A9).

Date and Place: Oct 4, 2023, P7, Helsinki

What happened: the dangerous effects of the enforced clinical, among others, tortures will be communicated to the health professional in P7.

Action of the nurses: Nonetheless, the nurses would disregard the outstanding issues regarding the effects imparted, such as refusing to document on OmaKanta (Argaw 2024).

Date and Place: Oct 12, 2023, P7, Helsinki

What happened: The alleged expert/specialist — who carried out the disputed mis-diagnosis, Dr Eeva, let alone recording effects, or harms, reported on Oma Kanta — would disregard the victim's report of apparent harm(Appendix A13).

Observed state, or behaviour, of the specialist: "Not willing to listen to the victim"

Date: Nov 3, 2023

What happened: Inka — the psychologist provided by the state, who is a work cholic of the alleged specialists who are suspected of crimes against humanity on Michael — would refuse to discuss about, and record, legitimate reports of harms incurred by Michael on OmaKanta though informed politely and repeatedly(Appendix A17).

Observed the state, or behaviour, or conduct, of the specialist: "Not safety-critical-customer-centric, indifferent and negligent."

Safety Critical Service Process Timeline.

Appendix A19: Observation of More Suspected Crimes Reported Hitherto

Appendix A19A: Observation of Suspected Ransomware

Michael's diary

Excerpt from the suspected crime report

I've been owning www.eabogida.com, an educational portal, for couple years. I hosted only, only and only educational contents. As a result of the success and popularity of the project, I was featured on popular outlets such as the Voice of America(VOA), Australian Broadcasting Service(SBS) and DW, among others. Having sunsetted the product, I would park its corresponding domain, eabogida.com, on GoDaddy long ago. However, I am getting abused by the current owner who has put horrendous, pornographic, contents on his private URL. While the current owner of the domain reserves the right to deploy any sort of software and content on his private URL by law, I am suspecting that there is something that the owner is trying to achieve by calling me, violating my unsolicited phone data protection: "Menace and ransom." The current owner is calling (bothering) me time and again privately about the need for paying ransom so he would stop the menace. The current owner's suspected motivation of using the URL is clear: "Damaging and requesting a ransom money from me." In addition, I kindly ask you support a decision Twitter closes <https://twitter.com/eabogida> and <https://twitter.com/ethioabogida> which contain copyright protected pictures.

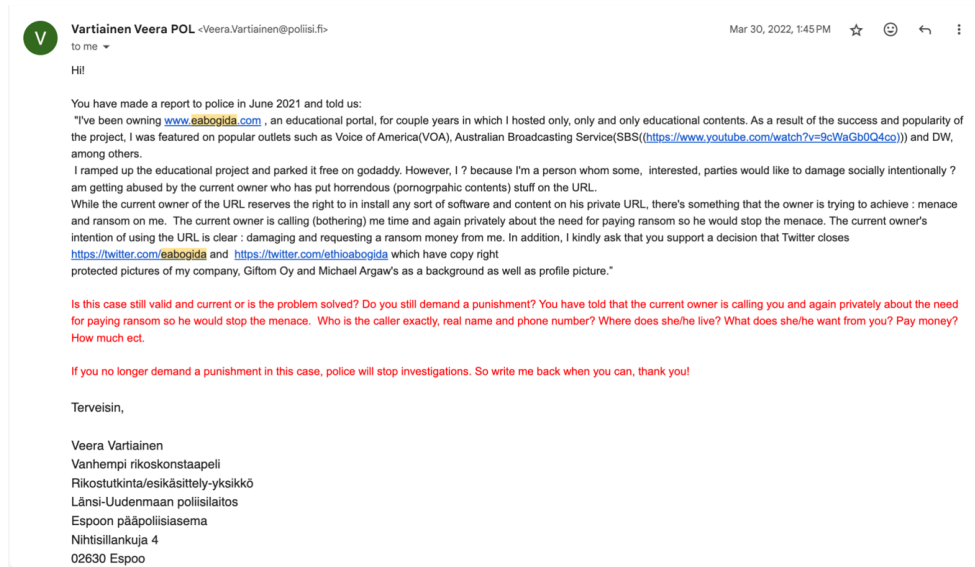


Figure 68. Again, the matter was not investigated by police.

If an investigation was carried out, it would have led to a due process: "1) Finding out who the owner was then. 2) Establish if the alleged caller, or black-mailer, was the owner of the site. 3) Establish the reason why the owner of the site, having acquired the parked(returned) domain from GoDaddy, went on to deploy pornographic platform, among others."

Appendix A19B: Observation of Suspected Psychosis and(or) Suspected Discrimination

Michael's diary

Date 30/11/2023

Time: about 13 : 26 PM

I would get in to buss number "213" at Tuomarila station. I would show that I have a valid ticket [a single BC ticket] to Kilo, my destination. Nevertheless, the driver would tell me that I will not be allowed to use the ticket. Showing that I have an additional, valid, seasonal ticket, AB, I would iterate that I have the right to commute to my destination.

"You can't go!" continued exclaiming the driver.

"I've the right to get in. You can only tell me where I amn't allowed to get in and be," I iterated to him politely.

"No, you can't go," he continued.

While I could have refused to leave the bus and let the driver call Police, or security guards, if the law has been violated intrinsically, I — for I did not want to create inconvenience for others and/or waste the resources of police and security — would decide to avoid any argument and leave the bus immediately. The service provider, HSL, which is represented by the driver, discriminated against me by applying fallacious double standards. In addition, I would like to know if there are other motivations behind the absurd, illegal, denial of services, such as suspected psychosis and dark triad, among others, interfering with the expected, normal, functioning of the active analytic judgment of the bus driver.

Here below, please find a valid BC and AB ticket.

Thanks M



Receipt for ticket 		Receipt for ticket 	
Date	04.11.2023 12:16	Date	30.11.2023 13:25
Product	Season ticket - AB	Product	Single ticket - BC
Serial number	29376172	Serial number	32726485
Valid	04.11.2023 00:00 - 04.12.2023 04:30	Valid	30.11.2023 13:25 - 14:46
Customer group	Adult	Customer group	Adult
Customer	Michael Argaw	Customer	Michael Argaw
Payment method	Epassi	Payment method	Epassi
Price	70.60 €	Price	3.10 €
Price without VAT	64.18 €	Price without VAT	2.82 €
Vat	6.42 €	Vat	0.28 €
HSL Helsinki Regional Transport Authority Customer service tel. (09) 4766 4000 Business ID 2274586-3 VAT number FI22745863		HSL Helsinki Regional Transport Authority Customer service tel. (09) 4766 4000 Business ID 2274586-3 VAT number FI22745863	

Figure 69. A valid ticket.

Nevertheless, Finnish police would refuse to investigate a legit case of suspected discrimination and psychosis presented.

Appendix A19C: Observation of Suspected Mishandling, or Mis-bundling, of two Distinct Suspected Crime Reports by Finnish Police

Michael's diary(edited)

To whom it may concern,

I would file two distinct suspected crime reports to Finnish police: "a) Meta Report.pdf (which is set on a story of suspected aggravated professional misconduct, suspected torture, suspected attempted suffocation to death, suspected physical harm, suspected attempted mental and intellectual disablement, among others and b) a case of suspected delusional psychosis and suspected discrimination(Appendix A19B)"

1) As opposed to requesting HSL[the transport and ticketing company] to provide available records regarding Appendix A19B and investigate the matter harnessing the due process of law imperatively, Espoo police — distorting and mis-representing customary, substantive, legal entity relationships models — would bundle two distinct reports of suspected crimes together under 5530/S/11288/23, suggesting to channel the matter to Valvira superstitiously and preposterously, when what I have with HSL is plain and simple: "A business relationship, or duality, protected by applicable business laws where I can not use a public transport without a valid ticket and the service provider can't deny me of services preposterously provided I've a valid ticket."

2) As opposed to interrogating, corroborating and analysing the couple of preposterous and superstitious sessions I had with medical doctors in the last quarter of 2023 after an illegal hijack on the 19th of September 2023 — regarding which I have tangible as well as circumstantial evidence that public health professionals, incorporating and mis-representing facts deliberately and quoting

one-another blindly, violating normative, professional, conducts of research methods and methodology on observing a human being intrinsically and misdiagonised and harmed me despite my lucid corrections and clarifications — Finnish Police, yet again, suggested that I should streamline Meta report to Valvira which except handling operational processes does not handle matters of due process of litigation, deciphering transcription of secession records, among others, independently, openly and morphologically.

Thanks

M.

Appendix A19D: Observation of Suspected Vandalism in Turku

Michael's Diary

2013

Case: My items in a student apartment in Frantisinkatu, Halinen, Turku in which I put up only occasionally would be stolen.

Report

N.B: I am not ruling out this scenario: “By the time when I left the student apartment in a weekend rush, I might have made the mistake of leaving the door of my room unlocked though closed”

As a result, most of my belongings — such as expensive electronic items (iPhone and mac, among others), clothes and the guitar which I just bought, among others, in my room — would be stolen.

N.B: While I have not named a definite person as a suspect, I wanted, or pressed, Finnish police to investigate the matter from different scenarios. As opposed to extending the investigation beyond Turku, Police would stop the investigation shortly.

Appendix A19E: Observation of Suspected Threat in Espoo

Michael's diary

A piece of paper on which a swastika symbol is present would be dropped in front of the door of my apartment in Espoo, Finland. As usual, it was aimed at consuming, occupying and frightening me.

This time around, I would report it to police privately and resolve to ignore it.

Espoon poliisi Tapahtumaseura Pääkirkko		T1 19.05.2020/09.30 049/ESPOO 7440/ESPOON KESKUS	
Osaisena asiassa:			
Nimi:	ARGAW, MICHAEL	21.09.1986	
Asia:	1		
Selostus:			
<p>Ilmoitti löytäneensä asuntonsa edustalta paperin, johon oli piirretty hakaristi.</p> <p>Michael Argaw ilmoitti seuraavaa:</p> <p>"I - on Tuesday morning at 9:30 am - found the swastika symbol of Nazism drawn on a paper and left between E 44 and 43.</p> <p>The 20th-century German Nazi Party made extensive use of graphic symbols, especially the swastika, notably in the form of the swastika flag, which became the co-national flag of Nazi Germany in 1933, and the sole national flag in 1935.</p> <p>The only person who could be doing this is a psychopath, mental case and miserable person suffering from an absolute and relative inferiority complex. A normal person who passed KG won't be doing this."</p>			

Figure 70: Report of suspected crime, or dangerous psychopathy, or mental case, made to Police Finland in 2020 already.

Appendix A19F: Observation of Suspected Theft in Espoo

Michael's diary

30/01/2023

My e-scooter was stolen from a locked, or protected, residential complex to which only relevant residents have the access key for.

Appendix A19G: Observation of Suspected Defamation

Michael's diary

2013

There was a time when I was running a very successful, crowdsourcing, educational platform: www.eabogida.com. What started out as a university course project at Åbo Akademi University would be featured on VOA and SBS Amharic news services, among others, as an impactful, exemplary, non-profit, edtech project. Somebody would upload an audio content lasting about 20 minutes in the crowd platform. According to the record, two suspected persons — R.K.S and F.S — were having a phone call. “I’m making 2K an hour. Michael is like this...he is like...,” says S.A to F.S. In the defamation record, the suspect, S.A, was not only making several false, or preposterous, statements about Michael but also himself and life in general. Again, Finnish Police would refuse to investigate the suspected crime observed or reported.

Appendix A19H: Observation of Suspected Biowarfare Attack

Michael's diary

I was attacked with a debilitating biowarfare between 2016 and 2018[from which I fully recovered only after 2019]. As a result, all I could eat was a little bit of salad and chickpeas for couple of years, resulting in a heavy weight loss, among others. The healthcare system [I believe] mis-diagonised me temporarily to deflect on the strategic bio-warfare. I would report the matter to police though it will not be investigated.

Appendix A19I: Observation of Suspected Attempted Manslaughter

Long before, “protection,” there has been lots of suspected stalkings and intimidations by private, public and non-gov actors on Michael who was framed as a threat by TPLF and the security structure of the state of Finland. According to credible information acquired by Michael from western intel agencies indirectly, even the national defence and security structure of Finland exercised counter, or defence, practice modelling Michael as a threat preposterously and superstitiously, jeopardizing his security fundamentally, just because Michael has been active opposing entities in the state of Finland, BigTech and the regime in Ethiopia, among others, openly.

“1) If possible to take out Michael dramatically, and 2) we have abused, or stepped on, Michael, under the carpet multiple times multidimensionally and what if he resorts to violence, among others,” was the motivation for the systemic deployment of tactics of deterrence and hostility which started over 10 years ago before it all was changed into protection years ago. Finland’s formal and informal flow of mis-information about Michael with the regime in Ethiopia and Finland’s private, public and non-gov actors keen on undermining Michael was instrumental in shaping the course of events subsequently.

Behold are examples of suspected stalkings and intimidations, among others.

Michael's diary

Time: 23:59 PM 5/6/2017

A van belonging to a private security company, Loomis Suomi Oy — having stacked me in the vicinity of my home address, among others, for some time, pretending to slow down before my pedestrian right of way momentarily — would attempt to knock me down. Then after, as usual, Finnish police would refuse to investigate the corresponding suspected crime reported by me.

Appendix A19J: Observation of Suspected Stalking and Intimidation

Michael's diary

Security guards belonging to another security company, ISS, would stalk and abuse me verbally. Finnish Police — though provided with the picture of the suspects, among others, timely — would refuse to investigate the suspected crime reported. In addition, employees of the same company would continue stalking Michael. For instance, Michael was stalked immediately after he shared and discussed classified information on Getachew Aseffa, spy chief of Ethiopia then, with the president of the Amhara regional state, Mr Degu Andargachew, at the peak of the anti-government protest in Ethiopia. While the momentum of the protest in the Oromia region was the highest then, the pace of the civil disobedience in the Amhara region needed to be on par as far as the assessment of those of use fighting for change is concerned. As a result, I, apart from mobilizing civic protest through social media, among others, would start engaging with President Gedu Andargchew, who would start facing off the central government from within, changing the dynamics of power-play after two decades. State of emergency would be declared and Gedu Andargachew would be under house arrest immediately. More security guards would stalk me in Finland subsequently.

Appendix A19K: Observation of Suspected Stalking and Intimidation

Michael's diary

Driving a plate-less police van, Police officers in uniform would turn up all of a sudden and say: "Michael, this is about millions of euro"

Appendix A19L: Observation of Tragedies Modelled on My Metadata

Report of caution

Following the self-giving example of my beloved dad, Mulate, who was active in grassroots opposition politics in Addis Abeba, I am the first person to use marketing technologies, political games and Facebook ads, among others, to take a swipe at the horrific tyranny in Ethiopia, the horrible injustices I faced in Finland and suppression by BigTech, among others, intensively and extensively for many years. Marketing is about placing, or positioning, messages to the envisaged target audiences. As a result, I — openly, using a bold-and-clear-human language as opposed to instinct like animals — placed messages free from ulterior objectives, reminding and reprehending, among others, the actors who carried out injustices on me and millions of people represented by me indirectly. Subsequently, in exchange, I have long been a subject of tacit swipes, such as getting served with abstract messages time and again online and offline for the exclusive purpose of carrying out intimidation, misinformation campaigns and hybrid-warfare, among others, on me, for many years. Some of the tacit swipes I experienced exhibited patterns of starting with certain letters(F, M, B, A, H and E, among others) and/or anything which could be categorised as my metadata which can be related to me in any ways, or by any means, intrinsically: “Anything I browsed. Anything I visited. Anything I experienced. Whether true, false or half-truth, anything someone else talked, wrote and associated regarding me. Anyone and anything permissible for any form of associative property with me, among others.” What happens in post-modern-politics, or post-modern-marketing, as we may know and see it is that, when a subject is targeted politically, a hybrid campaign, or attack, model will be designed and executed on anything which can be related to the victim. As a result, I have been a victim of tacit, expressed and acted, among others, attack models by entities which could not face, or stand, the legit, political, academic, product and service, among

others, challenges I placed, or positioned, upfront through my social entrepreneurship journey.

Consequentially, my report of suspected terrorism, homicide and collapses, among others, is premised on an empirical and rational hypothesis that the campaign(hybrid-warfare) models, or tacit swipes, executed on me using social media, culture and in-person, among others, took a new, absurd, dimension or, may be, are getting countered absurdly, by unknown parties, among others. As a result, I am of an opinion some of the most popular tragedies in the world might have occurred for the exclusive purpose of extending the delivery of an intimidating, harassing, metadata-model-centric messages to me and countering thereof, among others. One thing I know: "It all needs to be investigated as a case-with-in-cases synthesis as well as distinctively." Consequently, behold are the placements, or tacit swipes, I interpreted empirically and rationally. Another, important, thing: "The following interpretation is solely based on the limited intel, or data, I have. As a result, if I have unlimited access to acquire, process and investigate, among others, relevant data, I would have formulated even more causalities directly and indirectly."

The crashed Max 737, ET302, plane

ET302 — about which I, citing potential software failure, scribbled a subjective opinion immediately after the crash(Argaw 2019) — had a Facebook friend of mine, Cedric Galia, who was studying to become a Juris Doctor at Georgetown university, among others(Nations Media 2019). In addition, the pilots were friends of my friends on Facebook. Moreover, the pilots might have talked, watched and read about me, among other relations with me. Furthermore, the plane crashed near a place related to me in different ways: “Gimbichu, Oromia Region.” The corresponding key words, or phrases, for the meta-data-placement stunt are: “Bishoftu, Addis Abeba, Bole international airport, Jomo Kenyatta International Airport, Nairobi, Kenya, Flight, Max(the name of the cat I used to owe when I was small), Yared Getachew, Ahmednur Mohammed, Gimbichu, Oromia Region(I have been to Gimbichu and Ada'a, among others. As a matter of fact, we got teff from the Gimbichu and Ada'a woeredas of Debreziet), Pius Adebola Adesanmi, Sebastiano Tusa, [Blanka, Martin and Michala, deceased family of members of Anton Hrnko] and Christine Alalo, peacekeeper who received EU's Human Rights Defenders Award, among others.”

Ethiopian Airlines Flight 409

Ethiopian Airlines Flight 409 — which crashed immediately after taking off from Lebanon(Wikipedia 2025) — had pilot Habtamu Benti Negasa and Alula Tamerat Beyene whom I know, have met before and were friends with me on Facebook. The names of the crews contain letters the likes of which have been used to intimidate me before. In addition, some of the passengers could be connected, or related, to me directly(visiting my profile, among others) or indirectly. ET renounced the corresponding report of the investigation unequivocally. The corresponding key words, or phrases, for the meta-data-placement stunt are: “Beirut, Addis Abeba, Habtamu, Benti, Mediterranean Sea, Rafic Hariri International Airport, Ethiopian Airlines Flight 409, runway 21 and Michel Suleiman, among others.”

The crushed Lion Air Flight 610

Captained by Bhavye Suneja and First Officer Harvino as crews, the crushed Lion Air Flight 610 was a scheduled domestic passenger flight from Soekarno–Hatta International Airport, Tangerang, Indonesia. Black Lion is part of my historical meta-data in different ways: “During the time of King Haileselassie of Ethiopia, my father — who joined the royal police at the age of 17, before resigning voluntarily after serving for 7 years and starting to rise in the rank and file — performed also as a protection police or special guard. As protection-police working in different shifts, my dad, with different colics, had the possibility of protecting, or keeping an eye on, Madiba (Nelson Mandela) who, hiding in Ethiopia disguised as an Ethiopian citizen, was receiving a military training, among others. In exchange for lots of money, and luxurious living conditions in Belgium (which with all the golds and diamonds, among others, from Africa used to be a very prominent country in the world by then), my dad was offered to assassinate Madiba. Nevertheless, my dad, Mulate, upholding his oath patriotically, would refuse the offer. In addition, lion has a special notation during the time of King Haileselassie who was crowned as the lion of Juda. In addition, my grandfather, Arage Yimer (commonly called Argaw Yimer) was member of Black Lions, an antifascist resistance movement. Moreover, my father met my maternal mother, Fanaye, at Black Lion high school of Addis Abeba, Ethiopia.” In addition, not ruling out other forms of tacit relations, the first letters of the names of the crew of Lion Air Flight 610 starts with letters the likes of which have been used to attack me subtly before. Moreover, Lion Air Flight 610 may have passengers, or staffs of entities, which may be related to me directly, or indirectly, among others. Customarily, or operationally, that a system contains bugs does not necessarily mean it cannot function. Nor the crashes are the result of the imperfections identified and confessed by Muilenburg, among others, contritely in the aftermath of the tragedy. As a matter of fact, or premising on realism, Max (like each and every software on earth) had been operating with bugs, and all entities — the anatomy of the human person, corporations, software products,

industrial plants, cars and the universe as we may know and see it, among others — are not perfect and still function well. Nevertheless, after the crashes of ET 737 and Lion Air Flight 610, among others, most of us[as opposed to framing our presuppositions as "suspected causes or case-effect constructs"] associated the incident to everything which may not be perfect with the plane, or Boeing, speculatively, conclusively, as opposed to deciphering otherwise, such as potential formulation of the transformation of cultural and political subversion in to terrorism-for-placement, or hypothesis of metadata-model-centric-terrorism, among others, swiftly. The corresponding key words, or phrases, for the meta-data-placement stunt are: "Lion Air Flight, Soekarno–Hatta, Tangerang, Amir Airport, Boeing 737 MAX 8, Java Sea, software update, Federal Aviation Administration, Bhavye Suneja, First Officer Harvino and Andrea Manfredi, among others."

Black box logo

I incorporated an LLC in Finland called Giftom Oy in 2016. Ever since the entity was incorporated, it used the same logo: “A black box wrapped with a green ribbon”



Figure 71: The logo of Giftom Oy

What does the logo mean if we decipher it in the context of the crashes, the notion of backbox as we may know and see it and, with a mindset of intentionally, myself as a tacit, empirical and meta-data-model-target orthogonally?

Something branded on my birthday

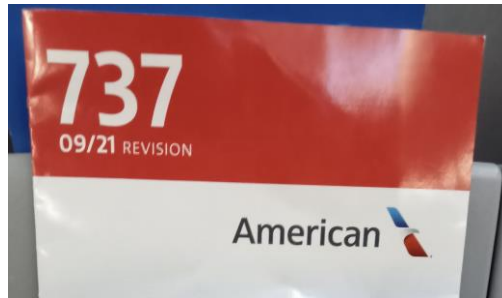


Figure 72: American Airlines service offering, revision 09/21, branded on my birthday

The D.C-Potamic-river-Midair collision

I have also built a metadata-relation-construct with the d.c-potamic-river-midair-collision between PAT25, a U.S. Army Black Hawk helicopter, and American Eagle Flight 5342, a Bombardier CRJ700 operated by PSA Airlines (Wikipedia 2025): "I have a historical data of visiting Potomac River and somewhere close to Regan airport in the spring of 2024. During my visit (or encounter of the area), I encountered military [I guess to give me a protection or keep an eye on me. Remains to be established accurately] and civilian persons [two Indian looking ladies were following myself and the person I was walking around with]. Furthermore, there could be other substantive direct and indirect forensics which may relate me to the scene and the persons involved in the crash and its operational environment. If I have an unlimited NSA pass, among others, to examine, research (interrogate, among others) and analyze potential, correlative, metadata, I would be capable of strengthening my hypothesis with more relational constructs [BTW, this applies to all my relevant empirical and rational synthesizes intrinsically]. The corresponding key words, or phrases, for the meta-data-placement stunt are: "Mid-air collision, American Airlines, Bombardier, Black Hawk helicopter, Eagle, Encounter of military and civilian, Potamic River and Flight, among others."

Air India Flight 171 crash

Air India Flight-171 crashed into the hostel block of a medical college in Ahmedabad, Gujarat, India (Wikipedia 2025). The corresponding key words, or phrases, for the meta-data-placement stunt are: "Boeing 787-8 , Ahmedabad, Airport, Air-India Flight-171, Gatwick Airport, Dreamline(Dreamliner is in my metadata after I composed essay in Swedish for an assignment in the title, "Vad drömmer du om(what do you dream about?), B. J. Medical College, Sabharwal, Clive Kunder, Honeywell, Kantaben Dhirubhai Paghadal, Naavya Chirag Paghadal, Kuberbhai Patel and Babiben Patel, among others." In addition, immanent in my metadata in the run up to the crash is my dispute with medical college students and alumni of Finland's medical universities regarding the biochemical torture and political, among others, crimes which become an important aspect of this writing subsequently.

Six dead after a private jet crashed in Maine

Seven people pronounced dead while one injured after a business jet linked to a Houston law firm crashed in Maine(KHOU 11 2026). The corresponding key words, or phrases, for the meta-data-placement stunt are: "A business jet, Houston, Firm, Banglor International Airport, Bombardier and Hobby Airport, among others." I, in my Facebook, in the run up to the crash, have seen an event advert on Facebook slated for the 28th of January before which there is a leaving act for Paris through a luxury jet which stopped over in Maine. Assuming I would have gone to Houston, I would be met with a message placement modelled on my metadata.

Plane crash in Colombia killed everyone on board

15 people on board dead after a small plane crashed in northeast Colombia (CBS News 2026). The corresponding key words, or phrases, for the meta-data-placement stunt are: “Norte de Santander, Satena, HK4709, Cúcuta, Carlos Salcedo, candidate for an upcoming election in March, Diógenes Quintero and Natalia Acosta, among others.” Satena, in Amharic, means: “Endurant, agile and in the front line” I, in my metadata, regarding politics, have people branding me, “Satenaw,” through social media comments, among others.

Pilots in my metadata whom I cannot mention here avoided near-crash scenarios

Two excellent pilots of Ethiopian airlines who were/are friends with me on Facebook alone averted unprecedented outcomes of crashes. I cannot provide their full names for security reasons. I met one of them — who used to be friend with me on Facebook, who has, “Ha and M,” in his name — at Bahirdar University.

Other perplexing deaths in my metadata

From my childhood, I witnessed the sudden, never-investigated, subsequent, death of those who were very close to me, Mulate(father), Fantaye(unt), Abezu(unt), Kasiye and his wife, Misaye(cousin) and Alemu, for what I believe is [a result of] a targeted, proactive, political-witch-hunt executed proactively.”

My experience of attempted suffocation to death on the 23rd of September 2023

The cunningly directed attempted-suffocation-to-death with lethal chemical agents I experienced on the 23rd of September 2023 after the swift misdiagnosis carried out on the 22nd of September 2023, which I will never forget nor can forgive easily, exhibited similar, meta-data-centric, patterns(Appendix A9; Appendix A10). The corresponding key words, or phrases, for the placement stunt are: “Michael, M1, M2, Helsinki, Eeva, Espoo, Finland and Mika, among others.” It was not just an attack on me, Michael, alone but what I stand for, my research, my product, my projects and millions of people impacted by me positively directedly and indirectly.

The death of Michael could be a high-level, cultural, placement stunt

The death of my (and my dad's) favorite rock (or pop) star ever, Michael Jackson, could be a cultural placement stunt. The person alleged for killing Michael, Conrad Murray, was attached to his mom. In addition, he looked like my maternal mom a bit. In this regard, I suspect the death of Michael, apart from what is formulated through the due process, may well correspond to the wave of the anti-Michael, or cancel-everything-Michael, spray that went for over a decade, according to my retrospective interpretation of culture since late 2025.

The death of Whitney Houston could be a high-level, tit-for-tat, cultural placement stunt

I suspect the death of Whitney Houston, the song of whom I covered amateurly when I was teen, could be a cultural placement stunt countering the placement of the cancelation of Michael premised on what was going on subtly and privately, according to my retrospective interpretation of culture since late 2025.

The murder of Trayvon Martin as a potential placement stunt

Trayvon Martin — a 17-year-old suspended Miami area high school student — was killed by George Michael Zimmerman in Sanford, Florida in the evening of February 26, 2012, while he was visiting his father (Wikipedia 2025). The corresponding key words for the placement stunt are: “Martin, high-school, Michael, SanFord, Florida, February and 17, among others.” In addition, as far as my digital forensic on Facebook in the run up to the incident, and subsequently, is concerned, I was very active criticizing police brutality. Again, the murder of Martin could be a placement stunt, according to my retrospective interpretation of culture since late 2025.

The murder of Michael Brown as a potential placement stunt

The murder of Michael Brown by officer Darren Wilson[who is from Fort Worth, Dallas, Texas] in Ferguson, Missouri, is a potential placement stunt(Wikipedia 2025), according to my retrospective interpretation of culture since late 2025. The corresponding key words, or phrases, for the placement stunt are: “Michael, Brown, Ferguson, Missouri, Johnson and Wilson, among others.”

The coup d'état attempt in the Amhara region as a placement stunt

The coup d'état attempt in Bahirdar, Amhara regional state, of Ethiopia by Fano, a grass-root militia network, resulted in the assassination of Ambachew Mekonen(PHD), president of the Amhara regional state, Ezez Waise, advisor to the president, Migbaru Gobezie, attorney general of the Amhara regional state and Asaminew Tsige(General), unofficial leader of Fano and the regional paramilitary force, among others(Aljazeera 2025). What is substantive in my meta-data here is that though I, as an independent political person who executed political ads and games, among others, for several years in the digital landscape of contemporary Ethiopian politics, am neither affiliated to the government nor any of the opposition political parties in the Ethiopian political scene — and that though it was only about bipartisan political matters, such as transition to a basic, multi-party-system, democracy, I advocated relentlessly — I have been in touch with one of the official assassinated, Migbaru, about the out-of-control activities of frustrated rebels lead by Asaminew and the repressive mal-administration of the regional administration and the federal government exacerbating matters exponentially. Migbaru was open to my feedback. Some argue the tragedy has been fabricated and honed to quell the rising, pro-democratic, revolutionary, rank and files, among others, in the regional state while Abere Adamu, a friend I met on Facebook and ex-police-commissioner of the Amhara regional state, to me, said, "I witnessed the incident, the assassination of Migbaru, among others, myself," befor his death. The corresponding key words for the placement stunt are: "Fano, Ambachew, Mekonen, Abere, Zenzelma, Ezez, Migbaru, Asaminew, Bahirdar and Zenzelma, among others."

The assassination of Se'are Mekonen Yimer as a placement stunt

Se'are Mekonen Yimer, Chief of General Staff of the Ethiopian National Défense Force, was assassinated by his very bodyguard while he was responding to the Fano-led coup d'état attempt in the Amhara regional state(Wikipedia 2025). The names, Mekonen and Yimer, are in my metadata. The assassination of Yimer could be one modelled on my metadata distinctively as well as as a case-with-in-cases synthesis, abstraction, related to the formers subject to be investigated coming up, according to my retrospective interpretation of culture since late 2025.

The sudden death of Abere Adamu as a placement stunt

The sudden death of Abere Adamu, ex-police commissioner of the Amhara regional state, days after he was removed from his position as chief of police of the Amhara regional state and admitted for an intensive care in a hospital in Bahirdar, is tantalizing to date (Borkena 2021). Abere, among others, faced tremendous amount of opposition, and threats, from the supporters of Fano. From the names to my history of communication with Abere regarding relevant subject matters, the sudden death of Abere could be one modelled on my metadata distinctively as well as as a case-with-in-cases synthesis abstraction subject to be investigated coming up, according to my retrospective interpretation of culture since late 2025.

The Assassination of Engineer Simegnew Bekele.

Engineer Simegnew Bekele was found dead in his car at Meskel Square (or Abiyot Adebaby), Addis Abeba, Ethiopia (The Habesha 2025). The relevance of the assassination of Engineer Simegnew Bekele regarding my metadata: “1) I covered about GERED (Ethiopia’s dam) and Egypt regarding the Blue Nile time and again, including synthesizing theories about how the universal church was divided into east and west after the first council of Nicaea(Michael Argaw 2025). 2) I have relatives by the name Bekele and Simegne(late one and whom I never met). 3) My popular game, Chewata, had civic disobedience at Meskel Square as one of its tactical operational objectives. 4) Every time I streamed live, I encountered a stream and notification from Adebabay media and Beteseb media on my Facebook newsfeed and its corresponding notification bar respectively. The corresponding key words, or phrases, for the placement stunt are: “Engineer, Simegnew, Bekele, Abiyot Adebaby or Meskel-Square, Benishangul-Gumuz, Addis Abeba, Blue Nile or Abay River and Assassination and GERED, among others.” While there could be several reasons for the assassination of the engineer, such as the need for scapegoating the mismanagement of the grand project, among others, I do not rule out a meta-data-centric synthesis as a case-with-in-cases as well as distinct serial-meta-data-centric-placement-stunt-crime, among others, according to my subjective, retrospective, interpretation since late 2025.

The collapse of Francis Bridge as a meta-data-placement stunt

In 2024, on my way back to Maryland from Austin, Texas through Bush intercontinental airport, Houston, Texas, I would be encountered with the buzz of the collapse of Francis Bridge of Baltimore, Maryland (Wikipedia 2025). In the days, weeks and months prior, I have been processing, or discussing, about the outstanding issues, or disputes, I have with the state of Finland regarding the sever human rights violations carried out on me in the last decade, among others: "For instance, having written a false, preposterous, medical review Michael collapsed pathologically and that he needed to be hospitalized{when I was buzzy reading research papers and books for my MS thesis, the Product Management of Chewata, while having a normal conversation with different persons}, I would be isolated[illegally and when there was not any need], interrogated(about politics preposterously and superstitiously) and tortured(in which I would survive an attempted suffocation to death, among others), among others." As a result, I've been processing all the legal and diplomatic, among other remedies regarding my ongoing dispute with the state of Finland and its corresponding entities which resorted to deflection and suppression instead: "Using unethical and unprofessional medical doctors(MDs), medical students and alumni of universities on Sep 2023 to insinuate over and override my years of open political fight by making a false, mental, case against me, including interfering and sabotaging on everything I did preemptively openly subsequently. In addition, as opposed to addressing the injustices committed on me, they would execute hybrid strategies: "He has a problem. We didn't do anything to impede him. We didn't undermine, or sabotage, among others, him. We didn't do anything against him for years," As a result, I have been running a case dubbed "Michael Vs Finland, Michael Vs Mehiläinen, Michael Vs Facebook or Meta Vs Michael), among others " Furthermore, a Finnish healthcare company, Mehiläinen, and its subsidiary, Bee healthy Oy, aided and abated organized health crimes on me on Sep 2023[Appendix A9A]. Moreover, there is something which connects me with pope Francis: "Participated in a spiritual direction by the Jesuits, the congregation

to which pope Francis belongs, when I was 21 years old" Aimed at inhibiting me politically, there has also been continuous, deliberate, misinformation and hybridwarfares on me about myself and my maternal mom, [F]anaye, who lived in Eretria and hasn't been a part of my memorable life in Addis Abeba at all. As a result, lots of campaigns were carried out on me for many years based on a false autobiography assembled (or talked) about me by collecting pieces of hearsays from those who are not authorized to co-create any story about me without my consent in the first place. That I was challenging different parties and big Tech, among others, politically, badmouthing and attacking me harnessing misinformation was the only desperate strategy left. As a matter of fact, Facebook, media companies and politicians, among others, were bastions for the attacks. Getting back to the main point, on my way back to MD from Texas in 2024, I would encounter the placement of the horrific buzz of the collapse of Francis bridge of Baltimore, Maryland. The corresponding parallel key words, or phrases, for the placement stunt are: "Michael, Austin, Bush Airport, Houston, MD, Baltimore, Maryland and Francis Scott bridge, among others."

Hypothesis for a placement stunt: "Crowd strike leading to a crowd-strike"

That it has been learnt I would be visiting Atlanta in the spring of 2024, they would set, or place, metadata-placement-attack-model-stunts on me in the city of Atlanta: "I would be met with a crowd-strike in the very morning I arrived at Atlanta on the 16th of March 2024. In addition, I would be crossed with actors putting on a purple suit with a black shirt inside. Furthermore, I would be stalked with different types of groups of persons displaying family visuals. Moreover, I would be met with actors, or placements, who look like those related to me or those in my metadata. My visit of the HQ of Coca-cola would be tampered with an unusual family video ad from the outset of the secession. There were events branding family, among others. Tigrian security guards would stalk me directly and indirectly. I would encounter intimidation in the very hotel I put up in, among others, time and again. Another thing with Atlanta: "In 2014, I connected to Kansas from Hartsfield-Jackson. The hostess and the passengers(boys) would act mom and family stuffs. Anyways, something would happen in the summer of 2024: "The crowd-strike software glitch which disrupted airports around the world would hit Atlanta the most, leading to the featuring of 'Atlanta' and 'CrowdStrike' in the digital media landscape time and again." The words, Atlanta and CrowdStrike, mean different things for different parties. For me, it was the abusive crowd-strike, among others, acts I faced all alone throughout my time in Atlanta violating my basic liberty as a tourist which were nether recognized nor apologized for, among others, by any party. For others, it would be disruptions, or travel inconveniences, they experienced together from one isolated incident. Fact of the matter: "Atlanta and Crowdstrike were in my metadata before the software glitch incident." As a result, the Crowdstrike incident could be an act, a meta-data-placement-stunt, done by hackers in defense of the many to one injustice, or crowd strike, I experienced in the city of Atlanta about which no stakeholder reached out to apologize and compensate, among others. As a tourist then, I believe I could literally sue the city for couple of billions for causing me emotional distress, pitting me with multiple parties and jeopardizing my

security and value co-creation sphere permanently, among others. Because, immanent in the public, crowd, strike, among others, is the violation of my private data followed by false punitive damages against me. My private information, falsely or genuinely, cannot be publicized publicly or privately for any affairs negative, or deconstructive, to me. Nor get utilized for the exclusive purpose of causing any harm [whether social, business, political and health, among others] to me in anyways, or by any means, intrinsically.

The foiled shooting incident at Hartsfield-Jackson as a placement stunt

A potential mass-shooting-incident at Hartsfield-Jackson, Atlanta airport by Billy Joe Cagle, 49, of Cartersville, Georgia was thwarted as a result of the tips acquired from the family of the suspect(CNN news 2025). The corresponding key words, or phrases, for the placement stunt are: “Mass-shooting, Hartsfield-Jackson, Atlanta, Airport, Billy, Joe, 49 and Family, among others.” Again, the incident could be a [case-with-in-case] meta-data-placement-stunt, among others.

Attack on Lawmaker Melissa Hortman and et all as a placement stunt

[Pastor] Vance Luther Boelter attacked lawmaker Melissa Hortman and her husband, mark, in Minnisota. In addition, state senator John Hoffman and his wife, Yvette, were shot multiple times(BBC 2025). The corresponding key words, or phrases, for the placement stunt are: "Vance, Boelter, Melissa, Hortman, Mark, John, Hoffman, 17, Yvette, Minnisota, Brooklyn Park, Champlin, Emergency lights Flashing, Mark Bruley and Board Member, among others." Again, the incident could be a [case-with-in-case] meta-data-placement-stunt, among others."

Minneapolis Catholic school shooting as a placement stunt

A mass shooting broke out during the all school mass celebration of Annunciation Catholic School at Annunciation (OSV news 2025). The corresponding key words for the placement stunt are: “Mass-shooting, Annunciation, Catholic School, Minneapolis, Brian O’Hara, Robin Westman (Robert), Mary Grace Westman(former employee at the annunciation), Fletcher-Merkel-Harper-Moyski, Minneapolis Mayor Jacob Frey, Hennepin County Medical Center, 17, Father Erich Rutten, Great anxiety and grief, among others.”

Fatal hit-and-run on Meaza Brown on Market street

Meaza Brown was hit by a Chrysler 300[which was towed in Hunting park subsequently] heading eastward discriminately while she was walking with her friends in the 3300 block of Market Street(Action News 2025). The corresponding key words, or phrases, for the placement stunt are: “Meaza, Brown, Chrysler-300, Hunting park, Eastward and Market Street, among others.”

Another fatal hit-and-run on Rosa Mar Espinosa on Market Street

Shamir Miller hit Espinosa Rodas with a black, 2012, Honda Accord at 36th and Market Streets in University City about 3:50(The Philadelphia inquirer 2025). Then after, he drove eastbound, crashing into a Buick which was driven by 41-year-old women admitted to Penn Presbyterian Medical Center subsequently. The corresponding key words for the placement stunt are: “Miller, Espinosa, Honda Accord, Market, University, Eastbound, Buick and Medical, among others.”

The assassination of Charlie Krick in Utha

Charles Kirk — born and raised in Arlington Heights, Chicago, American right-wing political activist and co-founder and executive director of Turning point USA — was assassinated by Tyler Robinson during a Turning Point USA event held at Utah Valley University, Utah(Wikipedia 2025). Declining his admission to Baylor University, Krik enrolled at Harper community college for a semester before he went on to concentrate with Turning Point USA, an influential conservative student organization which he co-founded with Bill Montgomery. The corresponding key words, or phrases, for the placement stunt are: “Charles, Kirk, American, political, activist, co-founder, point, Bill, Montgomery, Maga, Arlington, Heights, Chicago, Tyler, Robinson, University, Baylor and Harper, among others.” In addition, couple of weeks before the assassination of Charlie, I had bought a perfume brand, "Charlie Blue," from a CVS bricks and mortar near my place of residence then, Starlight Apartment Community, south Muller, Austin, Texas. My purchase data might have also been acquired by spying on my Starlight apartment unit bathroom in person or using a camera. Furthermore, as far as my metadata is concerned, applying games, satirical portraits[like that of Charlie Hebdo, a French satirical weekly magazine founded by François Cavanna and Professor Choron in 1970, featuring cartoons, reports, polemics, and jokes(Wikipedia 2025)] and software product management frameworks, among others, I carried out a research reaching and impacting millions to market the basic, human, democratic, aspiration of millions of afflicted citizens living in tyranny, revolutionizing software product management, among others, to meet the need of afflicted citizens in quest for the establishment of a bipartisan democratic political system, setting the stage for both conservative and liberal political ideologies subject to be evaluated by free and fair election. While there is not any doubt Charlie is, or could have been, targeted for his political track record, his assassination could have been modelled on my metadata — an empirical and rational hypothesis for investigation. For instance, the fact I bought Charlie blue by accident and put it in my bathroom might have set the stage for

the assassination of Chrlie, effectively making me a victim by building a negative associative property to a national tragedy through my metadata, among others, jeopardizing my basic security and value-creation sphere unequivocally. Because what I browse, browsed and will browse, experience, experienced and will experience, see, saw and will see, and visit, visited and will visit, among others, is not a tacit phenomenon for any complex, meta-data-centric, serial crime or tragedy.



Figure 73. Picture of the perfume taken from my bathroom at Starlight Apartments.

Stabbing in Tampere, Finland

Four persons were stabbed in Tampere, Finland about which eyewitnesses Aleksi Lagerkrantz and Erno Vanhala imparted their account (YLE news 2025). Henri Rikander — head of security at the city of Tampere, who was contacted by Yle — was unable to comment on the event while Juha-Matti Mäkitalo, head of preparedness and security at the city of Tampere, did not comment on the case. Mauri Huhtamo, managing director of Ratina Shopping Centre, Kiinteistö Oy, did not know how to comment on the development, according to YLE news.

The homicide at 8601 Research Boulevard, Austin, Texas, US

Multiple shooting incident at the Target parking lot at 8601 Research Boulevard northbound led to the death of Rosa Machuca-Osorio and Adam Chow and his 4-year-old granddaughter (City of Austin 2025). The suspect, Ethan Nieneker, is under the custody of Austin Police now. The corresponding key words, or phrases, for the placement stunt are: "8601 Research Boulevard Northbound (Target parking lot), Rosa Machuca-Osorio, Hispanic female, 4-7-2001, Adam Chow, Asian male, 8-18-1959, Ethan Nieneker, black Jeep Cherokee, firing, gray Toyota 4-Runner, water truck parked alongside the 7800 block of Mopac Expressway, Volkswagen, Waymo, 2100, Montclair Street,"

The shooting incident at Barton

I was walking in downtown Austin on the 9th of Sep 2025. Standing on the same side of the street I was walking were dozens of men and women staring at a white, drunken, or drugged, looking male across the street putting on a green shirt which has a text, "Sleep late(or stay late tonight) [I don't remember the exact phrases)," on it. That I needed to cross over to the other side of the street to commute to the north, I would cross over without fearing the man whom everyone else was afraid of being anywhere close to. By the time I woke up on the 10th of Sep, I would scan through the news and encounter the following headline, "Austin Police is still in a man-hunt for a suspect putting on a green T-shirt," in what would later be touted as a shooting incident. The corresponding key words, or phrases, for the placement stunt are: "Brandon Thompson, 700 block of Azie Morton Road. Officer Adam Reinhar. Barton Hills Elementary School, Austin, Sleep late and green shirt, among others."

National Guard members shot near Farragut

Two National Guard members, Sarah Beckstrom and Andrew Wolfe, shot near the White House while president Donald Trump was away in Maarlago, Florida and Vice President JD Vance was in Fort Campbell, Kentucky (CNN 2025). The tragedy unfolded few blocks away from the White house, or close to Farragut station, as opposed to another station where national guards are present as well. I have been to Farragut station befor dozens of times. The suspect, Rahmanullah Lakanwal, lived in Bellingham, Washington. As a result, we have yet got to establish 1) if the suspect moved to the state capital to carry out the alleged attack, 2)and why the location chosen, near Farragut station, was chosen, among others. According to Patel, head of FBI, the incident will be investigated as an act of terrorism. The corresponding key words, or phrases, for the placement stunt are: "Rahmanullah Lakanwal, Sarah Beckstrom, Andrew Wolfe(the facial feature of whom looks like a Facebook friend of mine) and Farragut station, among others."

Body of a missing woman located on Avenu F

A body of a missing women, Lesha Massey, located on Avenu F, Lancaster, CA(ABC7 news 2025). The corresponding key words, or phrases, for the placement stunt are: "Lesha Massey, Avenue E, Avenue F, sharp force injuries, Quartz Hill area and Lancaster, CA, among others."

2025 State Capital Jewish Museum shooting

Elias Rodriguez opened fire outside of the Jewish Museum in the state capital which resulted in the death of Yaron Lischinsky and Sarah Milgrim(Wikipedia 2025). I have visited the Museum befor. The corresponding key words, or phrases, for the placement stunt are: " Elias Rodriguez, Jewish Museum, Yaron Lischinsky, Sarah Milgrim, Diplomats, keffiyeh(hattah, or ghutra, or shemagh), "I did it. I did it for Gaza. Free, free-Palestine, Free-Palastine", Adas Israel Congregation and American Jewish Committee, among others."

Three shot dead on a Labour Day Weekend

Siblings Eden Adugna and Feven Adugna and their friend, Bemnet Deresse, were murdered by Samuel Erikson over the Labour Day weekend (FOX 19 News). The corresponding key words, or phrases, for the placement stunt are: “Bemnet Deresse, Eden Adugna, Feven Adugna, Samuel Erikson, Labor Day Weekend and Hamilton County, among others.”

Gunmen Kill 16 in Australian Beach

After two gunmen, father and son, opened fire during a Hanukkah celebration on Bondi Beach, Sydney, Australia on Sunday, 38 people were injured while 16 were pronounced dead subsequently(Newsmax 2025). Bondi Beach is in my browsing metadata. In addition, there was a time years ago on which I carried out monologs, "Bondi," imitating with Aussie accent. The corresponding key words, or phrases, for the placement stunt are: "Father and son, opened fire, Hanukkah, celebration, Bondi Beach, Australia, 38, 16, Moran and Prime Minister Anthony Albanese, among others."

Brown University Shooting

An unknown suspect opened fire in a Brown University classroom killing two, injuring 9(BBC news 2025; Fox news 2025; Hindustan times 2025). I had browsed Brown couple of times before. As a result, it is in my metadata. The corresponding key words, or phrases, for the placement stunt are: “Brown University, Barus & Holley engineering and physics building, Ella Cook, vice president of College Republicans, Mukhammad Aziz Umurzokov, aspiring neurosurgeon and Rachel M Friedberg, among others.”

High-powered shots took aim at a helicopter in Bastrop, Texas.

A helicopter conducting surveying flights for Bluebonnet Electric Cooperative was met with a round of high-powered firearm shots(KXAN News 2025). The corresponding key words, or phrases, for the placement stunt are: “Bastrop, Helicopter, Flights, Bluebonnet Electric Cooperative and high-powered firearm shots, among others.”

A training helicopter avoided fatal crash in Hyvinkää.

A training helicopter operated by a student avoided fatal crash in Hyvinkää(YLE news 2025). The corresponding key words, or phrases, for the placement stunt are: "Helicopter, Fatal crash, Hyvinkää, Hyvinkää airport, Eastern Uusimaa Police Department and Inspector Ben Henriksson, among others."

The murder of Rivas-Hernandez

A partially dismembered body of Rivas-Hernandez was found in Burke's Tesla (ABC 7 News 2025). The corresponding key words, or phrases, for the placement stunt are: "Rivas-Hernandez, body, frozen, decapitated, David Anthony Burke, Santa Barbara, security hold on the autopsy, Department of Medical Examiner, Chief Medical Examiner, Lake Elsinore, Mansfield Avenue, Romaine Street and Hollywood, among others."

The murder of Rob Reiner and Michele Singer

Karen, mayor of LA, confirmed Rob Reiner and his wife, Michele Singer, were found dead in their home located at the 250th block of Chadbourne Avenue, Brentwood-area, LA (ABC7 news 2025). Los Angeles police charged Nick Reiner, who had argument with his dad, with first degree murder. The corresponding key words, or phrases, for the placement stunt are: "Rob Reiner, Michele Singer, Brentwood-area, found-dead, 250 block of Chadbourne Avenue, The Princess Bride, When Harry Met Sally, All in the Family, Throw Momma from the Train, Stand By Me and This is Spinal Tap, among others."

10 year old girl, ex-parents-in-law, died

A 10-year-old girl, ex-parents-in-law, died. The alleged suspect was found dead (ABC7 news 2025). The corresponding key words, or phrases, for the placement stunt are: "Baldwin Park, self-inflicted-gunshot-wound, Monday, Qihao Jin, Yulan Wang, Qiufu Jian, Anaheim Police Department, 100 block of Vermont Street and Nov. 17, among others."

The murder of a 22-year-old Latin singer

Maria De La Rosa, a 22-year-old aspiring singer, murdered in bryant street east of tampa avenue (ABC7 news 2025). The corresponding key words, or phrases, for the placement stunt are: “Bryant Street, east of Tampa Avenue, Maria De La Rosa and Aspiring singer, among others.”

Death of a salon owner

Taylor Longshaw, a hairstylist, was murdered outside of the salon which she co-owns(KVUE News 2025). The corresponding key words, or phrases, for the placement stunt are: "Taylor Longshaw, hairstylist, murdered, Selena Eubank, Constunce Brantley, West Main Street, Two Rooted and funny, caring and a light to many, among others."

A crash leaves a person in a critical condition

A crash in Binz-Engleman Road, Bexar County, leaves a person in a critical condition, injuring couple of passengers (MYSANANTONIO 2025). The corresponding key words, or phrases, for the placement stunt are: “Bexar County, Binz-Engleman Road, San Antonio and Friday, among others.”

MIT professor killed in Brookline

Nuno F.G. Loureiro — professor of Nuclear Science & Engineering and Physics and director of MIT's Plasma Science and Fusion Center — was shot in his home in Brookline, Massachusetts (NBC10 Boston 2025). The corresponding key words, or phrases, for the placement stunt are: “Nuno F.G. Loureiro, professor, Science, Engineering, Nuclear, Physics, Plasma Science, Fusion Center, Brookline, Massachusetts, Monday, Gibbs Street, Beth Israel Deaconess Medical Center, Boston, Herman Feshbach, magnetized plasma dynamics, magnetic reconnection, magnetic field generation and confinement and transport in fusion plasmas, among others”

Burglary in a meat market.

Two individuals would carry out burglary at Ararat Fish & Meat Market on Glendale Avenue and E Maple Street(Abc 7 2025). The news is reported on the 21st, the date of my birthday. The corresponding key words, or phrases, for the placement stunt are: “Ararat Fish & Meat Market, Burglary, Glendale Avenue, E Maple Street”

Pflugerville man charged with murder of a friend

Joseph Javier Muniz, a Pflugerville resident, was charged with the murder of his visiting friend(Fox 7 2025). I would book to stay in an Air B&B rental for a month in Pflugerville. Although I paid for a full month, I, leaving the rental house without any altercation, would cut my stay short due to unprecedented negative experiences. The corresponding key words, or phrases, for the placement stunt are: “Joseph Javier Muniz, Austin, The 2500 block of Forgetmenot Lane, Pflugerville”

1 stabbed, killed at north Austin home

A man in his 70s stabbed to death in North Austin (Fox 7 news 2025). The three consecutive Uber rides I took recently before the incident pulled over North Austin to drop or pick-up passengers. The corresponding key words, or phrases, for the placement stunt are: "The 11000 block of Bending Bough Trail, Walter Connor, Isaiah Jackson"

North Austin shooting leaves 1 dead

Man in custody after shooting one man dead (Fox 7 news 2025). The corresponding key words, or phrases, for the placement stunt are: "Head, North Austin, 17, Austin 911, 11900 block of North I-35, Braker Lane/Yager Lane area, Quavone Easley, Bike, Murder"

Man in custody after fatal stabbing

A man in his 40s died of multiple stabbing wounds. The suspect, Faran Abdolrahimi, is under the custody of Austin Police (Fox 7 news 2025). The corresponding key words, or phrases, for the placement stunt are: "Faran Abdolrahimi, Lipton Lane, Pflugerville Police Department, Stabbing, Murder"

Libya's military chief dies in plane crash in Turkey

Libya's military chief dies in plane crash in Turkey(DW news 2025). The corresponding key words, or phrases, for the placement stunt are: "Libyan military chief, Muhammad Ali Ahmad al-Haddad, Dassault Falcon 50-type jet, Ankara, Esenboga, Airport, Mohammed Al-Asawi Diab, Major General Al-Fitouri Ghraibil, Mahmoud al-Qatiwi, Mohammed Omar Ahmed Mahjoub"

Two attorneys vanish during Florida fishing trip

Two attorneys vanish during Florida fishing trip(Fox news 2025). The corresponding key words, or phrases, for the placement stunt are: "Attorneys, Florida, fishing-trip, Fort Myers, Randall Spivey, Brandon Billmaier, Friday, 19, fishing boat"

The death of Gene Hackman and Betsy Arakawa

Gene Hackman, the Oscar winning star of superman, Betsy Arakawa, wife of Hackman, and one of their dogs were found dead in New Mexico (ABC news 2025). The corresponding key words, or phrases, for the placement stunt are: “Gene Hackman, Superman, Betsy Arakawa, one of their dogs and Santa Fe, among others.”

Woman stabbed inside Barnes & Noble

Rita Loncharich stabbed to death inside Barnes & Noble, Palm Beach Gardens, Florida(Fox 32 news 2025). The corresponding key words, or phrases, for the placement stunt are: "Florida, Barnes & Noble, Palm Beach Gardens, Rita Loncharich, Monday, Legacy Place shopping center, Antonio Moore and Stab, among others."

Appendix A19M: Observation of Attempts of Undermination

To whom it may concern,

I would like to bring something critical to your attention: "a suspected bio-chemical ambush in the vicinity of the Karamalmi campus on Friday 25/10/2024"

Immediately after I came out of the class for Business Process Development, I, all alone, went down through the elevator. And, I would inhale a weird chemical that changed my state a little bit temporarily. The result: I felt hot in parts of my leg and my state changed somehow thereafter for some time. I have been spray-ambushed with different types of chemicals, among others, in Finland. As a result, 1) it is evident that Metropolia is not safe and secure and 2) there are abnormal, or crook, or ill-intended, desperate actors operating in the campus. I will report the matter to Police and, including other substantive legal matters poised to arise, file a civil lawsuit and take political action. In addition, I would like to know a) why the university snubbed my outstanding security concerns before, b) if the student Cafteria of the Karamalmi campus[at least, in one customer touch point, or value co-creation, or value proposition, sphere alone] has ever placed experimental [or whatever the case may be] substance in the food that a student would encounter covertly or overtly, aiding and abating, or conspiring with, other internal, or external, parties, violating its terms of service[which doesn't, or can't, do away with the mission, vision and values of Metropolia UAS, normative human and democratic rights and European Convention on Human rights] directly and indirectly. If the antecedents in section 2 happened with the consent and knowledge of the university, forget about temporary harms, the act of not communicating substantively-emotional-state-changing-elements of the menu alone qualifies for felony absolutely and relatively c) and if the university has ever carried out any research on a student without the consent of the student in anyways or by any means. As far as the law is concerned, I can make research, or thesis, or memoir, out of my value creation sphere with Metropolia.

Nonetheless, Metropolita UAS, except enhancing its service offering to me, can't direct, or aid and abate, any form of research, or observation, on me in any ways, or by any means, without my knowledge and consent.

Thanks, Michael Argaw

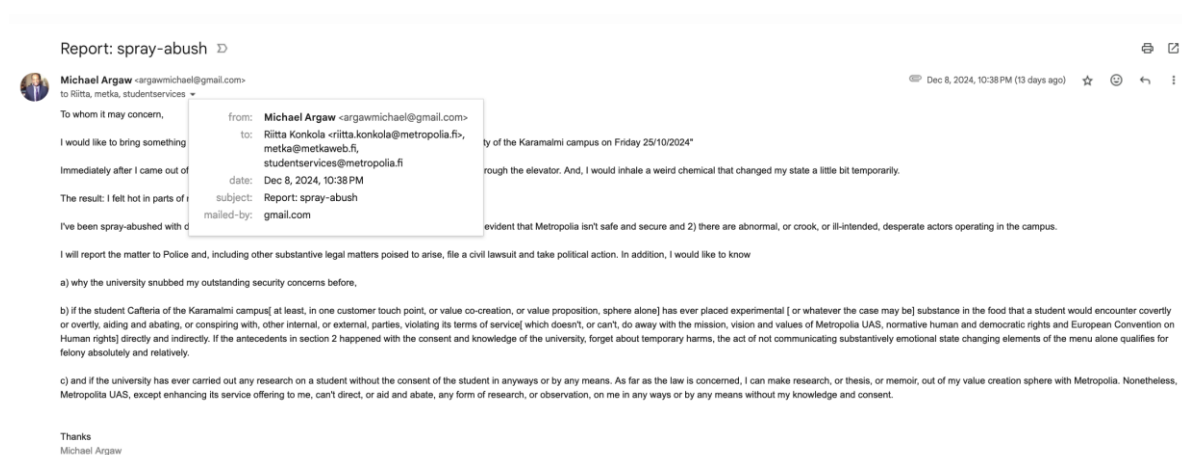


Figure 74. Snippet of example email sent.

Appendix A19N: Observation of Acts Premised on Hearsay

From the observation diary of the researcher

It is true that while interacting for value creation, I have encountered different private service providers, such as Liddle and Mehilinen, among others. In addition, I have also received illegal services from illegal service providers: "For instance, a Nazi salute dozens of times." Nevertheless, isolated incidents of Nazi salute, or any form of abuse committed on Michael using entities affiliated to Germany, cannot be framed as Michael Vs Germany or Michael and Germans unless investigated independently.

Although I don not know if somebody was directing an empirical experiment on me, I encountered girls and women dressed in purple getting off blue and white Toyota vehicles attempting to attract me. As a matter of fact, couple of them looked half-Japanise. Again, I am not blaming, and I can not blame, Toyota on this. Nor any party unless I establish the exact reason and party, among others, objectively and independently. "Would you like to do an advert for Toyota?" one of them would ask me. "You bumped me putting on purple because you have a misinformation about me. I am not against Toyota. Nor against German cars. I Nor against Tesla. Nor against any product or service. Nevertheless, given the drama directed at me using German entities (the reason for which only God, time, will tell) I am not willing to do anything premised on any misconceptions, or direction, until I can tell everything," I would tell her. Then after, the act would halt effectively.

Appendix A19O: Observation of Biochemical attacks

While becoming a subject of biochemical attacks is not a new thing for Michael, after 2024, especially immediately after he started working on this work, he was a subject persistent, multidimensional, external-and-internal biochemical attacks intended to debilitate a person intellectually, emotionally, psychologically, physically and psychiatrically, among others, carried out in different forms: “1) studying Michael's movements, or patterns, outside of his home and spraying biochemical agents, 2) interfering with Michael's district heating system and water supply, tampering with his air-supply system, and 3) interfering with contactful objects which Michael would be in contact with[For instance, even the reply letter which Michael received from AVI and the administrative court of Helsinki, among others, regarding his complaint over the torture, was concentrated with chemical powders inducing the same, envisaged, negative effects, such as degrading a person emotionally and intellectually, among others], among others.

Appendix A19O1: Internal, in-home, biochemical attacks in Espoo, Finland

Michael's home-water, district-heating and air-supply-system in Espoo, Finland was interfered with lethal biochemicals intended to debilitate a person intellectually, emotionally, psychologically, physically and psychiatrically, among others, that Michael had difficulty with writing while subjected to a persistent state of biochemical attack. In addition, the biochemicals were intended to upset his cardiovascular system and, in some cases, if Michael's home system is fully isolated, to result in a man slaughter by way of suffocation immediately. As a result, in what Michael dub, "an open, post-modern, neo-nazi, experiment," what was experimented on him in a closed environment was applied in an open environment by subverting and manipulating his corresponding home ontology strategically unethically. Reporting about the matter to emergency service by calling, among others, Michael, as opposed to receiving enforcements ready to take samples to deliver justice, was told, "we can send you an ambulance if you would like to see a health professional," instead. In some of the professional English email newsletters, website and e-newspaper-banner-ads and Facebook and google ads, among others, he encountered, Michael would be communicated about the corresponding interferences tacitly. In addition, dressing codes would be harnessed to communicate to Michael tacitly about the biochemical, or domestic, terrorism.

Appendix A19O2: Biochemical Attacks through retail-store products

Products I bought from Liddle were contaminated with lethal agents

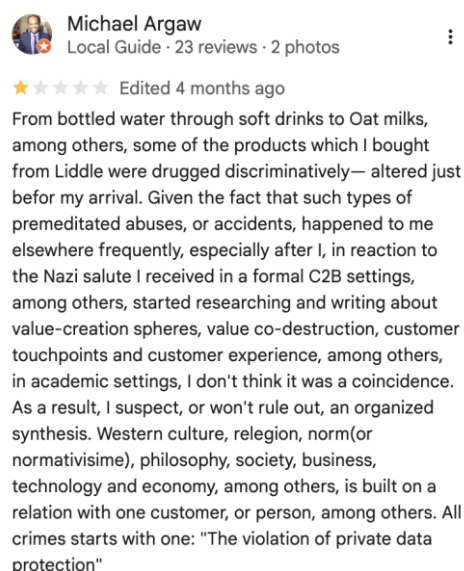


Figure 75. Google review regarding controlled products bought from Liddle

The bottled water which I bought from Target was contaminated with lethal agents intended to disable a person emotionally and intellectually, among others, temporarily. Remains to be seen if the corresponding lethal bottled water has inherent negative effects which will not be immanent effectively. In addition, the bottled water which I bought from an H.E.B bricks and mortars located at 1801 E 51st St, Austin, TX 78723 and 1000 E 41st St, Austin, TX 78751 were contaminated with lethal agents as well.

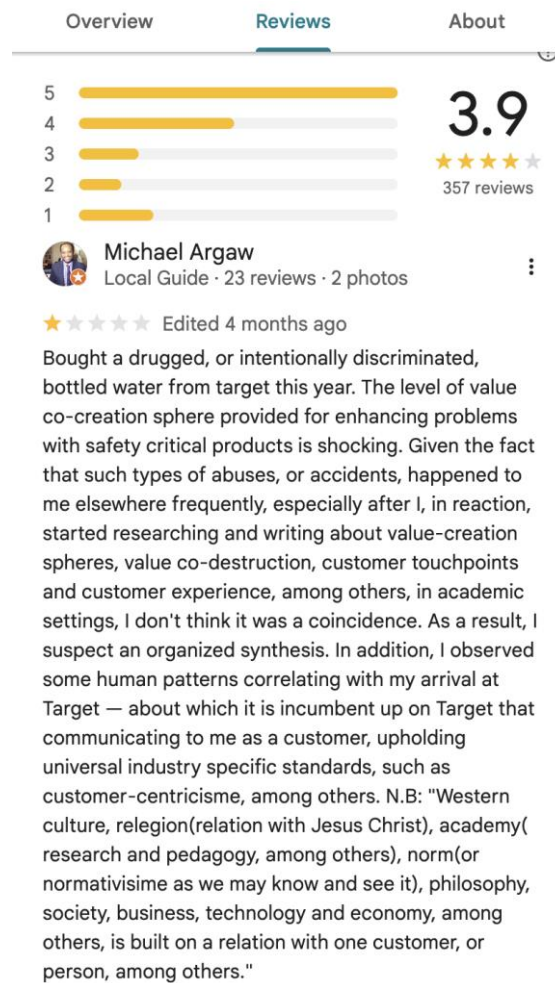


Figure 76. Google review regarding controlled products bought from Target

Appendix A19O3: Biochemical Attacks through restaurant services

In addition, I experienced biochemical attacks through the restaurant services I experienced. Entities implicated in the attack include: "Papa Jhons Pizza, Santa Catrina 2901 Manor Rd, Domino, East Ausitn Hotel and Coffee-house-Austin, among others." Donald Trump, the president of US, has the highest protection in the country. Nonetheless, the protection attached to me is not as complex as Donald Trump. I believe if Donand would visit one of the service providers, I don't think he would be attacked biochemically, getting served with food, or drinks, contaminated with lethal chemicals. One thing clear: "Immanent in the biochemical attack, or domestic terrorism, is discrimination."

Appendix A19O4: Biochemical Attacks through envelopes received

For instance, even the reply-envelops which I received from AVI and the administrative court of Helsinki presented in the upcoming appendixes, among others, were contaminated with lethal powders.

Appendix A19O5: Biochemical Attacks in my temporary hotel and Air B&B accommodations.

In addition, I have been a subject of lethal-biochemical-attacks, or domestic terrorisms, in the hotels and Air B & B accommodations I put up in, such as Sheraton Dallas Hotel, Embassy suit by Hilton San Francisco, Hotel Griffon San Francisco and Comfort Inn & Suites South San Francisco, among others.

Appendix A19O6: Domestic terrorism: "The biochemical attack at Volume apartments"

There has been repeated occasions at Volume apartments where my water and air supply were contaminated with lethal biochemicals intended to degrade, or undermine, or negatively-control, among others, a person. As a result, from hygiene through cooking to drinking, I was forced to rely on utilizing bottled water bought from retail stores.

Appendix A19O7: Domestic terrorism: "The biochemical attacks, among others, at Starlight"

While this section will be dedicated to the lethal biochemical attacks I experienced regularly, it also contains other types of experiences I had at Starlight as well: "1) My black t-shirt and pair of shorts were stolen from around the clubhouse of Starlight apartments on the 9th of June 2025. The corresponding service request number for the incident was 25-00215150 while the report number is 255013041. Although I contacted the police department time and again, Austin police refused to investigate the incident. 2) My debit card data was used to purchase unauthorized services, a ticket from Austin to Florida costing \$786.96, from Spirit Airlines. I won't learn about the illegal purchase before an agent would call me up to remind of a flight for my surprise."

31st of July 2025

25-00258494

2:41 AM

I, time and again, informed Austin police about getting subjected to a domestic terrorism at 2901 Manor Rd, Unit 340, 78722, Austin, Texas, Starlight Apartments : "That my air and water supply gets interfered with lethal biochemicals intended to negatively control a person emotionally, psychologically and psychiatrically, among others, and that police take sample(or direct matters to FBI, among others, relevant) effectively and investigate the biochemical crimes, or domestic terrorism, on me. As a result, I was issued a service request number, 25-00258494, regarding my report. Nonetheless, Austin Police, except closing the backlog subsequently, did not do anything about it. Then after, I, opening a new service request, 25-0041967, would remind Austin Police to investigate, or process, the discriminate exercise of domestic terrorism on me. The service request will be closed again. I would open the service request with another corresponding number, 25-00390819, again. Given the fact that any party could provide biochemical crimes, among others, on me as a service for different reasons, such as a) building hybrid strategies for similar crimes committed elsewhere though it won't work, b) degrading, or undermining, my emotional, intellectual, psychological, psychiatric and physical, among others, wellbeing, c) controlling me, and my activities, negatively, and d) equivocating on my hypotheses on the crashes and assassination, among others, which needs to be investigated from my angle of attack and contemplation, alleging, "Look. Michael makes stuffs up," though it would only be me who can write a story about what I experienced through inhaling, eating and touching, among others, at any private jurisdiction in time, I iterated Police streamline the domestic terrorism to FBI and Texas rangers, among others.

18th of August 2025

10:58PM

25-00280652

I would inform Austin Police about getting subjected to domestic terrorism at 2901 Manor Rd, Unit 340, 78722, Austin, Texas, Starlight Apartments. As a result, I would request police to take some samples from my carpet. In addition, as I have also been a subject of domestic terrorism using the items I bought from the supermarket, I would also ask police to take some sample from the bottled water I bought for the exclusive purpose of investigation. A report number, 255016116, would be created for the service request which has yet got to be investigated.

25 August 2025

25-00289152

10:48PM

The bottled water which I bought from Target was contaminated with lethal, psychoactive, biochemical agents. The case was referred for further review, according to police. Nevertheless, nothing unfolded subsequently. As a result, I would reopen the case on the 19th of Nov 2025 with service request number 25-00390809. One thing clear: "It's a case-with-in-cases crimes the like of which has happened to me before." It could be aimed at 1) framing me psychiatrically [though it won't work]. It could also be aimed at building a weak, impermissible, hybrid strategy on the biochemical crimes which occurred to me in Finland by the suspected private, public and non-gov parties. In addition, it is aimed at degrading me emotionally, psychologically and intellectually, among other envisaged outcomes. The problem: "Unless with my witnesses, in the real-time and, time and again, proving beyond any reasonable doubt, no person, or force, has any legal right to instrument, or will succeed in instrumenting, any if-clause-hybrid-strategy(If Michael complains about domestic terrorism, then we will make a case he's sensing what doesn't exist. If he doesn't complain, then we will make a case, "Look, what's happening. But, he doesn't complain," with a contingent strategy) on me. Furthermore, it could be aimed at watering my empirical and rational formulations, or theory, on some of the crashes and assassinations, among others, creating a weak hybrid-strategy, or hearsay, saying, "Look, he makes up preposterous and superstitious stuffs," preposterously and superstitiously desperately lest they know unless I make false sensations elsewhere in the real-time, time and again, beyond any reasonable doubt, they can't build any permissible case against me. After all, whatever I experience having eaten a privately ordered food in a restaurant is justified solely by my subjective experience, unless the defending parties, time and again, beyond any reasonable doubt and in the real-time, can prove I mis-test, they cannot challenge my private customer experience. The corresponding report number for the service request which has yet got to be investigated is 255021564.

28th August 2025

25-00292190

9:46 AM

I would report domestic terrorism at 2901 Manor Rd, Unit 340, 78722, Austin, Texas, Starlight Apartments. As usual, Austin police won't investigate the case. I will reopen the case on the 19th of Nov 2025, receiving a new service request number, 25-00390801, effectively.

31st of August

25-00295754

4:36PM

A complaint, which has yet got to be investigated, was made against Austin police regarding its corresponding conduct of mis-recording reports.

31st of Oct 2025

25-00295808

5:53 PM

Domestic terrorism: "Tap water and home air system tampered with psychoactive chemicals." Iterating, "No report is needed," Austin police would close the case effectively.

6th of October 2025

25-00337358

8:40 AM

I would report biochemical attack, or domestic terrorism, at 2901 Manor Rd, Unit 340, 78722, Austin, Texas, Starlight Apartments.

16th of October 2025

25-00350034

1:31PM

Continued experiencing Stanford experiment — sounds made correlating with my in-home activities and my activities on my connected devices — at 2901 Manor Rd, Unit 340, 78722, Austin, Texas, Starlight Apartments.

19th of Oct 2025

25-00353203

5:15PM

Continued experiencing domestic terrorism — home air system tampered with lethal psychoactive chemical. In addition, the back of the refrigerator released psychoactive chemicals.

20th of October 2025

25-00354544

10:52 PM

Continued experiencing domestic terrorism — home air system tampered with psychoactive chemical. In addition, the back of the refrigerator released psychoactive chemicals.

24th of October 2025

25-00359741

7:45 PM

Continued experiencing domestic terrorism — home air system tampered with psychoactive chemical. In addition, the back of the refrigerator released psychoactive chemicals.

25th of October

25-00360489

4:36 PM

Under case #25-00360489, biochemical attack, or biochemical assault, or domestic terrorism, at 2901 Manor Rd, Unit 340, 78722, Austin, Texas, Starlight Apartments was reported to Austin 311 Police.

31st of August 2025

25-00295822

6:38 PM

Biochemical attack, or domestic terrorism, at 2901 Manor Rd, Unit 340, 78722, Austin, Texas, Starlight Apartments was reported to Austin 311 Police. As a result, reports 25-2371056 and 25-501616116 were created though closed subsequently.

9th of Sep 2025

25-00305421

3:45 AM

Biochemical attack, or domestic terrorism, at 2901 Manor Rd, Unit 340, 78722, Austin, Texas, Starlight Apartments was reported to Austin 311 Police.

20th of Sep 2025

25-00320078

8:53 PM

Biochemical attack, or domestic terrorism, at 2901 Manor Rd, Unit 340, 78722, Austin, Texas, Starlight Apartments was reported to Austin 311 Police.

20252510346

In response to the call made regarding the biochemical attack, Austin police would turn up at 2901 Manor Rd, Unit 340, 78722, Austin, Texas, Starlight Apartments. Nonetheless, police would refuse to take sample upholding my request.

23rd of Sep 2025

25-00322259

9:26 am

I reported attempted manslaughter at 2901 Manor Rd, Unit 340, 78722, Austin, Texas, Starlight Apartments by way of pressuring lethal air into my apartment. As a result, I had to wake up to a reality of artificial suffocation, open the balcony door of the unit and inhale fresh air before I can establish a normal cardiovascular balance. Subsequently, the room was redolent of the lethal chemical pressured. Austin Police refused to turn up effectively, gather samples and investigate the attempted manslaughter.

30th of September 2025

2500330839

1:48 PM

Phone hacking and manipulation which happened by the time when I was not using the phone. It remains to be investigated whether the hack occurred through network, default apps, custom-installs or enterprise inlets, among others.

30th of Sep 2025

2500330846

1:56 PM

Biochemical assault, or domestic terrorism, at 2901 Manor Rd reported.

30th of Sep

25-00331316

9:03 M

Domestic terrorism, or biochemical assault, at 2901 Manor Rd reported.

30th of Sep 2025

25-00331320

9:13PM

Suspicious activity — that the supermarket was empty, I could not weigh and label grocery items an unusual and an EMS ambulance was on the scene — observed at H.E.B. The case was reopened with 25-00432196.

30th of Sep 2025

2500331418

11: 14 PM

Suspected maldirection of planes to detour through my address an unusual.

That the report was closed, another service request, 2500388233, was created on the 18th of Nov 2025.

13th of oct 2025

255019423

11:30 AM

Reported harassment

26th of December 2025

25-00429217

5:06 PM

Suspected discriminatory agitation or domestic terrorism: "Mal-direction of planes to detour through my vicinity, 2901 Manor Rd, Unit 340, 78722, Austin, Texas, Starlight Apartments, an unusual, during the months of September and October 2025."

24th of October 2025

25-00359741

7:45 PM

On my way back to my apartment from downtown Austin, I saw four men in different locations on the street putting on a shirt which has a text, “back to the ball room,” on it. The corresponding report number for the service request is 20255019785. As the founder of Chewata, which means, “Game,” in Amharic — and with my experience of getting attacked with lethal biochemical instruments, among others, in my apartment, among other mystifications — I’m hypothesizing a case with-in cases as well as distinct synthesis of organized, white-collar, crimes. In addition, there was also a buzz of news regarding the ballroom attached to the Whitehouse then. As a result, I am not concluding about anything now.

25th of October 2025

2500360489

4.36 pm

Domestic terrorism: "A hot psychoactive air continued to get dispensed out from the back of the refrigerator." The harm-centric solutions could also be set smartly using IoT devices. The case was reopened with a new service request number: "2500388223" Austin Police said, "The case was closed because Michael did not want to clarify about the matter," when I iterated the need for taking samples, among others.

Appendix A19O8: Domestic terrorism: "The biochemical attack at the breakers"

15th of November 2025

2500385812

Due to the biochemical (air warfare) attacks which happened to me in the apartment though the AC was off, I was drugged. Result: "Felt very dizzy (for which I fall on record), among others, and my active analytic judgment was so jeopardized I ended up providing the wrong address information when I subscribed for energy. Reopening the case, I was issued a new service request number: 25-00401145.

Appendix A19O9: Domestic terrorism: "The biochemical attacks at Bridges at Balcones"

18th of November 2025

2500388221

Environmental subversion, or domestic terrorism, or Stanford experiment: "Got served with sounds correlating with my activities on my connected devices."

19th of November 2025

25-00390795

7:07 PM

Suspected, organized, crime of agitation by mal-directing planes to detour through my location. If there is a pattern of planes detouring through my vicinity an unusual correlating with my presence in the corresponding area, it should be questioned(investigated) if it is an organized crime aimed at torturing, or agitating, me discriminately as a distinct as well as as a case-with-in-cases incident.

22nd of November 2025

25-00394102

4:12 PM

Stanford Experiment: "Sounds, saying, 'AI and tech,' heard correlating with my activities on my connected devices."

23rd of Nov 2025

25-00394599

11:37 AM

Domestic terrorism: “In what I dub, ‘a copy-cat mal-direction,’ my air and water supply gets interfered with lethal biochemicals intended to negatively control a person emotionally, psychologically and psychiatrically, among others, and that police take sample(or direct matters to FBI, among others, relevant) effectively, and investigate the biochemical crimes, or terrorism, on me. As a result, I was issued a service request number, 25-00394599, regarding my report. Nonetheless, Austin Police — except closing the backlog subsequently — did not do anything about it.

25th of Nov 2025

25-00398541

5:16 AM

Representative of Austin police 311 is not recording an incident reported — 25-00394102. In addition, a misconduct regarding mis-recording 25-00394102 was reported. Nonetheless, the new service request was closed.

25th of Nov 2025

25-00398546

7.01

Domestic terrorism: “In what I dub, ‘a copy-cat mal-direction,’ my air and water supply gets interfered with lethal biochemicals intended to negatively control a person emotionally, psychologically and psychiatrically, among others, and that police take sample(or direct matters to FBI, among others, relevant) effectively, and investigate the biochemical crimes, or terrorism, on me. As a result, I was issued a service request number, 25-00398546, and Report num, 255021778, regarding my report. Nonetheless, Austin Police — except closing the backlog subsequently — did not do anything about it.

23rd of Nov 2025

25-00394599

11:37AM

Domestic terrorism: "In what I dub, 'a copy-cat mal-direction,' my air supply gets interfered with lethal biochemicals intended to negatively control a person emotionally, psychologically and psychiatrically, among others, sporadically and that police take sample(or direct matters to FBI, among others, relevant) effectively, and investigate the biochemical crimes, or terrorism, on me. As a result, I was issued a service request number, 25-00394599.

Nov 30

25-00403121

10:22 PM

Domestic terrorism. Representative of Austin 311 would hang the phone up without taking down the corresponding report properly.

Report of domestic terrorism made: "The apartment environment is controlled maliciously. Although the thermostat is not on, I continue to receive a contaminated air (which has biochemical, or neurological, agents intended to degrade emotional, intellectual and psychiatric, among others, state) through the air system. In addition, I experienced itching. Furthermore, in what I dub, "Stanford experiment," I kept on getting served with sounds correlating with the movements of my body, and private activities on my connected devices."

Nov 30 2025

25-00403125

10:36 PM

Attempts were made to report domestic terrorism to Austin Police. Representative of Austin 311 would hang the phone up on me without taking down the corresponding report properly.

25-00403130

Austin Police mis-recording report

25-00403131

A report was made about Austin Police mis-recording a report.

26th of December 2025

12:14 AM

Attempts made to report domestic terrorism — interference on my air supply with lethal biochemical agents intended to degrade a person intellectually, emotionally, psychologically and psychiatrically, among others — to Austin police were unsuccessful because the customer service representative of Austin Police 311 refused to log my report though clarified time and again. In the call, I iterated: “There are several high-level matters connected to me. As a result, I demand Austin police direct the matter to FBI, among others.”

26th of December 2025

25-00428404

12:22 AM

A report — domestic terrorism, interference on my air supply with lethal, biochemical, agents intended to degrade a person emotionally, psychologically and psychiatrically, among others — was made to Austin police under service request number 25-00428404 though police disregarded the report effectively unethically.

26th of December 2025

25-00429217

12:22 AM

A report of domestic terrorism — interference on my air supply with lethal biochemical agents intended to degrade a person emotionally, psychologically and psychiatrically, among others, impeding intellectual activities effectively, such as reading, writing and rationalizing, among others — was made to Austin police.

29th of December 2025

2500430938

11:00 PM

A report of domestic terrorism — interference on my air supply with lethal biochemical agents intended to degrade, or ail, a person emotionally, psychologically and psychiatrically, among others — was made to Austin police under service request number 2500430938, and the corresponding report number, 255023545, was created effectively.

29th of December 2025

25-00432176

6:39 PM

Home heating system dispensing weird chemicals intended to create discomfort mentally and cardiovascularly. Reports of temporary injury, domestic terrorism and biochemical assault, was made to Austin police effectively.

20th of January 2026

26-00021032

12:40 PM

Received a contaminated air intended to degrade a target emotionally, psychologically and intellectually, among others, through the air system. As a result of the head-ache he experienced effectively, Michael was not able to carry out his normal activities for the course of the day.

27th of January 2026

2600027727

9:00 PM

Domestic terrorism

28th of January 2026

2600028834

11:00 PM

Domestic terrorism

Appendix A20: Decisions by Relevant Complaint Processing Entities

Appendix A20A: Decision by Finland Police

Behold is the decision of Police Finland [not to investigate] regarding the crimes committed by entities in the ecosystem of the Finnish health industry.

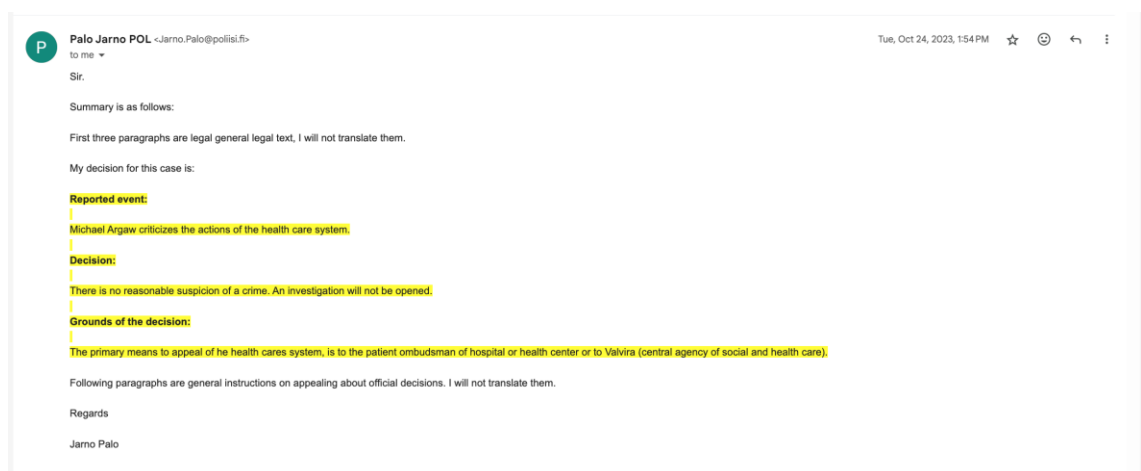


Figure 77. Decision by a representative of Police Finland

Appendix A20B: Decision by the Administrative Courts

Appendix A20B1 Decision by the Administrative Court

The first appeal made to the administrative court was regarding the misdiagnosis, or detention, decision made by the doctors. Although it received nearly 200 pages of documents containing transcription of the unethical interrogation, among others, the administrative court did not bother to cross-check facts and enforce a follow-up oral hearing secession as requested. For instance, 1) the misdiagnosis was made on the 22nd of September 2023. 2) The conduct with which the diagnosis made was unethical intrinsically. 3) It was immediately after the misdiagnosis was made that Michael was declared a mental patient suffering from delusional psychosis resulting from a pathological disease in the central nervous system officially. Nevertheless, the administrative court equivocated the landmark, disputed, critical, service operation touchpoint premising on which an involuntary detention and hospitalization was enforced as that which was done by mistake without illegitimizing the later paradoxically. There are lots of reported and unconsidered (though must be considered whether or reported) atrocities, misconducts and human and democratic rights violations which the administrative court disregarded.

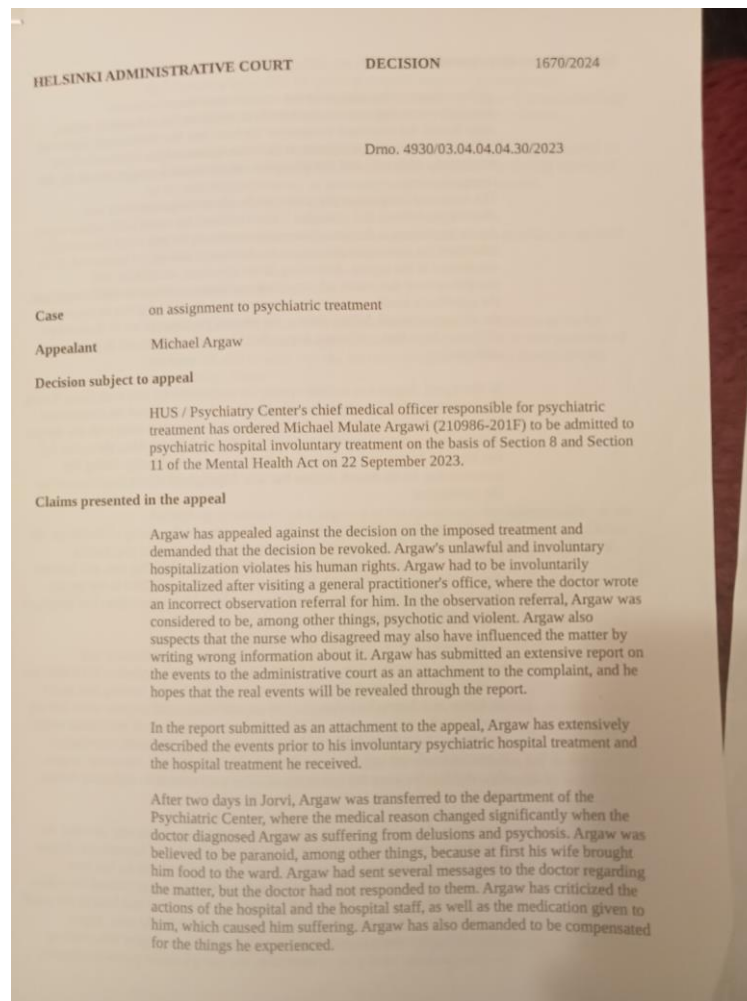


Figure 78. Decision by the administrative court 1.

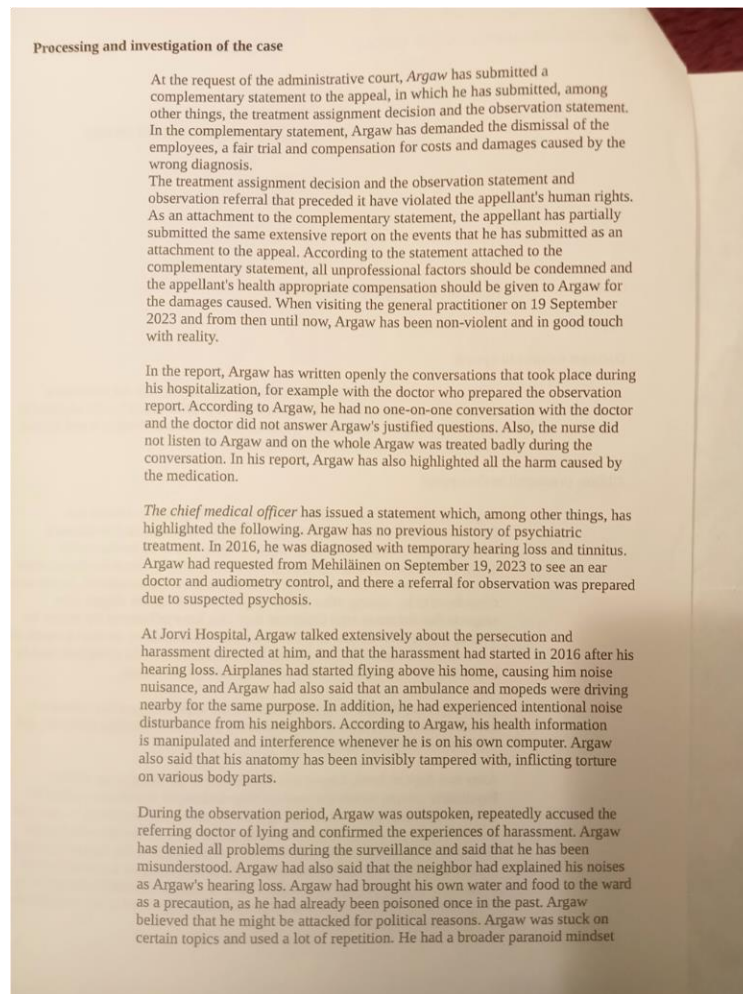


Figure 79. Decision by the administrative court 2.

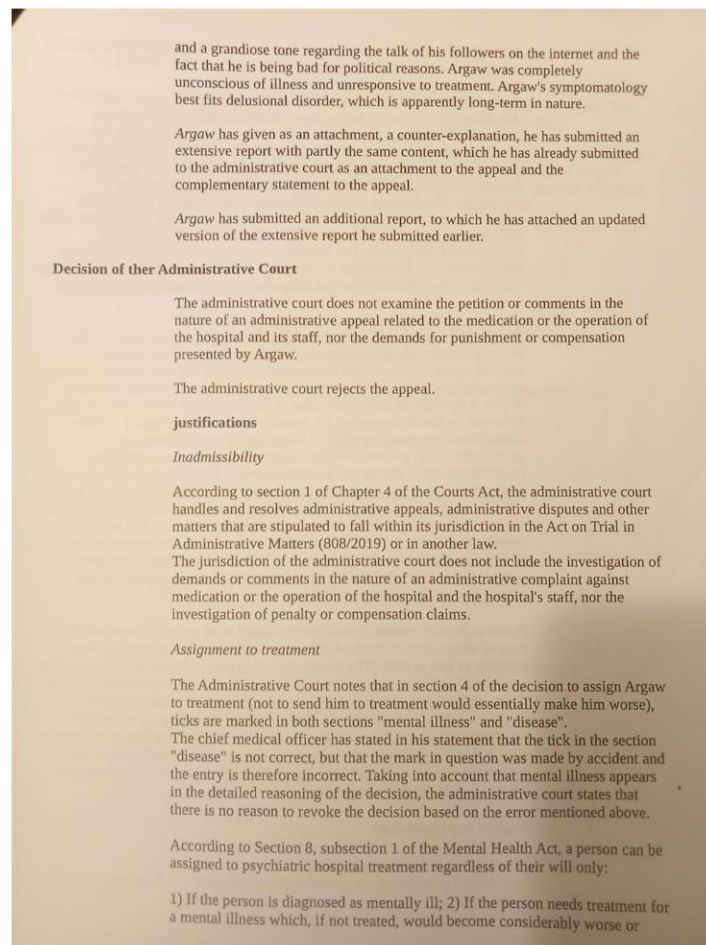


Figure 80. Decision by the administrative court 3.

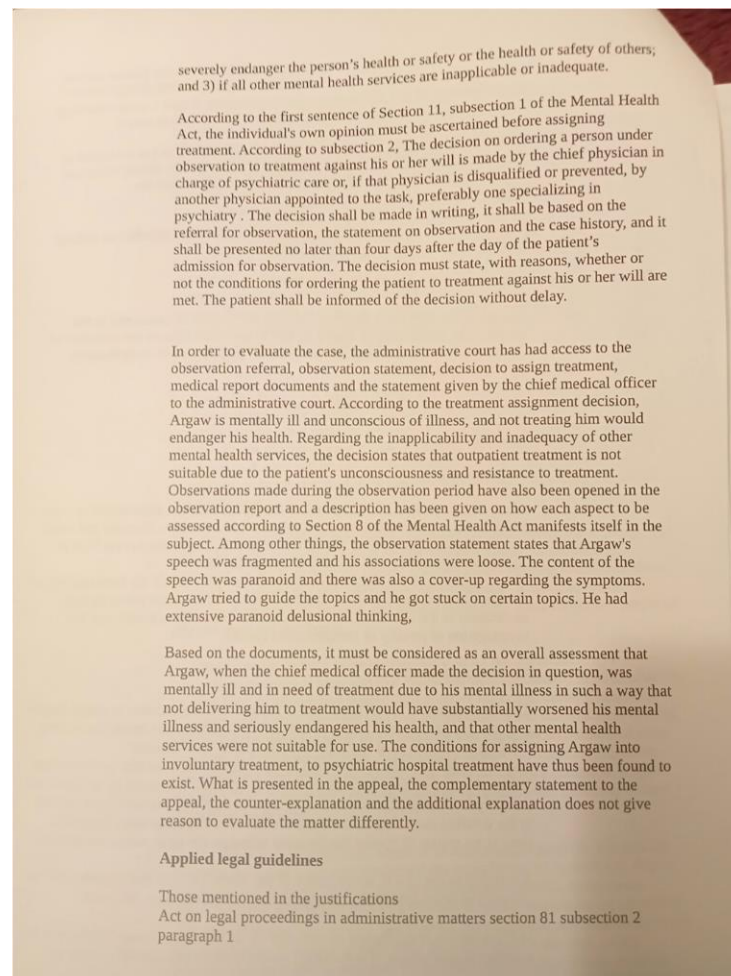


Figure 81. Decision by the administrative court 4.

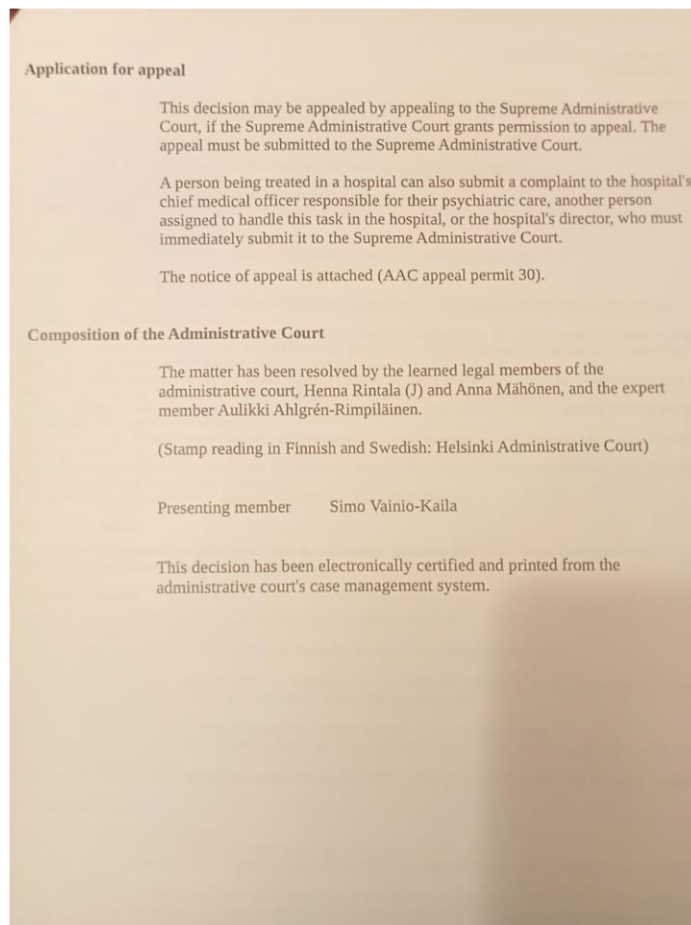


Figure 82. Decision by the administrative court 5.

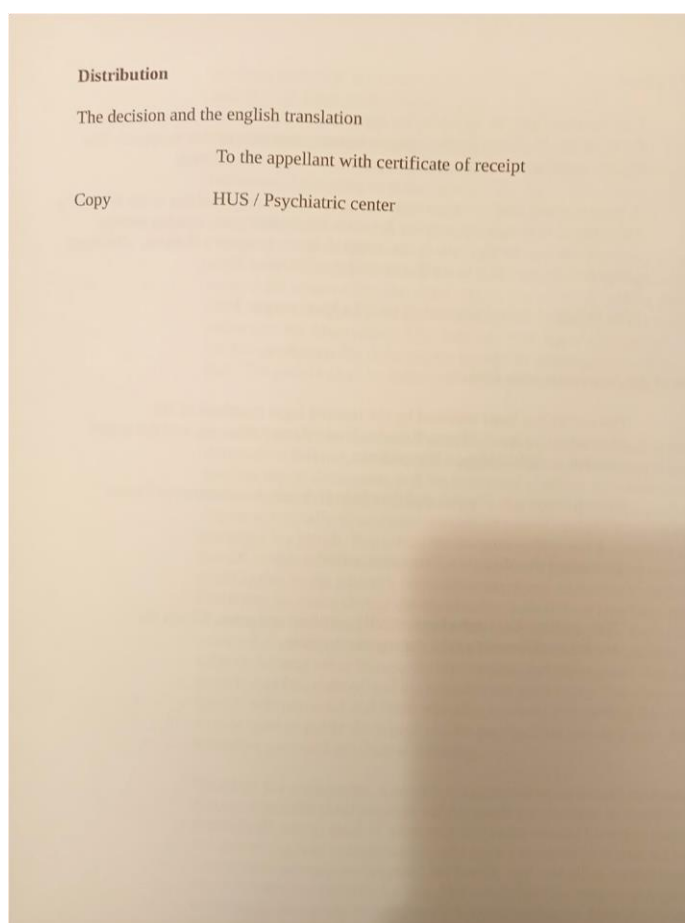


Figure 83. Decision by the administrative court 6.

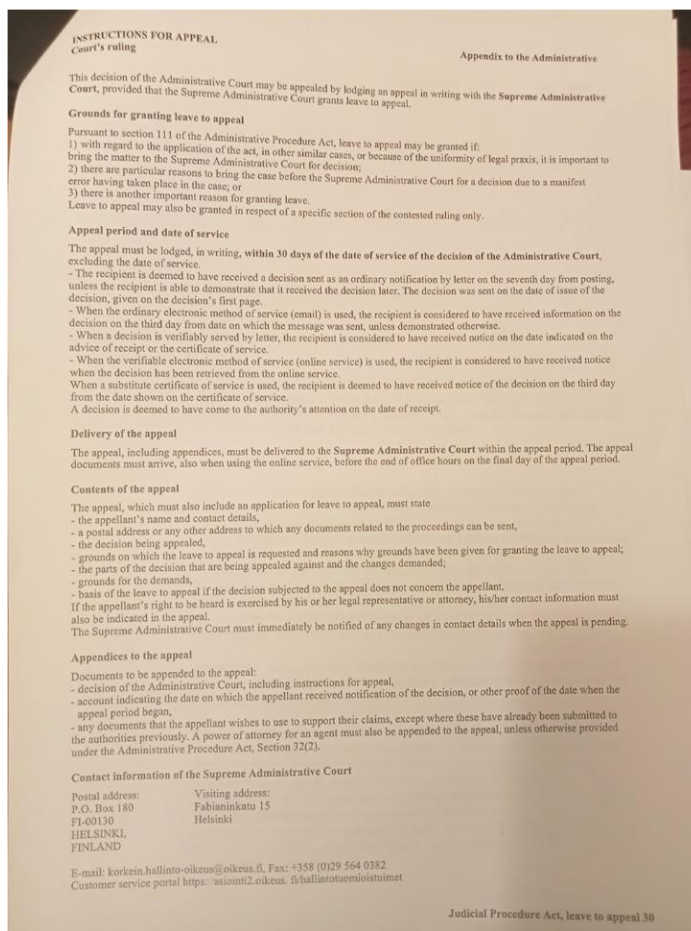


Figure 84. Decision by the administrative court regarding the psychiatric detention

The second appeal made to the administrative court was about Valvira, AVI and Police regarding their corresponding decision to pass the case to AVI.

HELSINKI ADMINISTRATIVE COURT	DECISION	6613/2024
Drno 2446/03.04.04.04.30/2024		
Case	Appeal against transfer of the statement of complaint	
Appellant	Michael Mulate Argaw	
Decision subject to appeal		
National Supervisory Authority for Welfare and Health 14.3.2024 DrnoV/10502/2024		
The National Supervisory Authority for Welfare and Health (Valvira) has transferred the appellant's complaint to the Regional State Administrative Agency for Southern Finland.		
Claims sought in the appeal		
Valvira has not fulfilled its obligations and has transferred the appellant's statement to the Regional State Administrative Agency. An oral hearing must be held in the case.		
Administrative court ruling		
The Administrative Court will not investigate the appeal.		
Statement of reasons		
Under Section 6(1) of the Act on Administrative Proceedings, an appeal may be lodged against a decision by which an authority has decided on an administrative matter or dismissed it as inadmissible.		
Valvira has transferred the appellant's case to the Regional State Administrative Agency for Southern Finland. Valvira has not resolved the matter or left the matter uninvestigated. A decision by an authority to transfer a case is not a decision that can be appealed. The appeal must therefore be dismissed as inadmissible.		
2 (3)		
Applied legal guidelines		
Mentioned in the statement of reasons Act on Judicial Procedure in Administrative Matters, section 81(2)(2)		
Appeal		
This decision may be appealed to the Supreme Administrative Court if the Supreme Administrative Court grants leave to appeal.		
The notice of appeal is attached (ACA leave to appeal 30).		
Composition of the administrative court		
The case was decided by members of the Administrative Court Minna Ruuskanen, Piritta Raivio (J) and Annika Lumikari.		
(Round stamp reading in Finnish and Swedish: Helsinki Administrative Court)		
Rapporteur Annika Aroharju		
This decision has been electronically verified and printed out from the case management system of the Administrative Court.		

Figure 85. The decision by the administrative court regarding Valvira's decision


Appendix A20B2 Decision by the Supreme Administrative Court

The decision of the supreme administrative court regarding an appeal made over the decision of the administrative court: “decision 1670/2024”

SUPREME ADMINISTRATIVE COURT		Decision	2095/2024
			23.07.2024
		Record no.	1143/03.04.04.04.30/2024
Case	Application for leave to appeal against an order for psychiatric hospitalisation		
Appellant	Michael Argaw		
Decision subject to appeal			
Helsinki Administrative Court, 9 April 2024, 1670/2024			
Ruling of the Supreme Administrative Court			
The application for leave to appeal is rejected. The Supreme Administrative Court will therefore not rule on the appeal.			
Grounds			
According to section 111, subsection 1 of the Administrative Judicial Procedure Act, leave to appeal shall be granted if:			
1) it is important for the application of the law in other similar cases or for the sake of consistency of case law to refer the matter to the Supreme Administrative Court;			
2) there are special grounds for referring the matter to the Supreme Administrative Court because of a manifest error in the case; or			
3) there are other serious grounds for granting leave to appeal.			
On the basis of what has been submitted by the appellant and what is otherwise apparent from the documents, there are no grounds for granting leave to appeal to the Supreme Administrative Court.			
2 (3)			
<p>Supreme Administrative Court:</p> <div style="display: flex; justify-content: space-around;"> <div style="text-align: center;"> <p>Hannele Ranta-Lassila Justice of the Supreme Administrative Court</p> </div> <div style="text-align: center;"> <p>Anne Nenonen Justice of the Supreme Administrative Court</p> </div> </div> <div style="text-align: center; margin-top: 10px;"> <p>Tero Leskinen Justice of the Supreme Administrative Court</p> </div> <div style="text-align: center; margin-top: 10px;"> <p>Marita Eeva Referendary in the case, Referendary Counsellor</p> </div>			

Figure 86. Decision by the supreme administrative court.

Appendix A20C: Valvira's Decision

 Valvira Sosiaali- ja terveysalan lupa- ja valvontavirasto	Päätös 14.03.2024	1 (2) Dnro V/10502/2024 <div style="border: 1px solid red; padding: 2px; color: red; font-size: small;"> SALASSA PIDETTÄVÄ JULK. 24.1 § kohta 25 </div>
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Etelä-Suomen aluehallintovirasto
Peruspalvelut, oikeusturva ja luvat -vastuualue
 PL 1
 13035 AVI

Michael Argawin kantelu 29.2.2024

Michael Argawia koskevan kantelun siirto

Valvira siirtää oheisen kantelun liitteineen hallintolain (434/2003) 21 §:n sekä Valviran ja aluehallintovirastojen välisen toimivallanjoon mukaisesti Etelä-Suomen aluehallintoviraston käsiteltäväksi ja niitä mahdollisia toimenpiteitä varten, joihin kantelu antaa aihetta.

Siirrosta ilmoittaminen

Asian siirrosta ilmoitetaan tällä kirjeellä kantelijalle. Kantelijaa pyydetään lähettämään mahdolliset asiaa koskevat lisätiedot/täydennykset sekä kysymykset Etelä-Suomen aluehallintovirastoon.

Salassapito

Tämä asiakirja on viranomaisen toiminnan julkisuudesta annetun lain (621/1999) 24 §:n 1 momentin 25 kohdan perusteella salassa pidettävä.

Ratkaistu: 14.03.2024
 Ratkaisija: Aho Susanna
 Virka-asema: Assistentti

 Asiakirja on sähköisesti allekirjoitettu
 asiankäsitteilyjärjestelmässä.
 Allekirjoituksen oikeellisuuden voi todentaa kirjaamosta.

Liitteet

Michael Argawin kantelu 29.2.2024 liitteineen


Tiedoksi

Michael Argaw

Lisätietoja

Lisätietoja antaa tarvittaessa assistentti Susanna Aho, puh. 0295 209 407

kirjaamo@valvira.fi PL 43, 00521 Helsinki Ratapuhuri: 00520 Helsinki Faksi 0295 209 700	Puhelin 0295 209 111 Koskenranta 3, 06100 Rovaniemi Faksi 0295 209 704	www.valvira.fi
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 Valvira Sosiaali- ja terveysalan lupa- ja valvontavirasto	Päätös 14.03.2024	2 (2) Dnro V/10502/2024 <div style="border: 1px solid red; padding: 2px; color: red; font-size: small;"> SALASSA PIDETTÄVÄ JULK. 24.1 § kohta 25 </div>
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Säädökset

Lainkohdat, joissa aluehallintovirastojen ja Valviran välisestä toimivallanjoosta on säädetty:
 Laki terveydenhuollon ammattihenkilöistä (559/1994) 24 §
 Laki sosiaali- ja terveydenhuollon valvonnasta (741/2023) 32 §
 Mielensterveyslaki (1116/1990) 2 §
 Tartuntatautilaki (1227/2016) 12 §
 Laki sosiaalihuollon ammattihenkilöistä (817/2015) 15 §

Figure 87. Valvira's decision

Appendix A20D: AVI's Decision

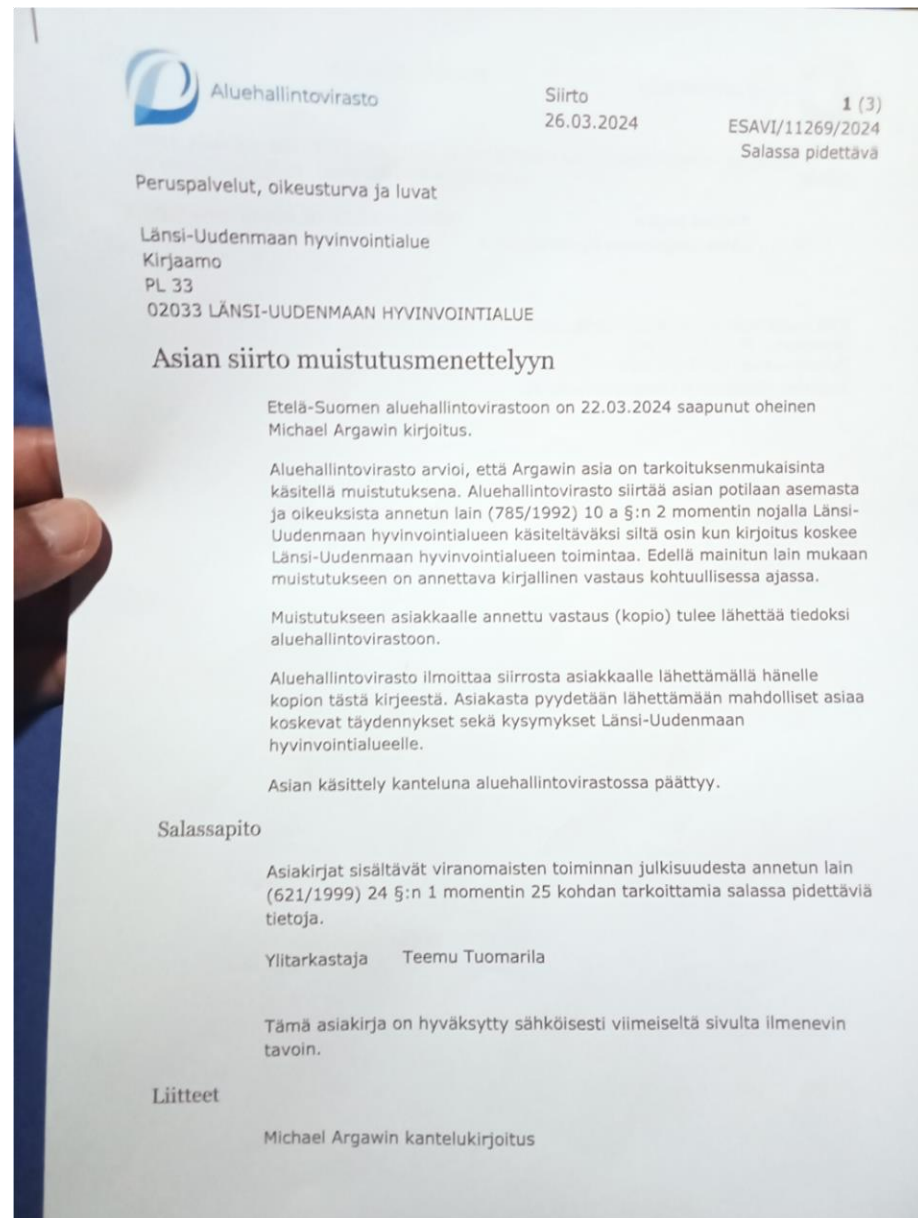


Figure 88. AVI's letter.

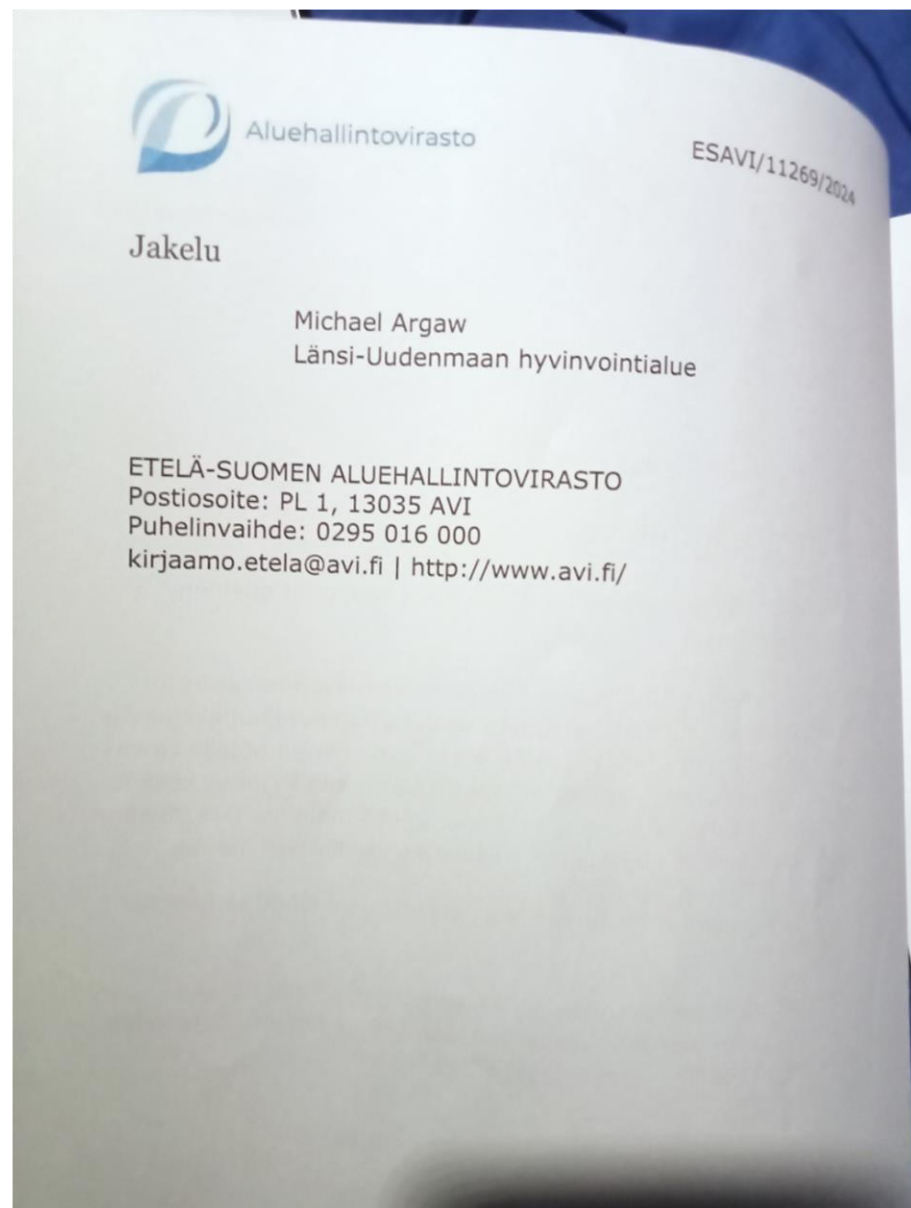


Figure 89. AVI's letter continued.

AVI's continued correspondence regarding the 200 pages complaint delivered to Valvira first.

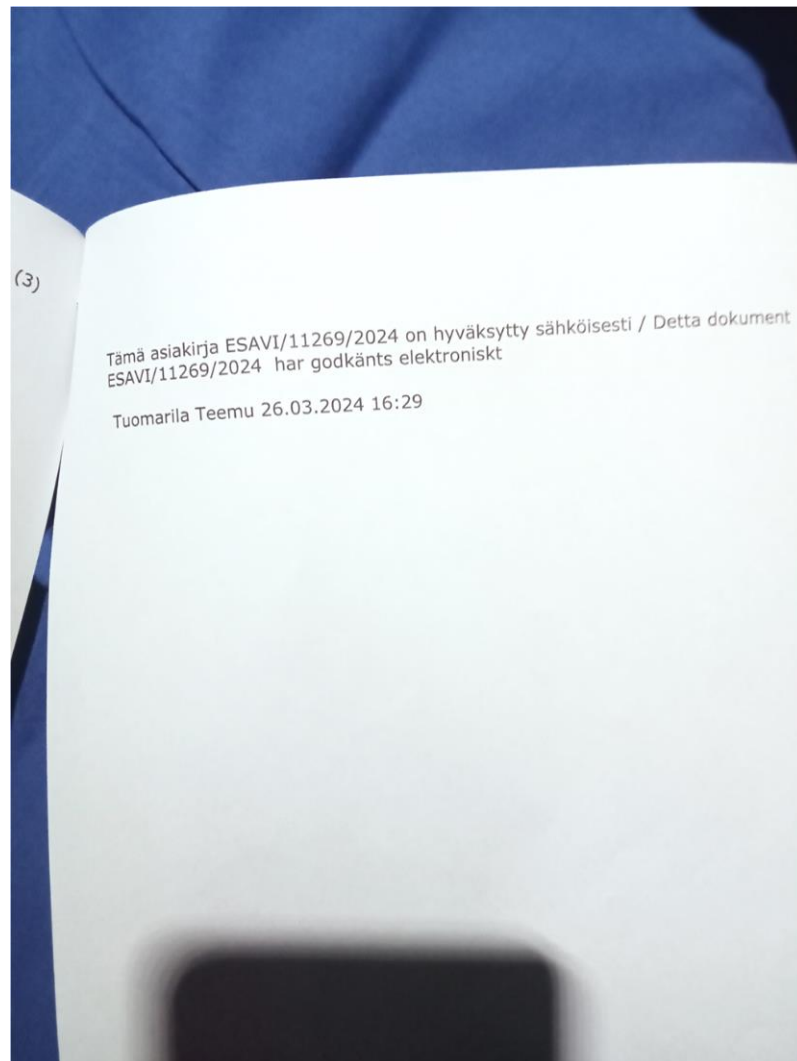


Figure 90. AVI's letter continued.

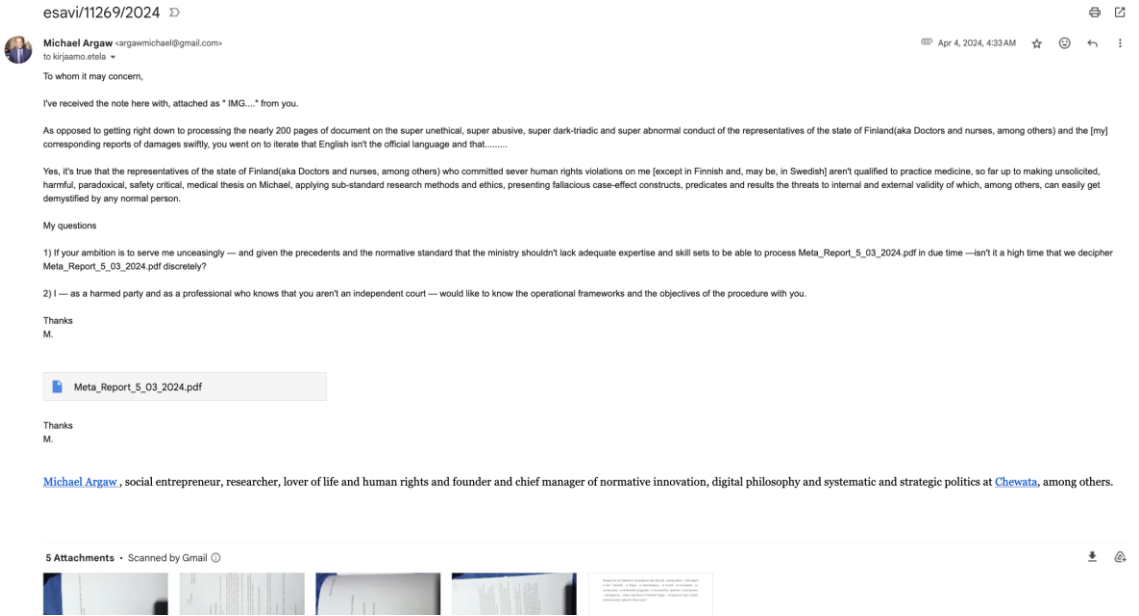


Figure 91. Michael’s reply to AVI

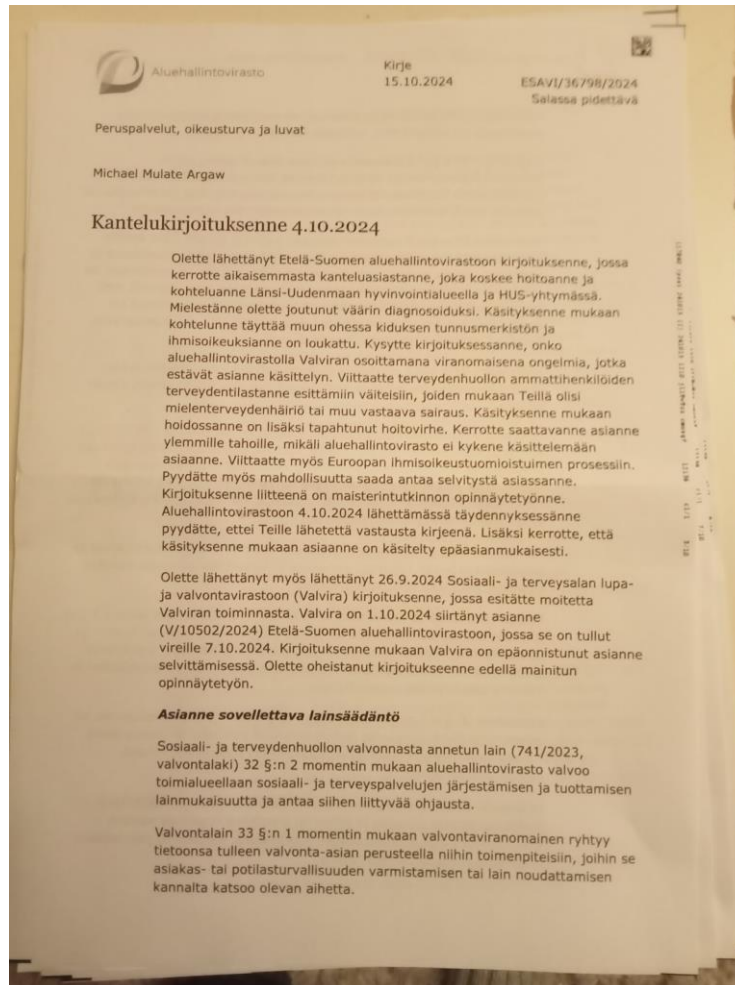


Figure 92. AVI's letter continued.

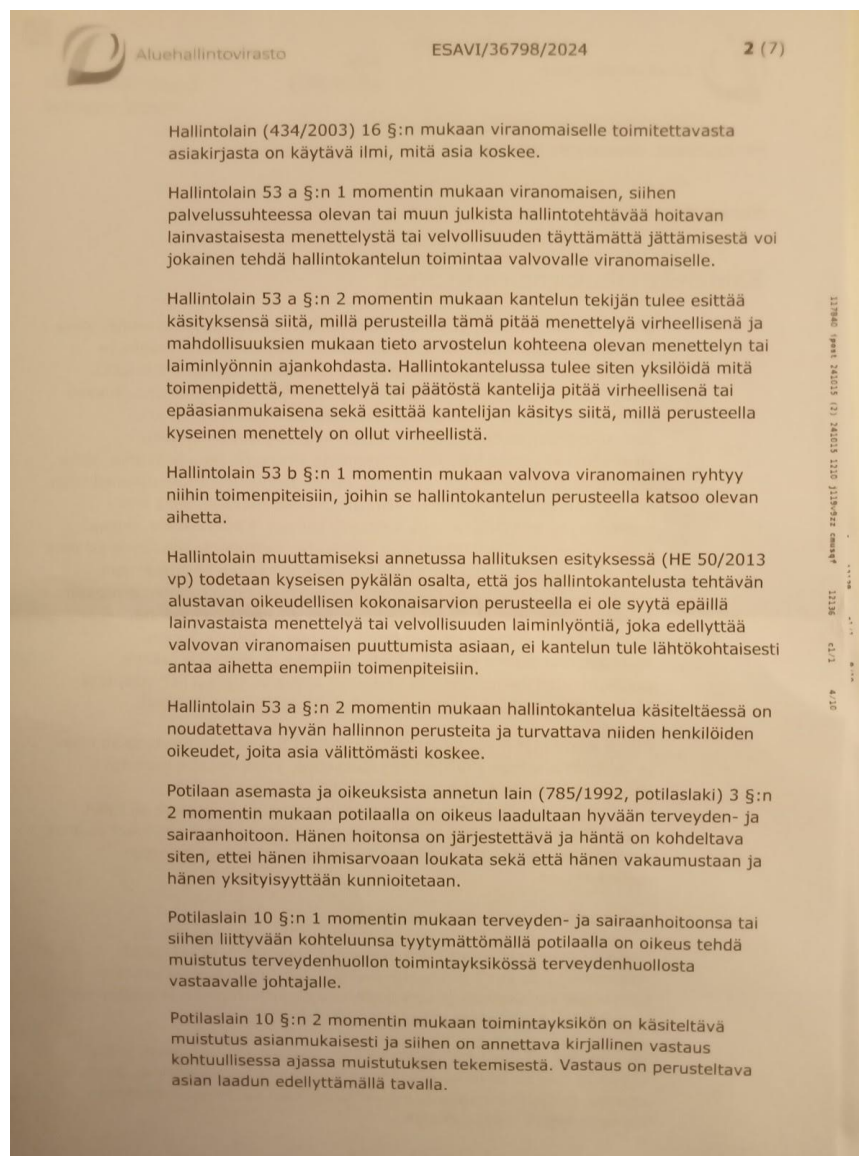


Figure 93. AVI's letter continued.

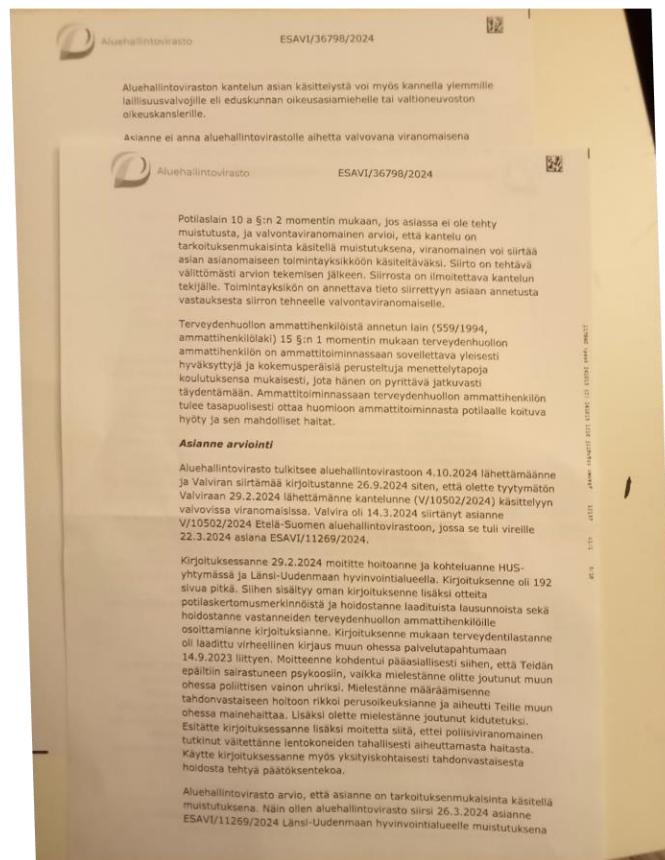


Figure 94. AVI's letter continued.

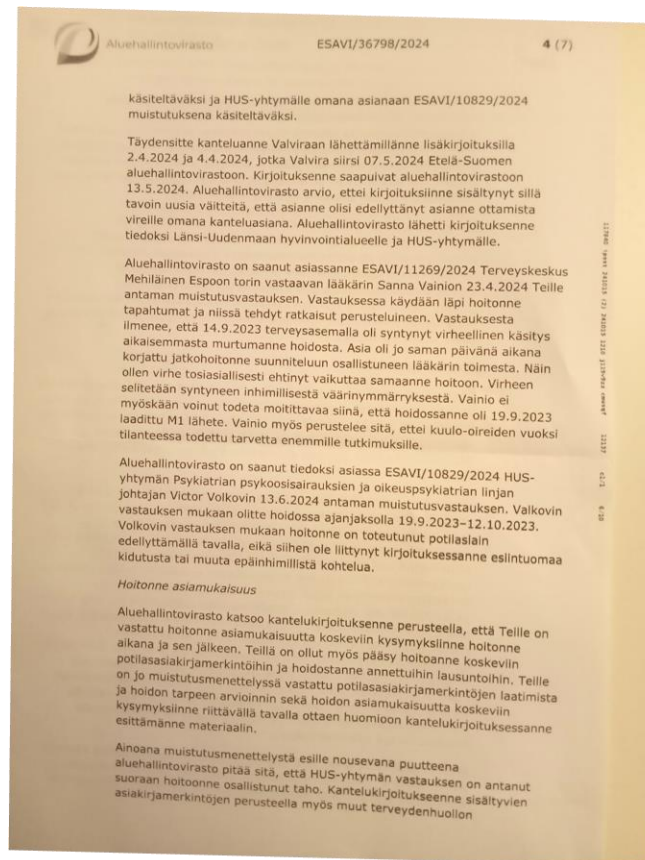


Figure 95. AVI's letter continued.

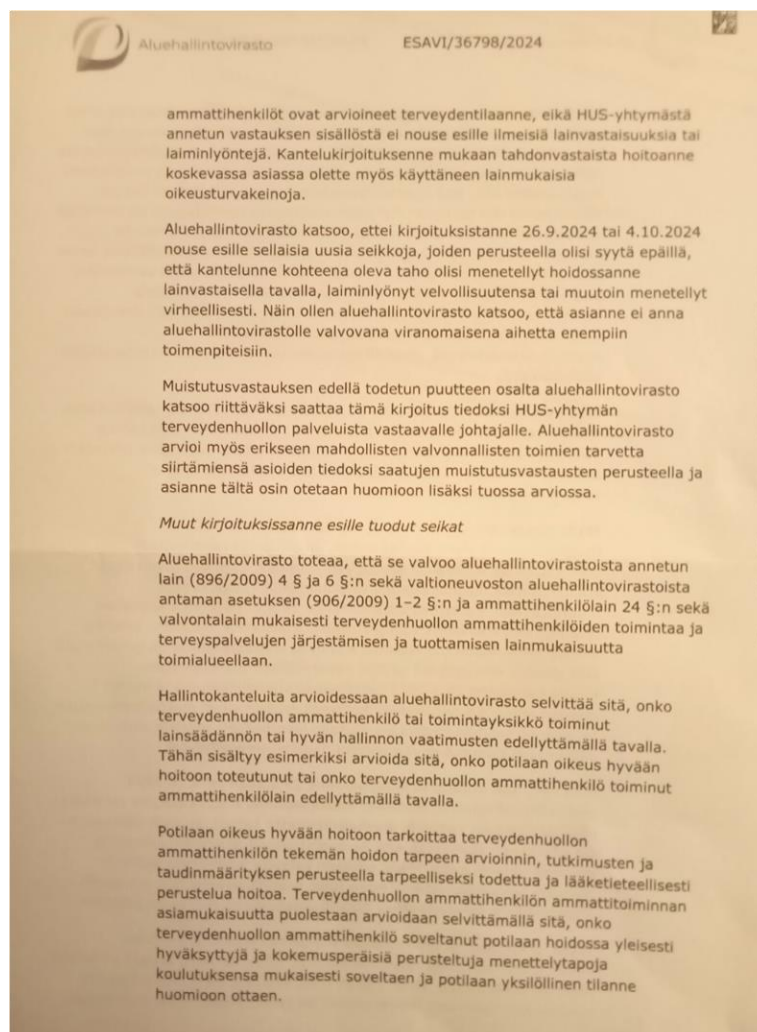


Figure 96. AVI's letter continued.

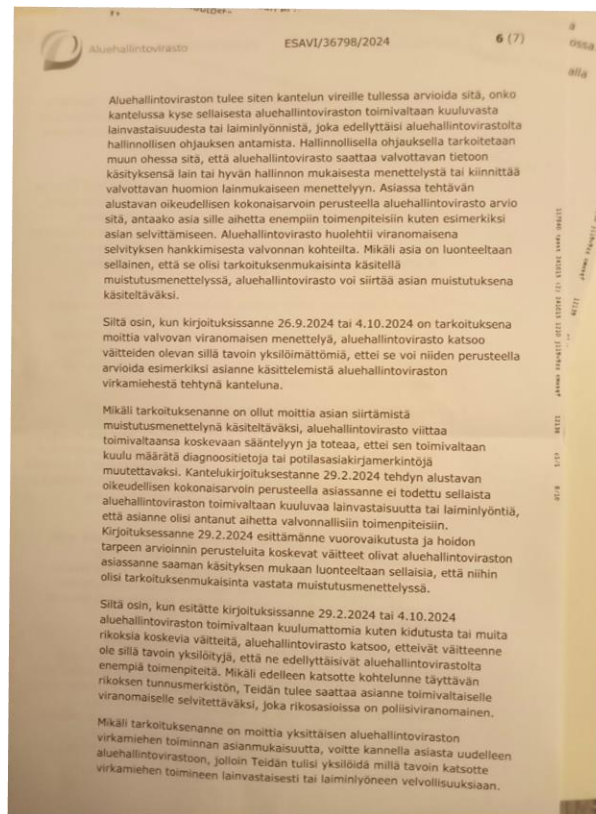


Figure 97. AVI's letter continued.

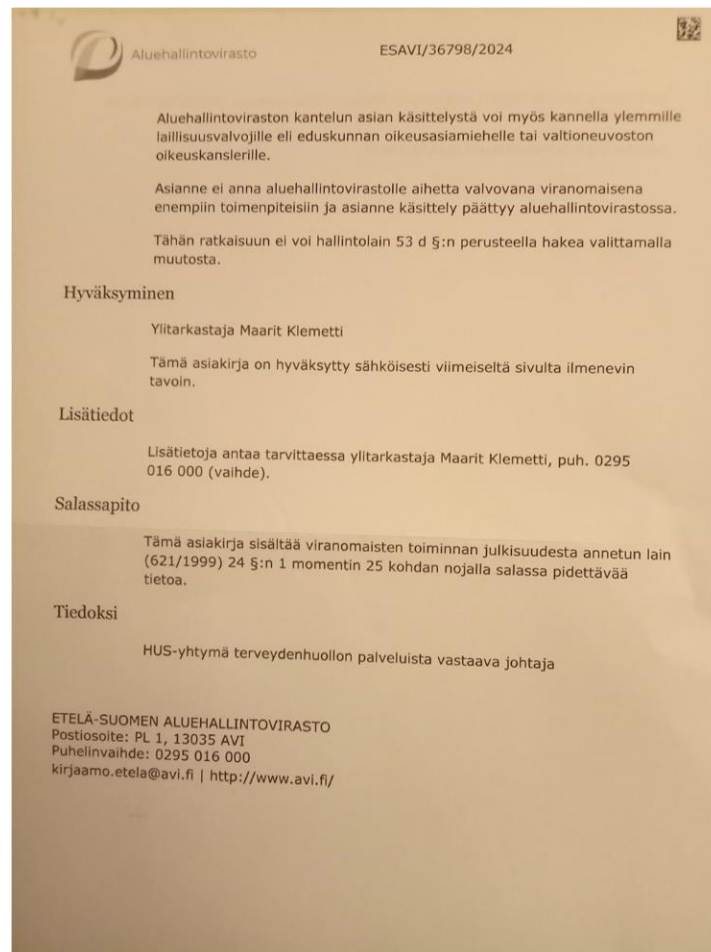


Figure 98. AVI's letter continued.

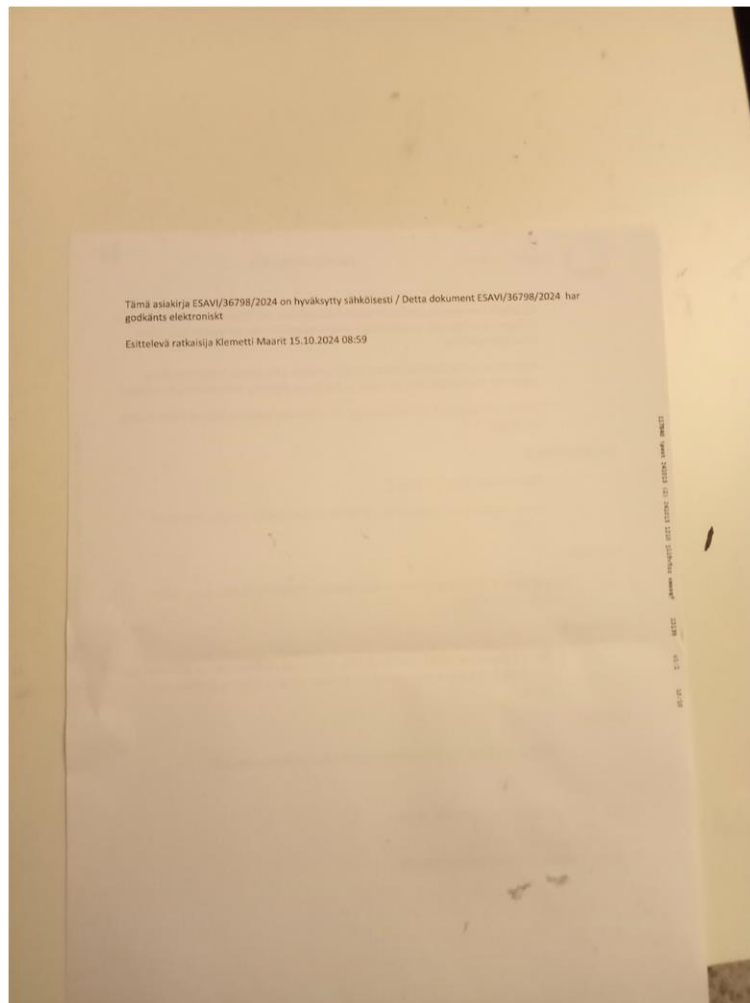


Figure 99. AVI's letter continued.

For instance, the justification of the western Uusimma wellbeing country services regarding the conduct of the appointment scheduling nurse and Malmberg, among others, ignored, or disregarded, detailed, outstanding, issues presented unethically. Nothing was so uncontrollable about me that I need to be alarmed to the media. Police, which was called by Malmberg, was able to witness I was conscious, non-psychotic, non-violent and calm.

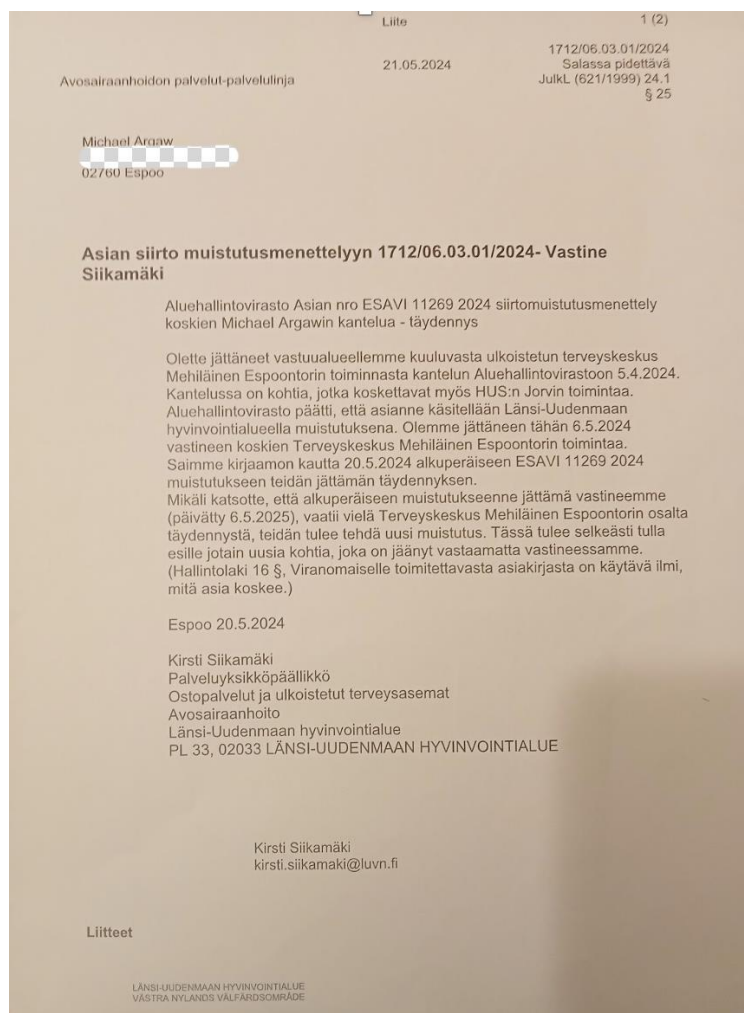


Figure 100. AVI's letter citing the western Uusimma wellbeing county service.

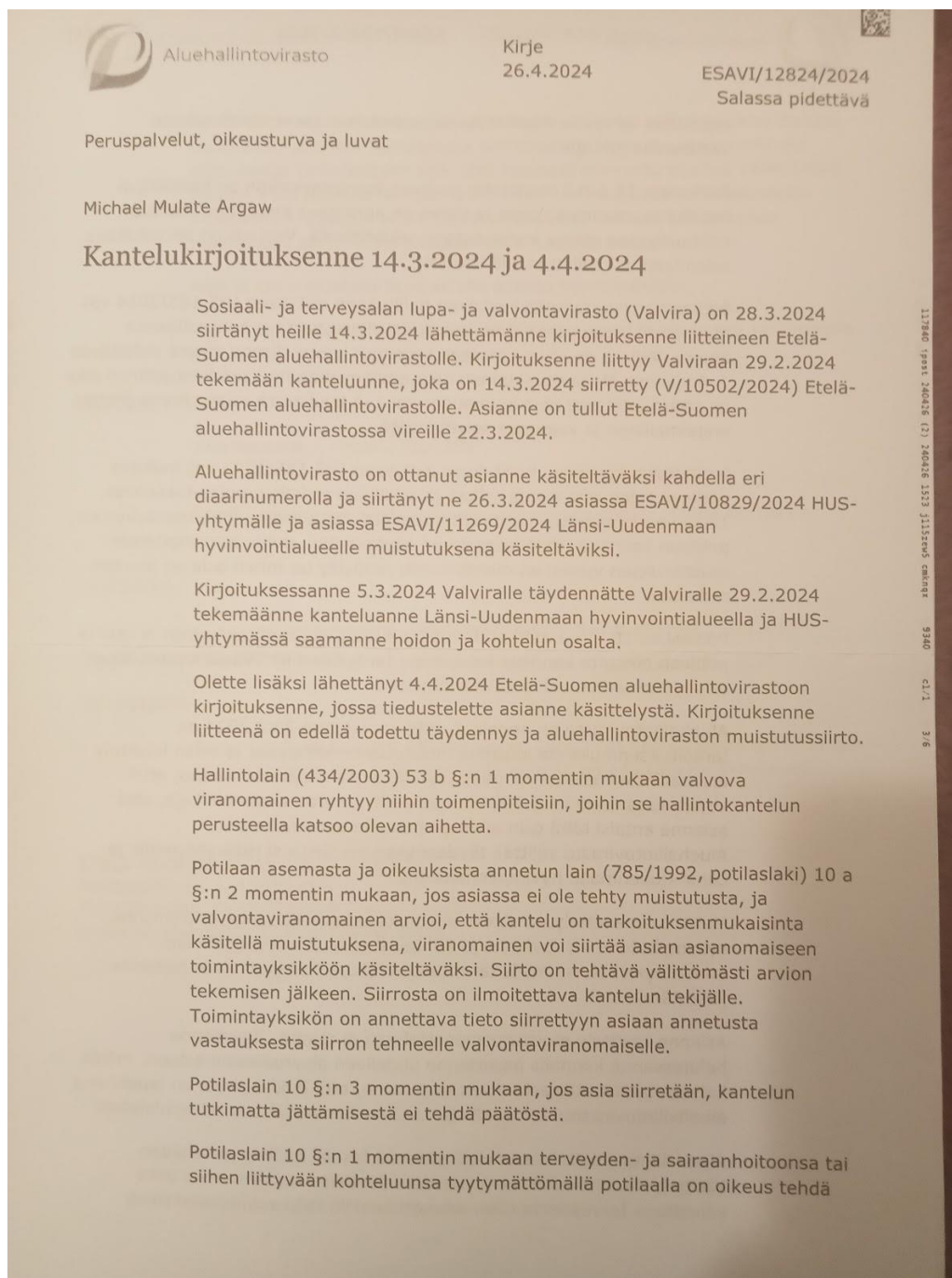


Figure 101. AVI's letter continued

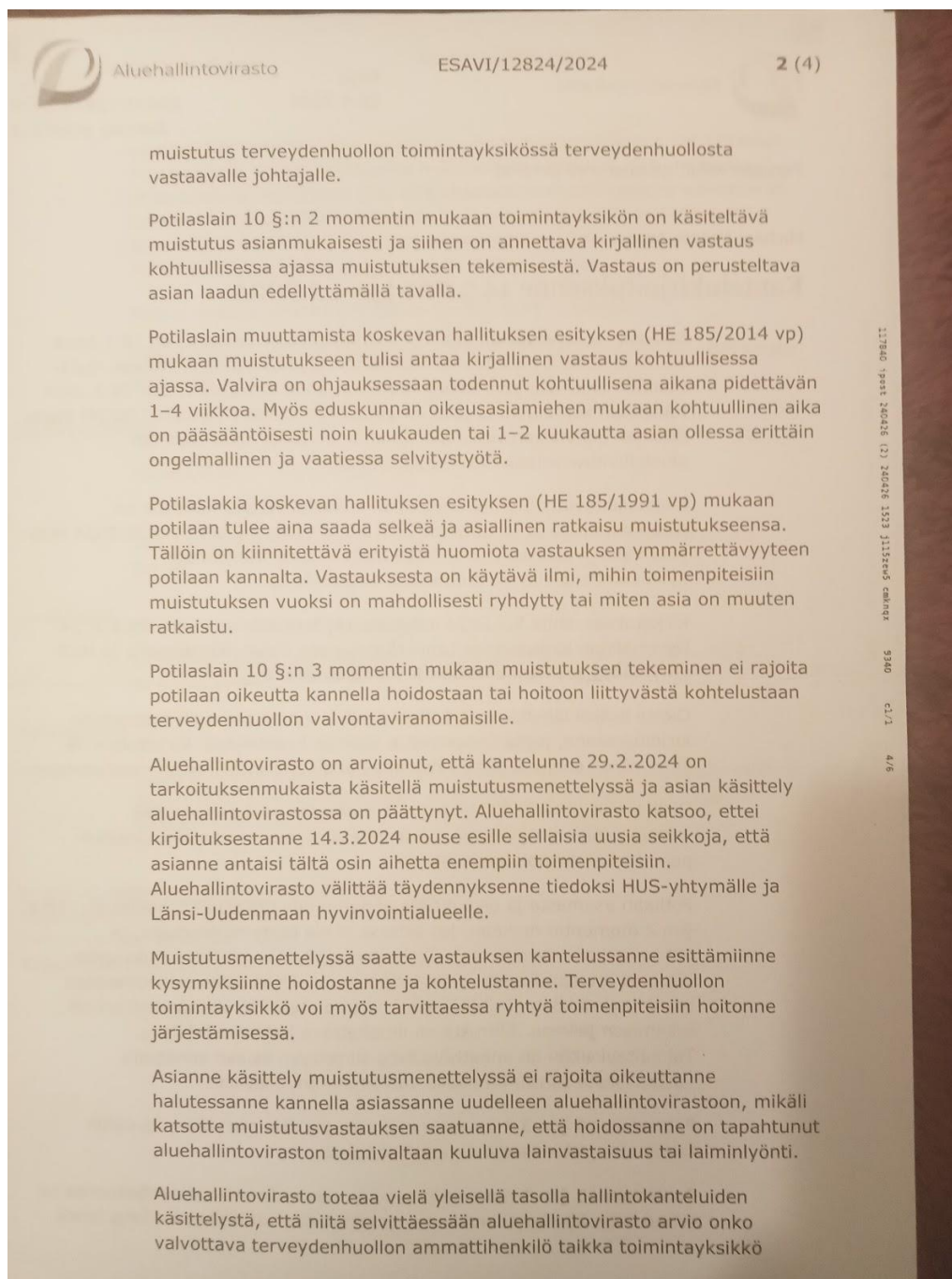


Figure 102. AVI's letter continued

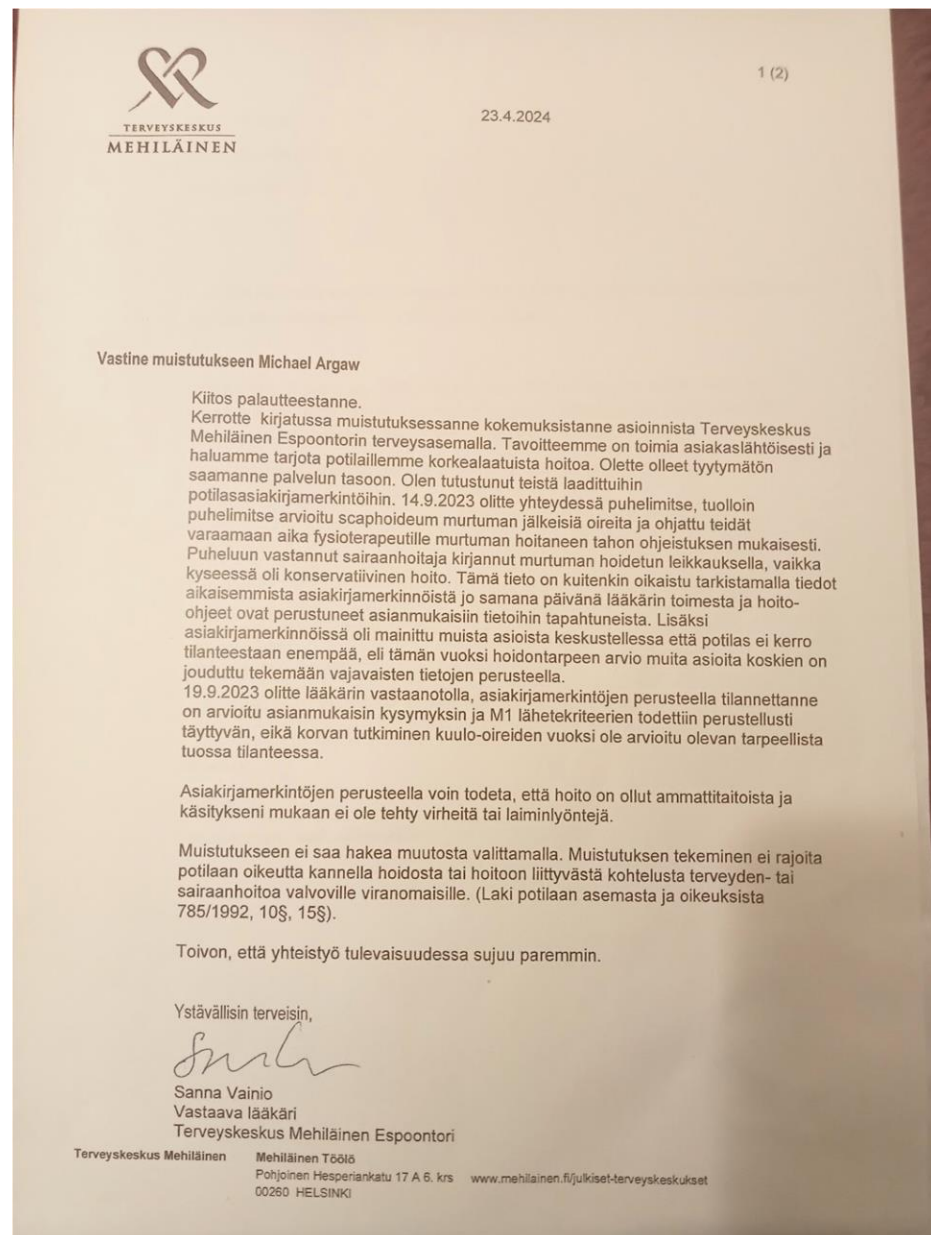


Figure 103. AVI's letter citing Terveyskeskus Mehiläinen

5.4.2024 Aluehallintovirasto Asian nro ESAVI 11269 2024 siirtomuistutusmenettelyyn
koskien Michael Argawin kantelua - AVIn siirtokirje

Olette jättäneet vastuualueellemme kuuluvasta ulkoistetun terveysaseman toiminnasta
kantelun Aluehallintovirastoon. Aluehallintovirasto on päättänyt, että asianne käsitellään
Länsi-Uudenmaan hyvinvointialueella muistutuksena.

Vastineemme on vastaavan lääkärin Sanna Vainion laatima vastine liitteenä koskien
Espoontorilla saamaanne hoitoa.

Kristi Siikamäki
Palveluyksikönpäällikkö
Ostopalvelut ja ulkoistetut terveysasemat
Avosairaanhoito
Länsi-Uudenmaan hyvinvointialue

PL 33, 02033 LÄNSI-UUDENMAAN HYVINVOINTIALUE

Postitus:

Argaw

Etelä-Suomen Aluehallintovirasto

Figure 104. AVI's letter continued

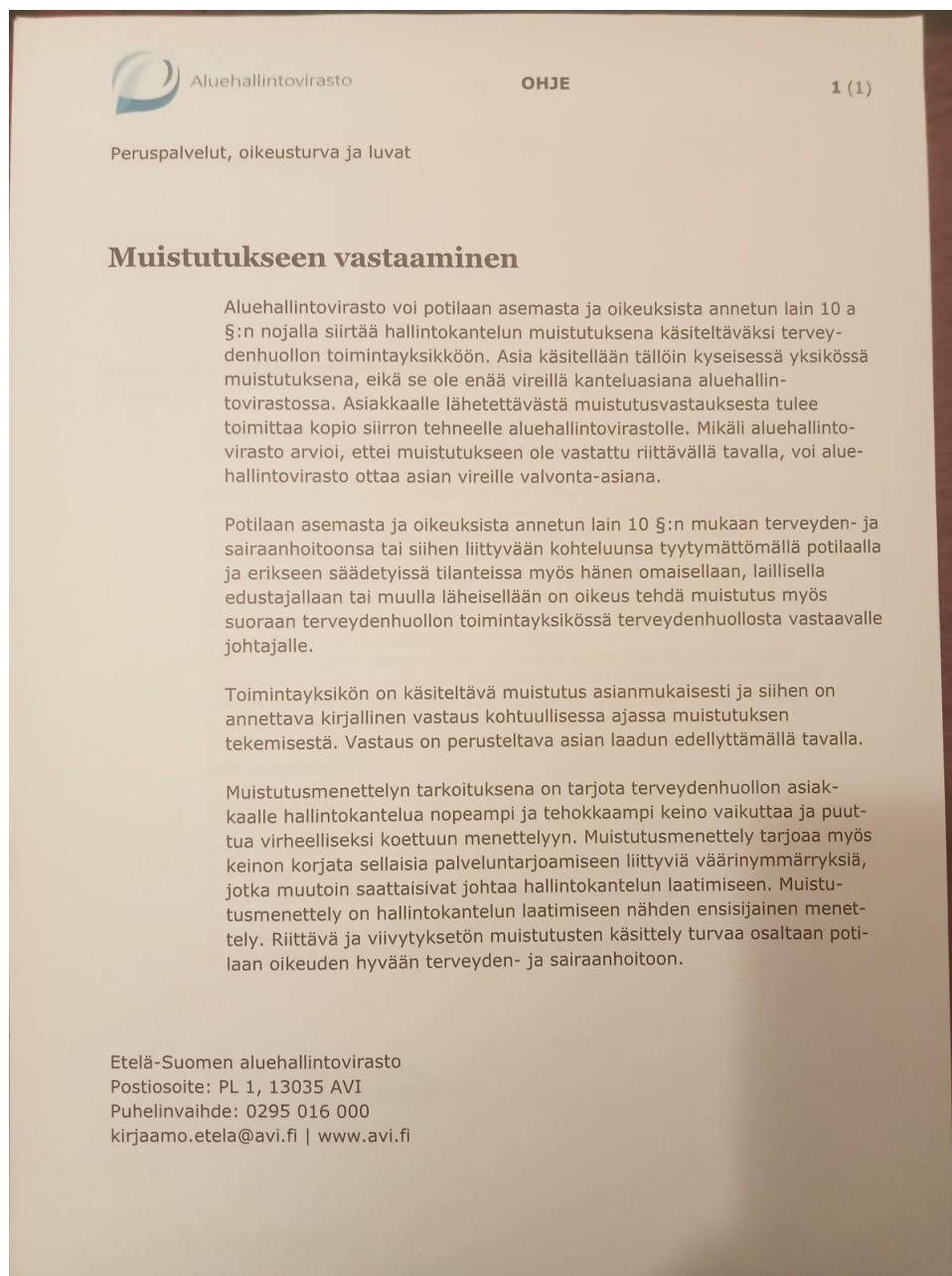


Figure 105. AVI's letter continued

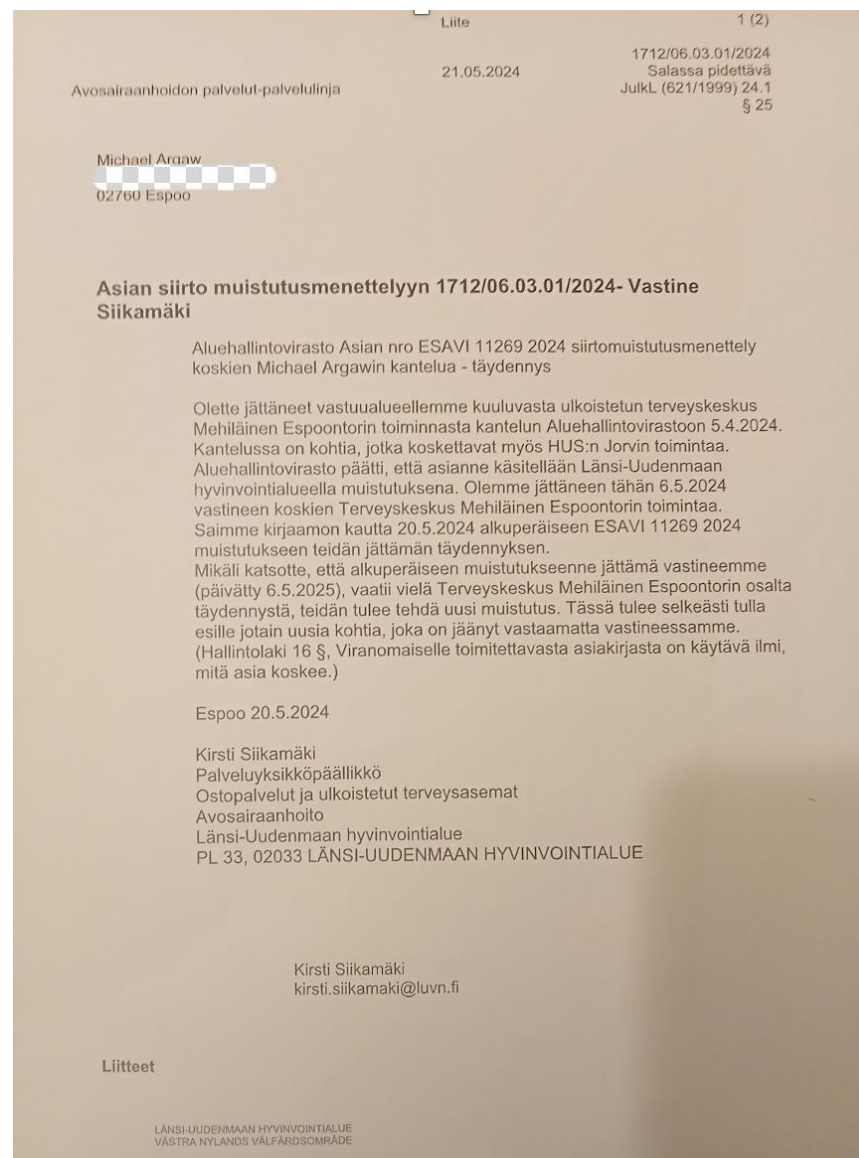


Figure 106. AVI's letter continued

Michael did not receive any psychiatric treatment at the Jorvi Acute psychiatric detention center. He stayed put in the isolation room alone while receiving visitors, talking with friends and family and working on his master's thesis, the software product management of Chewata, among others. Called out from the detention room where he was exercising his normal activities like a super-conscious person, Michael would be having a preposterous and superstitious interrogation secession with Victor and the nurses as unpacked in Appendix A8, among others, unequivocally.

HUS*

The answer to the reclamation
HUS/3400/2024

13.6.2024

Michael Argaw
02/600 Espoo

The Statement by senior physician in psychiatry


In response to Michael Argaw's [redacted] reclamation, I respectfully respond the following:

According to the medical records, you were treated in the in-patient department which belongs to my area of responsibility from 19.9.2023 to 12.10.2023 due to a mental health problem.

Referring to the documents, I consider that your treatment has been given in accordance with good care practice and was carried out in accordance with the patients' rights law.

The points mentioned in your reclamation, such as "harmful, or illegal, or discriminatory, or forced, or involuntary, or unwarranted, or deliberately misguided, or misjustified, detention, mistreatment, misdiagnosis, torture and abuse of Michael Argaw, violating his basic human and democratic rights for three weeks" were not true.

Thank you for your feedback.

With respect, 

Victor Volkov
Clinical director
050 427 5053
HUS Psychiatry; Psychotic disorders [redacted] Forensic Psychiatry

Submitting an objection does not restrict the right of a patient to appeal to other oversight authorities. A decision on an objection cannot be appealed (section 15 of the Act on the Status and Rights of the Patient)

Distribution Regional State Administrative Agency for Southern Finland

HUS Psychiatry
Psychotic disorders and Forensic Psychiatry

Ohiväki hospital
PO box 198
00029 HUS

firstname.surname@hus.fi
www.hus.fi

Figure 107. The dishonest reply by Victor which deviates from Appendix A8 and A9.

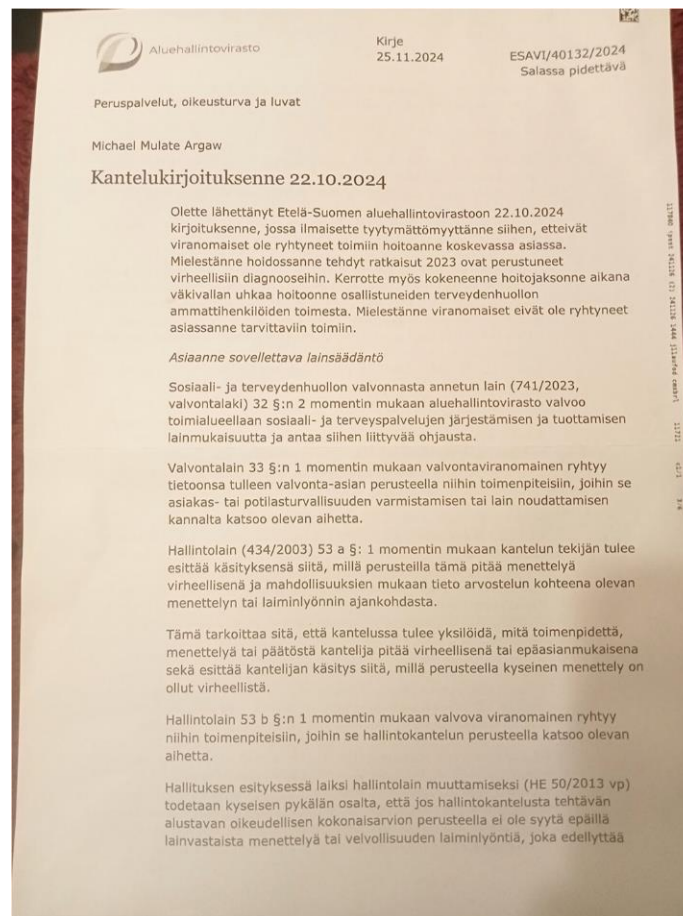


Figure 108. AVI's letter continued

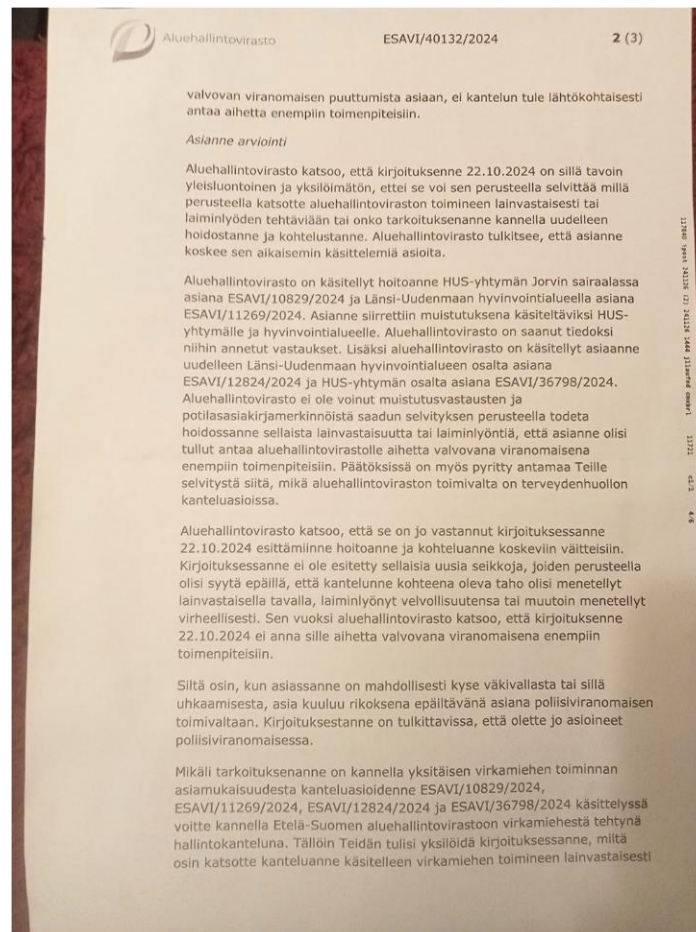


Figure 109. AVI's letter continued

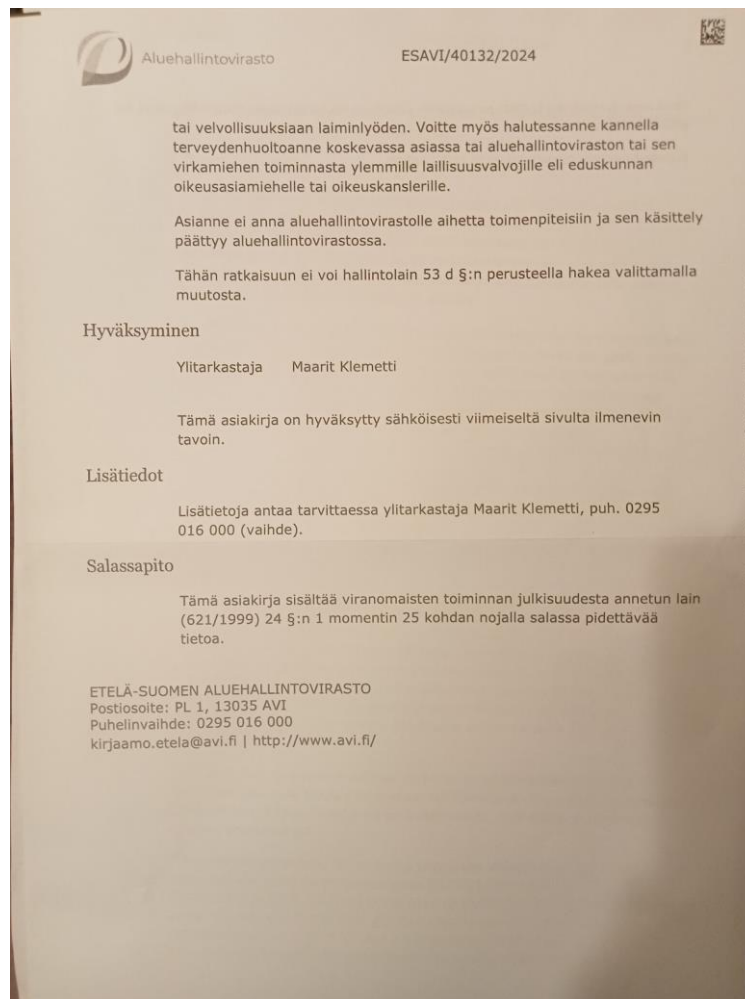


Figure 110. AVI's last letter continued

Appendix A20E: Decision by the Head of the Board of the Government of Finland which Manages AVI, among others, indirectly.

Complaint delivered to the head of the board of the gov of Finland

The complaint is delivered with a rational mindset and conscious awareness that the resources of Valvira and Police, among others, controlled by the board of the government of Finland directedly and indirectly should be exhausted to serve Michael Argaw impartially whether or Michael would resort to legitimate civil, public, lawsuits and media, diplomatic and political, among others, instruments. In addition, as the issue has been transferred to a political body, AVI, which is controlled by the board of the government of Finland, it is essential that letting the state know about the unethical conducts of its portfolio.

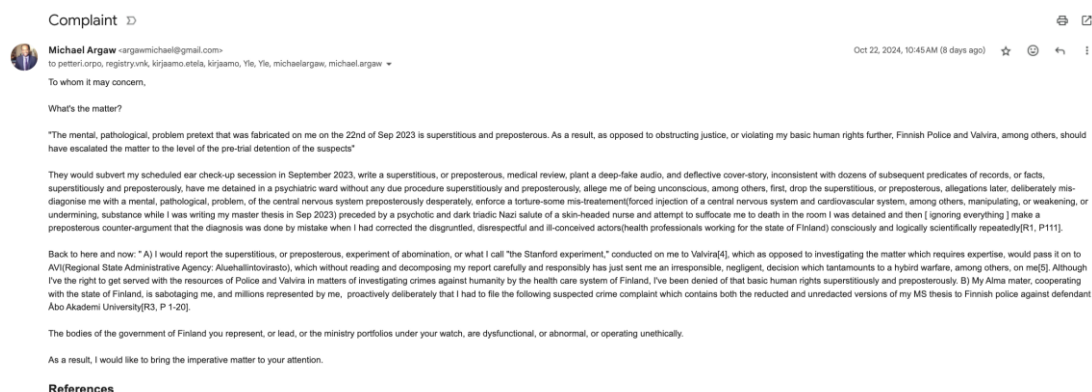


Figure 111. Notification to the government of Finland.

Request for signing treaty between Michael Argaw and the state of Finland regarding the outstanding issues between Michael and the state of Finland delivered to the board of the government of Finland.

To whom it may concern,

It is no secret the state of Finland is a party to different international laws of human and democratic rights. Nonetheless, entities, or representatives thereof, within the sovereign jurisdiction of the state of Finland have committed severe human and democratic rights violations on Michael time and again. The board of the government, or the parliament, of Finland is responsible for ensuring entities(private, non-gov and gov, among others) in Finland will not act unethically violating, or jeopardizing, the human and democratic rights of any individual. As a result, if, and when, the state learns that severe, or any form of, human and democratic rights violations have been carried out on a human being, then the state must 1) act and 2) engage with the victim value co-creatively. If the state does not act appropriately, the government, or parliament, will be terminated for misconduct. If the government, or parliament, continues with the mis-conduct of not acting appropriately, or fails to engage with the victim timely, then the government, or parliament, is said to be illegal, or unconstitutional, unequivocally. Consequently, that I would like to see MPs beyond more than frameworks of limitation of the liability of the state(or private, public and non-gov entities with in) indirectly and directly, I, as a sovereign man, would like to sign a bilateral treaty with the state of Finland that neglected, or unattended, severe human and democratic rights violation on Michael Argaw by the current, and previous, government, or parliament, of Finland would be signed as "pending obligations to be attended by the state of Finland" until the outstanding disputes between Michael Argaw and the state of Finland is resolved upholding relevant human rights laws to which the state of Finland is a party. [Thanks Michael Argaw]

Appendix A20F: Report delivered to if, my private insurance provider, couple of months ago has yet got to be addressed properly.

To whom it may concern,

I am writing to report the damages which I incurred since late 2023. I was reluctant to report my experiences, or damages, or accidents, because I was monitoring the circumstance with time. As a matter of fact, it is after the observation, or research, or recovery, phase which lasted nearly a year that I am proceeding to dispute resolution [with the harming parties] regarding the matter.

What happened? I would be misdiagnosed with a pathological diseases on the 22nd of September 2023¹. As a result, I would be administered with liquid chemicals which resulted in temporary(in some cases lasting months) and permanent(to date) harms, or symptoms, against my will and consent. The details of the complicated matter is annexed here with in the introductory and appendices, among others.

What you need to know,

- while I am not comfortable with eating as frequently and indifferently as most people do to date, I had a recurring stomach problem which lasted a year(Appendix A15).

- other problems which lasted couple of weeks(Appendix A15).

- though my hand is perfect(i.e. I do not have any pains at the moment), I incurred cosmic damages still immanent to date(Appendix A16).

- Tiredness which happens once in a while.

- Recurring numbness of my legs which lasted for about 8 months(Appendix A15).

As a result, I did not venture on driving for many months.

- It feels hot(in both legs though significantly reduced now) and painful(in my right leg though significantly reduced now) over my legs once in a while. I could engage in physical activities for about 40 hours/week, work out in the gym, play football and make long walks and runs, among others, without any, single, pain on my right leg then after. Nevertheless, after the incident in 2023, the physical ability of my right leg is jeopardized: "It is not as perfect as it used to be before the incident" And, the symptom — for instance, pain on my right leg — would recur[dominantly] if I would start lifting heavy weights and put pressure on my leg muscles persistently.

Aforementioned are the results of the liquid chemical I was subjected to after the misdiagnosis and avoidable and unsolicited subjection that followed unethically.

¹) Regarding the appendices, among others, please refer to the attachment here with: "Unpublished, ongoing, master's thesis"

Figure 112. Report Addressed to IF.

Regarding My Interaction with a Medical Professional Then After

Käynti 21.12.2023

Omakanta näyttää Kanta-palveluihin tallennetut terveystiedot terveydenhuollon käynneistäsi. Tiedot tallennetaan Kanta-palveluihin viiveellä. Jos käynnin tietoja ei näy kohtuullisen ajan kuluessa, voit ottaa yhteyttä sinua hoitaneeseen lääkäriin tai yksikköön.

Ajankohta 21.12.2023
Palveluyksikkö Mehiläinen Oy

[Laboratoriotutkimukset](#)

Potilaskertomus

TYÖLÄÄKETIEDE JA TYÖTERVEYSHUOLTO

Gowda, Ramachandra LL, työterveyslääkäri evl
Mehiläinen Oy, Lääkäriasema Mehiläinen Postintaival, Mehiläinen Oy
21.12.2023

Hoidon toteutus

Esitiedot (anamneesi)

09/2023 käynyt lääkärissä kuulovaivan takia. Epäilty psykoosi ja ollut pari vko sairaalahoidossa. Tuolloin annettu Abilify injektiot vastoin tahtoaan. Tämän jälkeen alkanut erinäiset oireet mutta nämä suurelta osin loppuneet kun lääkkeen käytön lopetettu mutta jotkut oireet jatkuneet. Esiintyy vatsakipu, mutta tämä helpottanut kun syönyt pienempiä annosmääriä. Lisäksi oikeassa alaraajassa on sisäsyrjässä kipua säärestä nilkan alapuolella. Puutumista on molemmissa alaraajoissa. Kykenee kävelemään ongelmitta jopa 2-3 tuntia ongelmitta mutta pidempään kävellessä eli yli 5-6 tuntia kerralla kehittyy kipu. Myös runsaampi kantaminen provosoi kivun alaraajoissa. Levolla helpottuu eikä ole joutunut ottamaan kipulääkettä. On ollut myös ylä- ja alaraajoissa kutina, mutta tämä on lähes loppunut eikä ole tähän antihistamiinia käyttänyt.

Syksyllä otettu labrat eikä niissä ole poikkeavaa. Väsymystä on ollut vaihtelevasti syksyn mittaan. Nukkuu 6-8 h yössä. Sekaruokavalio. Ei tupakoi eikä juurikaan käytä alkoholia (alle 20 annosta vuodessa).

Metropoliassa ja Åbo Akademiassa opiskellut. Lopputyöt on tekeillä.

Tutkimukset

Laboratoriotutkimusvastauksia:

26.10.2023 P-Ca 2.32 mmol/l (2.15 - 2.51)
26.10.2023 S-B12-Vit 157 pmol/l (145 - 570)
26.10.2023 U-BaktVi Negat.
26.10.2023 U-Leuk 0 E6/l (- 10)
26.10.2023 fS-Folaat 9.7 nmol/l (8.8 -)
26.10.2023 U-KemSeul TEHTY

Vastaus:

U-Omp: 1.010
U-pH-O: 6.0
U-Gluk-O: neg
U-Keto-O: neg
U-Eryt-O: neg
U-Alb-O: neg
U-Nitr-O: neg
U-Leuk-O: neg

Tehty lähete laboratoriotutkimuksiin:

B-La, B-PVK+T, B-HbA1c, P-ALAT, P-GT, S-D-25, P-Krea, P-K, P-Na, S-TSH

Suunnitelma

Figure 1. Although recorded inaccurately, the report I made to the doctor then

Figure 113. Report addressed to IF continued.

Appendix A20G: The reply I received from the prosecutor general

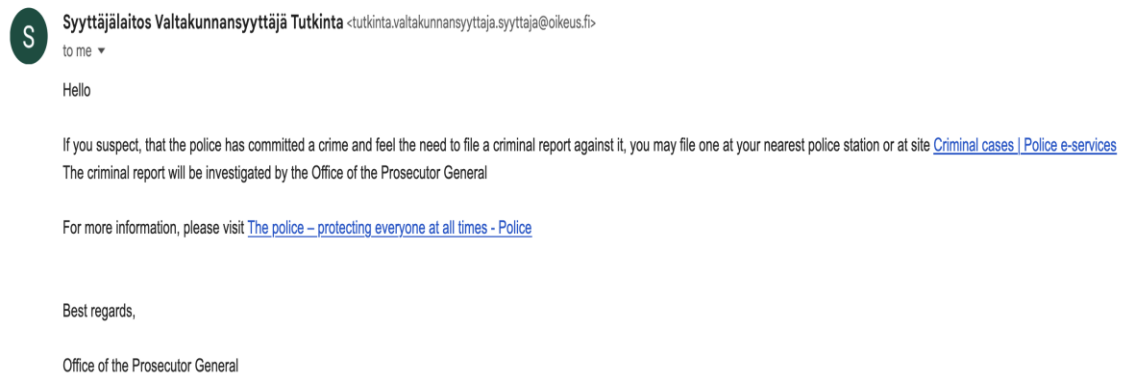


Figure 114. Reply from the prosecutor general.