

How Do We Know: A statistical analysis of epidemiological total death trends in 2020

By Joshua Williams

Introduction

Is there a way to confirm a pandemic that without trusting the number of reported deaths attributed to Covid-19? Instead of looking at the *stated causes* of deaths, Epidemiologists instead measure the *total* number of deaths. In an epidemic, more people die than would otherwise in a usual year. However, if some entity fabricated the pandemic, we would expect no statistically different changes in the number of deaths in a given year.

Each subplot represents data over the same range of time, even though the y-axes are not scaled uniformly scaled. Because the total population, and consequently total deaths, can vary dramatically from state to state, I adjusted scales of the y-axes to elucidate the differences visually. Specifically, the y-axis limits contrast the differences between 2020 and the previous years.

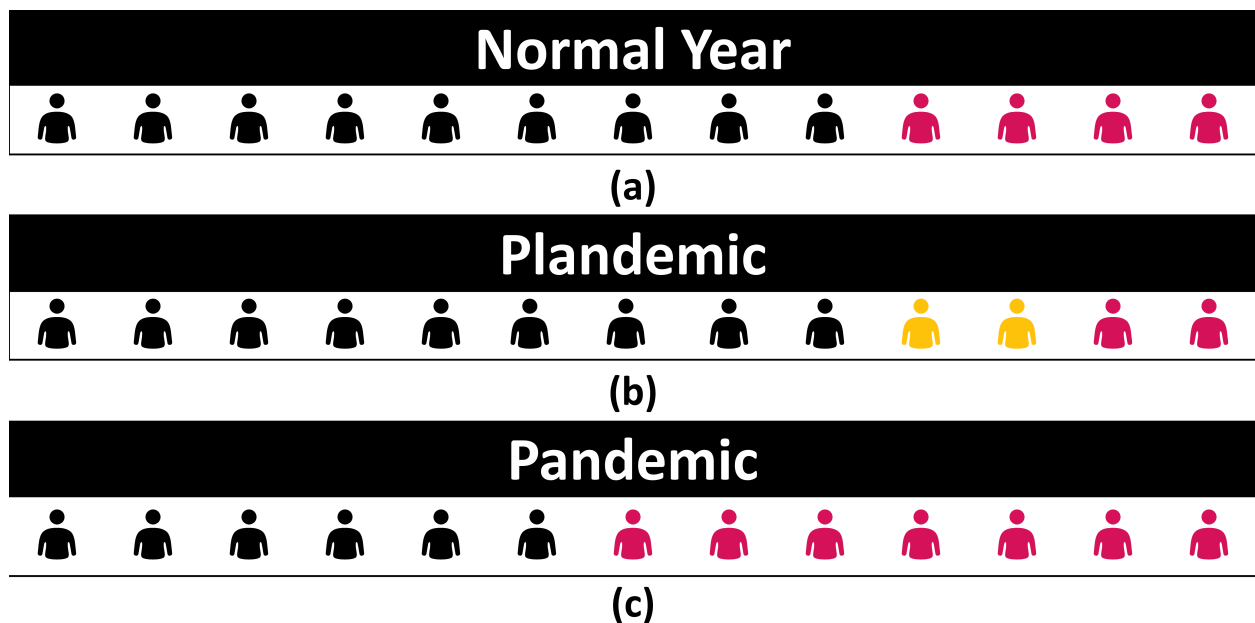
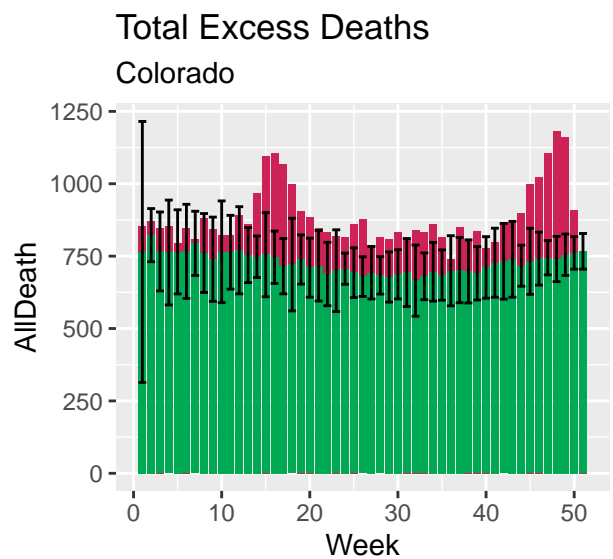
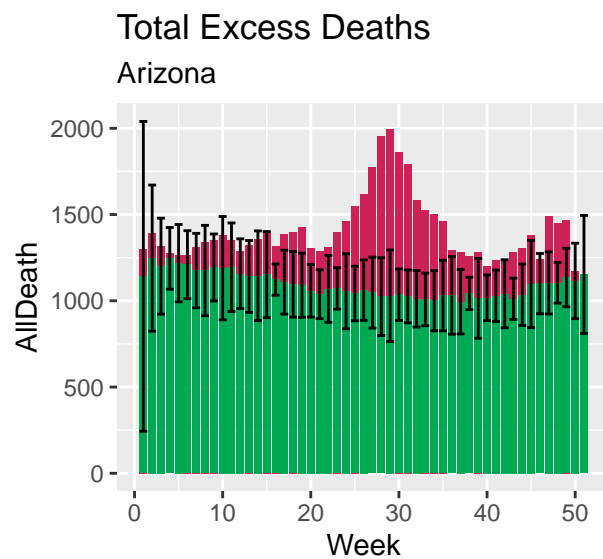
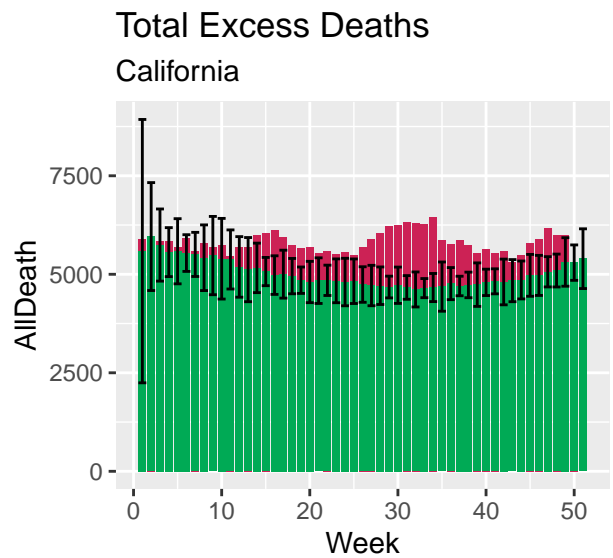
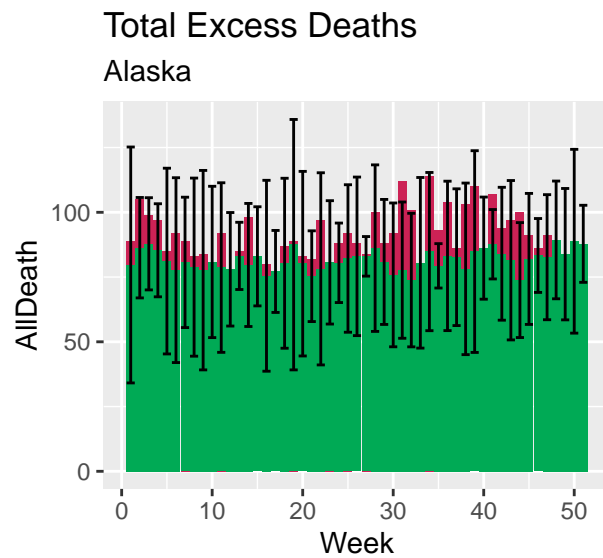
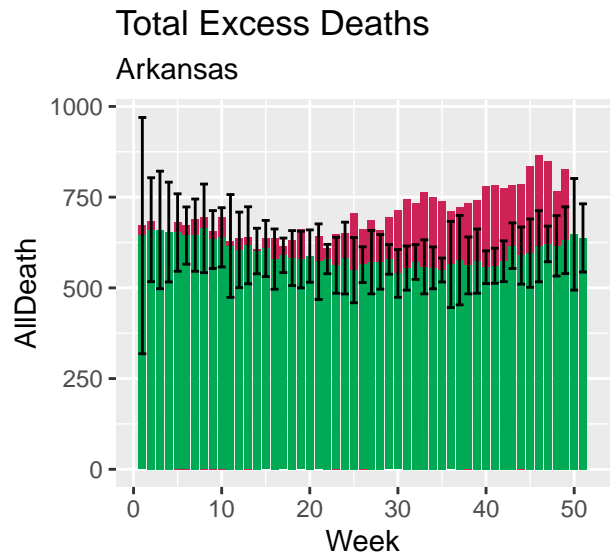
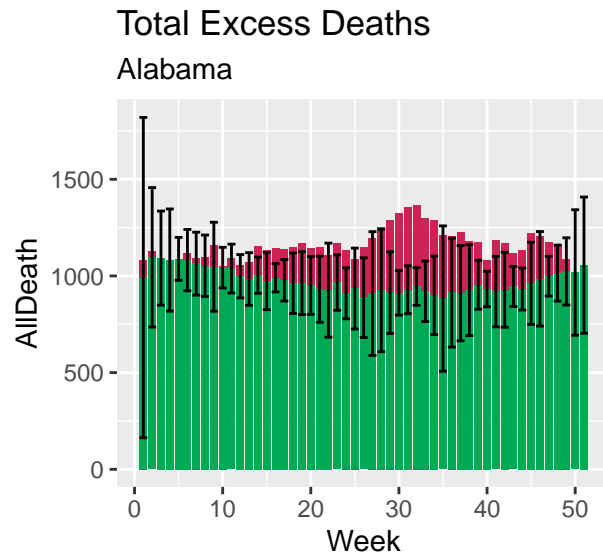
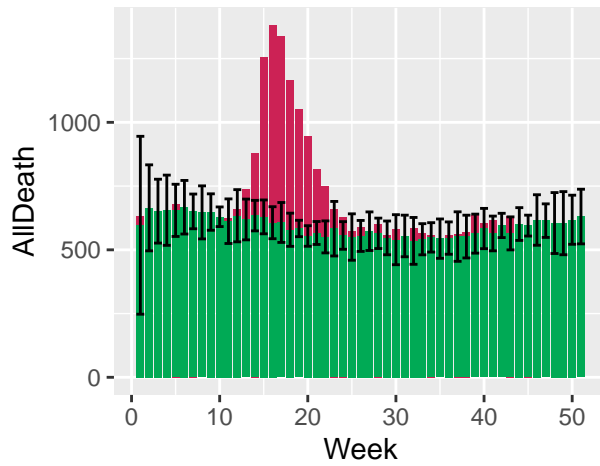


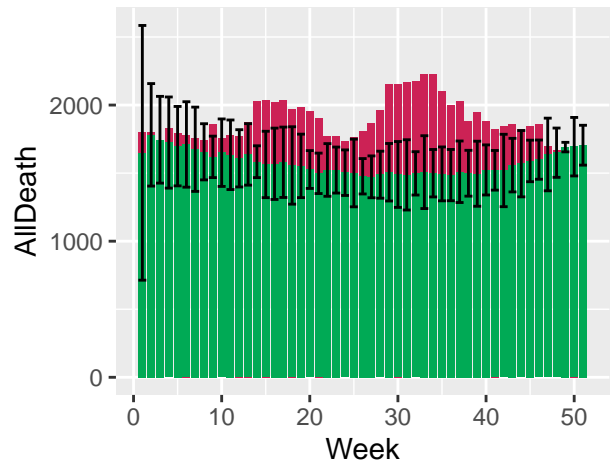
Figure 1: In a theoretical normal year (a), the number of people who die in a large nation should be fairly predictable. This follows from the law of large numbers. In a theoretical plandemic, (b), we observe how total deaths would look. The same number of people should die, but some of them will be apportioned to deaths by a fake disease. In (c) we see how the total deaths in theoretical pandemic should appear. In a real pandemic, we expect more people to die during a pandemic, so we should see an increase in the total number of deaths.



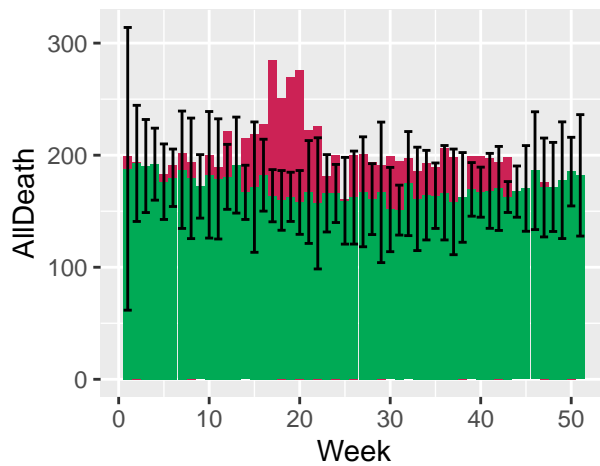
Total Excess Deaths
Connecticut



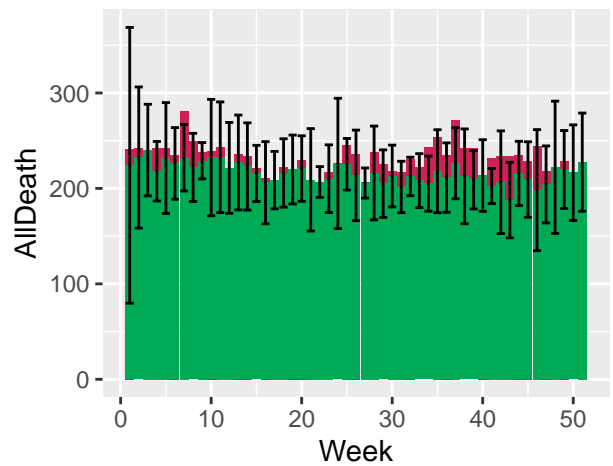
Total Excess Deaths
Georgia



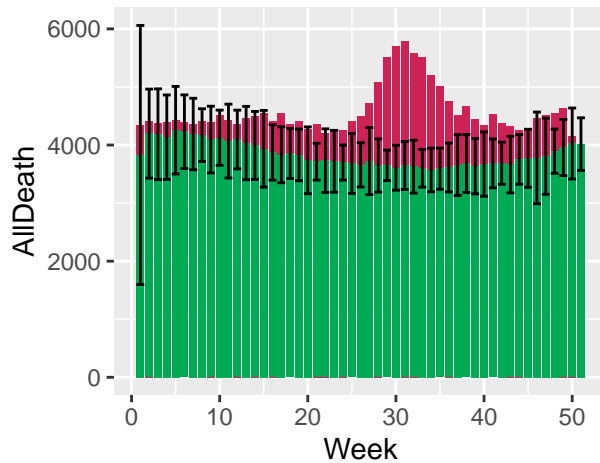
Total Excess Deaths
Delaware



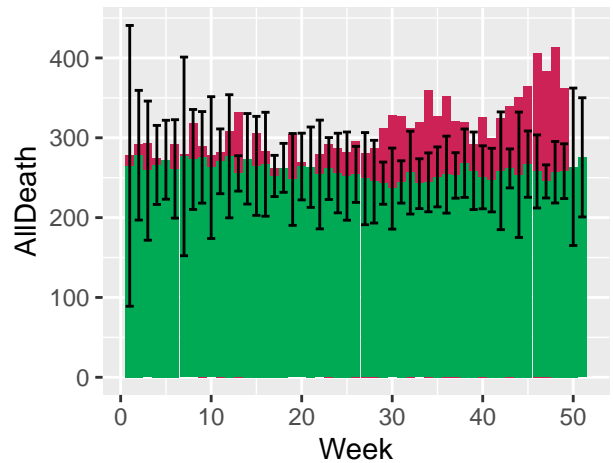
Total Excess Deaths
Hawaii

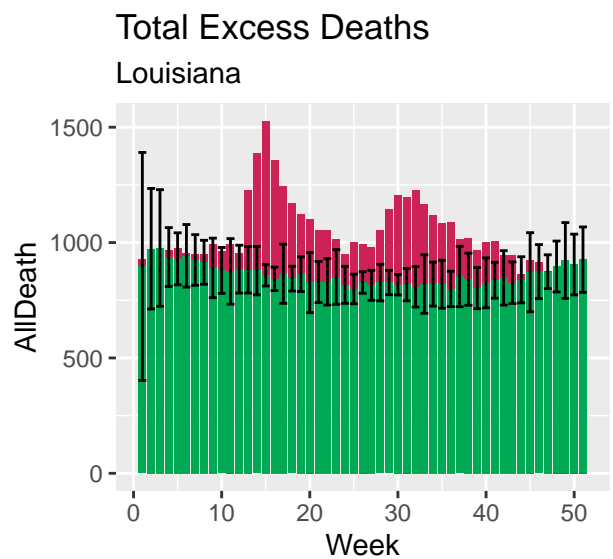
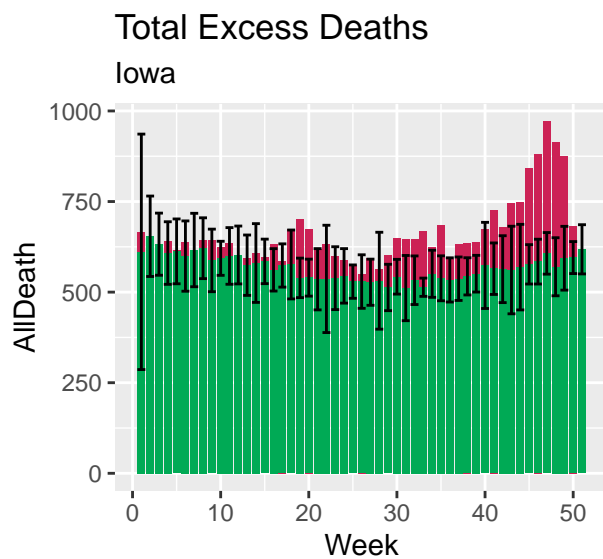
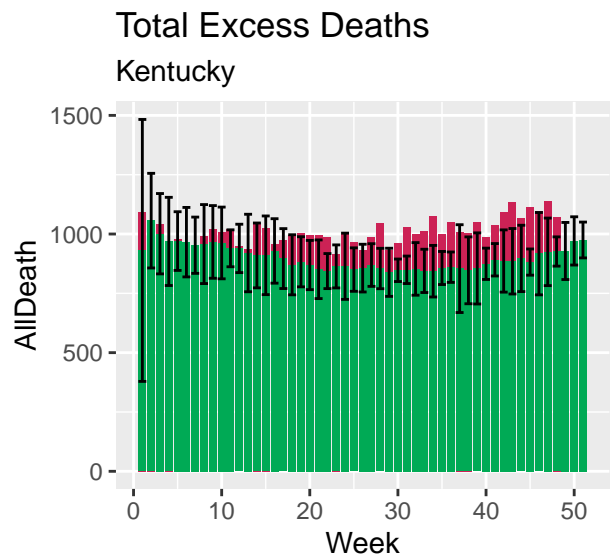
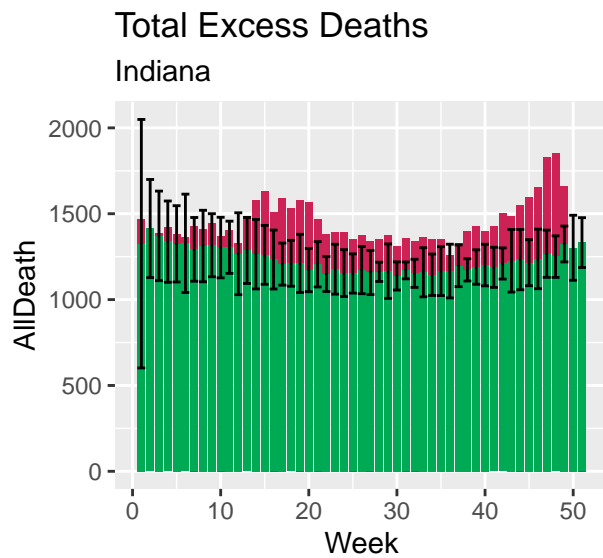
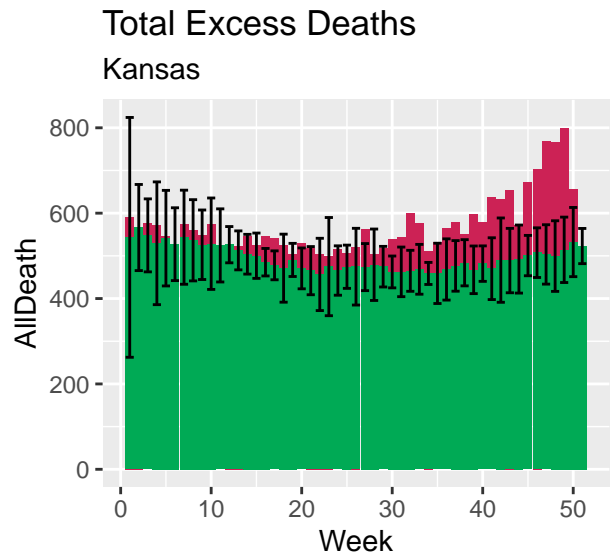
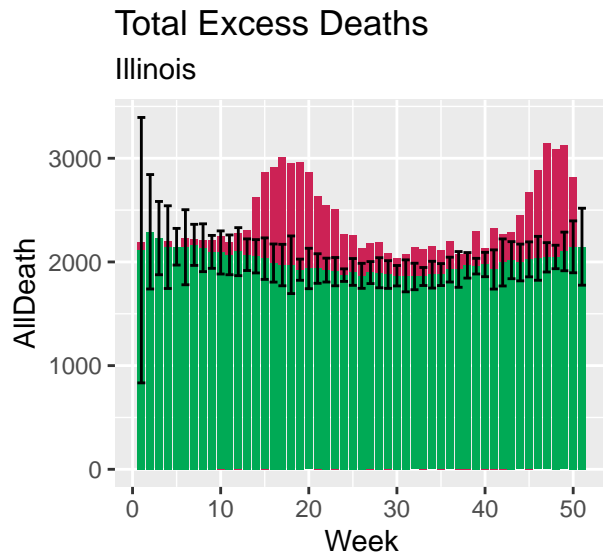


Total Excess Deaths
Florida



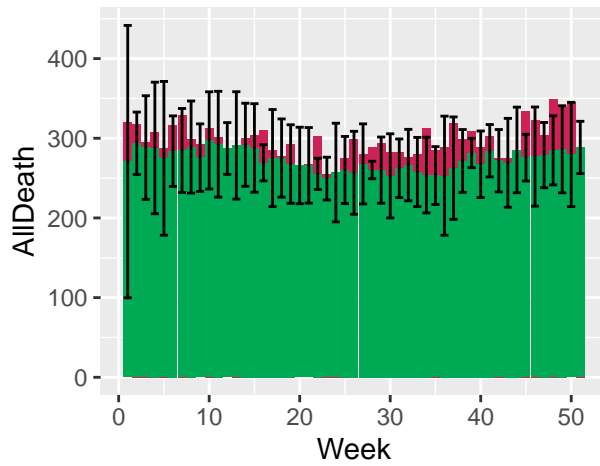
Total Excess Deaths
Idaho





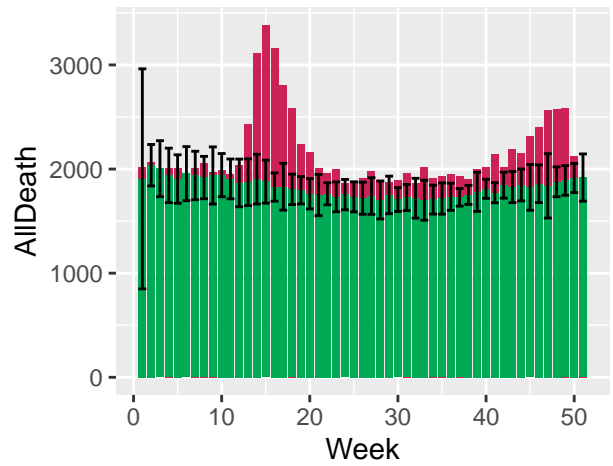
Total Excess Deaths

Maine



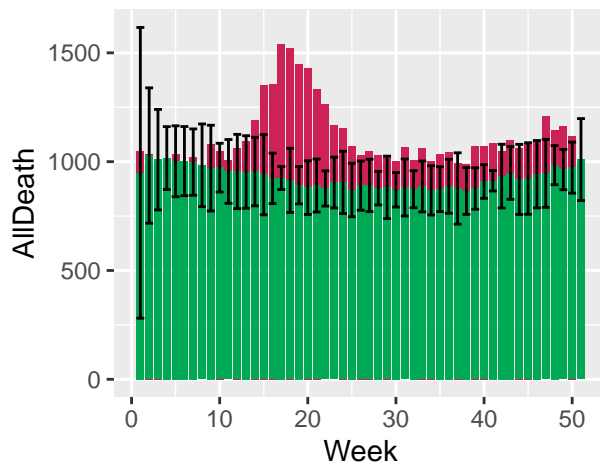
Total Excess Deaths

Michigan



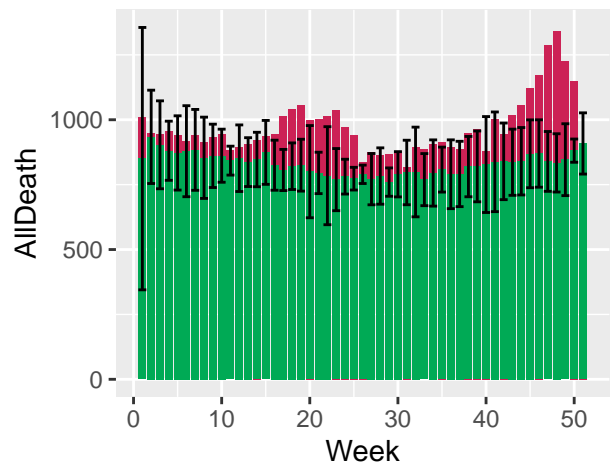
Total Excess Deaths

Maryland



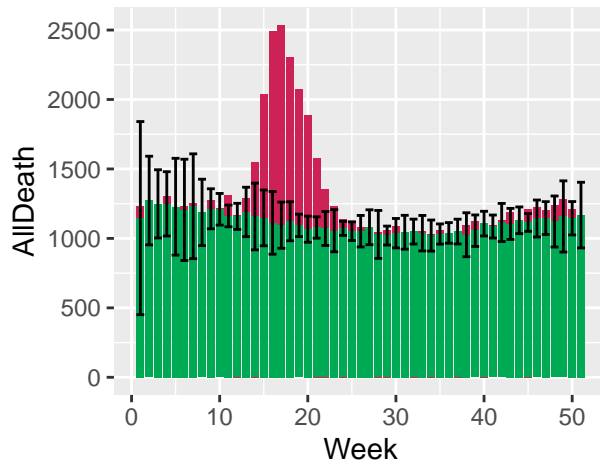
Total Excess Deaths

Minnesota



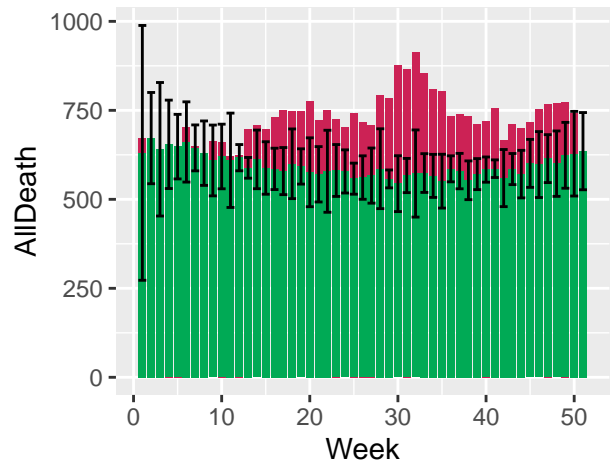
Total Excess Deaths

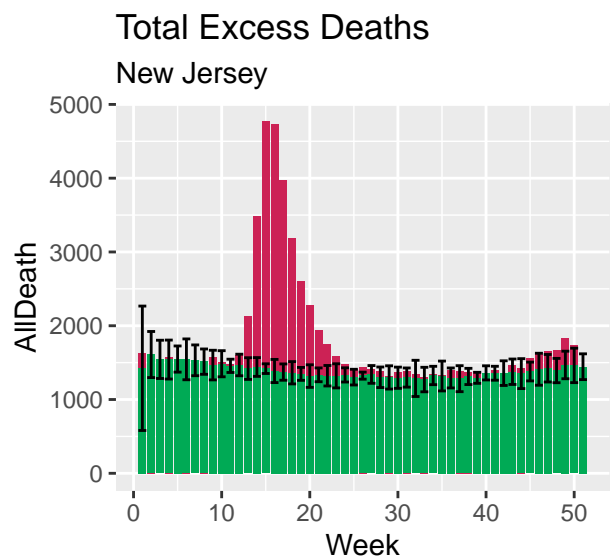
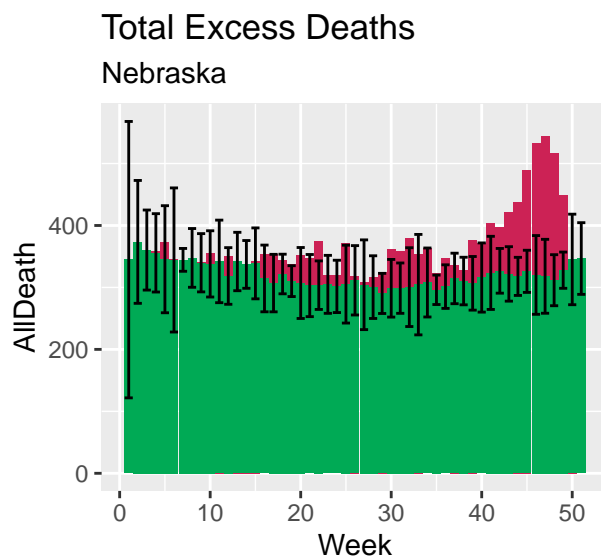
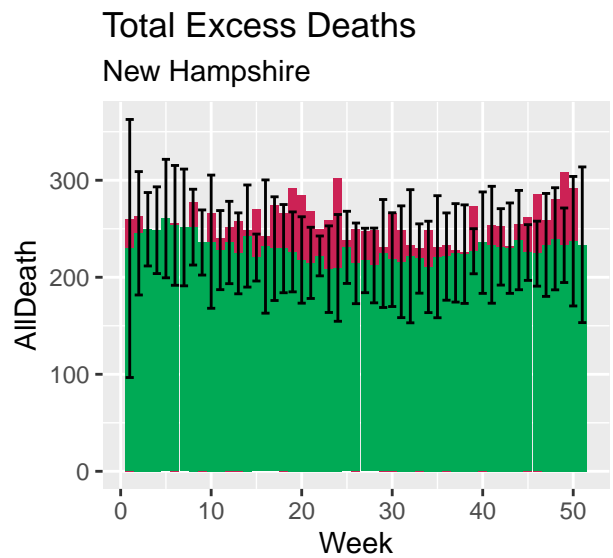
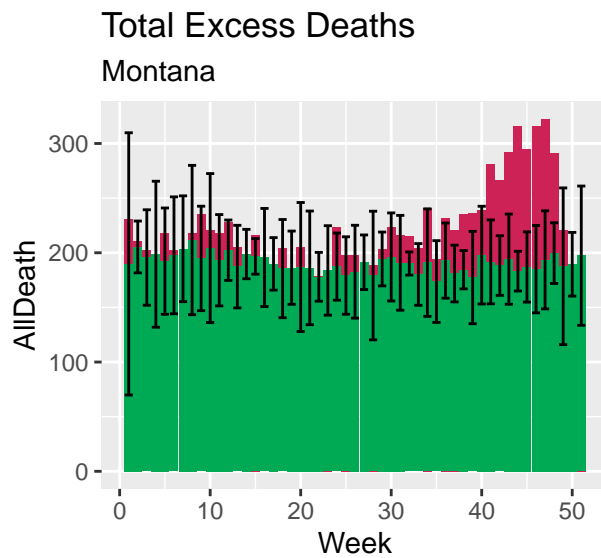
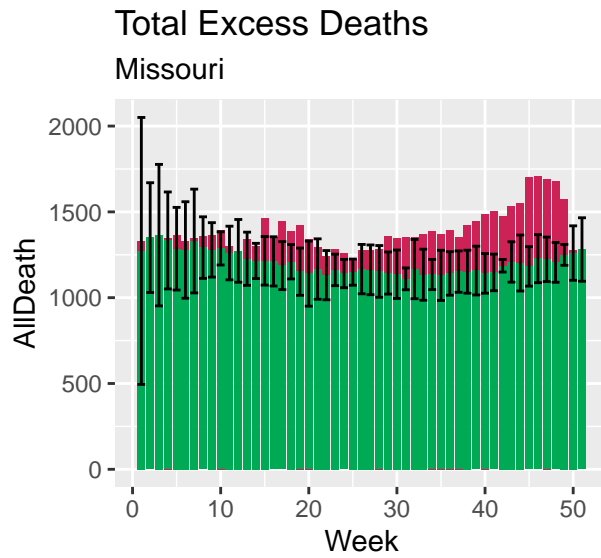
Massachusetts



Total Excess Deaths

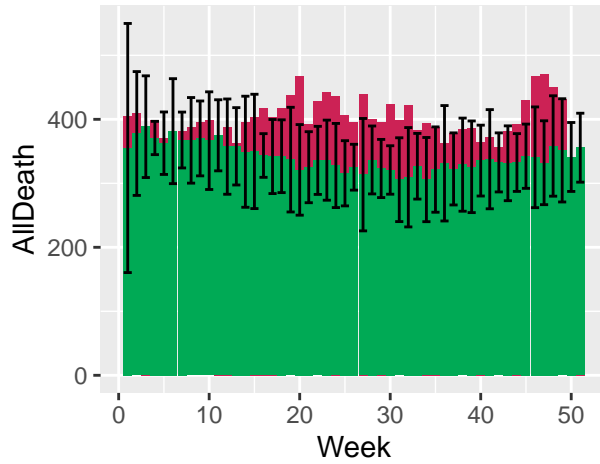
Mississippi





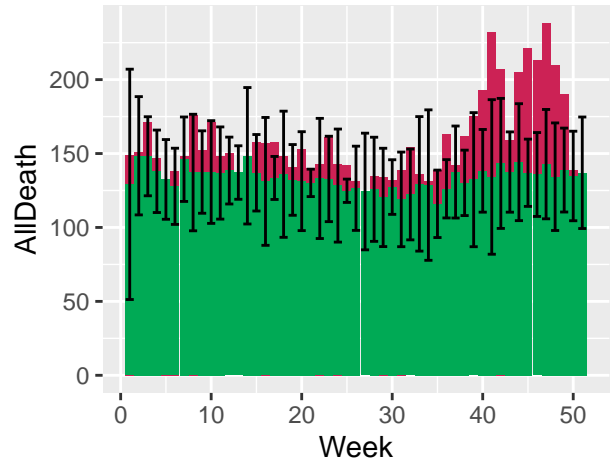
Total Excess Deaths

New Mexico



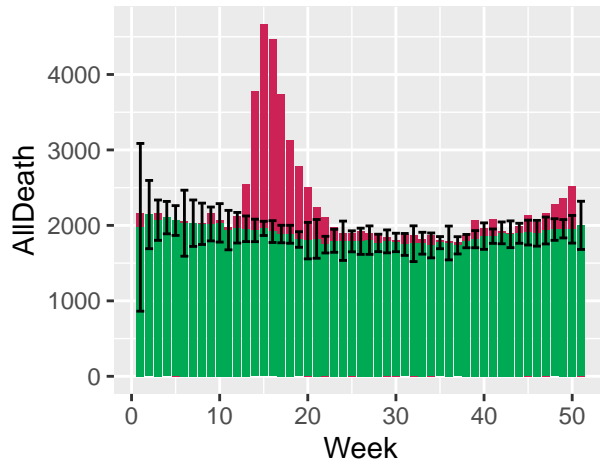
Total Excess Deaths

North Dakota



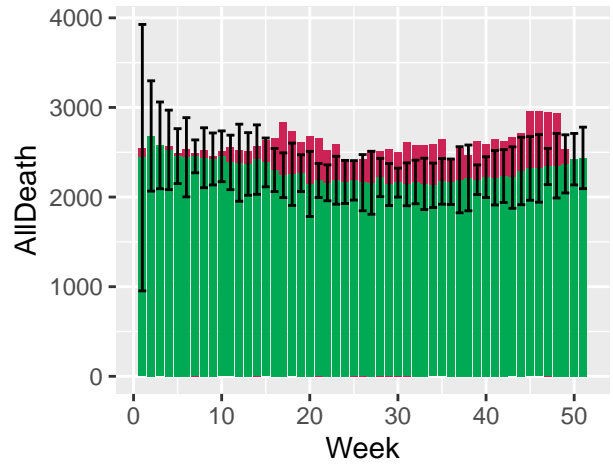
Total Excess Deaths

New York



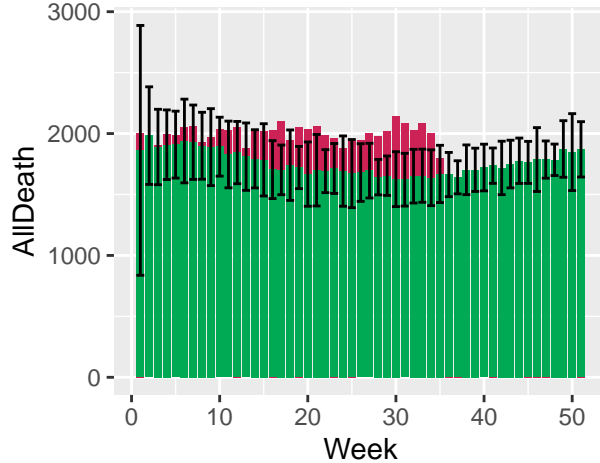
Total Excess Deaths

Ohio



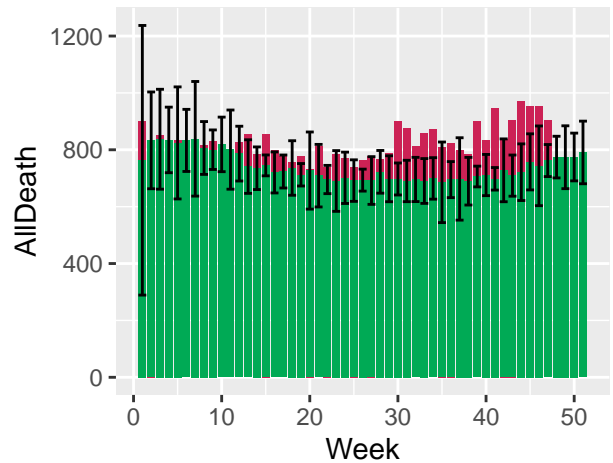
Total Excess Deaths

North Carolina

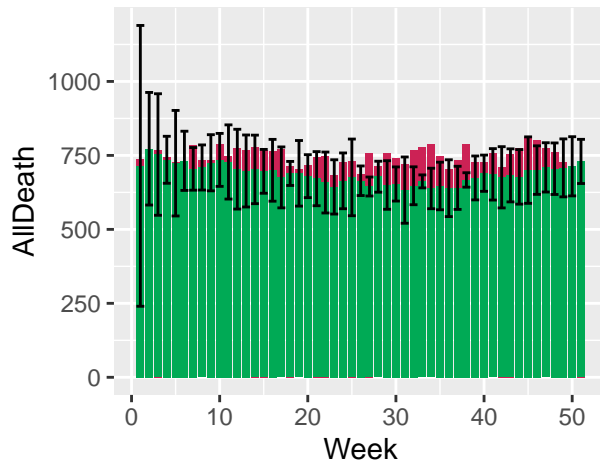


Total Excess Deaths

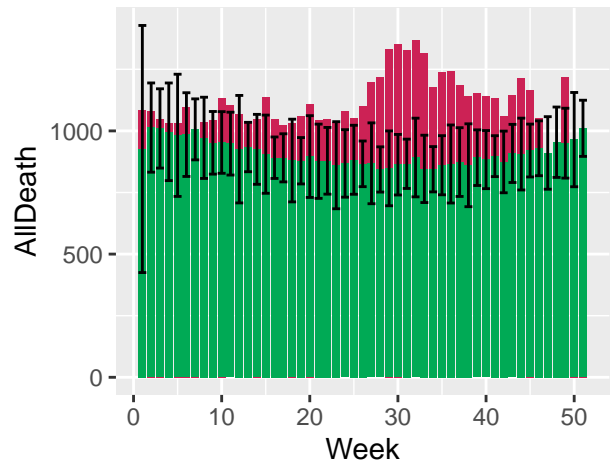
Oklahoma



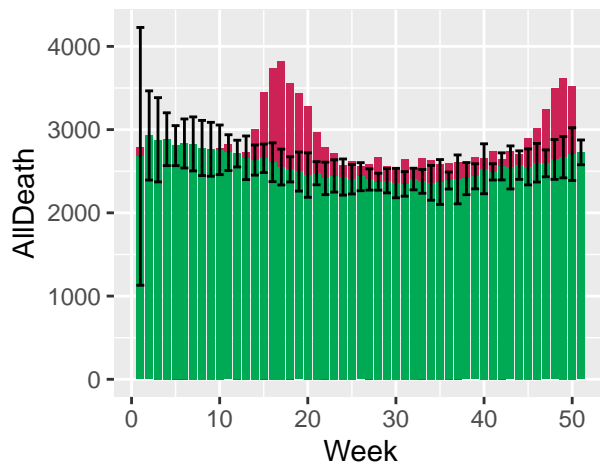
Total Excess Deaths
Oregon



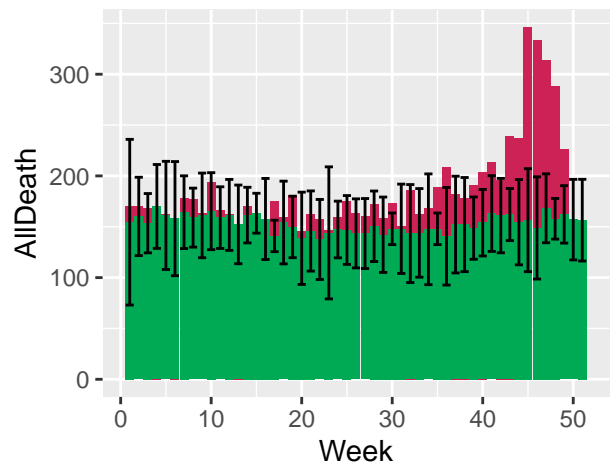
Total Excess Deaths
South Carolina



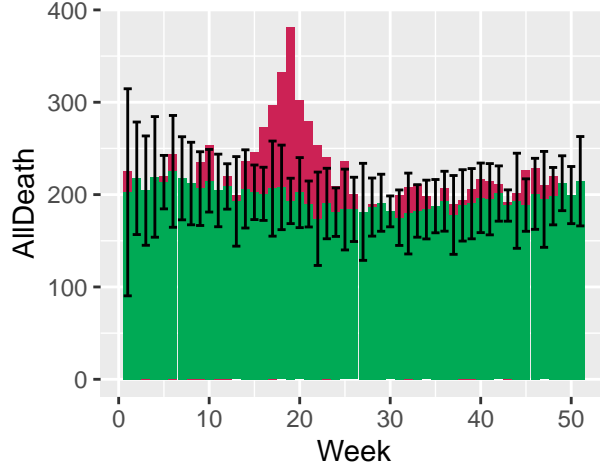
Total Excess Deaths
Pennsylvania



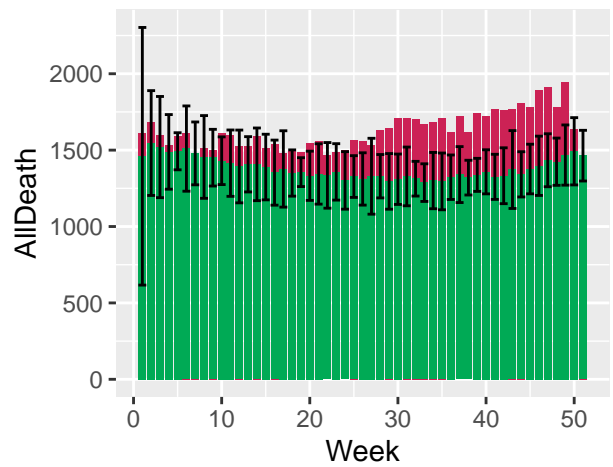
Total Excess Deaths
South Dakota

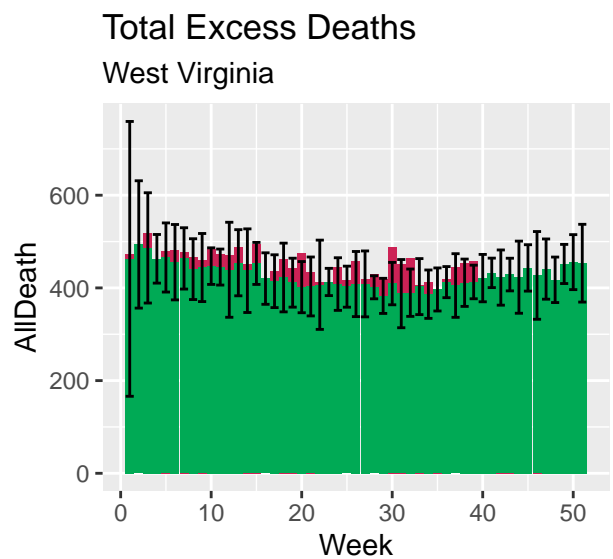
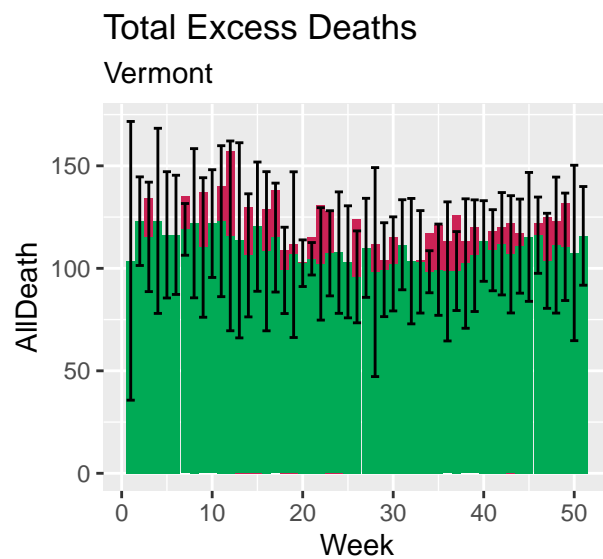
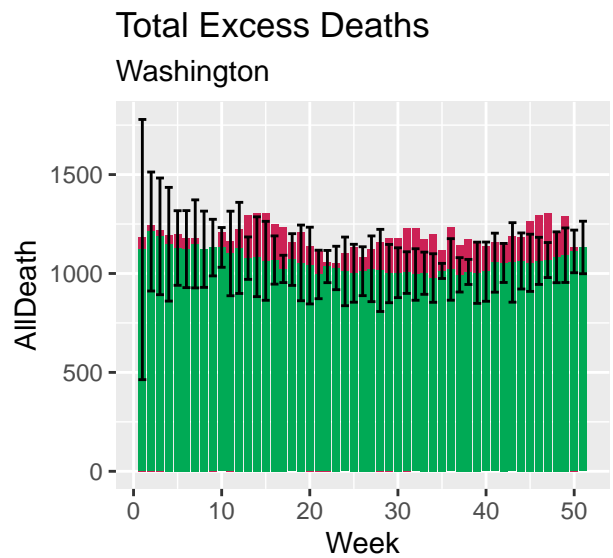
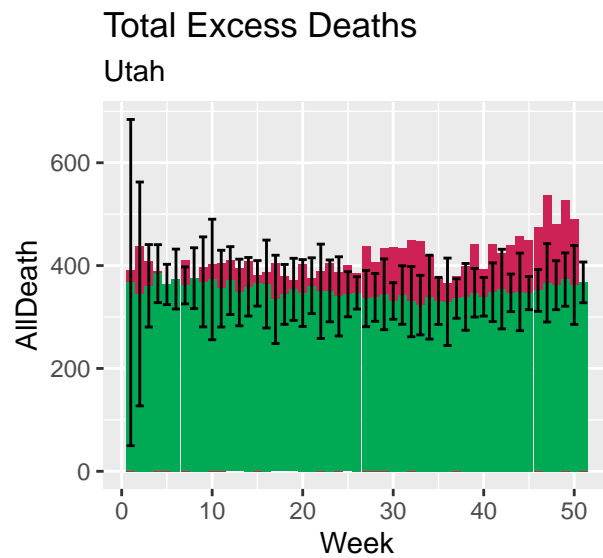
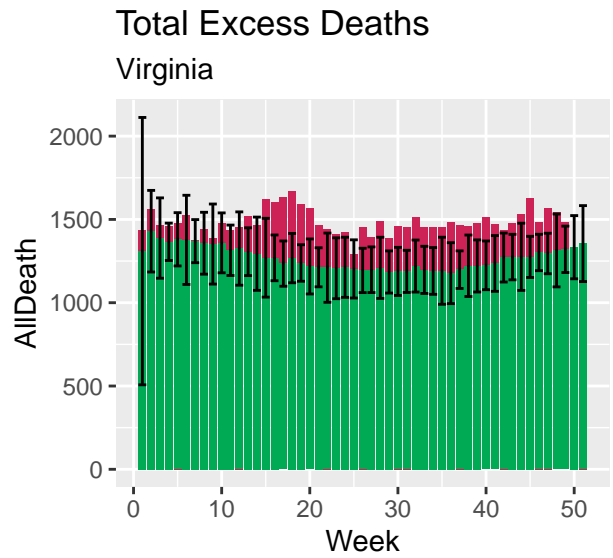
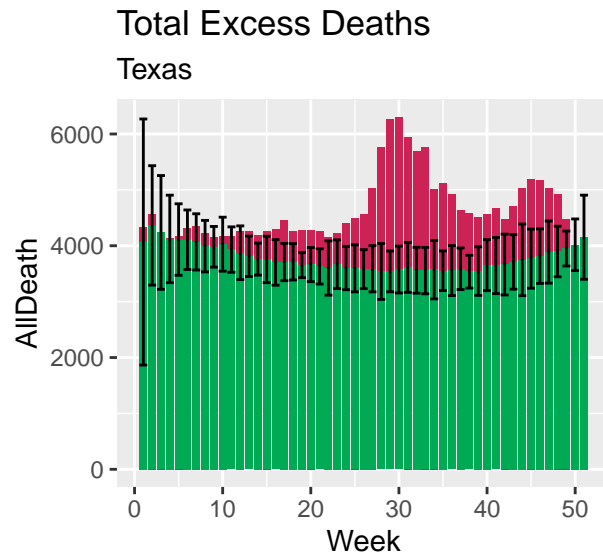


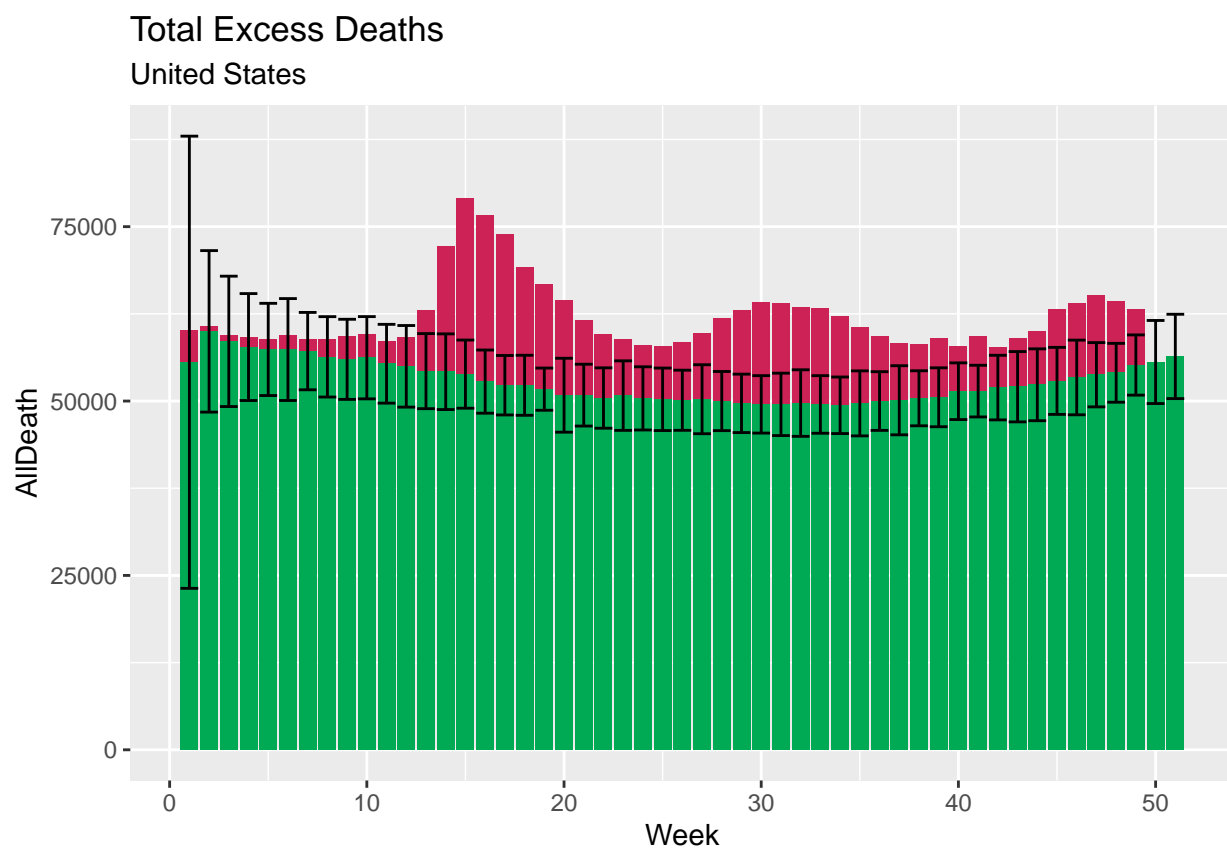
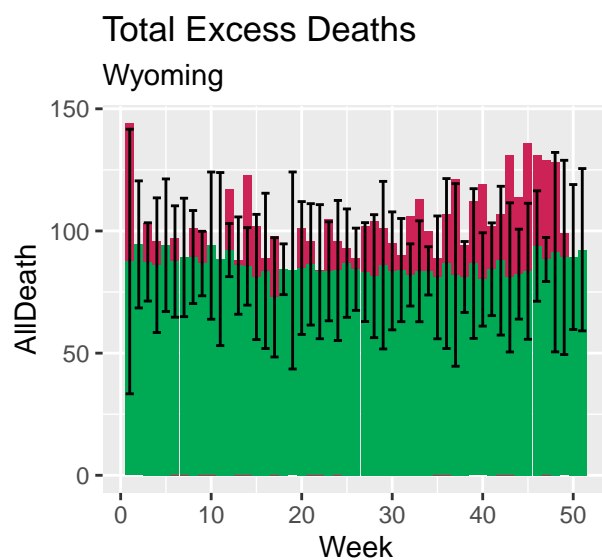
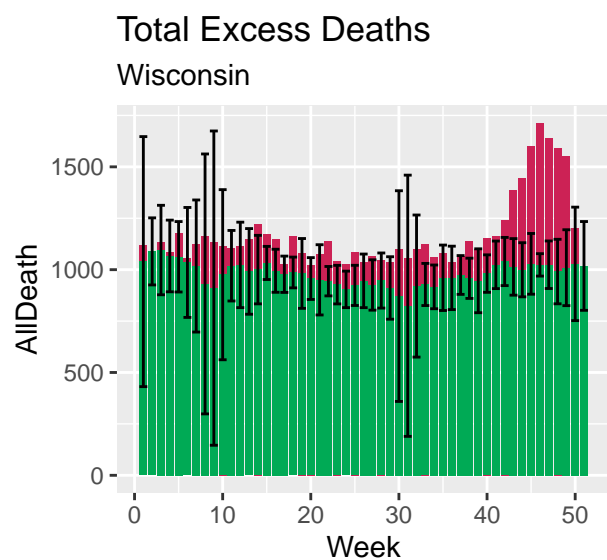
Total Excess Deaths
Rhode Island



Total Excess Deaths
Tennessee







Errata: North Carolina

I asked my statistics professor about the curious case of North Carolina. He noted that, unlike all other subplots, the y-axis includes negative numbers. Since it is not possible to have negative deaths, we knew that something must be wrong with either the code or the data. Upon further analysis, it seemed that the CDC data from which the plots came did not have complete data.

Conclusion

Since we saw an increase in the total number of deaths, to continue denying the existence of a pandemic, one must redefine her rationale for the belief in a falsified pandemic. They must now believe that **(1)** there is a way to falsify death certificates to fake the total number of deaths recorded at county, state, and federal levels, or **(2)** there is some other cause to explain the number of deaths, ideally in such a way that explains the correlation between total excess deaths and the deaths attributed to COVID-19.