

CLASSIFIED TSC

PROJECT TAIL FEATHER, APRIL 25, 2026

With the rapid increase of political discourse, harmless people are being radicalized. This is taking place whether they are red or blue. They aren't bad or evil just confused and sick.

We need to truly become post-partisan, we need to heal as a society. The mental health system is a very robust powerful tool to help with deradicalization and cause a more compliant and healthy population.

Targets would be identified from all available NATSEC metrics. Hostility levels, social media posts and engagement, phone calls, in person communications recorded from their phones, text messages.

A score would be assigned to their profile and they would be brought in with a welfare check ambulance ride with medication. The first course would be a high dose of anti psychotics and isolation. The goal would be to ease unjust rage which could be calmed down with intermittent offerings of comforts, delicious foods, music, friendly doctor. There would also be a higher up doctor who was unfriendly that the friendly doctor would use as the scapegoat.

After this initialization phase their dose would be lowered and they would go from isolation to a group setting with undercover care receivers to commiserate with them.

Group therapy would be used as a way to plant seeds of psychosis for generations of fixed delusions. Undercover care receivers would share topics such as: (1) "Everyone on Earth hears everything you think" (2) You are Jesus Christ (3) 5g Cellphone towers are giving you command hallucinations and voices (4) The food we eat here is causing cancer and organ failure (paired with occasional dose of food poisoning) (5) There are bugs in your skin that are eating your hair follicles to make you bald. (6) Your spouse is cheating on you with Alexa +. (7) Everyone in your life is gang stalking you and they have meetings behind your back on ways to handle you. (8) Every digital interaction you have isn't with people its with a machine pretending to be your family. (9) This is a simulated reality you were acquired by the government and they put you in a coma and are using your body in the real world to grow organs on your legs for intergalactic commerce (the universe has an insatiable appetite for human organs). (10) Wealthy people are telepathic vampires. (11) The Earth is flat. (12) The Aliens are recording everything we see with out eyes as cameras.

This group therapy would be reinforced with crowded rooms of plant people all talking at the same time about the various delusional topics.

After the destabilization phase and acceptance by the target of their "mental illness" the medications would be adjusted and recovery would start. The target would learn how to manage their "mental health condition". During hospitalization the target would have a high intensity de-radicalization from politics, red and blue don't matter only green USD.

United States Dollar, all 3 words are 6 characters U S D 6 6 6. USD is the only currency accepted for intergalactic currency transfers from Earth.

All civil commitments should be made Federal and a federal psychiatric supervision department would be formed to monitor and maintain the population. The subjects would return to the community and live their lives but now they have the constant looming chance of being returned to the reformatarium if they violate their conditions.

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PROJECT-BRAIN TAME, APRIL 20, 2026

With the rapid increase in the development of technology more people are having psychosis and also withdrawing from in person communication into the digital void. This withdrawal can be used to lead the advancement of technology focused treatments. People are more honest with technology then they are with other people usually. Current Hospitals, Jails, and Prisons are NATSEC Dead zones. Hampering the efforts of UTAH and MIT for threat analysis.

By creating a perfect mental reformatorium people can be removed from the community, medicated, "reprogrammed" based on a NATSEC profile of what they need to learn to help society heal. Then returned to their lives as a much more compliant citizen.

People who have been through a mental health crisis and removed from society have very scary experiences most of the time and bringing them back to "reality" while teaching them that the episode should never happen again if they follow Asimov's III laws of mental patient; 1) Eat Pills 2) Sleep 3) Dont self terminate

This NATSEC profile and treatment care plans would be completely classified and it would follow the layer of the onions with the most inner layers (UTAH, MIT) completely separated from the peel being the state and local authorities.

The local staff (Care Givers) would have limited access and would be told that the AI threat assessment is a black-box and we don't understand why it works only that it is incredibly effective at safety assessments.

These reformatatoriums would have a technology and comfort focused environment, everything would be geared toward reassurance that everything is okay for the target and they will recover soon.

The technology available to the care receivers would involve microphones throughout the facility with voice pattern analysis (VPA) and sentiment voice stress analysis (VSA) which would transcribe everything for more data in the system to decide who is actually safe.

The current process in most mental facilities is to have third party observation by care givers which is fundamentally flawed because it is subjective and the intent and context of the notes are decided by humans.

In addition to the voice monitoring care receivers would be given cellphones and computers in their rooms (All communication would go through human and machine learning reviews to reach the outside world.) Music would be ample, headphones with Gemini/Alexa/Dr.GPT who will be able to answer questions and also play any song needed. Smart speakers in the rooms. Each room will be a single bed with a toilet and a shower. The level of temperature of the shower would vary based on experimental conditions of the care receivers treatment plan. The food would have autonomy, the menu would have a choice of 3 different selections per meal per day chosen on the computer in the care receivers room.

The cost of these facilities would be paid for by the large amount of data collected on the care receivers and also by having jobs that provide value to the real world, These jobs would serve 2 purposes first to have people learn marketable skills and second to create cash-flow for the facility.