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Martial law shakes hands with U.S. Vaccine Program

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Who knew the Pentagon had muscled into the US vaccine program?

DARPA (Defense Advanced Research Projects Agency) has been doing research on vaccine production. They've found a way to produce flu vaccines a lot faster than Big Pharma. Utilizing vaccines grown on tobacco cells, instead of the traditional chicken eggs, DARPA has turned out a staggering 10 million doses of flu vaccine in just one month.

This "Blue Angel" project, as it's called, suddenly puts the Pentagon in the forefront of the vaccine business. The big question is: why is the Army involved in vaccines at all? And the answer is no surprise. According to DARPA, it's all about readiness in containing bio-threats. Translated, that means terrorist attacks that could use flu viruses. This is a sinister development. It creates a potential scenario in which the military can invent the "bio-threat" and then step in and provide the solution. It doesn't really matter whether the bio-threat is real or imaginary. The threat would offer the chance to initiate a martial-law scenario, after which the military vaccine would be made mandatory, destroying the right of each state in the union to permit, as is now the case, people to opt out of vaccination on religious, medical, or ethical grounds.

The Pentagon is famous for developing weapons and then lobbying for battlefield opportunities to use them. This is part and parcel of their "war is forever" mentality. Well, in this case, the vaccine becomes the defensive weapon, and you can be sure the Pentagon will strive to deploy it in a situation that "demands it", a chilling prospect. Several medical issues arise as well. First, what safety tests have been done to ensure that tobacco viruses don't enter these DARPA vaccines through lab contamination, thereby finding their way into the human bloodstream, via injection, and causing uncharted health problems? No word about that, just as there was no word, historically, about various Pentagon weapons systems that later proved to be dangerous to the soldiers using them (e.g. the Bradley Fighting Vehicle). Hidden in the story about the new means of vaccine production: the employment of a synthetic construction that is supposed to mimic the human immune system. To test the ability of the tobacco-vaccines to induce a "robust immune response," this new chemical lab-version of an immune system becomes the guinea pig. But there is no proof that such an artifact works or is translatable to actual processes of the human body.

Finally, DARPA states that the vaccine it just produced contains aluminum. Toxicity for humans is thus guaranteed. In the hands of the Pentagon, what could possibly go wrong with this Blue Angel program? Everything. In case we need to review the most recent "epidemic" advertised by the CDC and the World Health Organization (WHO), it killed, by the most generous estimates, 20,000 people worldwide. Despite being labeled a catastrophic level-6 pandemic, the H1N1 Swine Flu turned out to be a comparative dud. WHO states that, every year, seasonal non-pandemic flu kills between 250,000 and 500,000 people.

The CDC and WHO relentlessly promoted Swine Flu as a monster menace that could invade and decimate the planet. Therefore, everyone needed to step up and take the vaccine. These civilian agencies are mere pikers compared to the Pentagon. Can you imagine what the Dept. of Defense would promote and launch to guarantee their vaccine finds a place in your bloodstream? The DOD regularly makes conflict of interest into an art form. Martial law? No problem.

For those who value Rappoport's investigative reporting, he reminds us of the fallacy of the germ theory and how targeting a community with chemical poisonings and radiation can be blamed on a novel microbe, thus triggering Bioshield and the mass production of vaccines with DARPA's new technology.

Monitoring and Suppressing Dissent

The Bill and Melinda Gates Foundation has awarded \$100,000 for each of 17 proposals for optimizing immunization systems through its Grand Challenges Explorations Initiative. One such grant was awarded to Seth Kalichman, professor of psychology at the University of Connecticut, to "establish an Internet-based global monitoring and rapid alert system for finding, analyzing, and counteracting communication campaigns containing misinformation regarding vaccines to support global immunization efforts." Professor Kalichman is perfect for this job. His latest, soon-to-be published book, *Denying AIDS: Conspiracy Theories, Pseudoscience and Human Tragedy*, reveals he has sold his soul to repress dissent. Kalichman is also the recipient of numerous grants from the National Institute of Mental Health and the National Institute on Alcohol Abuse and Alcoholism.

Latest attempt to start a Flu Pandemic

On November 22, 2006, Jessica Mura, a 21-year-old Emergency Medical Technician, received a trivalent influenza vaccine at the insistence of her employer. Four days after the vaccination, she began to experience various symptoms and was eventually diagnosed as having acute disseminated encephalomyelitis (ADEM - an acute inflammation of the brain and spinal cord). Her ADEM caused Ms. Mura significant injuries, including paraplegia and respiratory failure. This disorder made Ms. Mura comatose, quadriplegic, incontinent (urine and feces), and she required mechanical ventilation, rendering her intellectually handicapped. In May 2012, Special Master Daria Zane of the United States Vaccine Injury Compensation Court determined that Mura was entitled to compensation for her injuries as a result of the flu shot.

But is this an isolated case? Absolutely not. Doctors, nurses and other healthcare workers witness the damage caused by the flu shot during the course of their jobs injecting patients with the flu shot. A growing number of healthcare workers have declined receiving the annual flu shot but are finding it harder to do so.

Beginning in January 2013, the Centers for Medicare & Medicaid Services (CMS) will require acute care hospitals that they reimburse to report healthcare workers influenza vaccination levels as part of the Hospital Inpatient Quality Reporting Program (IQR). One of the factors for determining quality care is a 90 percent or higher influenza vaccination uptake among both patients and staff. Hospitals who report the quality of their services are given financial incentives for doing so. Since the financial bottomline is primary, hospitals are implementing a policy for employees to get the flu shot or risk being fired.

Healthcare workers now have the choice of taking a deadly vaccine or risk losing their job. A few nurses have gotten creative. On Facebook, Vaccination Liberation co-director Donna Carrillo found rumors of what some nurses are doing:

1. **Going to "Walgreens", paying for the flu shot, getting a receipt and leaving without the shot. The nurse then has "proof" of getting the shot without having it actually injected.**
2. **Finding another nurse who does not want the flu shot and "giving each other the shot". Both shots are "flushed" but the record shows they were administered to one another.**
3. **While we have never encouraged lying, when it comes to this level of coercion, people are forced to come up with their own means of "protection".**

Compiled by Vaccination Liberation, VaccineTruth.com