

U.S. Government Has Been Planning to ‘Lockdown and Wait for a Vaccine’ Since 2007

By Will Jones - The Daily Sceptic DECEMBER 14, 2022

More and more evidence is coming to light that the ‘lockdown and wait for a vaccine’ strategy unleashed in 2020 was being cooked up inside the U.S. Government for decades before COVID-19 appeared and gave too many people an excuse to put the dreadful plan into action.

Recently the role of [CISA](#) (Cybersecurity and Infrastructure Security Agency) in producing key lockdown guidance for America in March 2020 came to light.

Now, a [pandemic plan](#) from 2007 produced by the National Infrastructure Advisory Council (NIAC) and currently hosted on the CISA [website](#) has emerged.

The plan contains the original list of pandemic ‘essential businesses’ that was used by CISA in 2020 to lock down America. The 2007 plan (which was itself based on a [Department of Homeland Security plan](#) from the previous year) clearly states the intention to ban large gatherings “indefinitely”, close schools and non-essential businesses, institute work-from-home, and quarantine exposed and not just sick individuals. The aim is simple and clear: to slow the spread to wait for a vaccine.

During a pandemic, the goal will be to slow the virus’ transmission; delaying the spread of the virus will provide more time for vaccine development while reducing the stress on an already burdened healthcare system.

Here’s the relevant section of the 2007 NIAC plan in full.

Social Interventions

The public health community is considering a series of measures intended to inhibit the spread of disease. These measures vary in their severity and potential to disrupt day-to-day activities. Federal, State, and local government officials are developing strategies to respond to a pandemic using these methods.

These methods have a historical precedent; health officials have used them in the past to assist in controlling previous epidemics, with varying degrees of success. During a pandemic, the goal will be to slow the virus' transmission; delaying the spread of the virus will provide more time for vaccine development while reducing the stress on an already burdened healthcare system.

The government retains the authority to limit the public's movement during an outbreak. In addition to border closures, isolation,

and quarantine generally represent the most widely known movement control methods. Quarantine is a legally enforceable declaration that a government body may institute over individuals potentially exposed to a disease, but who are not symptomatic. If enacted, Federal quarantine laws will be coordinated between CDC and State and local public health officials,

Isolation: For People Who Are Ill

Isolation refers to the separation of persons who have a specific infectious illness from those who are healthy and the restriction of their movement to stop the spread of that illness. Isolation allows for the focused delivery of specialized health care to people who are ill, and it protects healthy people from getting sick. People in isolation may be cared for in their homes, in hospitals, or in designated healthcare facilities. Isolation is a standard procedure used in hospitals today for patients with tuberculosis and certain other infectious diseases. In most cases, isolation is voluntary; however, many levels of government (Federal, State, and local) have basic authority to compel isolation of sick people to protect the public.

Quarantine: For People Who Have Been Exposed But Are Not Ill

Quarantine refers to the separation and restriction of movement of persons who, while not yet ill, have been exposed to an infectious agent and therefore may become infectious. Quarantine of exposed persons is a public health strategy, like isolation, that is intended to stop the spread of infectious disease. Quarantine is medically very effective in protecting the public from disease.

Source: http://www.cdc.gov/ncidod/dq/sars_facts/isolationquarantine.pdf

³⁴ For more information on how to stop the spread of germs at home, school, and work, log on to <http://www.cdc.gov/flu/protect/stopgerms.htm> and <http://www.cdc.gov/flu/protect/stopgerms.htm#GoodHealthHabits>.

and, if necessary, law enforcement personnel. During previous pandemics, particularly in 1918, many communities used isolation strategies and “reverse quarantine strategies” to prevent the disease’s spread to their community from surrounding populations. The government may also enact travel restrictions to limit the movement of people and products between geographic areas in an effort to limit disease transmission and spread. Authorities are currently reviewing possible plans to curtail international travel upon a pandemic’s emergence overseas.

Limiting public assembly opportunities also helps limit the spread of disease. Concert halls, movie theaters, sports arenas, shopping malls, and other large public gathering places might close indefinitely during a pandemic—whether because of voluntary closures or government-imposed closures. Similarly, officials may close schools and non-essential businesses during pandemic waves in an effort to significantly slow disease transmission rates. These strategies aim to prevent the close interaction of individuals, the primary conduit of spreading the influenza virus. Even taking steps such as limiting person-to-person interactions within a distance of three feet or avoiding instances of casual close contact, such as shaking hands, will help limit disease spread.

In many instances, the aggressive spread of influenza within communities during the 1918 pandemic was attributed to the close physical association of individuals in public gatherings or the workplace. For instance, Philadelphia officials ignored national recommendations against public gatherings to participate in the war bond parade experts believe likely contributed to the rapid movement of influenza through the city. During the Liberty Loan Drive parade in Philadelphia on September 28, 1918, 200,000 people grouped closely along the parade route. Shortly thereafter, city health officials reported 635 new Spanish Flu cases.³⁵

A pandemic will also demand changes in workplace behavior and practices. Businesses may be encouraged to have employees work from home as a means to limit employee interaction. Other steps, such as instituting shift work and altering business processes to minimize employee interaction are likely reactions to a pandemic. DHS’ *Pandemic Influenza Preparedness, Response, and Recovery Guide for Critical Infrastructure and Key Resources*³⁶ provides more detail on strategies to protect businesses and their employees during a pandemic.

³⁵ <http://www.hsp.org/files/findingaid0217southphilawomen.pdf>

³⁶ <http://www.pandemicflu.gov/plan/pdf/CIKRpandemicInfluenzaGuide.pdf>

2006 and 2007 were a turning point in U.S. biodefence planning. Prior to 2006, such planning had been focused on biological attacks, but then major mission creep set in and the new draconian ideas were applied wholesale to general pandemic planning. This controversial switch in focus so riled leading U.S. disease expert D.A. Henderson, who had been involved with the project up to that point, that he issued his [famous riposte](#) objecting in the strongest terms to the new ideas. He and his fellow dissenters [wrote, presciently](#):

Experience has shown that communities faced with epidemics or other adverse events respond best and with the least anxiety when the normal social functioning of the community is least disrupted. Strong political and public health leadership to provide reassurance and to ensure that needed medical care services are provided are critical elements. If either is seen to be less than optimal, a manageable epidemic could move toward catastrophe.

I'm told by someone who was involved with the program in the early days that the original biodefence planning in 2002-2003 assumed a targeted biological weapons attack with smallpox as the viral case and anthrax as the bacterial case – both considered worst case scenarios. It was recognized that the old smallpox vaccine was too risky to try to use on a wider population to protect them if such an attack occurred, thus the effort for a new vaccine. But very quickly, within a year or two (not least due to the SARS outbreak in 2003), there was a massive expansion of the original mission and suddenly every infectious agent, whether dangerous or not, was cast into the web of biodefence.

Outside the U.S. there was more resistance to this kind of totalitarian nonsense. However, even the 2019 [World Health Organization pandemic guidance](#) bears many of its marks. While this guidance commendably did not recommend “in any circumstances” contact tracing, border closures, entry and exit screening and quarantine of exposed individuals, it did make conditional recommendations for use of face masks by the public, school and workplace closures and “avoiding crowding” i.e., social distancing.

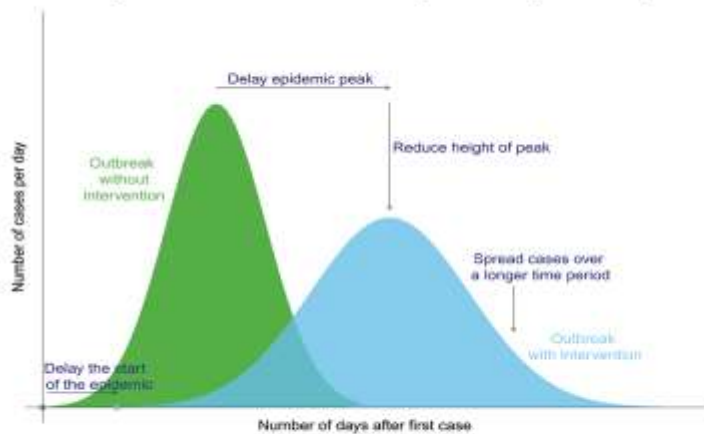
Table 1. Recommendations on the use of NPIs by severity level

SEVERITY	PANDEMIC*	EPIDEMIC
Any	Hand hygiene Respiratory etiquette Face masks for symptomatic individuals Surface and object cleaning Increased ventilation Isolation of sick individuals Travel advice	Hand hygiene Respiratory etiquette Face masks for symptomatic individuals Surface and object cleaning Increased ventilation Isolation of sick individuals Travel advice
Moderate	<i>As above, plus</i> Avoiding crowding	<i>As above, plus</i> Avoiding crowding
High	<i>As above, plus</i> Face masks for public School measures and closures	<i>As above, plus</i> Face masks for public School measures and closures
Extraordinary	<i>As above, plus</i> Workplace measures and closures Internal travel restrictions	<i>As above, plus</i> Workplace measures and closures
Not recommended in any circumstances	UV light Modifying humidity Contact tracing Quarantine of exposed individuals Entry and exit screening Border closure	UV light Modifying humidity Contact tracing Quarantine of exposed individuals Entry and exit screening Internal travel restrictions Border closure

NPI: non-pharmaceutical intervention; UV: ultraviolet.

The purpose was also the same: to ‘flatten the curve’ to wait for a vaccine, as illustrated in the diagram below. The WHO guidance states: “NPIs are often the most accessible interventions, because of the time it takes to make specific vaccines available”; “specific vaccines may not be available for the first six months”; NPIs are “used to delay the peak of the epidemic... allowing time for vaccines to be distributed”.

Fig. 1. Intended impact of NPIs on an influenza epidemic or pandemic by reducing person-to-person transmission.



NPI: non-pharmaceutical intervention.
Sources: US Centers for Disease Control and Prevention and European Centre for Disease Prevention and Control guidelines (29, 30).

These untested ideas, which the WHO's own guidance rightly admitted had no good quality evidence to support them, have now become a terrible orthodoxy for global pandemic response. This is despite them utterly failing to achieve any of their goals – a point that no one who backs them seems to have noticed.

Somehow, the world must learn the right lessons from this debacle. Yet it keeps threatening to learn all the wrong ones.

The Governor of Florida Ron DeSantis is taking on the government agencies and Big Pharma in legal action that will challenge the massive scandemic.



DeSantis' power move on COVID vaccines targets drugmakers

Grand jury can compel revelations that could affect legal immunity of drugmakers, 2024 presidential race.

By [John Solomon](#)

As he has done many times before, Florida Republican Gov. Ron DeSantis is flexing his state muscle to address an issue where many see federal failure, [empaneling a state grand jury](#) to investigate whether drugmakers and federal agencies hid potential risks or problems posed by the COVID-19 mRNA vaccines.

His power move, announced Tuesday, may reshape the debate over whether federal science agencies and drugmakers can share legal blame for any harm the vaccines are believed to have caused. It also opens a political avenue to attack Donald Trump's administration for its Warp Speed program to approve the vaccines on an accelerated timetable.

The latter could impact the 2024 race should DeSantis challenge Trump in the GOP presidential primaries, loaded with conservative voters long aligned with Trump who also harbor distrust of the federal government's approval process for the vaccines and big Pharma's profit motives in the aftermath of the opioid epidemic.

"I think people want the truth that I think people want accountability," DeSantis said Tuesday in explaining his decision to ask the Florida Supreme Court to empanel the grand jury. "You need to have a thorough investigation into what's happened with the shots."

Normally, vaccine safety is an issue left to federal regulators, like the Food and Drug Administration (FDA) and the Centers for Disease Control and Prevention (CDC). But [DeSantis is injecting himself](#) into the debate, declaring alongside his surgeon general Joseph Ladapo on Tuesday that state law prohibits drugmakers from making false or misleading statements about drug or vaccine safety.

In the filing to the state Supreme Court, his administration played to populist distrust of drug companies as well as casting doubt on the vaccines, which federal officials belatedly admit don't stop either transmission or infection but simply lessen severe symptoms for many.

The *"pharmaceutical industry has a notorious history of misleading the public for financial gain,"* and the grand jury will probe *"the development, promotion, and distribution of vaccines purported to prevent COVID-19 infection, symptoms, and transmission,"* the filing declared.

You can read that filing here:

File

[Vaccine-Grand-Jury-Petition.pdf](#)

Vaccine makers like Pfizer immediately pushed back.

“These authorizations are based on robust and independent evaluation of the scientific data on quality, safety and efficacy, including our landmark phase 3 clinical trial,” [Pfizer spokeswoman Sharon J. Castillo wrote Politico](#). “Data from real world studies complement the clinical trial data and provide additional evidence that the vaccine provides effective protection against severe disease.”

One issue officials said Florida is likely to investigate is whether federal agencies or drugmakers withheld data affecting Americans’ ability to judge the safety or efficacy of the inoculations.

On that front, the conservative watchdog group [Judicial Watch released documents Tuesday](#) it said showed that data Moderna submitted to the FDA reported a “statistically significant” number of rats were born with skeletal deformations after their mothers were injected with the vaccine. The documents also reveal Moderna elected not to conduct a number of standard pharmacological studies on the laboratory test animals, the group said.

“The vaccine companies are saying well, no big whoop, you know, that’s not necessarily tied to the vaccines,” Judicial Watch President Tom Fitton told the “Just the News, No Noise” television show. “Others would suggest otherwise, that this is a warning sign about the safety of the vaccines. The point is this debate should have been had last year, when we first asked for this material, rather than it taking 18 months and a federal lawsuit to get this basic information out about the vaccinations.”

You can read those documents here:

File

[JW-v-HHS-Biodistribution-Prod-4-02418.pdf](#)

Fitton said the DeSantis grand jury opens up a whole new, untested area for a state to challenge federal authorities on vaccine safety.

“This is the most important medical treatment, arguably in the history of modern man, these vaccines, and we’re just finding out basic information about how they were tested and what the results were,” he said.

“It’s going to be a big legal question as to whether these companies or anyone else has liability over the misleading information that we’ve too often never received related to these, what Justice Alito famously called ‘irreversible medical treatments,’” he added.

“And did federal law preempt Ron DeSantis, or Florida State officials’ ability to enforce consumer fraud and other statutes in a way that protects citizens there? That’s going to be interesting to see how that turns out.”

While the legal front evolves, there are significant political considerations to the DeSantis strategy should the Florida governor enter the 2024 presidential race as some expect. Trump, already declared for 2024, has touted his record of developing the vaccines in record time through a public-private partnership with the drugmakers.

DeSantis, who famously fought federal vaccine mandates on the grounds that people should have the freedom to choose what to inject into their bodies, could dent the Trump vaccine legacy if he can show safety was put at risk in the name of that warp speed.

That equation, however, won't be known until the grand jury gets the evidence and makes assessments as to whether the state's consumer laws were violated and whether citizens were deprived of the right to make informed decisions.

No matter how that turns out, DeSantis' move is already winning conservative converts, including in Trumpworld.

DeSantis "going after Big Pharma over the COVID shots is the feel-good story of the day," [tweeted Monica Crowley](#), an influential conservative columnist, TV analyst and podcaster who served in the Trump administration as an assistant Treasury secretary.

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Blessings,

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