

*From Canary In a Covid World: CHAPTER 24*

***The Most Egregious Violation of Medical Ethics in the History of Medicine***

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Few things are more illustrative of government corruption during the COVID-19 pandemic than the clandestine capture of private medical organizations by the U.S. Department of Health and Human Services (HHS), in what would eventually be exposed as a covert propaganda campaign to push experimental mRNA shots into every arm. Of all the lessons learned from the pandemic, this lesson is among the most important for those who envision the U.S. as a free democracy protected by the First Amendment.

In addition to protecting the right to express opinions without government censorship and control, the First Amendment also protects Americans' right to call out government corruption and abuse of power and petition the government for redress of grievances. These protections were stripped away during the COVID-19 pandemic by a government that recruited and bribed private entities and individuals to do its dirty bidding.

There is still no government acknowledgment of harms caused by reckless pandemic policies which sent sick people home to die in the treatable first stage of the disease, while silencing and maligning medical professionals who advocated for the use of safe, repurposed medicines. There is still no meaningful redress for millions in this country who are COVID-19 "vaccine" injured, who have lost a loved one to the "vaccine," and who continue to endure silencing by their government, their physicians, and corporate media.

To avoid further erosion of the First Amendment, it is essential that Americans come to understand how all this unfolded: How could upwards of 75% of the country be persuaded into taking experimental gene therapy injections with no informed consent and zero long-term safety data? If the U.S. government's illicit pandemic strategy is not exposed for the betrayal it was, then make no mistake – the same clandestine and totalitarian techniques will be deployed again on unsuspecting Americans.

This essay will delve into the shady techniques used by the HHS to convince Americans that the experimental shots were "safe, effective and necessary" in pregnancy – despite evidence to the contrary. Even Pfizer's own 90-day 5.3.6 post marketing experience, which both Pfizer and the FDA had in early 2021, showed its mRNA vaccine to be the most lethal drug ever rolled out, with 1223 deaths in the first 90 days (page 7), a multitude of adverse pregnancy outcomes (page 12) and nine pages of "Adverse Events of Special Interest" (Appendix).<sup>[1]</sup> However, the government had an unstoppable mRNA agenda, and so the band played on.

**Enlisting "Trojan Horses" to do the CDC's Ugly Bidding:  
HHS launches COVID-19 Community Corps**

Pfizer's 5.3.6 ninety-day post marketing experience report, which tracked adverse event data from December 1, 2020 to February 28, 2021, showed its COVID-19 mRNA "vaccine" to be the

deadliest drug ever rolled out in U.S. history. Instead of hitting pause on rollout of the vaccines, however, on April 1, 2021 the HHS launched COVID-19 Community Corps<sup>[2]</sup> – a colossal COVID-19 vaccine propaganda machine designed to exploit “trusted” private entities and individuals across the country, turning them into covert government agents to push the vaccines. As part of the strategy to get a shot in every arm, HHS used COVID-19 Community Corps to recruit private, non-government “trusted” sources to push the CDC’s message that the novel mRNA genetic injections were safe (despite clear evidence to the contrary) – but without directly disclosing that these messages were actually from the government.<sup>[3]</sup>

Under the guise of COVID-19 Community Corps, HHS awarded billions of federal dollars to recruit what HHS referred to as “trusted community leaders” who could push the “vaccines” within our most private relationships.<sup>[4]</sup> Much like modern-day trojan horses, these “trusted messengers” would be unique in their ability to permeate all facets of private life.<sup>[5]</sup> Essential to successfully deploying its strategy on the public, HHS sought to identify credible and influential community leaders, enlist them to join its COVID-19 Community Corps, and then exploit these “trusted sources” to convince those around them to take the COVID-19 vaccines.<sup>[6]</sup> The focus was on finding people with not just local, but also uniquely interpersonal influence. As Harvard public health professor Jay Winsten,<sup>[7]</sup> who has advised previous administrations, reportedly explained to CBS News in a December 2020 article about the HHS’ monumental effort, “You want to go for the low hanging fruit, those that are easiest to pick and harvest.”<sup>[8]</sup> Noting that the focus should be on finding locally influential people to push the vaccines, Winsten added, “People trust their own doctors, their own nurses, their own pastors, their own social networks. That’s very, very different from a distant figure.”<sup>[9]</sup> And indeed it was. American College of Obstetricians and Gynecologists (ACOG): A “Trusted Messenger” along with 275 other organizations, twenty-five of which were health and medical organizations, the American College of Obstetricians and Gynecologists (ACOG) jumped on board as a founding member of COVID-19 Community Corps,<sup>[10]</sup> ultimately receiving millions in federal grant money.<sup>[11]</sup>

Shortly thereafter, on July 30, 2021 ACOG began recklessly endorsing COVID-19 vaccination in pregnancy, even though the clinical trials failed to include pregnant women. Perhaps no other medical organization had as much potential to persuade Americans into taking these experimental injections as did ACOG. A pregnant patient’s relationship with her ob-gyn is arguably one of the most intimate and sacred physician-patient relationships in all of medicine. This is not without reason – as one patient and writer notes, “They’re right next to you for the most momentous occasion of your life.”<sup>[12]</sup> Pregnant mothers trust their ob-gyn doctor with the most intimate and sensitive information about their own bodies, their sex lives, and, if pregnant, about the new life growing inside of them. Some individuals have even reported the development of a non-romantic affection for their ob-gyn that rivals that of the baby’s father in some ways, due to the “complete vulnerability” many women reportedly experience with their gynecological and pregnancy specialists.<sup>[13]</sup>

Government capture of ACOG would capitalize on this unique and sacred doctor-patient relationship, using ob-gyn doctors – with their unparalleled physician influence – as pro-vaccine “trusted messengers.” Additionally, convincing pregnant women to take novel mRNA shots would yield an exponential harvest of “low hanging fruit.” This is because women reportedly make a full 90% of all healthcare decisions about their household and have long been considered

“A Brand’s Powerhouse” by professional marketers.<sup>[14]</sup> Convincing pregnant women to take the COVID-19 shots was almost a guarantee that they would become pro-vaccine “trusted messengers” within their own families. Moreover, the optics were exceptionally good for persuading other “vaccine” hesitant Americans to roll up their sleeve for the experimental shots – if the COVID-19 “vaccines” were considered safe enough to administer to pregnant patients (and thereby trans-placentally to their unborn babies) – certainly they were safe enough for everyone. If HHS and CDC could pull off government capture of ACOG and convince its ob-gyn members to push the shots on their patients, this would be a bonanza for reaching the “vaccine” hesitant – what HHS Deputy Assistant Sec. Mark Weber referred to as the “moveable middle.”<sup>[15]</sup>

As it would turn out, the HHS’ grand marketing strategy worked. The methods utilized by HHS to push the COVID-19 “vaccines” – including the creation of COVID-19 Community Corps – were so vastly different from any other HHS effort that an academic article was published in *Journal of Health Communication* in April of the following year, detailing the process and commending its success.<sup>[16]</sup> Featuring now-retired HHS Deputy Assistant Sec. Mark Weber as lead author, the article confirms that HHS did, in fact, target interpersonal relationships. <sup>[17]</sup> Weber’s and his colleagues “vaccine” marketing efforts were so successful that, after retiring from HHS, Weber apparently formed his own private company aimed at “Achieving bold goals at the Federal Level”<sup>[18]</sup> – in revolving door fashion.

Today the HHS campaign to push the COVID-19 “vaccines” is far from over. Having entered its third phase in 2022, according to Weber and his co-authors it has evolved into a highly targeted approach using both paid and “earned” media strategies. As explained in Weber’s article, the HHS campaign: focuses more on precision marketing to identify subgroups with vaccine hesitancy, working directly with communities and using trusted messengers in those communities to deliver messages without the Federal government being directly involved (even though the information may come from a Federal source).<sup>[19]</sup>

Notably, the article neglects to fully explain – or even recognize – that what HHS has engaged in is arguably exploitative, deceptive and unethical. This is because HHS used persons and methods targeting trust within interpersonal relationships to push messages that the “vaccines” were safe and effective – but often government involvement behind the messaging was not fully disclosed.

### **ACOG: A Revealing Case Study of Government Capture of Medical Non-Profit Organizations**

On February 1, 2021, ACOG had been awarded the first of what would eventually be three HHS and CDC “Cooperative Agreement” grants made during the pandemic.<sup>[20]</sup> Under these three Cooperative Agreement grants, ACOG would receive over \$11 million in federal money over coming years.<sup>[21]</sup> But there was a catch: Documents obtained in a Freedom of Information Act (FOIA) request made in connection with these three Cooperative Agreement grants has recently exposed that ACOG relinquished independent control over its COVID-19 recommendations for patients to the CDC when it accepted the federal grant money.<sup>[22]</sup>

Receipt of grant money by ACOG was contingent on ACOG's full compliance with CDC guidance on COVID-19 infection and control.<sup>[23]</sup> eerily similar to what former HHS Deputy Assistant Sec. Mark Weber writes about, the FOIA documents reveal that HHS and CDC seemed to be using ACOG to "deliver messages without the Federal government being directly involved (even though the information may come from a Federal source)."<sup>[24]</sup>

Although they were heavily redacted, the FOIA documents revealed startling information about the extent of control CDC wielded (and still wields) over ACOG. For example, the FOIA documents show that CDC grants totaling \$3,300,000 were awarded to ACOG on Sept. 2, 2021 for two separate programs, entitled "Engaging Women's Health Care Providers for Effective COVID-19 Vaccine Conversations," and "Improving Ob-Gyns' Ability to Support Covid-19 Vaccination, Mental Health, Social Support."<sup>[25]</sup> As part of receiving funds under these awards, ACOG is required to "comply with existing and or future directives and guidance from the [HHS] Secretary regarding control of the spread of COVID-19."<sup>[26]</sup> The award is also expressly contingent on ACOG's agreement "to comply with existing and future guidance from the HHS Secretary regarding the control and spread of COVID-19."<sup>[27]</sup> In addition, ACOG must also "flow down" these terms to any person or entity who receives a "subaward."<sup>[28]</sup> Moreover, the CDC is expressly authorized to terminate any award due to material failure to comply with "the terms and conditions of the federal award."<sup>[29]</sup>

If this sounds like government capture of ACOG – it is. Disturbingly, the FOIA documents show CDC working through ACOG, in essence exploiting ACOG's authority and sway to influence not only doctors and patients, but also a host of others, including public health entities and "partner organizations."<sup>[30]</sup> The FOIA documents obtained make it difficult to tell where ACOG ends and CDC begins. CDC Recommends COVID-19 Vaccines for Pregnant Women on April 23, 2021. Fast forward to April 23, 2021. On this day, CDC Director Dr. Rochelle Walensky announced during a highly publicized White House COVID-19 press briefing the CDC's new recommendation that all pregnant individuals receive the COVID-19 "vaccine."<sup>[31]</sup>

Pointing to a flawed CDC study published just two days before, which study featured CDC Immunization Safety Office Director Tom Shimabukuro, MD as lead author,<sup>[32]</sup> Walensky publicly declared that the vaccines appeared to be safe for pregnant women. However, Walensky neglected to mention that the Shimabukuro article was another mRNA marketing product of the CDC. In addition to serving as Director of the CDC's Immunization Safety Office, over the course of the pandemic, Shimabukuro has been deeply entrenched in the CDC. He has reportedly served as VAERS "team lead" (raising valid questions about why the CDC seems to be ignoring the VAERS database) and "acting team lead" of the Vaccine Safety Datalink (VSD) team.<sup>[33]</sup> He has also served on the CDC "COVID-19 Vaccine Coordination Unit."<sup>[34]</sup> With Shimabukuro's deep ties to the CDC and pro-COVID-19 "vaccine" stance, his serving as lead author on this critically timed and flawed study constituted a flagrant conflict of interest and never should have been allowed.<sup>[35]</sup>

### **ACOG Follows CDC's Lead**

Following the lead of CDC, on July 30, 2021 ACOG, along with the Society for Maternal Fetal Medicine (SMFM), recklessly began endorsing COVID-19 vaccination in pregnancy,<sup>[36]</sup> even

though the clinical trials failed to include pregnant women. Now bound under terms and conditions of the Cooperative Agreements grants (which ceded control to CDC for programs involving COVID-19 grant funding), ACOG seemingly had no choice, and thus played right into the hands of the HHS' strategy to enlist "trusted messengers" to push the COVID shots. As ACOG explains on its website, a pregnant patient's ob-gyn had the potential for enormous influence: "Pregnant people need to feel confident in the decision to choose vaccination, and a strong recommendation from their obstetrician-gynecologist could make a meaningful difference for many pregnant people."<sup>[37]</sup> In this case, ACOG seems to say the quiet part out loud – a recommendation from an ob-gyn could be a game changer for convincing pregnant women to take the COVID-19 "vaccines." Sadly, the targets of the experimental "vaccine" campaign would be society's most vulnerable – pregnant mothers and their unborn babies.

ACOG's July 30, 2021 announcement strongly recommending COVID-19 "vaccination" in pregnancy was a sharp about-face from ACOG's previous stance on the issue. Website archives show that for the months of the pandemic preceding July 30, 2021 (Dec. 2020 through July 21, 2021), ACOG's official recommendation was to allow pregnant women the freedom to choose, stating throughout the first half 2021: "In the interest of patient autonomy, ACOG recommends that pregnant individuals be free to make their own decision regarding COVID-19 vaccination."<sup>[38]</sup> Yet, ACOG's recommendation abruptly changed on July 30, 2021.<sup>[39]</sup> In place of patient autonomy, independent clinical judgment, and informed consent about the known and unknown risks of the COVID-19 "vaccines," ACOG's recommendations would now follow CDC's guidance, announced by CDC director Walensky on April 23, 2021, that novel, experimental gene therapy "vaccines" with zero long term safety data were somehow safe in pregnancy.

### **Multiple Sources Flash Danger**

Multiple sources, including the government's own data contained in VAERS, <sup>[40]</sup> casts doubt on the veracity of the claim that the COVID-19 vaccines are safe in pregnancy. One published investigational study, led by ObGyn and Maternal Fetal Medicine physician James A. Thorp, looked at adverse events reported in VAERS following COVID-19 "vaccination" in pregnancy compared to adverse events reported following Influenza vaccines since 1998.<sup>[41]</sup> The results of this VAERS investigational retrospective study are catastrophic: the FDA and CDC use a 2-fold increase as a breach in the safety signal, yet the study led by Thorp found a 57-fold increase in miscarriage, and a 38-fold increase in fetal death (stillbirth) following COVID-19 vaccination when compared to Influenza vaccines. A total of 18 separate adverse events, including abnormal menses and 17 other major pregnancy complications, all exceeded CDC and FDA safety signals.

Most recently, The Defender, a publication which is affiliated with Children's Health Defense (an organization which advocates for greater vaccine safety founded by Robert F. Kennedy Jr.), reports alarming data. Calling into question the veracity of CDC's and ACOG's recommendations that the vaccines are safe in pregnancy, the data reported on by The Defender suggest that authorities knew of health risks with the mRNA shots, but assured pregnant mothers it was safe anyway.<sup>[42]</sup> According to a recent troubling report from Naomi Wolf's organization, DailyClout, the April 2023 batch of Pfizer clinical documents released under court order

demonstrate that both Pfizer and FDA knew the mRNA shots caused serious harm to both fetuses and infants – yet CDC pushed the shots anyway.<sup>[43]</sup>

### **A Troubling Relationship between ACOG and CDC**

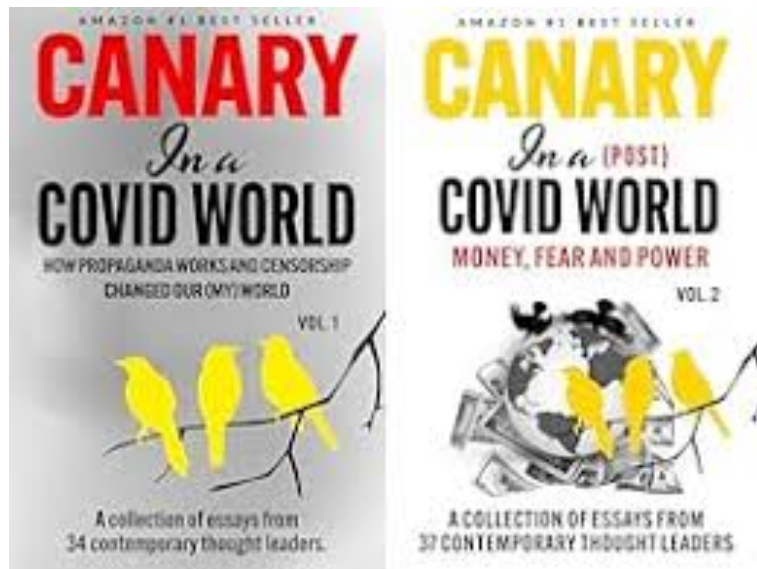
ACOG's July 30, 2021 page recommending the COVID-19 "vaccines" for pregnant individuals does not disclose that ACOG – a membership funded non-governmental organization – was operating under the purview of the HHS and CDC regarding its COVID-19 guidance for pregnant women at the time that recommendation was made.<sup>[44]</sup> Which begs multiple questions: When ACOG changed its official COVID-19 "vaccination" position on July 30, 2021 – choosing to follow CDC's April 23, 2021 recommendations that COVID-19 "vaccines" be given to pregnant women – why didn't ACOG simply disclose it was following the CDC's recommendations? Was ACOG's July 30, 2021 recommendation also its own independent recommendation? If so, what exactly was ACOG's independent recommendation based upon? How many of the 275 medical and other founding members organizations of the COVID-19 Community Corps perhaps sold their souls – trading free speech, the protections of the First Amendment, bodily autonomy, and informed consent– for money, power or both? Without FOIA requests for each of the founding members, it is impossible to know for sure.

But what we do know about the HHS COVID-19 Community Corps and the FOIA documents involving ACOG should make us wary. Finally, ACOG's capture by HHS and CDC regarding COVID-19 vaccination recommendations in pregnancy is troubling for yet another reason – potential conflict of interest via the CDC's nonprofit support entity, the CDC Foundation.<sup>[45]</sup> Donation records show that the CDC Foundation has, in past years leading up to the pandemic, received donations from Pfizer, Inc.,<sup>[46]</sup> the Bill and Melinda Gates Foundation,<sup>[47]</sup> and a host of other pharmaceutical companies and private entities.<sup>[48]</sup>

As government capture of ACOG strikingly illuminates – at the heart of the HHS' vaccine propaganda campaign was exploitation of our trust, built upon age-old marketing tricks – and not anything approaching actual medical "science." HHS, working with the Biden administration, injected itself into our most private relationships, utilizing trusted leaders who were viewed as the golden ticket to reach government vaccination goals. The US government cherry picked groups and individuals because of their capability to engender widespread influence and confidence. Some of these included hospitals, administrators physicians, nurses, pastors, local celebrities, business leaders, academic institutions, and many more viewed as voices which resonated trust. Literally no facet of life or society was left untouched. The government's strategy: to exploit those identified by "communication science" as highly "trusted,"<sup>[49]</sup> using them to infiltrate the most sensitive, personal and intimate areas of our lives. The government's goal: To convince the "low hanging fruit, those that are easiest to pick and harvest"<sup>[50]</sup> to take part in novel and experimental therapy injections rebranded as vaccines.

While some have tried to explain what happened by arguing that there was a kind of mass hypnosis that took hold, that explanation falls short. Rather, in a disturbing and intentional campaign for control typically characteristic of totalitarian dominator societies, the US government co-opted our most intimate relationships and the voices we trusted into a vast covert government operation, unleashed on the unsuspecting public at the height of fear and isolation.

Understanding the breadth and depth of the government's illicit actions can assist us in never letting such a grab for totalitarianism control happen again.



## Endnotes

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320 | Canary In a Covid World

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Chapter 24 The Most Egregious Violation of Medical Ethics in the History of Medicine | 321

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Chapter 24 The Most Egregious Violation of Medical Ethics in the History of Medicine | 323

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324 | Canary In a Covid World

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ACOG encourages its members to enthusiastically recommend vaccination to their patients. This means emphasizing the known safety of the vaccines and the increased risk of severe complications associated with COVID-19 infection, including death, during pregnancy," said J. Martin Tucker, MD, FACOG, president of ACOG. "It is clear that pregnant people need to feel confident in the decision to choose vaccination, and a strong recommendation from their obstetrician-gynecologist could make a meaningful difference for many pregnant people." (Emphasis retained).

Chapter 24 The Most Egregious Violation of Medical Ethics in the History of Medicine | 325

See also, The American College of Obstetricians and Gynecologists (ACOG). 2023. "COVID-19 Vaccines and Pregnancy: Conversation Guide - Key Recommendations and Messaging for Clinicians." Accessed May 1, 2023. <https://www.acog.org/covid-19/covid-19-vaccines-and-pregnancy-conversation-guide-for-clinicians>. This page states: The American College of Obstetricians and Gynecologists (ACOG) strongly recommends that pregnant individuals be vaccinated against COVID-19. Given the potential for severe illness and death during pregnancy, completion of the initial COVID-19 vaccination series is a priority for this population.

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