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U.S. Investigates massive counterfeit N95 mask scam; South African virus variant found in California!

Federal authorities are investigating a massive counterfeit N95 mask operation in which fake 3M masks were sold in at least five states to hospitals, medical facilities and government agencies. The foreign-made knockoffs are becoming increasingly difficult to spot and could put health care workers at grave risk for the coronavirus.

These masks are giving first responders “a false sense of security,” said Steve Francis, assistant director for global trade investigations with the Homeland Security Department’s principal investigative arm. He added, “We’ve seen a lot of fraud and other illegal activity.”

Officials could not name the states or the company involved because of the active investigation.

In other developments:

- California has identified the state's first two cases of the South African variant of the coronavirus in the state, Gov. Gavin Newsom said on Wednesday as he touted overall positive trends in the state's control of the virus.
- A new government study finds that wearing two masks can be better than one in protecting against coronavirus spread. But health officials are stopping short of recommending that everyone double up.
- About 1 in 3 Americans say they definitely or probably won't get the COVID-19 vaccine, according to a new poll that some experts say is discouraging news if the U.S. hopes to achieve herd immunity and vanquish the outbreak.
- As the European Union surpassed the shocking toll of 500,000 people lost to the virus, the EU Commission chief said Wednesday that the bloc's much-criticized vaccine rollout could be partly blamed on the EU being over-optimistic, over-confident and plainly “too late.”
- As the coronavirus takes a devastating toll on seniors in nursing homes, many attorneys are turning down grieving families seeking to sue long-term care providers for wrongful death. More than half of U.S. states have granted nursing homes and other health providers protection from lawsuits during the pandemic.
- Independent experts advising the World Health Organization about immunization on Wednesday recommended the use of AstraZeneca's vaccine even in countries that turned up worrying coronavirus variants in their populations.

Wow, this is the first time I have seen the term "**HERD IMMUNITY**" associated with the CoVid-19 vaccines. So, I went to the U.S. CDC website and spent nearly 45 minutes using the website's "Search"

feature and could not find the words "Herd Immunity" or "Herd." Why would the U.S. CDC NOT have something on their website expounding Herd Immunity? Well, since the U.S. CDC (our trusted U.S. government) has nothing on their site about this subject, I went to what I thought was the next best place to look for information. . What is Herd Immunity?



Herd immunity

What is herd immunity?

Herd immunity (or community immunity) occurs when a high percentage of the community is immune to a disease (through vaccination and/or prior illness), making the spread of this disease from person to person unlikely. Even individuals not vaccinated (such as newborns and the immunocompromised) are offered some protection because the disease has little opportunity to spread within the community.

Vaccines prevent many dangerous and deadly diseases. In the United States, smallpox and polio have both been stamped out because of vaccination. However, there are certain groups of people who cannot get vaccinated and are vulnerable to disease: babies, pregnant women, and immunocompromised people, such as those receiving chemotherapy or organ transplants. For example, the earliest a baby can receive their first pertussis or whooping cough vaccine is at two months, and the earliest a child can receive their first measles vaccine is at one year, making them vulnerable to these diseases.

Herd immunity depends on the contagiousness of the disease. Diseases that spread easily, such as measles, require a higher number of immune individuals in a community to reach herd immunity. Herd immunity protects the most vulnerable members of our population. If enough people are vaccinated against dangerous diseases, those who are susceptible and cannot get vaccinated are protected because the germ will not be able to “find” those susceptible individuals.

When can we expect herd immunity for COVID-19?

COVID-19 is a very contagious disease. A large percentage of the population will need to be immune against the disease (through infection or vaccination) before herd immunity will be achieved. It is not known when that will happen, but it will depend on how many people develop immunity after COVID-19 infection, how soon a COVID-19 vaccine is widely available to the general public, and how many people get vaccinated. Throughout this time period until herd immunity is achieved, it is very important to continue to [wear masks](#) in public and social distance to slow the spread of COVID-19.

On December 11, 2020, the U.S. Food and Drug Administration (FDA) issued an emergency use authorization for the first COVID-19 vaccine. The emergency use authorization allows the Pfizer-BioNTech COVID-19 Vaccine to be distributed in the U.S. The Moderna COVID-19 vaccine received approval for emergency use shortly thereafter. With vaccines becoming approved, the focus is shifting to manufacturing the vaccine, educating members of the public about the vaccine, and distribution of the vaccine. Although these efforts will take some time to achieve, vaccines have proven to be the safest, most cost-effective way to protect people from disease. APIC continues to [monitor and advocate](#) on policies affecting each one of these steps and will continue to share consumer information via our social media channels.

Why are there still outbreaks of vaccine-preventable diseases?

Measles was declared eliminated in 2000. Yet in 2019, there were 1,282 cases reported in the U.S. Outbreaks of vaccine-preventable diseases still occur when too few individuals in a population are vaccinated. Outbreaks often begin with an imported case (someone who was traveling outside the U.S.) or person coming into contact with an unvaccinated individual or people. These infected people then expose unprotected people to the disease.

There are a number of reasons why people are unprotected: some protection from vaccines “wanes” or “fades” after a period of time. Some people don’t receive all of the shots that they should to be completely protected. For example you need two measles, mumps, and rubella (MMR) injections to be adequately protected. Some people may only receive one and mistakenly believe they are protected. Some people may object because of religious reasons, and others are fearful of potential side effects or are skeptical about the benefits of vaccines.

When doesn’t herd immunity work?

One of the drawbacks of herd immunity is that people who have the same beliefs about vaccinations frequently live in the same neighborhood, go to the same school, or attend the same religious services, so there could be potentially large groups of unvaccinated people close together. Once the percentage of vaccinated individuals in a population drops below the herd immunity threshold, an exposure to a contagious disease could spread very quickly throughout the community.

What can you do?

Talk to your healthcare provider. Ask about your immunization status and if you and your family members are up-to-date on your shots. Staying on schedule with vaccinations not only keeps you safe, but also keeps your loved ones and your community safe.

Additional resources

[APIC “Herd Immunity” infographics](#)

OK, let me get this straight, the vaccines are "supposed" to get everyone immune to infection by the CoVid-19 virus. Conceptually, those who don't get inoculated can get infected, risk death and may not survive the infection. Those who are vaccinated with their two shots are totally immune and therefore can't acquire the infection and since they can't acquire the infection they can't pass it on to someone else. So, our "Herd" of Americans who got the two shots, according to the U.S. CDC who said it takes a few weeks for the immunity to happen, should fearlessly remove their masks and resume a normal life three weeks after the 2nd shot, no longer a need for those immune members of the Herd to do face cover or any distancing apart from others. They are totally virus free!

Now, those who didn't get the shots, if they get infected they either recover or die. If they recover from the CoVid-19 virus they are just as immune as the Herd members who received the two shots since their T-lymphocytes and B-lymphocytes memory cells are now encoded with the virus' identity and if the virus shows up again, the T & B cells will attach to the virus and trigger the immune system to "Attack" that bad bug and kill it dead in its tracks! With this said, the entire concept described is 100% reliant on the vaccines itself containing the EXACT slice or surface protein of the EXACT virus that is attacking the body. This is the major problem - they don't contain the EXACT elements of CoVid-19. This might be why the U.S. CDC and Pharma can't allow people to remove their masks and feel safe standing next to anyone with or without a mask.

The truth is not being told to the American people, this is NOT a Vector Vaccine. It's a Drug Treatment that pounds your immunity system to the maximum. So, why is the U.S. CDC terrified to have those inoculated fully remove their Masks three weeks after the 2nd shot? Could it be they would be "gambling" on how many of those who were inoculated have such a powerful immunity system that it will kill any foreign "thing" entering the body? Is it they don't have the courage to tell the American people the truth that this was never a Vector Vaccine but a Drug Treatment to pump up a person's immunity response? Did they think they could inoculate enough people, fast enough to give them a super immunity to kill the virus so the "Herd Immunity" event would take place in the United States? And if so, what about those who are elderly or ill in some manner who got the two shots and don't have a significant immunity, pumped up or not - do they just die? Did they fully understand or know this is a four strand (Maybe) man-made bio-weapon designed to be a killing machine with no current known medical technology to counter it? Could it be that they knew how fast and often this virus could mutate and mutate not just slightly but radically, and that's why they never used an actual dead slice or surface of the CoVid-19 virus but rather went with a super pumped immunity boosting drug? If everyone in the United States got inoculated, what would change? Do we then discard the Masks, start dancing close together again and invite family and friends over for dinner? Can anyone in the medical community or U.S. government give answers to these questions? Final question: Of those millions of people who got the two shots, what is the long term "medical timeline" of their health going forward?