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<u>Emergency Powers Deployed to Impose Vaccine Passports (/archives/featured-articles/2021/december/23/emergency-powers-deployed-to-impose-vaccine-passports/)</u>

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In its infinite Scientific™ wisdom, the city of Boston, Massachusetts just announced a new "vaccine passport" system set to take effect next month. This was one of the first major actions of the recently-elected mayor, Michelle Wu, who'd been hailed by many as a paradigm-shifter for her inspiring Progressive potential. Wu's passport system is endearingly called "<u>B Together</u> (https://www.boston.gov/departments/mayors-office/introducing-b-together)," because there's nothing more emblematic of heartwarming communal "togetherness" than compulsory monitoring of medical activity by the government.

Waiters, front-desk clerks, and movie theater ushers will join "together" to carry out this very important epidemiological task. At first, the proof-of-vaccination requirement will apply to all individuals age 12 and up who wish to enter a covered venue — restaurants, museums, sports arenas, etc. — but children as young as five will be included by March. It has been so ordered.

The stated purpose of this system is "to address rising COVID-19 cases" in Boston caused by the "Omicron" variant. This seems a bit strange, because what we've been told is supposed to be so alarming about "Omicron" (pronounced "Oh, c'mon") is that it's extra transmissible — with rapid viral spread observed even among those who are fully vaxxed and "boosted" out the wazoo, drowning in daily "rapid tests," and quadruple-masked at the first sign of human contact. These measures have evidently not succeeded in curtailing the exponential spread. Nonetheless, the hammer is about to come down hard again on "The Unvaccinated," allegedly because they pose such a unique transmission threat. If you don't quite follow the logic there, you simply must not understand The Science, dummy.

Though the "booster" is not yet required for compliance with this system, Bisola Ajikutu, the head of the Boston Public Health Commission, offered a pertinent clarification at a <u>press conference</u> (https://www.youtube.com/watch?v=ZXUYV2ecNgA&t=373s) Monday: "We will adjust the policy as needed when the definition of fully vaccinated changes." Got that? The people who run these "public health" bureaucracies reserve the right to perpetually modify what it means to be "fully vaccinated," and therefore add future injections at their pleasure.

"It is the unvaccinated that are killing us right now," bellowed Joseph Curtatone, the mayor of Somerville, MA, who appeared at the press conference alongside Wu and pledged to implement a comparable system in his own jurisdiction. Also trotted out for the press conference was Heather White, the founder of a "boutique fitness studio" in Boston who oddly boasted of being the first gym

The Ron Paul Institute for Peace and Prosperity : Emerg... http://ronpaulinstitute.org/archives/featured-articles/202... proprietor in the city to shutter for COVID.

"We stand here proud to support Mayor Wu and her team's leadership as we trust in science, we believe in the experts, and we move forward to do what it takes to slow the spread of COVID-19," White exclaimed. All the while, the press conference was nearly drowned out by protesters belting extremely loud renditions of the Star-Spangled Banner, plus chants of "Shame On Wu."

If it seems curious that this new behavioral regulation and bio-surveillance scheme could just be summarily decreed one day by the Mayor without any apparent deliberative process, take a look at the fine print of the actual Executive Order (https://www.boston.gov/sites/default/files/file/2021/12/BPHC-Indoor-Vaccination-Order-12-20-21.pdf). Particularly this section:

Do you have questions about why "stopping the spread" remains a stated goal of these policies, even though the "spread" seems to have continued exponentially in myriad places (like New York City and parts of Europe) where "vaccine passports" have already been implemented? Does mandating vaccines for five-year-olds — who face astronomically low risk of a severe health outcome from COVID — strike you as overkill? Are you wary of additional "boosters" becoming required by state injunction every couple of months — the <u>fourth (https://twitter.com/PandemicInfoIL/status/1473409824742416389)</u> is already on its way — just so you can go sit somewhere and have a sandwich?

How about the rationale for this specific Boston policy? Despite invoking "Omicron," its proponents seem to admit that the real motive has nothing to do with current "cases."

The head of the Health Commission said: "Obviously we want to protect people within these particular venues, but it really is about tipping people over the line so they'll choose to be vaccinated." She added that "the time has passed" for vaccine holdouts, and everyone must come together and accept that "it's in the best interest of our world if we are all vaccinated."

Do you find these shifting and contradictory rationales for the imposition of a sweeping new state intervention — one which could re-order the public sphere in far-reaching, tangible ways — persuasive? Or perhaps not?

Well, it doesn't matter what you think: an Emergency has been declared. Sorry!

Now, it's very plausible that the citizens of Boston would've wanted to go through with a vaccine passport-style system anyway, regardless of how the measure was enacted. Maybe a "normal" deliberative process would have yielded the same result, and five-year-olds would still have eventually needed to present vaccine documentation to eat an ice cream cone. But the fact remains that this rule-by-decree was made possible by dint of an "Emergency" declaration first issued in March 2020 — and which has been extended ever since, enabling the Mayor to launch these extremely consequential interventions essentially on a whim.

And it's far from just Boston. New York City, whose "vaccine passport" system was cited by Michelle Wu as a favorable model, has <u>continuously (https://www1.nyc.gov/assets/home/downloads/pdf/executive-orders/2021/eeo-296.pdf)</u> extended its own "State of Emergency" since March 2020 by order of Mayor Bill de Blasio — most recently on November 23. This enabled de Blasio to <u>unilaterally impose (https://www1.nyc.gov/office-of-the-mayor/news/250-001/emergency-executive-order-250)</u> the NYC system in September.

Missing from any of the debate around the Boston measure is why the de Blasio "model" should somehow be seen as an unmitigated success, in light of what we're being told is an explosion of "Omicron cases" underway in NYC at the moment. Countries like Germany, which tout similar "passport" systems, are also seeing "cases" skyrocket and have announced <u>further restrictions</u> (https://www.reuters.com/world/europe/germanys-rki-recommends-maximum-contact-restrictions-starting-once-2021-12-21/). But, whatever! This almost two-year uninterrupted "Emergency" has endowed Mayor Michelle Wu with the authority to make such a policy determination on her own, unfettered volition.

Glance around the US and you'll be amazed at how many state/local governments have these "emergency" measures still in place. Delaware maintains an official "Public Health Emergency (https://governor.delaware.gov/wp-content/uploads/sites/24/2021/12/Fifth-Extension-of-Public-Health-Emergency-12032021.pdf)" by decree of Governor John Carney, which was last extended on December 3. Indiana Governor Eric Holcomb renewed (https://www.in.gov/gov/files /EO-21-31.pdf) his "Public Health Emergency" declaration for the 21st time on December 1. Dane County, Wisconsin enforces its current indoor mask mandate by dint of a continuously-renewed "Emergency Order (https://publichealthmdc.com/documents/2021-11-23_Order_21.pdf)."

Governor Jay Inslee of Washington first declared a "State of Emergency" on February 29, 2020, and has effectively governed by fiat (https://www.governor.wa.gov/sites/default/files/proclamations /21-14.3%20-%20COVID-19%20Vax%20WA%20Amendment%20%28tmp%29.pdf) ever since — wielding his "emergency" powers to mount sweeping policy campaigns like mandatory vaccination for state employees, nearly 2,000 of whom were subsequently terminated (https://www.seattletimes.com/business/so-far-washington-workers-pushed-out-over-vaccine-mandates-arent-losing-jobless-benefits/) for non-compliance. Democrats control the Washington legislature and have passively enabled Inslee to rule in this manner for approaching two years straight, with no end in sight.

Governor Michelle Lujan Grisham has continuously <u>renewed (https://cv.nmhealth.org/wp-content/uploads/2021/12/121021-PHO-Masks.pdf)</u> her declaration of a "Public Health Emergency" in New Mexico, now set to last through at least January 7. It is "pursuant to the full scope of her emergency powers" that a statewide indoor mask mandate continues to be enforced throughout the state, including at schools.

New Jersey pulled a nifty little switcheroo when Governor Phil Murphy ended the "Public Health Emergency" in June (https://www.nj.gov/governor/news/news/562021/20210604b.shtml) — resulting in some nice election-year headlines that suggested the state had returned to "normalcy." But in actuality, Murphy figured out a way to simultaneously continue a separate "State of Emergency

(https://nj.gov/infobank/eo/056murphy/pdf/EO-251.pdf)" — which enables him to do things like mandate mask-wearing at schools. In other words, Murphy terminated the "Public Health Emergency" but maintained the "State of Emergency," which definitely makes perfect sense.

Governor Gavin Newsom has proclaimed a "<u>State of Emergency (https://www.gov.ca.gov/wp-content/uploads/2021/11/11.10.21-Vaccine-and-Med-Surge-Extension-EO.pdf)</u>" in California through at least March 22, 2022. Governor Steve Sisolak continues to <u>draw (https://gov.nv.gov/News/Emergency_Orders/2021/2021-11-30_-_COVID-</u>

19_Emergency_Declaration_Directive_051_(Attachments)/) on the original March 2020 "Declaration of Emergency" in Nevada to impose his various policy preferences. Even in Iowa, a "State of Public Health Disaster Emergency" declared by Governor Kim Reynolds remains in effect (https://governor.iowa.gov/sites/default/files/documents/
/Public%20Health%20Proclamation%20-%202021.12.10.pdf?utm_medium=email&utm_source=govdelivery) through at least January 9.

Miami-Dade County, Florida has <u>extended (https://documents.miamidade.gov/mayor/emergency-orders/12.16.21-state-of-emergency-declaration-extension-93.pdf)</u> its "State of Emergency" every seven days, most recently on the grounds of "Omicron." Similarly, a "State of Emergency" still <u>exists (https://www.honolulu.gov/rep/site/may/may_docs</u>

/City County of Honolulu Emergency Order 2021-16 searchable pdf) in Honolulu County Hawaii

<u>/City_County_of_Honolulu_Emergency_Order_2021-16_searchable.pdf)</u> in Honolulu County, Hawaii, enabling the imposition of a "vaccine passport" system there. <u>San Antonio, Texas</u> (https://covid19.sanantonio.gov/files/assets/public/mayor-amp-council/declaration-8/declaration08-addendum14.pdf) has a "Public Health Emergency" currently in effect, <u>as does</u> (https://www.columbus.gov/Templates/Detail.aspx?id=2147521683) Columbus, Ohio. Portland, Maine just retained (https://www.pressherald.com/2021/12/20/portland-city-councilors-postpone-action-on-emergency-order-until-jan-3/) its "Emergency Order" this week.

On a federal level, the Department of Health and Human Services has been extending its "Determination That A Public Health Emergency Exists" every 90 days since January 31, 2020. The most recent extension was <u>declared (https://www.phe.gov/emergency/news/healthactions/phe/Pages/COVDI-15Oct21.aspx)</u> on October 15, and it's difficult to imagine that there will be any appetite for not renewing it again next month, given the furor over "Omicron."

The term "National Emergency" has also appeared again and again in Presidential directives across two years and two administrations, most recently in the November 26 executive order (<a href="https://www.whitehouse.gov/briefing-room/presidential-actions/2021/11/26/a-proclamation-on-suspension-of-entry-as-immigrants-and-nonimmigrants-of-certain-additional-persons-who-pose-a-risk-of-transmitting-coronavirus-disease-2019/) by Joe Biden banning travel from South Africa and seven other African countries. Recall, these bans were purportedly to stem the spread of "Omicron." Seems to have worked spectacularly well!

Question: when does all this amount to a "Permanent Emergency," and when do we get to discuss that the very notion of a "Permanent Emergency" is oxymoronic? Back in September, I <u>wrote</u> (https://mtracey.substack.com/p/academia-is-establishing-a-permanent) that "for many people in positions of bureaucratic authority, universal vaccination was never going to be sufficient for a

transition away from the 'Permanent Emergency' mode of COVID exegetical theology."

At that time I was referring mostly to elite college campuses, which were at the vanguard of incubating this "Permanent Emergency" mentality — complete with enforcement regimes subjecting double-vaxxed 20-year-olds to endless "testing" protocols, monitoring their social activity, and forcing them into isolation.

Now, many of those same students will soon have to be triple-vaxxed, and the administrative dictates show no sign of easing. A darkly humorous example is Dartmouth College, which just <u>decreed (https://twitter.com/MarcNovicoff/status/1472286574679248897)</u> that mandatorily "boosted" students will be barred from socializing indoors when they arrive back to campus — but they are more than welcome to socialize outdoors, in New Hampshire, in January.

Given the vast interlocking patchwork of governmental jurisdictions in the US, only the most discerning citizens would have the faintest clue that these official "Emergencies" are not only still on the books, but are still being invoked to authorize aggressive state action.

On Monday, Mayor Muriel Bowser of Washington, DC once again declared a "<u>Public Emergency</u> (https://coronavirus.dc.gov/sites/default/files/dc/sites/coronavirus/page_content/attachments/2021-147%20Declaration%20of%20Public%20Emergency

%3B%20Indoor%20Mask%20Requirements

%3B%20Vaccination%20Requirements%20for%20DC%20Government%20Employees %3B%20etc.pdf)," which once again vests city officials with a variety of "emergency"-related powers — including the ability "enter into contracts and procurements... without regard to established operating procedures relating to the performance of public works." Conveniently, this likely means there will be no "performance" metrics used to evaluate the efficacy of the million-plus "rapid antigen tests" just ordered (https://dchealth.dc.gov/release/mayor-bowser-unveils-covid-19-action-plan) on Monday by the DC Health Department.

It's safe to assume that similarly lax "performance" standards will be applied to the 500 million "rapid tests" that Biden just <u>announced (https://www.wsj.com/articles/biden-administration-to-distribute-500-million-at-home-covid-19-test-kits-11640080802)</u> will be procured by the Federal Government to thwart "Omicron." But while the efficacy of this endless testing regime remains a mystery, what's clear as day is that the manufacturers of the tests are having a profit bonanza. Abbott Laboratories, which produces the widely-used "BinaxNOW self-test," reported in its latest quarterly earnings update a whopping 29.6% increase of total net sales between 2020 and 2021 — and that number is sure to balloon even higher thanks to "Omicron" frenzy.

"During the first nine months of 2021, Abbott's COVID-19 testing-related sales totaled approximately \$5.4 billion," the corporation wrote in its SEC filing. No wonder Abbott CEO Robert Ford said optimistically, "We always believed that the rapid test was going to be a kind of more sustainable part of the business."

The Department of Defense alone had just <u>awarded (https://www.defense.gov/News/Releases/Article/2780251/dod-awards-647-million-in-contracts-for-over-the-counter-covid-19-test-</u>

<u>kits/</u>) \$647 million in "rapid test" contracts this past September, including \$47.8 million to Abbott — now Biden wants to make another gigantic order of these things. Does anyone know how they worked? Did they "stop the spread"? Did they save millions of lives? Or... did they just line some pockets? I guess we can only speculate, because the fine print says we're still in the throes of a never-ending "Emergency."

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