

3/5/2024

NAACP

Attn: Mr. Jeremy Coleman 405 Tancahua Corpus Christi, Texas 78401

**LULAC** 

Attn: Mr. Abel-Ray Armadillo 400 Mann St., Ste. 513 Corpus Christi, Texas 78401 Asian Cultures Attn: Mr. Nicholas Medina 1809 N Chaparral St. Corpus Christi, Texas 78401

Indigenous People of The Coastal Bend P.O. Box 60286 Corpus Christi, Texas 78466

## Corpus Christi Minority Group Leaders:

Founded in 2021, Citizens Defending Freedom ("CDF") is a non-profit organization that strategically employs county-level chapters across America to help citizens fight for transparency and accountability. We also work to safeguard the constitutional rights of citizens from any and all infringements upon their civil liberties pertaining to safety, medical freedom, and moral conscience, among others.

This letter is being sent to you in response to the City of Corpus Christi's decision to recently pass a \$75,000 Partnering for Vaccine Equity (PAVE) Grant sponsored by the National Association of County & City Health Officials (NACCHO).¹ The stated purpose of this grant is to enable the Corpus Christi Public Health District "to increase vaccination uptake and address inequities in influenza and COVID-19 vaccination coverage among racial and ethnic minority adults."² However, the targeting of racial and ethnic minorities to encourage them to take the Covid and Influenza vaccines under the guise of "health equity" is concerning given the experimental nature of the COVID-19 immunization and the problematic history of state-sponsored medical

<sup>&</sup>lt;sup>1</sup>National Association of County & City Health Officials (NACCHO). (2023). Partnering for Vaccine Equity. Full text available <a href="here">here</a>. <sup>2</sup>Ibid.

experimentation.<sup>3</sup> This includes the infamous Tuskegee Experiments, directed at minoritized populations in the absence of clear, informed consent that has since contributed to the skepticism of racial minorities towards the COVID-19 and comparable vaccinations.<sup>4</sup> What's more, people of color are also at higher risk of experiencing adverse effects associated with experimental vaccination.<sup>5</sup> Further, it is especially fitting to characterize the COVID-19 vaccine, in particular, as experimental given a slate of recent research demonstrating its inadvertent consequences that effectively highlight its general unreliability and unpredictability. This includes higher levels of thrombosis, myocarditis, and increases in exposure to lethal spike proteins.<sup>6</sup>

Importantly, as indicated by the National Blood Clot Alliance, racial disparities exist when it comes to life-threatening venous blood clots, with black populations at a 60% higher rate of experiencing thrombosis events. This is also true of indigenous and other ethnoracial, non-white populations.<sup>7</sup> Similarly, myocarditis and related cardiac events are more widespread amongst people of color, particularly in young children who are among the most at-risk age demographic for this condition.<sup>8</sup>

For these reasons, The City and Public Health District should not be promoting these shots without informing the public, particularly the minority populations targeted, of the deleterious side effects associated with the COVID-19 vaccines. Because of this, the current actions of the District are inconsistent with the practice of full, ethical, and open disclosure that is integral to minimizing racial disparities in medicine and addressing the legitimacy of existing mistrust. Considering this, we hope you will join CDF's efforts to rescind the PAVE Grant, stop the problematic targeting of minorities, and request all Health agencies to provide information to the

<sup>&</sup>lt;sup>3</sup>Scharff, D. P., Mathews, K. J., Jackson, P., Hoffsuemmer, J., Martin, E., & Edwards, D. (2010). More than Tuskegee: understanding mistrust about research participation. *Journal of health care for the poor and underserved*, 21(3), 879, available <a href="here">here</a>. Dula, A. (1994). African American Suspicion of the Healthcare System Is Justified: What Do We Do about It? *Cambridge Quarterly of Healthcare Ethics*, 3(3), 347–357, available <a href="here">here</a>.

<sup>&</sup>lt;sup>4</sup>Anderson, J. (2021). America has a history of medically abusing Black people. No wonder many are wary of COVID-19 vaccines. USA Today, available <u>here</u>.

<sup>&</sup>lt;sup>5</sup>Gallagher, C. M., & Goodman, M. S. (2010). Hepatitis B vaccination of male neonates and autism diagnosis, NHIS 1997-2002. *Journal of toxicology and environmental health. Part A*, 73(24), 1665–1677, available <a href="here">here</a>.

<sup>&</sup>lt;sup>6</sup>Abbattista, M., Martinelli, I., & Peyvandi, F. (2021). Comparison of adverse drug reactions among four COVID-19 vaccines in Europe using the EudraVigilance database: Thrombosis at unusual sites. *Journal of thrombosis and haemostasis: JTH*, 19(10), 2554–2558, available here; Barmada, A., Klein, J., Ramaswamy, A., Brodsky, N. N., Jaycox, J. R., Sheikha, H., ... & Lucas, C. L. (2023). Cytokinopathy with aberrant cytotoxic lymphocytes and profibrotic myeloid response in SARS-CoV-2 mRNA vaccine–associated myocarditis. *Science Immunology*, 8(83), eadh3455, available here; Lei, Y., Zhang, J., Schiavon, C. R., He, M., Chen, L., Shen, H., ... & Shyy, J. Y. (2021). SARS-CoV-2 spike protein impairs endothelial function via downregulation of ACE 2. Circulation research, 128(9), 1323-1326, available here; Bansal, S., Perincheri, S., Fleming, T., Poulson, C., Tiffany, B., Bremner, R. M., & Mohanakumar, T. (2021). Cutting edge: circulating exosomes with COVID spike protein are induced by BNT162b2 (Pfizer-BioNTech) vaccination prior to development of antibodies: a novel mechanism for immune activation by mRNA vaccines. *The Journal of Immunology*, 207(10), 2405-2410, available here.

National Blood Clot Alliance. Black populations are at higher risk of blood clots, available here; Xu, Y., Siegal, D. M., & Anand, S. S. (2021). Ethnoracial variations in venous thrombosis: implications for management, and a call to action. *Journal of Thrombosis and Haemostasis*, 19(1), 30-40, available here.

<sup>&</sup>lt;sup>8</sup>Olsen, J., Tjoeng, Y. L., Friedland-Little, J., & Chan, T. (2021). Racial Disparities in Hospital Mortality Among Pediatric Cardiomyopathy and Myocarditis Patients. *Pediatric cardiology*, 42(1), 59–71, available <a href="here">here</a>; Oster, M. (2021). Overview of Myocarditis and Pericarditis. *Center for Disease Control and Prevention*, available <a href="here">here</a>.

public, including minority populations, so they can make their own informed healthcare decisions free of public pressure insensitive of historical medical and racial inequities.

Thank you in advance for your careful and thoughtful attention to this matter.

Very Respectfully,

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